

WHITE PAPER

Summer 2024

Serving Those Who Served:

**Empowering U.S. Veterans
and Their Families to Create
Better Futures**



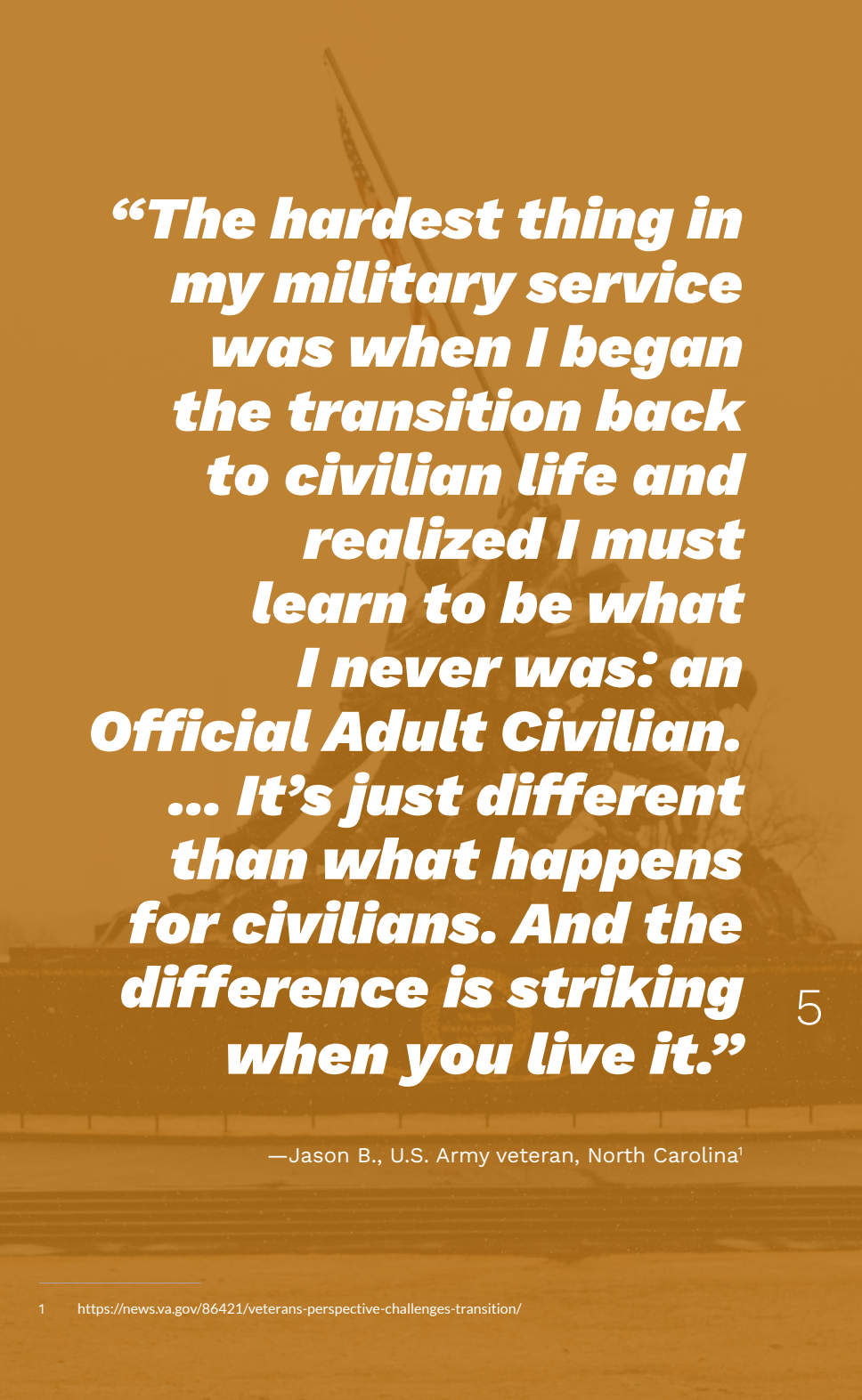
PHILIP MORRIS INTERNATIONAL



Table of contents

An Indebted Nation	4
Obstacles Impeding the Return to Civilian Life	12
The Way Forward	14
Who Are America’s Veterans?	20
Younger, More Educated, Less White, and More Female	24
Why This Diversity Matters	26
Issues and Challenges Veterans Face	32
Benefits Without Access	35
Employment and the Return to Civilian Life	41
Mental Health, Suicide, and Despair	49
TBI: A Critical Issue for Younger Veterans	54
Trauma, Poverty, and Opportunity	57
Legal Issues	62
Financial Illiteracy and Stress	68
Homeownership and Housing Insecurity	71
Food Insecurity	72
Family Structure	74
Doing It Right: Principles and Practices That Can Work	76
PMI + Veterans	102
Veterans and Our Smoke-Free Future	104
Closing Thoughts	110

An Indebted Nation



“The hardest thing in my military service was when I began the transition back to civilian life and realized I must learn to be what I never was: an Official Adult Civilian. ... It’s just different than what happens for civilians. And the difference is striking when you live it.”

5

—Jason B., U.S. Army veteran, North Carolina¹

Volunteerism is a core American value. We see it everywhere—from our schools, houses of worship, and halls of government to our clinics and hospitals and firehouses.

When that service takes place in the context of the military, it exacts an extra cost—and may forever change those who raise their hands to serve. These men and women give up their freedom and accept a level of constraint few civilians will ever experience. They set aside years of their lives—often separated from family and friends for extended periods—to defend America, its values, and its allies. And they must be prepared to make the ultimate sacrifice.

Upon their return to civilian life, some service members transition easily, transferring their skills and experiences seamlessly to civilian jobs and reentering the embrace of their families and communities. This is not the case for all veterans, however—many of whom carry with them traumas and injuries (physical or mental) that can last a lifetime and all too often go unseen and untreated. These veterans may require specialist support that is difficult to access. They may struggle to reconnect with the civilian world. This may be especially the case for those enlistees who come from disadvantaged backgrounds and, following their military service, return to civilian life without many of the supports—e.g., stable employment, housing, healthcare—on which they had come to rely.²



Regardless of the nature of a service member's transition back to civilian life, one thing is certain: America has an unwritten moral compact with those who have volunteered to serve. They must be treated with care and respect by the nation for which they have sacrificed so much. In short, those who served deserve to be served.



“The narrative that the media, social media, society, Hollywood portrays—just go back and look at the last five, 10 movies that have come out about the war in Iraq and Afghanistan. They’re not pleasant movies. They don’t talk about the post-traumatic growth that occurs for those of us who have been through combat. ... For the majority of us, that actually makes us better members of society. ... We want to be active in society.”

—Joseph Kopser, U.S. Army veteran and Special Advisor for Military Leadership and Strategy Policy, University of Texas at Austin

But does our nation do enough?

The evidence makes clear that we do not. When these men and women have completed their tours of duty—whether after a few years or several decades—we, as a nation, must ensure they have what they need to retransition successfully to civilian life and cope with the impacts of military service on their physical and mental health. They must be recognized appropriately for their sacrifices. And, vitally, they must feel a sense of purpose—part of a mission that will see them through the remainder of their lives.

“I really want to see fewer suicides, fewer struggles, fewer divorces. ... And I think the best thing when those veterans come home is to help them into a new life.”

—Misi Moser, Gold Star Mom, Colorado



Obstacles Impeding the Return to Civilian Life

Philip Morris International (PMI) has identified three major deficiencies in our nation's current veterans support systems:

First: Organizations mistakenly regard veterans as a homogenous group.

Too often, organizations providing benefits, care, and support services perceive veterans as a monolithic group and operate under the assumption that all veterans face similar circumstances. Instead, these groups must recognize the diverse and individual needs of veterans based on age, socioeconomic background, race, gender, military experiences, and other factors.

Second: Veterans' services, especially in the healthcare space, tend to be overly complicated and difficult to navigate.

In our conversations with veterans, PMI found that a sizeable proportion of these men and women are uncertain of how best to move forward in life after military service. For some, this is worsened by the maze of benefits, programs, and bureaucratic requirements veterans and their advocates must navigate to access

needed support. Moreover, many veterans rely heavily on one another and their families for information and guidance, but the advice they receive is often inadequate or incorrect.

Third: Too many support services available to veterans and their families are one-off or short-term solutions.

The unique needs of veterans can last a lifetime, and some may not emerge for years after service. Time-limited solutions are inadequate. What is needed are programs and services that are accessible to veterans for life—available where and when they need them.



The Way Forward

It is time we collectively do better. PMI recognizes that the U.S. government has established a robust support system for veterans through the Department of Veterans Affairs, the Department of Defense, and other federal and state agencies. Nevertheless, gaps persist. We see an opportunity for society as a whole—including corporations, nonprofits, other organizations, and individuals—to fill these gaps so that far fewer veterans slip through the cracks.

Our recommendations, based on our research and conversations with veterans, their families, and experts in this space, are as follows:

- *Enhance veterans' transition to the civilian workforce with clearer pathways, including programs that offer one-to-one mentoring, career counseling, skills development, and other forms of ongoing support.* Many newly discharged veterans require personalized career direction to fully integrate into the civilian workforce and identify a meaningful and sustainable path forward. They need help exploring their options and a clearer understanding of the educational and training programs that may be available to them—and how the skills they acquired in the military can translate to the civilian workplace.

- ***Link veterans to advocates who can help them identify and apply for needed benefits.***

The rejection rates for certain of these benefits remain far too high, especially among veterans with so-called “bad paper”—meaning they received an other-than-honorable discharge.³

This includes veterans discharged for purported “misconduct” at a time when gays and lesbians were banned from service.

- ***Focus attention on veterans who lack mental health support or have an untreated substance abuse disorder stemming from their military service.***

These veterans are at far greater risk of being unhoused, hungry, or suicidal. Barriers to vital services range from an ongoing stigma around mental health to access and logistical factors.⁴ These must be addressed at a local and individual level.

- ***Recognize that our veteran population is highly diverse.*** This applies to demographics (e.g., socioeconomic background, gender, ethnicity, and race) and type of military service and responsibility. There are also significant differences among combat veterans based on the era in which they served (Korea or Vietnam versus the post-9/11 conflicts in Afghanistan and Iraq).

3 <https://www.latimes.com/opinion/story/2021-05-31/veterans-healthcare-denied-access>

4 <https://www.research.va.gov/currents/0522-Self-reliance-may-affect-acceptance-of-mental-health-treatment-in-Veterans.cfm>

➤ *Explore ways to ensure veterans are recognized, honored, and served as they wish.*

Lip service and public displays of appreciation do not solve the problems so many veterans face.

PMI and its people have supported U.S. military veterans in multiple ways and over many years. Now, we are focused on contributing to a more comprehensive and people-centered approach and network to fill the gaps left by government services. Our work will be guided by and grounded in the core insights and findings in this report, which was informed by conversations with veterans and their families and advocates and by publicly available research produced by RAND Corporation, the Bob Woodruff Foundation, and other highly regarded organizations.

This paper does not aim to be the final say on what veterans need. Rather, it lays out some of the core issues and challenges we've identified and outlines principles for action. We seek to draw special attention to the sorts of local and individualized assistance that are only possible when citizens at all levels of society work together to meet veterans where they are and with what they need. As we continue what we anticipate to be a years-long journey, we will return to these issues, share our experiences and findings, and recalibrate our goals to ensure we do the best we can for our veterans and their families.

Individually and collectively, we have an opportunity to do something meaningful for America's service members—one veteran at a time—so they can **succeed at home, at work, and in their communities** and move forward with a sense of purpose and life satisfaction.



“Military service is a gateway, and if you come out through that gate and know where you’re heading and have your head screwed on straight, you’re able to skip two spaces in life’s line. If you emerge without your mind and life intact, you are guaranteed to be permanently at the back of the line.

And even for those who emerge ‘intact,’ the civilian world doesn’t understand administrative or managerial skills honed during service. The phenomenal training you’ve gotten doesn’t translate unless you get a certification beyond the military.”

—Army National Guard soldier nearing his completion of service—overheard in a Tucson café



Who Are America's Veterans?

The first step in serving America's veterans is understanding who they are.

America's veteran population has risen and declined in reflection of our nation's shifting military needs. In 1940, a year prior to the U.S. entering World War II, only 9 percent of American males 18 and over were veterans—fewer than 5 million people.⁵ A decade later, 37 percent of U.S. adult males—nearly 20 million—were veterans.⁶ By 1970, 44 percent of U.S. men—roughly 27 million—were veterans.⁷ Veteran status was customary—and most Americans knew someone who had served, typically their father, uncle, brother, or son.

Over the following decades, as the nation's military involvement became less intensive and the military became a fully volunteer force, the share of Americans with military status declined significantly. In 2000, 26 million men, or around 25 percent of U.S. adult males, were veterans.⁸ Today, that figure has decreased to 18 million veterans (male and female), representing less than 7 percent of U.S. adults, in part due to the passing of millions of veterans who served during World War II and in Korea and Vietnam.⁹

5 <https://www.census.gov/content/dam/Census/library/publications/2020/demo/acs-43.pdf>

6 Ibid.

7 Ibid.

8 Ibid.

9 [https://www.bls.gov/news.release/vet.nr0.htm#:~:text=\(See%20table%208.\),about%2011%20percent%20were%20women](https://www.bls.gov/news.release/vet.nr0.htm#:~:text=(See%20table%208.),about%2011%20percent%20were%20women).

Diverse, but Not a Cross Section of America

The end of compulsory military service in 1973 meant that those who serve no longer represent a cross section of the population. Certain races, ethnicities, geographies, and socioeconomic groups are over- or underrepresented, meaning that, while the population of veterans is diverse, it is not a close approximation of the country as a whole.

Those from the highest- and lowest-earning quintiles, for instance, are underrepresented in America's military branches.¹⁰ Native Americans and Alaska Natives are overrepresented at five times the national average.¹¹ Representation of other races and ethnicities depends on the branch of service. For example, Latino men are overrepresented in the Marine Corps but underrepresented in the other branches.¹² Black men are overrepresented in the Army and underrepresented in the Marine Corps.¹³ Nor is enlistment geographically proportionate. Relative to population size, five states—Alabama, Florida, Georgia, Hawaii, and South Carolina—are responsible for an outsized share of military recruits.¹⁴ Moreover, veterans are more likely to live in some states than others after their service is complete. For instance, veterans make up 10.1 percent of the adult population of Alaska, compared with 3.7 percent in New York.¹⁵ These concentrations are important and shape the way we must serve veterans.

10 <https://www.cfr.org/background/demographics-us-military>

11 <https://www.nicoa.org/american-indian-veterans-have-highest-record-of-military-service/>

12 <https://www.cfr.org/background/demographics-us-military>

13 Ibid.

14 Ibid.

15 <https://www.axios.com/2023/11/10/map-where-veterans-live-us>



“Some 60 percent of Army recruits now come from military families ... And as of 2018, the Army recruited 50 percent of its enlisted soldiers from just 10 percent of the nation’s high schools, suggesting too much dependence on certain geographic areas. ... [It] is admirable how many children of military parents are willing to accept the sacrifice of service even after they have experienced it growing up. But passing the baton from generation to generation like this tends to perpetuate traditions—most, but not all, of them good—and leaves too few American young people of both genders willing to consider service.”

23

—Brookings Institution (2020)¹⁶

16 <https://www.brookings.edu/articles/women-warriors-the-ongoing-story-of-integrating-and-diversifying-the-armed-forces/>

Younger, More Educated, Less White, and More Female

Compared with historical averages, today's veterans are younger, with most having served in the post-9/11 conflicts. They are also more likely to have a college degree and less likely to be white. Moreover, almost one-fifth of post-9/11 veterans are women.

- The median age of veterans is projected to continue to fall, from 62 years in 2023 to 59 years by 2050.¹⁷
- As of 2018, the median age of post-9/11 U.S. veterans was 37 years.¹⁸
- The proportion of veterans who are female is projected to increase from 11 percent in 2023 to 18 percent in 2048.¹⁹
- By 2045, non-Hispanic whites are expected to make up 61 percent of the U.S. veterans population, down from 74 percent in 2019.²⁰

17 <https://www.data.va.gov/stories/s/VetPop2020-Data-Story/e4st-civd/>

18 <https://www.census.gov/newsroom/press-releases/2020/veterans-report.html>

19 <https://www.pewresearch.org/short-reads/2023/11/08/the-changing-face-of-americas-veteran-population/>

20 https://www.va.gov/HEALTHEQUITY/Race_Ethnicity.asp

“My son was born February 2nd, 1990. I remember putting him to bed after nursing him, and my husband and my daughter were downstairs watching the invasion of Kuwait. The president [was] on TV saying that we were going to war. And I came down, I got the phone call, I needed to report to the flight line, and we needed to bring our A bags. ... They had to be packed, ready to go—for war. And we went down to the flight line, they said we’re getting ready to be shipped overseas. They got us all ready. I remember I called my husband and told him I’m not coming back home, ’cause we weren’t coming back home. ... They told us we’d be gone at first 30 days. Thirty days turned into eight-and-a-half months.”

—Carolyn Morgan, 115th Fighter Wing,
Air National Guard, Wisconsin²¹

Why This Diversity Matters

Understanding the diversity of our veterans is essential if we are to serve them well. It's important to recognize, for instance, that those who fought in Kuwait, Iraq, and Afghanistan are more likely to have been diagnosed with incidents of physical and mental trauma, including brain injury, post-traumatic stress disorder (PTSD), exposure to dangerous chemicals, and injury from improvised explosive devices (IEDs).²² This may be partly due to greater awareness of these kinds of injuries, but it's also clear that warfare has become more concussive. (In 2022, the Department of Defense debuted the Warfighter Brain Health Initiative, a coordinated effort between the military and medical communities to improve the brain health of service members and prevent traumatic brain injuries.²³ This effort includes developing a better understanding of the bodily impact of blast overpressure, the sudden increase in atmospheric pressure caused by detonating or firing certain weapons.)

Post-9/11 veterans have a 43 percent chance of having a service-connected disability—significantly higher than that of veterans from other periods.²⁴

22 https://academic.oup.com/milmed/article/185/Supplement_1/154/5740661;
<https://www.ptsd.va.gov/professional/treat/essentials/epidemiology.asp#three>

23 <https://www.health.mil/Military-Health-Topics/Warfighter-Brain-Health>

24 <https://www.census.gov/newsroom/press-releases/2020/veterans-report.html>



Certain aspects of diversity create opportunities and challenges for veterans-focused organizations. For example, few programs target the growing number of female veterans. One large healthcare and nutrition services provider, Adagio Health, based in Pennsylvania, studied this issue extensively and found that women veterans face unique challenges, including care environments in which they feel invisible and devalued, prior negative experiences attempting to access healthcare services, lack of support during the

transition back to civilian life, inadequate social support and access to transportation, childcare, housing, and other needs, and the extra burden of caregiving responsibilities.²⁵

It's clear that if we want to serve our veterans better, we need to understand them better.

“When you meet a veteran you meet a veteran. One. Everyone’s so wildly different. Look at the Army as just one example. There are 200 different jobs in the Army. So, you could be talking about Army vets who served at the same time, [but in] different jobs, totally different experiences. ... There’s such a broad diversity in treating and helping and caring for veterans that what you do for one is not going to work for another.”

—Bryan A, U.S. Army veteran, Indiana



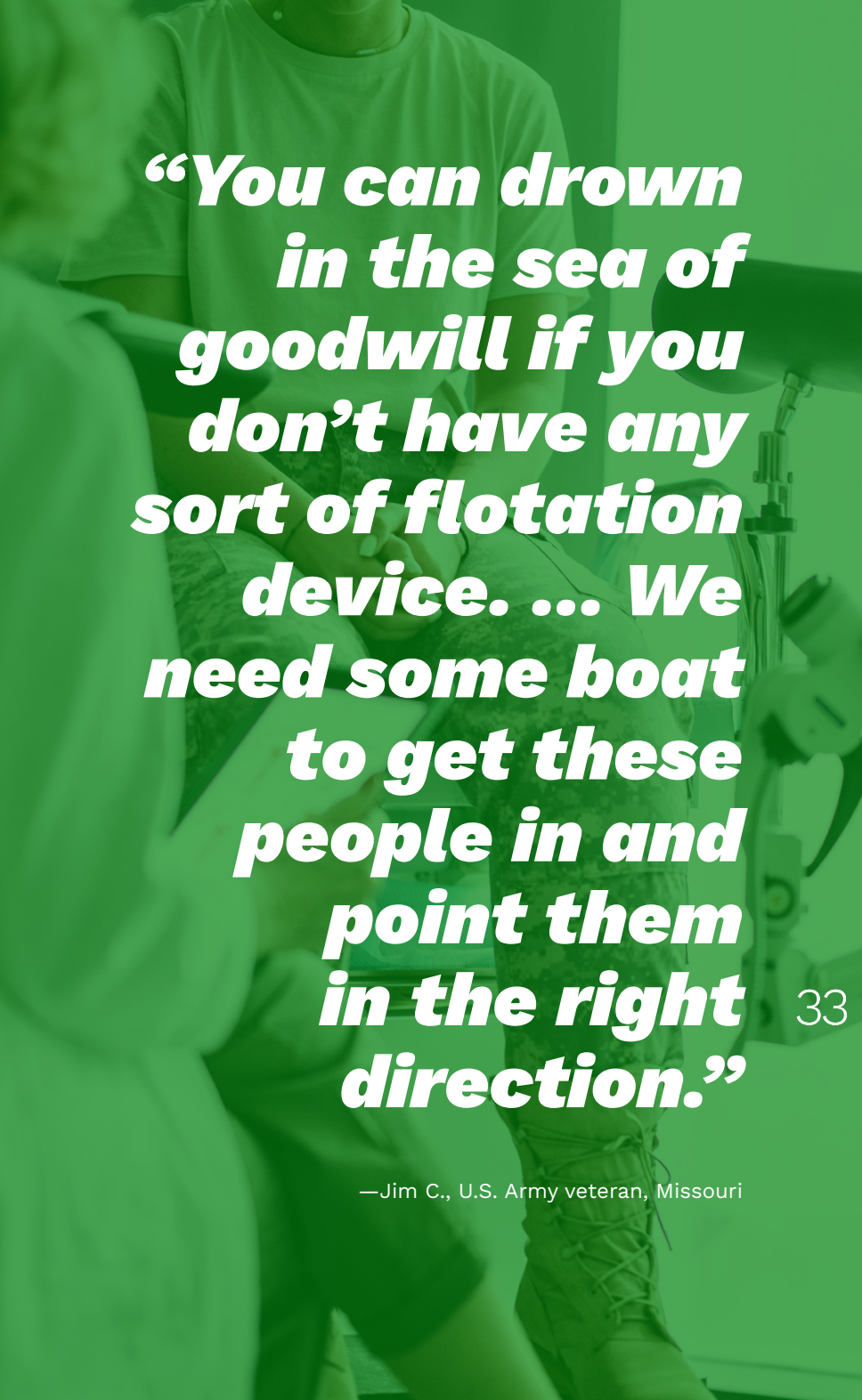


“Everybody that comes out of the military, you want to know why they struggle so bad? Because we’re taken care of. We’re taken care of for however long you’re in, whether it’s four years or 20 years. You’re fed every day. You have a roof over your head. Off base or on base, you’re still getting paid ... you have everything you need. The military makes sure of that. You have medical, you have dental, you have everything. It’s all right there on base.

Now, you get out. Do you have that same support? Are they paying your rent? Are they giving you money for food? No, you’re on your own. And that’s tough, that’s tough to transition to.”

—Ryan Shead, U.S. Air Force veteran, Arizona

Issues and Challenges Veterans Face



***“You can drown
in the sea of
goodwill if you
don’t have any
sort of flotation
device. ... We
need some boat
to get these
people in and
point them
in the right
direction.”***

33

—Jim C., U.S. Army veteran, Missouri



As a result of the nation's shift to an all-volunteer military force, not all Americans have regular contact with veterans. This leaves the country with an uneven appreciation of veterans' issues and challenges—and contributes to veterans being underserved.

Here, we outline some of the significant obstacles veterans face.

Benefits Without Access

Meeting the needs of our millions of veterans requires substantial nationwide programs such as those offered by the Veterans Administration, as well as state-by-state efforts. Together, these provide a baseline safety net of regularly funded and staffed services for veterans and their families.

Yet, as we listened to veterans, we heard a common refrain: How are veterans meant to navigate the web of programs and other offerings that exist? In addition to the dozens of federal and state programs focused on veterans, the George W. Bush Presidential Center estimates there are some 45,000 nonprofits registered with the IRS that claim to serve veterans and their families.²⁶

35

Despite this wealth of services, many veterans struggle to access the benefits they're entitled to. For instance, as members of the military approach their discharge date, they are automatically eligible to enroll in programs

26 <https://www.bushcenter.org/publications/case-studies-on-veteran-serving-non-profit-organizations>

such as the SkillBridge²⁷ transition program run by the Department of Defense. To gain access to all the benefits of these programs, however, service members need to apply six months prior to discharge. Those who fail to do so may lose out.

Matthew Langseth, the military transition coordinator for Tucson, Arizona, explains: “If you’re not prepped prior to 180 [days], you can miss out on a lot of things.” Sometimes, he told us, members are deemed mission-critical and, therefore, are not allowed to take the time necessary to plan their discharge and transition.

“So now you’re working your full day, trying to do all this stuff that you’re trying to do to transition at night instead of being able to do it during the day.”

The situation can be even more detrimental when it involves mental health. Many veterans struggle to navigate the entrenched thicket of rules and red tape that exists before they can access the support for which they are eligible. (The fact that dozens of books are available on how to navigate the VA system points to the extent of the problem.) In some instances, veterans are convinced to hire unscrupulous lawyers who take their cases and charge exorbitant fees—as much as 50 percent of the value of the benefit—for what should be a free support service.

“One of my friends hired a lawyer who kept pushing the date so that his back pay would keep accumulating—so that [the lawyer] would make more money at the end. So,

27 <https://skillbridge.osd.mil/program-overview.htm>

my friend should have been getting medical treatment a year and a half prior, but we found out that the guy was pushing it so that he built up the back pay and could make more money off of him,” said Ryan Shead, a U.S. Air Force veteran who has helped many fellow veterans get the medical benefits to which they’re entitled.



Ryan noted, too, that the quality of mental healthcare varies. In his case, he said, it was a difficult process to determine which medications would help him—which is not uncommon even with the best providers. “They put me on amitriptyline; it made me suicidal. Luckily, I had my wife there, who figured it all out and was like, ‘Stop taking whatever they just put you on.’ And we figured it out. ‘Okay, let’s move you to the next med. Let’s figure out what’s going on.’ It’s not a perfect science to figure out what works, you know? What’s the chemical imbalance that’s making me like this? Until we figure it out, we’re not going to have the right med. And so, do veterans have the ability to go through that process to figure out what it is? I don’t think evidence-based therapy—limiting somebody’s visits based off what they’re presenting at the time—[gives] the therapist enough time to really delve into what’s going on.”

These two examples begin to reveal the problem: The issue isn’t so much whether benefits exist as whether veterans can access them easily and without the support of intermediaries.



“In my last year of active duty, I learned there were over 45,000 veteran service organizations that provide free services, benefits, resources to us and our families. But nobody freaking tells us about it while we’re serving, and we’re not told about it when we’re transitioning either. ... When I learned about this, all I could think about was how many airmen I had let get out of the military without setting them up for success on the outside due to my own ignorance of the existence of all these free resources. And honestly, it pissed me off.”

39

—Brian A., U.S. Air Force veteran, Georgia

“We see a lot of characteristics and attributes [veterans] bring to the table: their willingness to win, their team mentality, their leadership skills. They may not have the exact transferable skills to get into a job in investment banking or program management or something, but their individual characteristics bring a lot ... that you may not find in a civilian employee.”

—Lindsey Schiro, Executive Director, 51 Vets

Employment and the Return to Civilian Life

Approximately 200,000 active-duty service members leave the U.S. military and enter the civilian labor market each year.²⁸ That's equivalent to nearly 10 percent of the people who graduate with a bachelor's degree each year.

Many veterans struggle to convert their skills and training to comparable civilian jobs. Army infantry members, in particular, have a hard time applying what they've learned in military service to the civilian sector. However, employers report²⁹ that veterans often have the “soft skills” they value most, including leadership, diligence, tolerance for stress, and adaptability. Also, at minimum, veterans are high school graduates or hold a GED.

A critical factor in employment is how military members prepare for their post-service lives. The military branches support this process with various programs, but few service members seem to understand how to best use these benefits. A lack of clear direction, mentors, and a network can make the transition to civilian life more challenging, and some veterans are reluctant to admit that they don't know what they're doing. “You have to talk to people,” Matthew Langseth, the military veteran program coordinator for Tucson, Arizona, advises clients. “It's going to be super odd for you, but ask for help.”

28 <https://www.rand.org/pubs/perspectives/PEA1363-7.html>

29 <https://surface.syr.edu/ivmf/113/>

The government's Transition Assistance Program (TAP)—a multiagency effort aimed at supporting the return to civilian life—is a good example of the dynamic of veterans' reluctance to access help. Roughly 90 percent of transitioning military members participate in at least one TAP pathway, but one-quarter of those “needing max support” fail to attend required courses.³⁰ The interagency and overlapping nature of the program frustrates many veterans. As the RAND Corporation puts it, “If everyone is responsible, then no one is.”

What's more, the work culture outside the military is different, and that requires an adjustment period. Langseth says it takes no less than 20 weeks for a civilian to become a soldier through basic training and additional learning. He estimates it takes at least that long to go from being a soldier to a civilian.

Members of the military who are motivated to serve, who enter the service in robust physical health, and who have no criminal history (which is the case for virtually all enlistees) are far more likely to emerge from their service with a strong foundation of skills and attitudes that can be applied to a post-military career. Other important factors influencing post-service career success include the service member's training and occupational specialty while in the military, the involvement of the armed services branch in training and placement, and the service member's ability to overcome a military culture that discourages seeking help during the transition back to civilian life.³¹

30 https://www.rand.org/pubs/conf_proceedings/CFA1363-3.html

31 https://www.rand.org/pubs/conf_proceedings/CFA1363-2.html



Even among those who secure meaningful employment, however, it can be challenging to be treated as a novice after holding positions of responsibility and leadership in the military. Matthew Langseth describes his experience after leaving the National Guard: “I was in a tactical operations center, the noncommissioned officer in charge. I ran a bunch of stuff; I had 23 direct reports. ... I was flabbergasted when I got asked one time, ‘Can I review the email before you send it?’ in my civilian job. You want me to send you the email that I’m about to send so you can review it just to see if it’s OK for me to send the email? I can move millions of billions of dollars of equipment on the battlefield. I can rescue people. I can do all these things without you. ... You want to check my email?”



***“I was interviewing
for some supervisor
positions at factories.
... I was a sergeant in the
Marine Corps. ... I would
explain some things and
say, ‘OK, well, here’s my
leadership experience.’ ‘But
that’s in the military. That
doesn’t translate to civilian.’
... That’s one of the things
that I would hear often in
the interview process. I
would interview very well,
but I would lose to somebody
that had more experience
... because my experience
‘didn’t translate.’
... It kind of shocked me.”***

45

—Brad L., U.S. Marine Corps veteran, Kentucky



The good news: Veterans have lower unemployment rates³² than their nonveteran peers, regardless of race or gender, and veteran households have consistently higher standards of living.³³ This trend is particularly pronounced among veterans from minority groups or who have acquired less education.

In addition, the poverty rate among veterans, at roughly 6 percent, is less than half that of nonveteran households (13 percent).³⁴ The relative difference in poverty is even more pronounced among Black and Hispanic veteran households, where the poverty rate runs at nearly 10 percent and 8 percent, respectively, compared with 23 percent for nonveteran Black households and 19 percent for nonveteran Hispanic households.

32 <https://www.dol.gov/agencies/vets/latest-numbers#:~:text=Veteran%20Unemployment%20Rate%20was%202.8,previous%20month%20and%20prior%20year>.

33 <https://www.pewresearch.org/short-reads/2019/12/09/veteran-households-in-u-s-are-economically-better-off-than-those-of-non-veterans/>

34 <https://nvhs.org/veterans-and-poverty/>

“In the transition into the civilian world ... you feel at a complete loss in terms of being unable to relate to society. ... You’re like an alien that’s landed on Earth, and you just go, ‘What is this about?’ You’ve got no understanding of how things work.

I didn’t know how to pay my taxes or register my vehicle. I don’t know any of this stuff because I’ve never done it before. ... And so, it’s almost like you’re a child, learning—beginning to learn—how to live.”

—Andrew F., Army veteran, Virginia

Mental Health, Suicide, and Despair

Like much of the world, America is experiencing a surge in “diseases of despair,” including drug dependency and addiction, depression, anxiety, loneliness, and suicidal ideation.³⁵ These serious conditions can be found across the population but may be more prevalent among military veterans, especially those with combat or negative service experiences. An emerging focus of research is what some call “moral injury”³⁶—a wound to the soul that occurs when a person goes against their personal moral code, even under orders. Such injuries to the soul and sense of self require treatment and too often lead veterans to contemplate taking their lives.

The U.S. Department of Veterans Affairs reports that, adjusting for age and sex, the suicide rate for veterans in 2020 was 57.3 percent greater than for nonveteran U.S. adults.³⁷ And while that rate has been declining, every day an average of 17 veterans take their lives. Research from RAND Corporation shows that veterans’ suicide risk varies depending on demographics, with younger and female veterans at the highest risk relative to their nonveteran peers.³⁸ This suggests that efforts to help veterans should be tailored to specific demographic audiences.

49

³⁵ <https://www.bmj.com/company/newsroom/diseases-of-despair-have-soared-over-past-decade-in-us>

³⁶ *Moral injury* has been defined as the psychological, social, and spiritual impact of events involving betrayal or transgression of one’s own deeply held moral beliefs and values occurring in high-stakes situations. Moral injury is not a recognized mental health disorder in itself but may be associated with PTSD or depression. <https://www.openarms.gov.au/signs-symptoms/moral-injury>

³⁷ <https://news.va.gov/108984/2022-national-veteran-suicide-prevention-annual-report/>

³⁸ <https://www.rand.org/pubs/perspectives/PEA1363-1.html>

“He was kind of like a big brother to me ... He was 28 when he enlisted; he had his MBA already. Went through multiple deployments, multiple tours. Came back after he got out of the Marine Corps and was just an absolute mess. He had been broken completely—detached from his wife, detached from his children. Couldn’t get or hold a job, even though he was sharp as a tack, very qualified. He ended up hanging himself. His fricking six-year-old kid found him.

He was left behind. You know, I think about him every single day.”

—Jayce H., U.S. Marine Corps veteran, Virginia



It's not enough to focus just on suicide, of course. Veterans face an array of mental health challenges. For instance, one 2017 study of post-9/11 veterans found that as many as half of those diagnosed with combat-related mild traumatic brain injuries met the criteria for PTSD, and more than a third had a history of depression.³⁹

Other mental health challenges veterans face include limited access to qualified services, drug or alcohol abuse, and trouble sleeping, concentrating, or controlling anger.⁴⁰

39 <https://pubmed.ncbi.nlm.nih.gov/28121256/>

40 https://www.rand.org/pubs/research_reports/RR2030.html



***“I was at home one day ...
in the kitchen by myself,
just standing there. Mind
you, this is 10 years after
the Marine Corps. It hadn’t
taken me long to realize
I didn’t fit in with society
based on my newfound
perspective and experiences,
right? I felt like a tiger out of
its cage—that’s how I used
to describe it to some people
at the VA here.***

***... I started crying on my
kitchen island around eight
or nine o’clock at night.
... I was just crying and
overwhelmed with emotion—
fear, anxiety, depression,
whatever you want to call
it. I got smacked in the face
with all of it.”***

53

—David A., U.S. Marine Corps veteran, Kentucky

TBI: A Critical Issue for Younger Veterans

Traumatic brain injury (TBI) is far more common among post-9/11 veterans compared with earlier generations because the conflicts in Iraq and Afghanistan saw a higher frequency of attacks involving IEDs, artillery, mines, and rocket-propelled grenades. Sixty percent of blast injuries incurred in those conflicts resulted in TBI. Moreover, improved equipment and medical care meant U.S. military members were more likely to survive these attacks—and live with their consequences. From 2009 to 2011, 9.6 percent of veterans from the Iraq and Afghanistan conflicts who tapped into the services of the Veterans Health Administration received a TBI diagnosis.⁴¹

41 https://www.mirecc.va.gov/visn19/docs/presentations/TBI_Suicide_PTSD_OEF_OIF_Veterans.pdf

“[S]uch are the effects of being in a Humvee that rolls over three buried 130-millimeter artillery shells, which explode at the perfect moment. Up he went, and down he came, and once his brain was done rattling around from a blast wave that passed through him faster than the speed of sound, here came the rest of it. ... ‘The signature wound of the war’ is what the military calls traumatic brain injury.”

55

—David Finkel, *Nº 2* - Û∞Ŵ. ∞Ł Û∞ŴŁ Ä⁶ Łg 8⁶ 42



Trauma, Poverty, and Opportunity

For enlistees from stable family backgrounds within the middle tiers of the nation's socioeconomic strata, returning home and building a middle-class life can be a relatively seamless experience. That typically is not the case, however, for enlistees who have experienced adversity as children and young adults—poverty or near-poverty, childhood trauma, family instability, and so forth. These service members tend to have fewer emotional and financial resources and less support as they cope with the challenges of post-military life. In addition, those with three or more adverse childhood experiences are more likely to have significantly worse reactions to and outcomes resulting from combat or military sexual trauma.⁴³

Women veterans are three times more likely⁴⁴ than their male counterparts to have experienced serious psychological distress.⁴⁵ The prevalence of psychological distress is also higher among gay and lesbian veterans (nearly twice that of heterosexual veterans) and bisexual veterans (three and a half times that of heterosexual veterans).

This is a vital insight. Military service can significantly boost an individual's opportunities thanks to training,

43 <https://pubmed.ncbi.nlm.nih.gov/35962589/>

44 <https://www.rand.org/pubs/infographics/IGA1363-1.html>

45 *Psychological distress* is defined as a nonspecific indicator of probable mental health problems severe enough to cause some impairment in social, occupational, or school functioning and to require treatment.

leadership development, discipline, and post-service educational support. However, not all veterans move forward or upward in life. If they come to the military with significant negative life experiences, their time in service may not help them and could even exacerbate their challenges. These challenges can be expressed in many ways, including mental illness and trauma. Veterans who struggle to readjust to civilian life will also be more likely to experience poverty and housing and food insecurity.



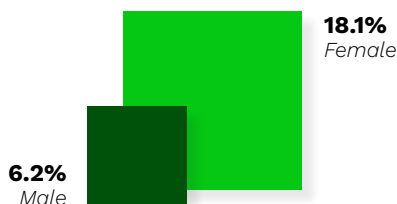
“My dad grew up as a farm boy in Pennsylvania, and he had this dream of going to college and becoming an accountant. ... Instead, he was drafted to Vietnam. ... Trying to come back and pick up where he left off in life, after everything he had gone through and experienced in Vietnam, was really difficult.

He tried to go back to college to study accounting, but I think the juxtaposition of the situation he came back from to the situation he was trying to adapt to was just too much. ... He ended up being a welder for the rest of his life and had a lot of health struggles. ... There was kind of a sense always that something wasn't quite right. I think he always struggled from not processing his feelings from that.”

Prevalence of Past-Year Serious Psychological Distress Among U.S. Veterans

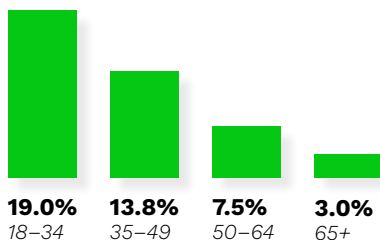
GENDER

Serious psychological distress is nearly 3 times higher among female veterans than among male veterans.



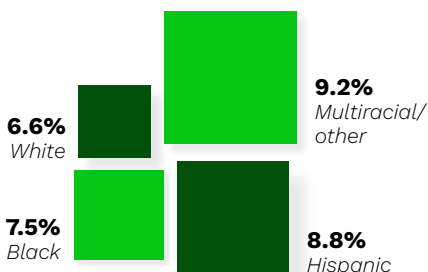
AGE

Serious psychological distress is more than 6 times higher among veterans aged 18–34 than among veterans aged 65 or above.



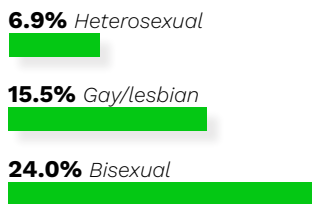
RACE/ETHNICITY

Serious psychological distress is 1.4 times higher among multiracial / other race veterans than among white veterans.



SEXUAL IDENTITY

Serious psychological distress is almost twice as high among gay/lesbian veterans and nearly 3.5 times higher among bisexual veterans than among heterosexual veterans.





Legal Issues

Veterans, whether recently discharged or several years into their civilian lives, often need to access legal support and services to deal with issues related to their benefits, including medical care, education support, and disability compensation. In particular, those veterans who have an other-than-honorable discharge often struggle to be approved for benefits. But such a discharge could well have occurred due to factors tied directly to their service, such as PTSD or TBI, both of which can impact performance and behavior while in the military and later in life. A 2023 report from the Council on Criminal Justice reveals that combat exposure, with its associated physical and mental health problems (e.g., PTSD, TBI, mood or substance abuse disorders), is strongly correlated with a greater likelihood of criminal justice system involvement among veterans.⁴⁶ TBI alone is linked to a 59 percent increase in the odds of justice involvement among veterans.

46 <https://counciloncj.org/from-service-to-sentencing-unraveling-risk-factors-for-criminal-justice-involvement-among-u-s-veterans/>

“Many of the veterans I work with every day fall into this bucket where maybe their DD-214 says ‘other than honorable,’ so they can’t get those VA benefits that may prevent them from becoming unhoused or allow them to access mental health care. Or maybe their DD-214 says they have a ‘personality disorder’ because their commander didn’t want to deal with the process of medically retiring them for PTSD and instead got rid of them as quickly as they could. When a prospective employer is looking at that—how are those employers responding to that information? That’s incredibly stigmatizing and can be a punishment they carry for their entire life.”

63

—Matthew Handley, U.S. Army veteran and Equal Justice Works Fellow and Attorney, National Veterans Legal Service Program, Pennsylvania

For any veteran, applying for benefits or a discharge upgrade can be highly bureaucratic, requiring a level of expertise many veterans lack. In some cases, their applications are assessed by private contractors who do not follow routine procedures and may reject claims unfairly. It's also not unusual for veterans to be denied due process review or be required to travel great distances to have their appeals heard. These are all problems that trained lawyers and other legal professionals can best address.

Scams and other abuses of veterans also require legal remedy. In recent years, the Federal Trade Commission (FTC) has worked with law enforcement officials to crack down on fraudulent “charities” that falsely claim to help veterans and service members.⁴⁷ These groups siphon off dollars that could be going to legitimate veterans service organizations. Veterans, too, are targeted by scammers running fake investment and other schemes. The FTC estimates that U.S. military veterans lost \$292 million to fraud in 2022 alone.⁴⁸

Exacerbating the issue is the uneven availability of legal support across the U.S. While some states and localities feature a significant number of pro bono legal support services, veterans living in rural areas may not be able to access them. Moreover, many veterans do not know their legal rights.

47 <https://www.ftc.gov/news-events/news/press-releases/2018/07/ftc-states-combat-fraudulent-charities-falsely-claim-help-veterans-servicemembers>

48 <https://www.aarp.org/home-family/voices/veterans/info-2023/ftc-fraud-veterans-military-community.html>





“If a lawyer—or a whole firm—is basing their entire business plan on veterans, they’ve got to be making some good money, right? A lot of the contracts that they would make us sign if you wanted their help to navigate the system gave them 50 percent of our back pay. My back pay was over \$100,000 when it was all said and done. So that person would have got \$50,000 cash from me if I had signed that contract. Which I didn’t. Thank God.”

—Ryan Shead, U.S. Air Force veteran, Arizona

Financial Illiteracy and Stress

For some veterans—perhaps especially those who enlisted straight out of high school—a lack of financial literacy can lead to serious and lifelong issues and constraints. The VA and other government organizations offer information and education on an array of monetary topics, from finding a home loan to creating a family budget, but too many veterans still fall prey to predatory lenders or find themselves unable to dig out of a financial hole. Those who suffer from TBI may be at particular risk of financial difficulties.

Despite collectively experiencing lower poverty rates compared with their nonveteran peers, veterans are not immune from financial worries. In fact, according to the Military Family Advisory Network (MFAN), more than 8 in 10 veterans and service members report that their finances are a source of stress, and nearly 4 in 10 veteran families have less than \$500 in savings for emergencies.⁴⁹ Constant worry about finances can negatively impact mental health, with respondents to an MFAN survey reporting difficulty sleeping, anxiety or depression, and even physical symptoms such as headaches.

49 <https://www.mfan.org/wp-content/uploads/2022/07/MFAN-Programming-Survey-Results.pdf>

“All you have to do is Google ‘military loans,’ and you’ll see how many million results come up. Many of them shady, frankly. I saw it with my own eyes at Fort Campbell, Kentucky, some years ago. There were 22 fast-cash lenders in a four-mile stretch out the gates. It’s a problem.”

—Holly Petraeus, former Assistant Director and head of Office of Servicemember Affairs, Consumer Financial Protection Bureau

“Financial crisis is a common area of despair among the veteran community and can lead to depression and, even worse, suicide. Providing them with the skills to make educated financial decisions is vital to their well-being.”

—Florida Bankruptcy Judge Laurel M. Isicoff⁵⁰

69

50 <https://www.uscourts.gov/news/2023/11/09/judges-bring-financial-literacy-florida-veterans#:~:text=E2%80%9CFinancial%20crisis%20is%20a%20common,to%20their%20well%2Dbeing.%E2%80%9D>



Homeownership and Housing Insecurity

According to researchers at RAND, households that include veterans are more likely than nonveteran households to own the home in which they live. This runs counter to prior research that suggested veterans spend more of their household budgets on housing, leaving them at greater risk of homelessness when the economy weakens or the cost of food, housing, and other essentials rises rapidly. It's important to note, however, that this does not apply to post-9/11 veterans, who experience a higher housing cost burden than nonveterans do, in part because so many of them are renters.⁵¹ Female and low-income veterans also continue to be at greater risk of losing their homes and experiencing housing instability.

Despite recent gains, nearly 13 percent of the unhoused adult population in the U.S. are veterans—nearly twice the percentage of veterans in the general population.⁵² Among the male unhoused population, 20 percent are veterans. Women veterans who are unhoused, the fastest-growing segment of the homeless veteran population, are particularly vulnerable. In many women's shelters, military status is not asked, so benefits such as housing vouchers and temporary financial assistance are not offered.

71

According to research from the VA, veterans who are unmarried or have a drug use disorder are more than twice as likely to become homeless.⁵³

51 https://www.rand.org/pubs/research_reports/RRA1363-3.html

52 <https://nchv.org/veteran-homelessness/>

53 https://www.research.va.gov/topics/mental_health.cfm

Food Insecurity

Veterans typically have access to government-run food and nutritional support programs should they need them. However, access is not the same as use, and Feeding America reports that one in nine working-age veterans is food insecure.⁵⁴ Moreover, food-insecure veterans are less likely than their nonveteran peers to seek out and sign up for the Supplemental Nutrition Assistance Program (SNAP) and related offerings. This is particularly true of older veterans and those with disabilities, according to RAND.⁵⁵

This reluctance to access available resources is partly because servicemen and -women are culturally conditioned to avoid asking for help even when needed. This ethic of self-sufficiency tends to influence veterans' decisions throughout the rest of their lives. In the case of food and nutrition programs, however, there may be aspects of individual programs that can overcome this resistance. For example, early education and outreach can ensure veterans know about food and nutrition support programs. In addition, public-private collaborations can target veterans at particular risk of food insecurity and hunger. As one example, Humana has teamed with Veterans of Foreign Wars on Uniting to Combat Hunger, a program that has provided millions of meals to hungry veterans since 2018.⁵⁶

54 <https://www.feedingamerica.org/hunger-in-america/food-insecurity-in-veterans>

55 https://www.rand.org/pubs/research_reports/RRA1363-2.html

56 <https://www.vfw.org/community/community-initiatives/uniting-to-combat-hunger>



Family Structure

As the number of women veterans increases, so does the number of single-parent households led by female veterans. While veterans are more likely than nonveterans to be in two-parent households, that gap is closing: Today, roughly 12 percent of veteran parents identify as single compared with 18 percent of nonveteran parents.

Concerningly, single-parent veterans have lower median personal and household incomes.⁵⁷ They are also more likely to be still enrolled in higher education, suggesting they could benefit from targeted support for education-related expenses, including childcare. This is particularly true for Black female veterans.

Research from RAND Corporation suggests that veteran single parents would benefit from additional career guidance that helps them balance family and work, more affordable childcare options, and support in accessing resources such as SNAP.⁵⁸

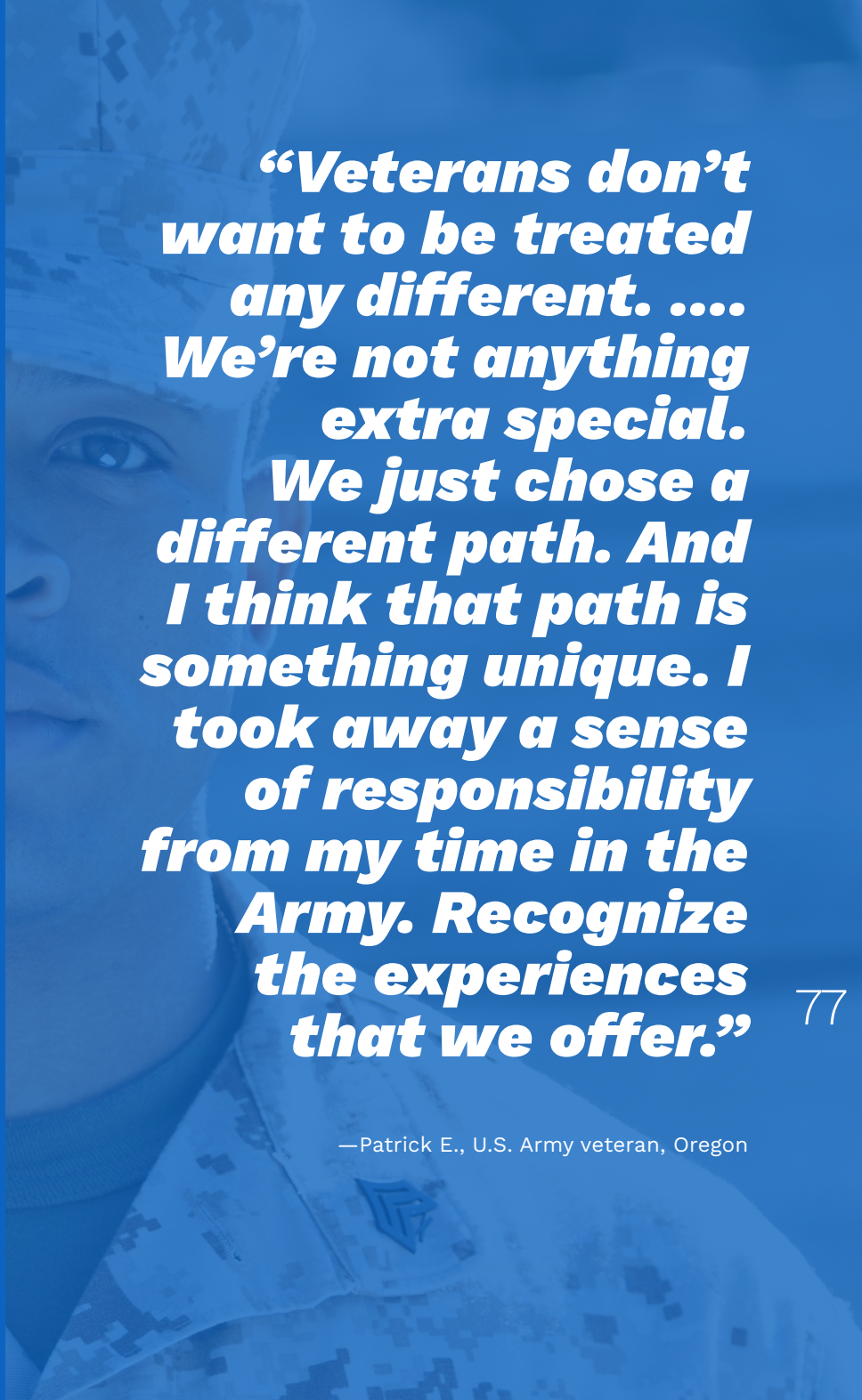
57 https://www.rand.org/pubs/research_reports/RRA1363-6.html

58 https://www.rand.org/content/dam/rand/pubs/research_reports/RRA1300/RRA1363-6/RAND_RRA1363-6.pdf

“The health of our all-volunteer force depends on how we respond to veterans transitioning back into civilian society. We’ve made huge progress—we are a very generous nation after all—but the risk is that we have compassion fatigue and short attention spans.”

—Anne Marie Dougherty, CEO, Bob Woodruff Foundation⁵⁹

**Doing It
Right:
Principles
and
Practices
That
Can Work**



***“Veterans don’t
want to be treated
any different.
We’re not anything
extra special.
We just chose a
different path. And
I think that path is
something unique. I
took away a sense
of responsibility
from my time in the
Army. Recognize
the experiences
that we offer.”***

77

—Patrick E., U.S. Army veteran, Oregon



There is broad support nationwide for better serving those who have served, but too often, good thoughts don't translate into meaningful action and any actions taken are surface-level—allowing well-intentioned people to feel good without measurably improving the lives of veterans.

To boost the effectiveness of the programs PMI supports, achieve measurable outcomes, and set standards others can follow, our research identified several principles and practices we believe will prove particularly effective in serving veterans and their families.

First and foremost:

Ask, don't assume: Veterans tell us they are rarely asked what kind of support they need at various stages of the transition to civilian life. Years after their discharge, their needs change, but the forms of support on offer don't. Bottom line: We are failing our veterans by not prioritizing their opinions and insights in efforts to improve their welfare. Any organization seeking to support veterans must engage in regular and robust dialogues with the men and women who served. This should include, among other activities:

- Convening regular meetings and conversations (in person and online) with veterans and the organizations that serve them
- As feasible, conducting surveys and demographic studies of the veterans population

- Staying up to date on scholarship regarding veterans' needs and challenges
- Maintaining a positive and informative presence in online forums dedicated to veterans and their welfare

Offer substance, not symbols: Americans are quick to thank veterans and active-duty military members for their service. It's not unusual, for instance, for those in uniform and veterans to be recognized at community and sporting events or while boarding airplanes. While typically appreciated, such recognition doesn't address the very real challenges many veterans face, from mental health struggles to food and housing insecurity. Action is needed. This must include both public and taxpayer-funded services and volunteer- and community-led efforts.

Helping veterans transition into the civilian labor force, providing access to appropriate mental health and other support services, and improving the lives of military families are among the most substantive ways we can serve our veterans and their families. Actions that support this goal will include:

- Building programs with clear goals and measurable outcomes (e.g., number of military families served, meals provided, pro bono legal and financial services accessed)

- Listening to veterans and incorporating their feedback into reformulating service and support programs
- Hiring and encouraging other organizations to prioritize the employment of military veterans and their spouses/partners
- Using public events not just to recognize veterans and service members but as forums for education and calls to action (Beyond standing and clapping, what can attendees *do* to improve the lives of veterans and their families?)
- Supporting governmental policies focused on meeting veterans' needs
- Heightening community awareness through programming and events



“I appreciate you thanking me for my service. But whenever people say that to me, it’s like, don’t thank me ... tell me what I can do for you. ... Don’t thank [veterans] for their service; give them a new purpose. ... Because a lot of us, we just want to do stuff. We just want to help. ... Tell me how I can help. What do you want me to do? And that, for me, is how we can empower people and lift them up.”

—Andrew F., Army veteran, Virginia

Recognize the diversity of the veteran community:

Veterans are not a homogeneous group. Not all served in combat roles. Not all their injuries and traumas are visible. There are multiple other distinctions and divides as well, including the very different experiences of those who served prior to versus after 9/11, stark demographic differences (e.g., socioeconomics, race, cultural background, education), and widely varying needs. Any “one-size-fits-all” approach to military families and veterans will serve only a fraction of this population.

Actions that encompass the diversity of veterans’ needs include:

- Understanding the highly complex challenges veterans face and accepting that no one organization can help all of them simultaneously
- Working with a diverse array of veterans’ service and advocacy organizations and recognizing that each has its own capabilities and priorities
- Supporting service organizations targeting specific segments of veterans (e.g., single parents, LGBTQ+)
- Creating programs targeting communities that “overserve” and are underserved (e.g., Native Americans)
- Treating veterans as individuals and recognizing that their experiences and needs differ greatly based on their life experiences prior to enlistment, the military branch and unit in which they served, and their experiences during and after their military tenures

Serve veterans early and individually: Too often, military members wait until just a few months before their discharge date to begin planning for their lives after service—if they plan at all. Some may believe their active duties are too critical to miss, while others are falsely confident in their ability to manage the transition back into civilian life. Sometimes, their commanding officers make it difficult for them to devote adequate time to pre-discharge training.

Whatever the circumstances leading up to a lack of preparation, service members pay the price. Just as it may take as long as a year of basic and then specialist training for an enlistee to be ready for deployment, it can take six months or more to fully prepare for life post-discharge.

Importantly, this preparation should be both comprehensive and customized. Once discharged, a veteran has significant educational and professional development supports available—but some of those benefits can only be used once. Advocates for veterans say they need more intensive mentorship and counseling months prior to leaving the service so they can better assess their interests and career goals and use existing benefits to the greatest possible effect.

“I was getting all this [pre-discharge] information,” veteran Matthew Langseth told us. “I couldn’t make sense of it all. I had checklist after checklist ... Have you Googled the transitioning military checklist? You’re going to find this 8.5 x 11 paper just crammed full of stuff. But each one of those things, it isn’t a one-step process.”

Changes to the current system are urgently needed. Our initial recommendations, based on our research and conversations with veterans and their advocates, are as follows:

- Public and private organizations alike need to provide concierge-like support so veterans understand the programs available to them and can more thoughtfully choose the best path forward.
- Benefit guidance should be built into public support programs. Volunteers and outside organizations can play a vital role in this regard.
- Veterans should be permitted to tap into education and professional certification benefits when they are ready, rather than on an artificial “use it or lose it” schedule that may pressure them into unsustainable career choices.
- Government programs should be streamlined and simplified to reduce delays and eliminate the need for intermediaries.
- Family members should be empowered to support veterans and active military members on all issues related to benefits, education support, and other critical programs.

“Technology is great, but at the end of the day, you can’t replace people, right? ... It would have been super helpful for me to have a person to sit down with and talk to—someone to say, ‘Hey, here’s what’s available if you need this ... if you’re having housing problems, relationship problems, whatever.’ Like, ‘Here are the avenues.’ That was not a thing when I went through coming home. ... I had to walk that walk, and it was ugly, and it was horrible, and I’m super blessed to be here.”

—David A., U.S. Marine Corps veteran, Kentucky

Ease the transition to the civilian workforce: A

common refrain emerged in our research: The U.S. military and associated institutions do a fair—but not excellent—job of connecting military members to employment opportunities and related services before discharge. Deficits in the system lead military families to rely on one another for information, help, and advice. If a military family recognizes a helpful partner in the transition to civilian life—whether an employer, therapist, lawyer, or someone else—they typically share that information with other military families. This can be a powerful driver of success in serving veterans.

Certain employers can efficiently recruit and hire outstanding veterans because “the word is out” that their workplace supports those who served. Unfortunately, these informal networks are not big or broad enough to provide economic opportunity to all discharged service members. Even highly skilled or educated veterans say the most challenging part of their transition was the first six months after discharge. A critical step, therefore, would be to create better pre-transition education focused on private-sector opportunities, training and education programs that are highly relevant to marketplace needs, and better and broader job postings by employers focused on hiring ex-military.

“Veterans have a very hard time finding their new mission once their mission-critical mission has ended. When folks don’t find their new mission, they blow off that excess steam in negative ways. They get involved in drugs and alcohol. They spiral. They detach. It’s a very serious issue.

The VA doesn’t have the bandwidth or resources to do the individualized support service that I think is probably required. So, any ancillary help is of huge importance.”

89

—Jayce H., U.S. Marine Corps veteran, Virginia



Actions that support these goals will include:

- Creating corporate initiatives to recruit veterans and military spouses/partners
- Including veteran status and veterans-focused programs within broader diversity and inclusion efforts
- Tailoring vibrant mentorship and networking opportunities for veterans
- Creating pathways such as apprenticeships and paid internships to allow newly discharged veterans to “try out” a position before they commit fully to a career path
- Establishing dedicated employee resource groups for veterans, their families, and supporters
- Providing a path to education without blocking employment access (veterans have a proven record of accessing education while they work)
- Providing gap pay for reservist employees who are called to active duty
- Creating volunteer opportunities for employees focused on veterans’ needs
- Establishing corporate memberships in veterans’ support organizations
- Making a sustained commitment to prioritize veteran-owned vendors
- Offering learning, training, and leadership opportunities to recently discharged veterans
- Supporting scientific and clinical research into veterans’ healthcare needs—especially mental health and suicide prevention

Build long-term services for mental well-being:

Veterans may require lifelong support and services—especially those who experience TBI, PTSD, or another issue that affects mental health. Treatment immediately after trauma and during the early months of recovery is critical, but it is not enough. A veteran's needs will change over time. Unfortunately, the military culture tends to discourage accessing mental health services while in uniform, delaying much-needed treatment and therapies, and veterans often pay the price later in civilian life. Moreover, some effects of trauma are known to be delayed.

Actions that support mental health and well-being include:

- Destigmatizing mental health and contributing to a culture that promotes mental health awareness and action
- Supporting a broad range of mental health programs and services for veterans, including concierge services, in-patient care, ongoing individual and group therapy, telemedicine and virtual support, and self-help guides and tools
- Ensuring veterans and their families are informed of existing mental health and well-being resources dedicated to veterans, including federal, state, and local programs and nongovernmental and private sector resources
- Sponsoring low-cost mental health programs for all employees that also incorporate veterans-specific mental well-being services





- Educating nonveteran communities about PTSD, TBI, and other mental health–related challenges that affect veterans disproportionately
- Proceeding on the veterans’ terms, allowing them to decide what they want to share—and when

“[I had] prolonged exposure therapy every Friday ... I would have to tell this story, and it was so bad when I first started ... I would just cry for 10 minutes straight, 15 minutes, and then I could get a couple of sentences out or the first five minutes of a story ... It was that way for months until, finally, I had rubbed enough of the sharp edges off of some of these traumatic experiences that I could talk about it.”

95

—David A., U.S. Marine Corps veteran, Kentucky

“That one week they get before they’re thrown back into family life or civilian life, whatever it may be, is just not long enough. They need more of a transition period. The military needs to be there for them. And you know, help them out. Maybe it’s daycare? You’d be amazed at what a problem it is for these veterans coming home to get daycare.”

—Misi Moser, Gold Star Mom, Colorado

Earn veterans' trust: Military families learn to trust and rely on one another but are more cautious outside these closed circles. Established organizations, including the military branches themselves and the VA, may attempt to provide necessary services, but they do not always enjoy a reputation for good service among military families and veterans.

Organizations earn trust through specific and repeated actions, such as hiring veterans and military spouses, offering clear financial and quality-of-life benefits, and treating veterans and their families with respect and honesty.

Actions that support this goal include:

- Being a steady, positive presence over the long term rather than creating one-off events or offerings and ignoring the needs of veterans the rest of the year
- Structuring programs for veterans around cohorts and networks—recognizing that each branch of the military has its own culture and there are significant distinctions within each branch (Outreach and service programs must reflect these distinctions.)
- Being visible to and accessible by all members of the veterans community, including their families
- Reflecting the military values of accountability and follow-through in veterans' service programs
- Beginning service and support work while service members are still enlisted—demonstrating a commitment to their whole selves and letting them know where to turn as needed

- Serving as a resource for and liaison to other service providers (No organization can be a “one-stop shop” for veterans. Focus on what you can do best and help veterans access other groups for their remaining needs.)
- Demonstrating a firm commitment to specific outcomes and being as comprehensive as possible in the type of support you offer
- Maintaining a year-round, “always open” presence (to the extent possible) so veterans always have somewhere to turn



Make support for veterans a family affair: It is not enough to support veterans. Their families, too, need support. This is true during deployment, but it's also critical when veterans return to civilian life injured or needing extra assistance.

Actions that support this goal include:

- Offering respite care to family caretakers, as well as access to support groups
- Providing education and job training
- Hiring military spouses/partners
- Creating scholarships and education support for the children of active military
- Building and funding support networks for military families at a base and branch level (Such a network effect will likely produce greater results at scale and repeatable successes. One-off support for military families is beneficial but not as effective over the long term.)
- Recognizing that military families are highly diverse, with widely varying needs (regular surveys and follow-up can help to ensure families are appropriately targeted and catered to)
- Recognizing that any program for active-duty military families will have two significant audiences: the families themselves and those in uniform who are often far away
- Being transparent about available resources and never promising what you might fail to deliver
- Structuring programs to provide year-round support



“I would hear from my stepmother that my dad had really severe issues with PTSD and nightmares, and people that were lost and things that were witnessed, and things that were participated in, and all of that sort of thing. ... It was hard on her in a lot of ways. Number one, she was his caretaker for all his physical issues. ...

My dad was a little bit of a heavy drinker. There was a lot of stuff that he didn't want to deal with emotionally. And when someone is a heavy drinker, there's sort of an emotional toll it takes on their spouse, right? Because there's not necessarily that emotional openness or that kind of softness that you want to be there in a marriage. There are walls that get put up. I think it was really hard for her.”

PMI + Veterans

PMI has a special relationship with the nation's military veterans that has extended over many years. In our charitable endeavors, our company prioritizes veterans-focused groups, and members of our U.S. leadership team have had a personal commitment to those who have served, including one executive who spent several years on the board of the Bob Woodruff Foundation.

In 2023, PMI embarked on a listening tour in the U.S. to better understand the challenges confronting our military veterans and hear directly from them which programs and initiatives would serve them and their families best. With stops already in Arizona, Colorado, Texas, and Washington, D.C., this tour will continue throughout 2024 as we ramp up our veterans support program. The people of PMI are fully behind this initiative, with an internal survey showing that 97 percent of U.S. employees are interested in joining the company in its outreach to veterans and their families.

"I'm not sure I can think of any other cause that elicited such a strong response among employees," says Marian Salzman, Senior Vice President & Chief Corporate Citizenship Officer, U.S. "Our people very much want to make a positive difference in the lives of those who have served. I was especially moved by communications I received from veterans within our ranks, who are eager not just to be heard but to reach out to other veterans in support."

Veterans and Our Smoke-Free Future

As a company on a mission to create a smoke-free future—a world without cigarettes—PMI also feels compelled to address the higher-than-average rates of smoking among current and former service members.

- According to research from the American Lung Association, an estimated 21.6 percent of U.S. military veterans smoke—rising to 50.2 percent among male veterans and service members aged 18–25.⁶⁰ This compares with a national smoking rate of 11.5 percent among U.S. adults.⁶¹
- Military deployment is associated with higher rates of smoking initiation and recidivism, particularly among those with prolonged deployments, multiple deployments, or combat exposure.⁶²
- The Department of Veterans Affairs (VA) reports that seven in 10 veterans who smoke cigarettes would like to quit.⁶³

60 <https://www.lung.org/research/sotc/by-the-numbers/top-10-populations-affected>

61 https://www.cdc.gov/tobacco/data_statistics/fact_sheets/adult_data/cig_smoking/index.htm

62 <https://pubmed.ncbi.nlm.nih.gov/22496626/>

63 <https://www.dva.va.gov/news/2024/increasing-tobacco-cessation-services-veterans>



Philip Morris International has never sold cigarettes in the U.S. Moreover, since 2016, our company has committed to seeing an end to cigarette smoking—including in the United States. Our message to adults is clear:

**“IF YOU DON’T SMOKE, DON’T START.
IF YOU SMOKE, QUIT.
IF YOU DON’T QUIT, CHANGE.”**

The best choice a smoker can make is to quit tobacco and nicotine altogether. For those adults who don’t quit, the best option is to switch from cigarettes—*the most harmful form of nicotine consumption*—to a smoke-free product that has been scientifically demonstrated to be a better choice than continued cigarette use. (Learn more at [PMI.com](https://www.pmi.com).)

“When I was in Vietnam during the war, they gave us cigarettes with our C rations. They were everywhere. And nobody that I recall anywhere along the way told me, ‘You can’t do that here,’ except maybe on an airplane. They told me to go to the back of the airplane to smoke a cigarette.”

—Bob Y., U.S. Air Force veteran, Georgia

Whether it involves service members quitting nicotine altogether or switching to a better alternative, we want to see cigarette use eliminated in the U.S. Armed Forces and among its veterans. And we are committed to doing all we can to speed up this process.

PMI's efforts on behalf of veterans extend far beyond this, of course. We are working to support the men and women who have sacrificed for our nation through a multipronged approach that includes:

- Prioritizing the hiring of military veterans and their spouses/partners as we expand our U.S. footprint
- Establishing an employee resource group (ERG) devoted to veterans and the challenges they and their families face
- Sponsoring national organizations dedicated to improving the lives of veterans and their families (e.g., Bob Woodruff Foundation, Elizabeth Dole Foundation, Project Home Base)
- Partnering with law schools to offer legal clinics to help veterans access critical benefits (e.g., mental health services, housing, job training)
- Supporting community-based veterans-focused events and initiatives

- Bringing together veterans and their advocates, academics, policymakers, and others to push veterans issues into the center of conversations and make real and measurable progress on removing the obstacles that prevent veterans from living their best lives

In 2022–2023, PMI donated well in excess of \$1 million to organizations working on behalf of U.S. veterans and active service members, including Active Heroes, American Corporate Partners, Beyond Boundaries, Bob Woodruff Foundation, Disabled American Veterans Charitable Service Trust, Elizabeth Dole Foundation, Folds of Honor, Forgotten Not Gone, For the Troops, HillVets, Homes for Our Troops, Hope for the Warriors, Iraq and Afghanistan Veterans of America (IAVA), K9 for Warriors, Lady Veterans Connect, Liberation Veterans Services, Pennsylvania Wounded Warriors, PTSD Foundation of America, Purple Heart Homes, Soldiers' Angels, Veterans Empowered Together, Wounded Warrior Project, and Wreaths Across America.

“As PMI expands its presence in the U.S. market, we have an opportunity to put our values into action by supporting the men and women who have served our nation and the organizations that work on their behalf. As an employer and community member, it is our privilege to work with military veterans to ease their transition back into civilian life and help them overcome the obstacles they should never have had to face alone.”

—Stacey Kennedy, President, Americas & CEO
of U.S. Business, PMI

Closing Thoughts

We believe that America's 18 million veterans represent an essential strength of the United States, embodying the nation's spirit of public service, courage, selflessness, and leadership. Coming from every part of the country and representing the full diversity of America's people, veterans can be bridge builders and leaders.

In our communities, workplaces, and homes, veterans are people we can look up to. They have taken on difficult and often dangerous work vital to keeping our nation strong and secure—and many pay an exceptionally high price for participating in this mission.

We accept this service with gratitude. And we must be ready to do what it takes so that those who serve are, in turn, served.

As an organization making a long-term investment in America, Philip Morris International recognizes what's at stake. America is a better and stronger nation because of our veterans, and lip service is not nearly enough. We need to act.

Most veterans return to civilian life well-prepared for the challenges they will face, and we are proud to employ many of these men and women in our company. We also recognize, however, that some veterans—especially those who have served more recently—struggle with the return to civilian life. Finding direction in a new career, signing up for programs that provide meaningful career



KC-130J
169229

111

and other support, and arranging for ongoing medical care are complex tasks made more difficult by a system of overlapping, confusing, and sometimes insufficient services. When veterans can't access the help they need, we all suffer—veterans and their families most of all.

As a corporate citizen, our goal is to raise these issues to a place of prominence—to convene discussions so people learn about the diversity of our veterans and devise ways to address their needs one veteran at a time. PMI is taking action to provide U.S. veterans and their families with the individualized support required. In doing so, we hope to inspire others to find their way to make their commitment to our veterans felt and seen.

Progress on this front will require the concerted effort of many millions of Americans—and we look forward to helping lead the way.

Philip Morris International would like to thank the following individuals and organizations for their time and support:

PMI employees and other military veterans and family members who participated in interviews to enrich this report and inform our plans (Brian A., Bryan A., David A., Jim C., Patrick E., Andrew F., Jayce H., Dale K., Brad L., Matthew Langseth, Mimi Moser, Mansoor S., Karla S., Ryan Shead, Amanda W.)

Matthew Andres, Professor of Law, Veterans Legal Clinic, University of Michigan Law School

Steve Clemons, Founding Editor at Large, Semafor

Matthew Handley, U.S. Army veteran and Equal Justice Works Fellow and Attorney, National Veterans Legal Service Program

Joseph Kopser, U.S. Army veteran and Special Advisor for Military Leadership and Strategy Policy, University of Texas at Austin

Holly Petraeus, former Assistant Director and head of Office of Servicemember Affairs, Consumer Financial Protection Bureau

Lindsey Schiro, Executive Director, 51 Vets

Lee Woodruff and the Bob Woodruff Foundation



PHILIP MORRIS INTERNATIONAL

© PMI GLOBAL SERVICES INC.

All rights reserved. No part of this publication may be shared, reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, without the prior written permission of PMI.

All third-party product names or company names referred to are for informational purposes only. References to these names does not implicitly or explicitly express any kind of affiliation with, or endorsement of, them.

Images: All images used within this book are either owned by or licensed to PMI under separate license agreements or used under nonexclusive, royalty-free license. Image banks used: Getty Images, unsplash.com

Philip Morris International
677 Washington Blvd., Ste. 1100
Stamford, CT 06901
USA