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From Death to Life: Female Veterans, Identity Negotiation, and Reintegration Into Society

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Abstract

Experiences of 17 female Iraq War veterans were explored to understand the challenges of reintegrating into civilian life and the impact on mental health. All respondents completed preliminary electronic surveys and participated in one of two focus groups. High levels of distress exist among veterans who are caught between military and civilian cultures, coping with war experiences, feeling alienated from family and friends, and attempting to negotiate gender and identity. Narrative is identified as a means of resolution. Recommendations include development of social support and transition groups; military cultural competence training for therapists, social workers, and college counselors; and further research to identify appropriate military response and paths to successful reintegration into society.

Keywords

female, veterans, identity, gender, mental health, qualitative

It is a well-known fact that increasing numbers of women are serving in the military; in fact, they currently comprise approximately 16% of active duty

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military personnel and the equivalent percentage of veterans who have separated from service (U.S. Department of Defense, 2009). In the past, there were few research studies that focused primarily on female veterans, and although that is changing, female veterans' issues are woefully understudied when compared with male veterans. Among all Veterans Affairs investigations funded through both public and private sources, only 2.6% of the research is conducted among female veteran participants (U.S. Department of Veterans Affairs, 2004).

A review of the literature pertaining to female veterans from the Gulf Wars (including Iraq and/or Afghanistan) revealed that the majority of research is related to posttraumatic stress disorder and trauma (Erickson, Wolfe, King, King, & Sharkansky, 2001; Fontana & Rosenheck, 1998; Himmelfarb, Yaeger, & Mintz, 2006; Kang, Natelson, Mahan, Lee, & Murphy, 2003; Pierce, 1997; Stuart, Murray, Ursano, & Wright, 2002; Suris, Lind, Kashner, Borman, & Petty, 2004); use of Veterans Administration services for health care (Carney et al., 2003; Fontana & Rosenheck, 2006; Ouimette, Wolfe, Daley, & Gima, 2003; Washington, Kleimann, Michelini, Kleimann, & Canning, 2007); and sexual victimization, including sexual harassment and assault (Chang, Skinner, & Boehmer, 2001; Harned, Ormerod, Palmieri, Collinsworth, & Reed, 2002; Sadler, Booth, Cook, & Doebbeling, 2003). Military sexual trauma—sexual assault or repeated threatening sexual harassment that involves someone against their own will, and that occurred while the veteran is in the military (U.S. Department of Veterans Affairs, 2012)—has been well-documented (Butterfield, McIntyre, Stechuchak, Nanda, & Bastian, 1998; Fontana & Rosenheck, 1998; Kimerling, Gima, Smith, Street, & Frayne, 2007; Suris, Lind, Kashner, & Borman, 2007; Williams & Bernstein, 2011). The risk of exposure to sexual violence within the military is disturbingly high. Among female patients treated at the Veterans Health Administration, the prevalence of military sexual trauma was 21.5% (Kimerling et al., 2007), and it is likely that these rates are significantly underreported. In a survey conducted by the U.S. Department of Defense (2010), 71% of females responded that they had not reported a sexual assault in the previous year's survey, and a review of the literature reveals prevalence rates between 4% and 71% (Suris & Lind, 2008). Gender harassment (sexist jokes, crude remarks and stories, putting someone down on the basis of gender, or expecting someone to work harder to prove himself or herself) occurs more often than other forms of sexual harassment (Lipari, Cook, Rock, & Matos, 2008; Magley, Waldo, Drasgow, & Fitzgerald, 1999), and 54% of military women experience gender harassment annually (Lipari et al., 2008). Gender harassment and sexual harassment are likely to cooccur (Street, Vogt, & Dutra, 2009); however, research indicates that gender harassment is perceived more negatively by

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military women than is sexual harassment (Rosen & Martin, 1998). Gender harassment is most likely experienced as a chronic, severe stressor and is most likely compounded by the stress of being in a combat zone where support from ones' comrades is crucial for maintaining unit cohesiveness and safety (Street et al., 2009). After returning home, female veterans who have experienced gender harassment are more likely to have negative mental health outcomes (Rosen & Martin, 1998), and female veterans who have been sexually harassed or assaulted report engaging in substance misuse and feelings of loneliness, anxiety, depression, and anger (Davis & Wood, 1999; Ouimette, Wolfe, & Chrestman, 1996; Skinner et al., 2000).

Although there is growing interest in female veterans' issues, there is very little research about their reintegration into civilian life, and there is a paucity of qualitative research in this area. One of two qualitative studies (Suter, Lamb, Marko, & Tye-Williams, 2006), identified in this review, explored the experiences of Women Accepted for Volunteer Emergency Services (WAVES) in the Navy from one regional WAVE unit. Twenty-eight females were interviewed, the majority of whom (75%) were World War II veterans. Only one of the females had served in the Persian Gulf War, and none were currently serving in the military. Suter et al. (2006) found that participants' sense of self began to change through their military experiences, contributing to a new, transformed identity. They gained "self-confidence as they grew through the experience into strong, capable women" (p. 12). Suter et al. also reported that participants experienced difficulties in transitioning back to the civilian world, particularly in fulfilling traditional female roles, because the women had "developed atypical identities as they served, and upon returning home, had no one who indexed this transformed identity" (p. 12). They reported feelings of isolation and loneliness, and some of the women were forced to reidentify with their preservice identity. Participants reported that joining the WAVES regional unit, or community of practice as the researchers referred to it, after they returned from deployment significantly ameliorated their distress.

The majority of research on female veterans is problem based and quantitative in nature. The purpose of this study was to explore the lived experiences of becoming a military service member, returning home and reintegrating into civilian life among a more heterogeneous group of female veterans from the Iraq and Afghanistan wars, using a critical interpretive approach.

Literature Review

Unlike quantitative research in which a complete literature review is conducted prior to implementing the study, the relevant literature for an interpretive approach often emerges during data analysis. Identity and the role of

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military culture in the formation of identity emerged as cross-cutting themes during the analysis process; hence, these topics formed the basis of the literature review and the lens through which the experiences of participants were interpreted.

Culture

Culture is made up of the “webs of significance” that humans create (Geertz, 1973, p. 5), and it is within culture that we learn socially accepted norms, how selves are valued, and what constitutes a self (Adler & McAdams, 2007; Pasupathi, Mansour, & Brubaker, 2007). Although men and women come to the military from diverse cultural backgrounds, the one thing they ultimately share is assimilation into military culture. One of the primary goals of boot camp, the training ground for all military personnel, is to socialize recruits by stripping them of their civilian identity and replacing it with military identity. The passage from one identity to another is composed of three stages. Van Gennep (1960) describes the stages as separation, liminality (or transition), and incorporation. Drawing on his own experiences and those of other veterans of the Vietnam War, Paulson (2005) similarly identifies three stages of identity development—separation, initiation, and return. The first stage, separation, involves the removal of an individual from his or her customary social life, the imposition of new customs and taboos (Van Gennep), and the stripping of individuality and identity (Paulson). The second stage, liminality, is one of transition between two social statuses. The individual is “betwixt and between” statuses, belonging to neither one nor the other (Turner, 1974, p. 232; Van Gennep, 1960). Transition rites create new social norms, and initiates become equal to each other within emergent “communitas,” that is, a “cultural and normative form—stressing equality and comradeship as norms” within relationships that develop between persons (pp. 232, 251). In Van Gennep’s third stage, incorporation, the individual reenters the social structure, oftentimes, but not always, with a higher status level than before going through the socialization process (Van Gennep) and begins to identify with the group in preparation for initiation—entering into combat as a military unit (Paulson).

Military indoctrination, the process whereby civilians are transformed into a “collective group that shares a unique identity,” occurs in boot camp or basic training (McGurk, Cotting, Britt, & Adler, 2006, p. 13). All members of organizations are socialized to take on the values and goals of the group to which they belong; this is a much more intense process in the military, going beyond what occurs in civilian organizations and is necessary to “enable service members to engage in behaviors that represent a more radical departure from their

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prior experiences and worldview" (p. 15). The goals of this intense indoctrination process are to (a) teach recruits to subordinate their self-interests, including survival, in the service of group goals and in order to follow orders to accomplish a mission; (b) teach recruits to kill someone else in the service of their country; and (c) enable recruits to view themselves in collective terms (pp. 13-15). Recruits are trained to never abandon their fellow warriors in combat and never show weakness to fellow warriors or to the enemy (Fenell, 2008). Military identity is infused with the values of duty, honor, loyalty, and commitment to comrades, unit, and nation. It promotes self-sacrifice, discipline, obedience to legitimate authority, and belief in a merit-based rewards system (Collins, 1998). These values are in conflict with more individualistic, liberty-based civic values.

Although military culture is evolving and has accepted women to some degree (Dunivin, 1994), military training remains rooted in the ideal of the masculine warrior, rewarding self-control, aggressiveness, and determination. Military training celebrates the group rather than the individual and fosters an intimacy based on sameness, whereby recruits become one of a loyal team, developing a "bond that transcends all others, even the marriage and family bonds we forge in civilian life" (Tick, 2005, p. 141). At the same time, recruits become capable of fighting wars by learning how to turn their emotions off and depersonalizing the act of killing "the other." The process of war involves dehumanizing everyone involved (on both sides) and placing everyone in kill or be killed situations. According to Tick (p. 21), war "reshapes the imagination as an agent of negation." To create strategies and use weapons for the destruction of others, the imagination is "enlisted in life-destroying service" (Tick, p. 21). Once a military service member enters into and survives combat, he or she is "no longer an initiate; he [or she] is a full-fledged combat veteran" (Paulson, 2005, p. 25).

The differences in values between civilian society and military society create a "civil-military cultural gap" (Collins, 1998), which is exacerbated by the fact that there is an all-volunteer military. Today, fewer families have direct contact with someone serving in the military than ever before. The move away from a draft and to a volunteer force has allowed most Americans to become completely detached from military issues and the men and women who are sent to war, leading to a lack of understanding about the differences between the two worlds.

Identity

Identity is composed of multiple dimensions, including gender (Jones & McEwen, 2000), and is socially, historically, politically, and culturally constructed

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(Weber, 1998) within community, that is, within social or civic spaces (Kerr, 1996). The military is a gendered institution in which "cultural images of gender are invented and reproduced" (Acker, 1990, p. 140). Training is not solely about turning civilians into soldiers by teaching them the skills they need to perform appropriately in times of war; it is "intended to vest each participant with a clear notion of what it means to be a soldier" and "most images are characteristically male" (Herbert, 1998, p. 8). Historically, soldiering has been constructed as a male pursuit, leaving females in the position of having to determine what strategies to use and actions to take to be accepted as women soldiers. This includes "their everyday actions, e.g., choice of uniform hobby, or social activity, [that] involve the creation and re-creation of what it means to be a woman, particularly a woman soldier" (Herbert, 1998, p. 14) and managing their "femaleness" by blending (p. 21). Blending is the process of carefully managing being masculine enough to fit in and being perceived as able to do the work of a soldier but not so masculine as to be perceived as lesbian. One of two strategies may be employed in the process of blending; women can either play up their femininity to convey that they are not a threat to men's jobs or status (Herbert, 1998) or women can minimize their femininity and become "one of the guys by emphasizing work status . . . minimizing themselves from other women" (Dunivin, 1988, p. 60), and downplaying the traits that constitute what it means to be a woman in Western culture—fragility, attractiveness, passivity, and nurturance (Silva, 2008).

According to Ricoeur (1992) and others (Baerger & McAdams, 1999; Bruner, 1987; Howard, 1991; Pasupathi et al., 2007; Sarbin, 1986; Whitty, 2002), our identities evolve over time, and we can only know ourselves and find meaning in our lives through narrative. It is through the continual retelling of our stories, that is, weaving together our day-to-day experiences with reinterpretations of our past experiences, that we know who we are today. Life stories address the issue of identity by describing how "the same person came to be the current self, via remembering and the interpretation of past experiences. Over time, the life story must change to accommodate new experiences" (Pasupathi et al., 2007). Neither our memories of the past nor our projections for our future are fixed in time; identity is the continual remembering and weaving together of our stories throughout our lifetimes (Baerger & McAdams, 1999; Pasupathi et al., 2007; Whitty, 2002). We choose to remember events in a particular way, we set goals and expectations, we regulate emotions, and we can imagine possible future selves based on our current lives (Pasupathi, Weeks, & Rice, 2006). Understood in narrative terms, identity belongs in the sphere of the dialectic between sameness (that part of us that holds constant, i.e., genetic makeup, physical traits, and character) and

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selfhood (our experiences over time); it is constructed in connection with the story elements in a life's narrative (Ricoeur, 1992). When we do not have the opportunity to reflect on the history of our lives and our place in it, an interval opens between sameness and selfhood (Ricoeur, 1992). It is often the case that individuals find themselves living between two social contexts that offer incompatible cultural narratives and are unable to articulate an integrated personal narrative that avoids a crisis in identity (Adler & McAdams, 2007). At best, this may lead to limited opportunities for adult development; at worst, it leads to poorer mental health (Main, 1995), including depression (Baerger & McAdams, 1999) and other forms of psychopathology (White & Epston, 1990).

Method

Design

This was a participatory study informed by hermeneutic phenomenology wherein knowledge is viewed as practically and historically situated (Lopez & Willis, 2004). The philosophical basis for this method was articulated by Heidegger who asserted that humans' realities are influenced by the world in which they live, and humans cannot separate themselves from those realities. The focus of hermeneutic inquiry is on what individuals' narratives imply about their experiences. In contrast to descriptive phenomenology, wherein researchers are expected to shed a priori knowledge of the subject matter and bracket all personal biases, hermeneutic phenomenology assumes that the researcher's presuppositions are a valuable guide to the inquiry and interpretation of the narratives. Instead of searching for descriptive categories of the world in the narratives of the participants, the emphasis is on the meanings embedded in the narratives. The interpretations the researcher develops are not completely his or her own, they are a fusion of the meanings articulated by both the researcher and the participants. Although there is no single interpretation that will hold true across time, interpretations must be logical and plausible within the study framework, and they must reflect the realities of the research participants.

Focus groups were used to explore female veterans' experiences of returning home. Focus groups were selected because this method is recognized as an appropriate way to obtain in-depth information about individuals who share similar experiences, using group interaction as a catalyst for generating innovative ideas that might not be revealed in individual interviews (Krueger & Casey, 2000; Morgan, 1998).

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Participants

Purposive sampling was employed to identify and recruit female veterans, at least 18 years of age, who had served in Afghanistan (Operation Enduring Freedom), or Iraq (Operation Iraqi Freedom), or both since the beginning of the wars in those countries in October 2001 and March 2003, respectively. Participants were recruited in the San Francisco Bay Area, California through Internet advertisements; dissemination of flyers at diverse locations, including 2- and 4-year colleges and universities, coffee houses, and veterans' centers; and word of mouth primarily through area veteran groups and veterans' families' groups, veterans' hospitals and medical facilities, and community not-for-profit organizations.

Recruitment materials directed potential participants to the website of a not-for-profit agency that has provided services to veterans in the San Francisco Bay Area since the early 1970s, where they were asked to complete an electronic survey using Survey Monkey. Demographic data were collected via the survey, including age, race, number of dependents, branch of service, rank, and military status. Respondents were asked to provide an e-mail address to receive detailed information about locations and times of focus groups. These methods resulted in 17 female participants.

Procedures

This study received institutional review board approval from San José State University. Veterans who were eligible for the study were given a date and time that was most convenient for them to participate in one focus group session. The researcher reviewed all relevant points contained in the consent form, emphasizing that results would be reported only in aggregate form. All participants provided written informed consent before participating in the study. Confidentiality was explained to participants, who were asked to introduce themselves to the group using their first name or a pseudonym only.

A semistructured interview guide (see the appendix) was developed by the researcher, and reviewed and endorsed by three Operation Enduring Freedom/Operation Iraqi Freedom war veterans who were employed at the not-for-profit agency previously noted. The interview guide consisted of open-ended questions and statements to elicit responses among participants about the ways in which their deployments affected their lives, including the effects on their interactions with family members and friends.

Two focus groups were held—one in Oakland (n = 6) and one in San Francisco (n = 11)—in September 2006 and February 2009, respectively. The

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3-year gap was because of challenges recruiting enough participants to conduct additional focus groups. Transcripts from the first focus group were reviewed prior to conducting the second focus group, and the researcher and agency veteran assistants determined that the original interview guide was appropriate without revisions.

Focus groups were held in a nonprofit organization meeting room and a community room at a local hospital. Sessions were audiotaped and later transcribed verbatim. Before the start of each focus group, participants were presented with a list of guidelines, in order to facilitate effective communication during the discussions, and with a list of local counseling and support agencies. The tape recorder was placed in full view of participants. Each participant was provided with the opportunity to respond to each question but was informed that she did not have to do so.

Data Analysis

Data from Survey Monkey were downloaded and descriptive data analysis was conducted using SPSS. Audiotapes from the focus groups were transcribed into verbatim written records. The transcripts were read and compared with the audiotapes on two separate occasions by the research team (principal investigator and a research assistant) to ensure accuracy of the data transcription. Because the data could not be separated distinctly question by question, each focus group transcript was analyzed as a whole. Themes and categories emerged from the data and were not developed a priori. After the first focus group, we created broad categories for each recurrent topic—mental health, identity, military experience, reintegration, and relationships. These categories became the basis for analyzing new data from the second transcript, which we classified into an existing category. No new categories were created during analysis of the second transcript. The team explored relationships among and between categories, using an iterative process. The first step was to analyze the data and identify themes independently of each other; second, we shared our themes and supporting text with each other; third, after a series of discussions, we agreed on two themes and six subthemes that became the basis for our interpretation of the meaning of participants' experiences (see Crist & Tanner, 2003; Krueger & Casey, 2000; Lincoln & Guba, 1985 for additional information about analysis and interpretation methods).

Trustworthiness and authenticity of the data were ensured through the use of peer debriefings and member checks. Peer debriefings were accomplished by sharing the data and ongoing data analysis with the three veteran assistants referred to in the procedures section. Three focus group participants provided

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member checks by engaging in additional conversations to discuss interpretations and the formulation of conclusions. Transferability was addressed by collecting participants' demographics and thick descriptions of the data so that someone who is interested in transferring the findings to similar situations or contexts may draw his or her own conclusions about the appropriateness of doing so.

Results

Participants

Recruitment methods yielded a diverse group of participants (N = 17), ranging in age from 22 to 43 years (Mdn = 29 years), who self-identified (standard categories for identification were not used) their race as either Latina (n = 3) or White (n = 14). Most participants (n = 15) reported having no dependents. They represented almost all branches of the U.S. military—Army (n = 10), Marines (n = 3), and Navy (n = 4). Of the total sample, 29% were in either Reserves (n = 3) or National Guard (n = 2); and 94% (n = 16) were enlisted personnel, as opposed to commissioned officers. They had deployed to Iraq at least once since September 11, 2001. All participants reported their status as veterans, and none were on active duty. It is acknowledged that since the military has become more specialized, each branch of the military uses different terms to refer to members, for example, marine, tanker, infantryman, ranger; however, *soldier* is defined as a person engaged in military service ("Soldier," n.d.), and it is used throughout this article to refer to all participants.

Themes and Subthemes

The major themes and subthemes that emerged from this study are presented in Table 1.

Women at War. This theme describes female veterans' experiences of becoming soldiers and soldiering in the war zone (hereafter referred to as *in theater*). It is divided into two subthemes: Becoming a Soldier and Fighting Two Wars. Each is described below and supported by selected text from focus groups and interviews.

Becoming a soldier. Participants described how they had been transformed from civilians into soldiers, saying "There's a sense of freedom . . . I'm told exactly what to do, when to do it, how to do it, and I just completely surrender";

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Table 1. List of Themes and Subthemes Among 17 Female Iraq War Veterans

Women at war
• Becoming a soldier
• Fighting two wars
Coming home
• Dirty time bombs
• Mourning who I was
• Questioning who I am
• Composing who I will be

"You know, I just fall in line and do what I'm told"; and" I accepted the fact that I could die in Iraq." However, their transformation was slightly more complex than if they had been males. They described being "female in a man's world," and the result was that "if you're going to play the female role, then you're not going to be respected, but if you play the role like, 'I'm a soldier, and I'm here to do my job, and then you do it, then along with that comes respect." They described the importance of being able to "blend in pretty well with the guys." One veteran shared,

> In the military, guys can be crude, and I'd tell them [male soldiers] "say whatever you want just like if I was a male," and I would try to fit in [by] being like a guy as much as I could just for that reason; because if you can play well, you can work well.

She added, "I kind of went out of my way to be as guy-like as I could," and explained that it was not too difficult, "because of the environment you're in." However, not all participants felt that fitting in was easy. A second veteran said, "If you want to be respected, you have to do it better . . . and to be better is so hard, because it's nonstop;" and a third veteran added,

> If you're in there, and you're performing, you are a perceived threat . . . [and] the one way they can keep you in the box, is by writing negative fitness reports . . . They [male soldiers] don't want us there.

Fighting two wars. Although they found ways to blend or fit in while in the United States, veterans' experiences of being treated like one of the guys changed once they were in theater. Describing one of many incidents of harassment, a veteran shared,

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> I was waiting in this long line to use the microwave, and this guy's like, "Hey, you know you're female, you should use being female to your advantage." I was like, "What's that supposed to mean"? He's like, "You're a female; you should definitely use that to get ahead."

She added that she believed the behavior was "inappropriate" and from that point on she "had real trust issues with those guys."

Another veteran shared an experience that not only violated the trust she had in her comrades, but it was intensely traumatizing. She said,

> I watched men who I had been friends with for years, [and] they turned on me . . . All I was trying to do was survive and keep bringing people in alive. I was doing the actual war, and I was doing a mental war, battling with my own peers . . . It was nonstop . . . They didn't want me to succeed . . . the fact that I could do what they were doing, and do it well, took away from their masculinity or the manliness of what they were doing.

She described how painful this experience was and how difficult it was to hide her feelings from the men and to not have another female to confide in about the experience. Similarly, another veteran said,

> My staff sergeant was the only female that I got deployed with . . . but we got separated, and she ended up going to a different camp . . . We both ended up with so much to deal with . . . so many occurrences . . . such bad memories . . . I just wanted to get away from all of them [male soldiers]. I didn't want to have anything to do with them.

In addition to fighting wars on two fronts, female veterans also had to confront fears that male soldiers did not experience. One veteran said,

> I was right there next to all these men that went through the exact same thing as me, but women perceive things a lot differently. When there's a bunch of Iraqis looking at you like they're going to rape you, or that they're going to kill you, because you're a female? The men had no idea what I went through.

Veterans shared how stressful these experiences were, and one of the participants described the toll that it took, saying, "You're just trying to stay alive . . . and when it's over there's no one . . . you can't even . . . I can't even begin to describe what it's like . . . it's just a big mush pot. It's just too many things."

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Coming Home. This theme describes veterans' mental states when they returned home, the ways in which they attempted to cope with their experiences, and the challenges they faced with negotiating identity. There are four subthemes: Dirty Time Bombs, Mourning Who I Was, Questioning Who I Am, and Composing Who I Will Be. Each is defined below and supported by selected text.

Dirty time bombs. Veterans described unsuccessful attempts to cope with their deployment experiences and concomitant feelings about them, on returning to the United States. One participant shared, "I was kind of like a time bomb . . . I was trying to compartmentalize the different things, and it just overwhelmed me." Another veteran described feeling "like pieces of the house were kind of falling apart around me, and it was fast, and I didn't know how to deal with it." She added, "I was kind of withdrawn, and I just kind of like internalized it."A third veteran shared that the mindset is "Don't worry about me; don't worry, I've got it . . . I can handle it," suggesting that they could cope with and adapt to any negative psychological or emotional repercussions on returning home. Participants' narratives indicated that one of the consequences of suppressing their feelings was that they emerged at unpredictable times. One veteran said,

> Anxiety, out of nowhere; I get angry, like out of nowhere . . . I'm not running around beating people up, but I feel really angry all of a sudden. I'm like, from normal to ten like that [snaps fingers] . . . and I just can't seem to channel that, and it's so embarrassing and frustrating . . . I feel upset, and I don't even know what I'm upset about . . . That's probably one of the biggest hurdles for me.

Some of their experiences seem to have been so deeply repressed as a means of coping at the time that they were just beginning to emerge into conscious awareness. A veteran shared, "I don't know what happened to me . . . just recently, I'm starting to realize maybe there were, there was something, you know, like sexual harassment." As one veteran articulated,

> You don't see it . . . but everybody's traumatized, even if you've never seen a bullet fly. Trauma is trauma; it's a footprint, an imprint that's been left, and it doesn't matter by exactly what or by whom; it's something that we have to deal with.

There appears to be significant tension between revealing their thoughts and feelings to others and keeping them bottled up inside for self-preservation.

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The same veteran shared, "The worlds don't touch . . . because the moment we bring that [military experience] into this world, then it's contaminated just like we are." However, she added that, in the attempt to keep the worlds from colliding, "You defer payment on a bill that's due . . . [and] the longer you defer payment, the more interest you accrue . . . [but] make no mistake, you will pay," intimating that prolonging addressing the issues leads to much more intense and possibly longer lasting emotional and psychological distress. It is likely that some of the participants were experiencing posttraumatic stress disorder; however, this was not assessed.

Mourning who I was. All veterans expressed a sense of sadness about their lost innocence, saying, "I mourn the loss of the days that I didn't have to worry" and "I remember laughing more, being a little more extraverted, and going out. I'm not like that now." Others expressed the loss of their sense of self. One veteran shared, "I mourn the loss of me before . . . I look back, and I try to remember; I can't remember who I was." Another veteran said,

> I don't know how else to put it, other than you're sad, I was sad [and], from time to time, I still get sad . . . that's something that's not going to come back. I can't make it come back. That was me then, and this is where I am now; so, I need to say goodbye.

Most veterans acknowledged the need to move forward from both who they had been before they became soldiers and who they had become in the military. Another veteran said,

> The military was a chapter in my life, but it's not my life . . . I'm kind of mourning from the loss of that world, [but] most of the time, I'm trying to move on towards the future, and put it more and more behind me, everyday.

Questioning who I am. Veterans' narratives revealed that they hold themselves in "two separate worlds—there's the military and there's the civilian [world]," and who they were in the military was very clear to them. One veteran said, "Who I am in the civilian world is completely different from who I am in the military. When I put on a uniform, I am a different person—I'm one in a unit. I'm told what to do, when to do it, how to do it, and I just completely surrender."Another veteran shared, "I knew exactly who I was." Nevertheless, the certainty they felt while they were in the military vanished when they reentered the civilian world. One veteran said, "The military was

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such a big part of my life . . . I left with this huge question mark on me that I feel like I wear." Another veteran added, "It's challenging to have to figure out who exactly I am . . . In the civilian world, it's like, who am I? What do I dress like? How do I talk? Where do I go? What do I do?" Not only were veterans questioning their identities, civilians were also unsure about how to relate to veterans. Describing an experience with a male she had met, one veteran said,

> He knows me as military, but I'm female too . . . it's really hard for men . . . They don't know what to do with us . . . Do I treat you like one of the guys? Do I treat you like a lady? They don't know what to do with us . . . We're just kind of like a freak show.

Referring to her mother, another veteran said, "She introduces me as her daughter from Iraq. That's how she sees me." Comments from other veterans reinforced these experiences and feelings of detachment from both society and self. They said, "I lose patience with myself because I don't feel normal. I'm not you; you fit into society. My thought process is completely different than yours"; and "I went from being special in my field . . . to being frighteningly devoid of identity."

Composing who I will be. Veterans' narratives revealed the level of indoctrination they experienced when they joined the military, and some of them expressed the need to undo that process. Two veterans shared, "I [want to] find my true self and not something that was manipulated along the way," and "I want the reverse of what I had when I got in . . . Undo me; let me figure out how to be not like this anymore." However, a third veteran shared that one cannot separate who they were in the military from who they are, or are in the process of becoming, now. She said,

> I'm in the process of reinventing myself; not from scratch necessarily, because I am who I am in the core, but to try and take what I've done, where I've been . . . to totally embrace it . . . The whole, I don't want to talk about my military experience, it doesn't work that way. It is a part of my skin; it is who I am; it is my story. It is what makes me, me . . . So we go around hoping we find the person that can accept the story for what it is, or for what parts we're willing to tell.

Telling the story did not necessarily mean engaging in dialogue with another person. One veteran shared, "I'm journaling a lot . . . it's been an incredibly important process of dealing with all the military stuff."

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Some veterans were conflicted about the need to share their stories as part of the process for reintegrating and composing their identities. Another veteran said,

> I think talking helps, maybe a little bit . . ., but the more I think about it, the more I feel like I'm dwelling in the past. It's easy for me to live in the past, and I feel my mind going there; sometimes, when I concentrate too much on it, it's almost like I'm trying to live in the past, so I try to stay in today and move on towards the future, and put it [the military] behind me.

Although they were at various stages, all veterans were exploring the process of becoming; one participant said, "The more I live in this world, the more I'm developing who I am." Another veteran, who seemed further along in her process of reintegrating, shared that she had struggled with who she was, and with her experiences in the military and that she had experienced difficulty sleeping. She said, "I was having all these dreams about losing my passport and not being able to find my driver's license. Over and over again, I was having these dreams." When queried about when the dreams stopped, she shared,

> They stopped when I graduated from midwifery school . . . I was in the business of death; it was part of who I am. Now, I'm doing this . . . [and] it's becoming part of who I am . . . I went into the business of birth, the business of life, to feel like I could sort of get back to the middle . . . to undo that whole process . . . With every baby that's born, and breathes and lives, it's like, here's another life. This is what life feels like, and here's another one; this is what this one feels like.

All participants were grappling with their transitions into the civilian world. While they were in the military, they had to suppress their femaleness and act as "guy-like as possible," in order to fit into "a man's world." Although they are in various stages of grieving and questioning who they are now, they recognize the need to move forward in the process of negotiating their identities and reintegrating into civilian culture. They made it clear that they did not want to interact with male veterans and that they did not feel as though they fit into society. However, they did identify the importance of finding others "to accept their stor[ies]" as part of their reintegration process, and one veteran articulated the power of telling her story, saying, "Talking like this felt great; I feel like I've taken a shower. I feel clean."

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Discussion

Female veterans face considerable challenges on returning from war; not only must they cope with the experiences of war that all soldiers must come to terms with, they must also overcome the consequences of the psychological war they fought with comrades. Moreover, although their struggle to "fit into society" and overcome their sense of alienation is common to all returning veterans (Demers, 2011; Paulson, 2005), women veterans must struggle with what it means to be female in a society where civilians are perplexed by them and do not know whether to treat them "like one of the guys . . . [or] like a lady."

Female veterans were indoctrinated into military culture through basic training, which facilitated the passage from one identity (civilian) to another (military; Van Gennep, 1960). Veterans left civilian culture (separation phase), were stripped of those cultural norms (transition phase), and engaged in the rituals of boot camp that taught them military language, military protocol, and to accept death as their fate. It was in basic training where communitas—a normative form stressing comradeship (Turner, 1974)—most likely occurred, facilitating a complete break from civilian culture and full incorporation (third phase) into military culture, increasing their expectations of themselves and others, and inculcating strong team loyalty. Nevertheless, it does not appear that female veterans were afforded higher status, and they quickly learned that, although they perceived themselves as being equal to their male comrades, male soldiers neither viewed female soldiers as equals nor fully exhibited loyalty and comradeship toward them.

The military is a gendered institution (Acker, 1990), whereby training is structured to develop masculine warriors (Tick, 2005), and females are left to determine what strategies to use to be accepted (Herbert, 1998) by their male comrades. In this study, all participants managed by minimizing their femaleness (Dunivin, 1988), becoming one of the "guys," and working much harder than male soldiers who were doing the same jobs, in order to prove themselves. They were engaged in a constant tension between being male enough to earn respect but not so male that they became a threat to their comrades. Once they were in theater, it is quite likely that the gender balance that females had carefully negotiated while they were in the United States was upset as they became more warrior-like, that is, masculine, in order to survive. They were reacting just as they had been trained to react in basic training, further evidence of their full incorporation into military culture. However, military culture does not provide space for femaleness, and unfortunately, the consequences of females' actions became dire as male soldiers may have felt

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their masculinity threatened and responded by increasing their harassment of female veterans and turning against them, leaving the females to "fight two wars." There was a complete break in trust, leaving females feeling abandoned and, most likely, calling their identities into question.

On reentering the civilian world, returning veterans were, once again, thrust into a separation phase of passing from military identity to civilian identity. Similar to when veterans separated from civilian culture, entered the military and experienced liminality (Paulson, 2005; Van Gennep, 1960), they were caught again between two cultures as evidenced by their references to themselves as not being "normal" and not "fit[ting] into society." This was further complicated by the need to transition from being a soldier—an identity almost devoid of femaleness—to being a civilian and negotiating what it means to be female.

Veterans articulated the need and desire to reenter the social structure (Turner, 1974) and to create hybrid identities that incorporate the military experiences that "are part of [their] skin" with civilian cultural knowledge, values, and practices (Mahalingam, 2008). They must also negotiate gender and incorporate it as one dimension of their identities. Ultimately, veterans must be able to articulate a fully integrated (Berntsen, Willert, & Rubin, 2003) and coherent (Burnell, Hunt, & Coleman, 2009) personal narrative that incorporates their past experiences, creates connections based on sameness, and rejects unwanted identities, in order to avoid a crisis in identity (Adler & McAdams, 2007; Baerger & McAdams, 1999; Bruner, 1987; Howard, 1991; Pasupathi et al., 2007; Ricoeur, 1992; Sarbin, 1986; Whitty, 2002). Veterans recognized the need to reshape their imaginations from "agents of negation" (Tick, 2005) to agents of creation, moving from the "business of death" to the "business of life) and to embrace where they have been, what they have done, and what has been done to them in order to weave that "chapter" of their lives into an integrated whole; and they identified the importance of narrative in this process. They must have safe spaces to tell their stories, so they can cleanse themselves of the contamination of their war experiences, try on various ways of being female, and imagine new possibilities for their futures, thus, reducing the probability of poor mental health outcomes.

Recommendations

Services and program implications. There are three areas in which services that benefit female veterans, either directly or indirectly, are suggested, (a) support groups for veterans—both formal and informal—in which they

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would have the opportunity to share their stories and learn about practices for successful reintegration. These might be integrated with creative activities that encourage imagination and facilitate veterans' communication of their stories in a medium with which they are comfortable. Groups should be facilitated by individuals who are trained and experienced counselors and who are knowledgeable about military culture; (b) military cultural competence training for mental health practitioners (i.e., therapists, social workers, and college and university counselors). Trainings should elucidate the reintegration challenges female veterans face, including gender identity, and inform models to address the unique needs of this population; and (c) transition groups for families, partners, and friends of veterans, in which they would have the opportunity to learn about military culture and how to best support their veteran.

Future Research

This exploratory study increases our understanding of females' experiences in the military and the challenges they face negotiating identity when they begin their transition into civilian life. However, there are considerations that should be addressed in future studies, including (a) greater representation of the voices of women of color; (b) number of deployments; (c) differences between active duty, reserves, and National Guard; and (d) length of time since separation from their military unit. During the final stages of data analysis, it became increasingly apparent that the latter two considerations may play a significant role in veterans' ability to successfully transition into civilian life.

Findings from this study also indicate the need for further research among both male and female veterans. Studies among female veterans should be undertaken in three primary areas: (a) a qualitative study should be conducted to obtain a better understanding of the ways in which the experiences of women with various sexual identities might differ; (b) mixed methods should be implemented to explore the relationship between the ways that females negotiate gender in the military, the role that sexual and gender harassment play in their processes of negotiation, the number of times they are deployed, how renegotiation occurs in combat situations, and the continuum of distress that females experience that is beyond the distress caused by combat alone; and (c) a longitudinal study should be carried out to illuminate the ways in which female veterans successfully negotiate transitions from masculinized soldiers to identities that incorporate their femaleness and resolve their reintegration challenges. To better understand

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the interactions between male and female soldiers in combat and their concomitant impact, an exploration of male soldiers' experience of females in the military should be conducted. Specifically, we need to understand (a) the ways in which male and female veterans support (or do not support) each other's assimilation into the military, (b) if female veterans' perception that male soldiers' masculinity is threatened when they serve together in combat zones is accurate, (c) if males change their mannerisms in theater in ways that alienate females, and (d) if males change their mannerisms, why and how they do so. Results could be used to inform additional programs, services, and ultimately, policy, within the military, which facilitates appropriate support and integration of women.

Conclusion

In summary, we are just beginning to acknowledge the magnitude of work ahead to address veterans' mental health issues. Based on current findings, the numbers of female veterans with diagnosed mental health disorders do not tell the whole story. Participants' narratives about continual renegotiations of gender (while in the military and during transition back into civilian culture) and their experiences of fighting two wars reveal their confusion and distress. The composition and face of today's military is changing. Female soldiers are joining the military in increasing numbers, and the end of "Don't Ask, Don't Tell" (the official U.S. policy on gays and lesbians serving in the military) will most likely affect the culture of the military in ways that will emerge over time. If the U.S. military is going to support women who choose to serve, then military culture must shift from the sole, masculine warrior model to a set of diverse models from which each service member can discern one, or more, with whom he or she identifies. This may significantly influence the likelihood of male acceptance of females as soldiers.

On transition out of the military, there are many veterans who have diagnosable mental health disorders and should be treated for them through the use of cognitive therapy and medication as appropriate. Although the U.S. Department of Veterans Affairs (2010, 2011) provides mental and physical health services specific to women's needs, not all female veterans have access to them, such as those with less than an honorable discharge. Moreover, not all veterans should be pathologized in order to receive support for transition from military culture to civilian culture. In essence, all veterans need the equivalent of basic training in civilian settings to assist them with successful reintegration once they leave military settings. Many veterans are experiencing a crisis of identity, and a continuum of services—both formal and

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informal—is needed to assist them. Opportunities to develop integrated personal narratives could provide a way to prevent or at least mitigate poor mental health outcomes. The costs of ignoring female veterans are great, and we owe it to them to provide the care and support they need to imagine themselves in new ways, reintegrate into civilian culture, and live healthy and productive lives.

Appendix

Semistructured Interview Guide

1. Please share how your life has been since you left the military.
    a. What does a day in your life look like?
    b. How do you spend your free time?

2. Will you tell us about your relationships with close family members and friends?
    a. Do you enjoy spending time with them?
        i. If no, why not? Do you avoid them?
        ii. Do you avoid them? If so, why?
    b. How do they act toward you?
    c. Are you able to talk with them? How much about your experiences do you feel comfortable sharing?
    d. Who else do you talk with?

3. Please describe your relationships with other OEF or OIF veterans now that you're separated from the military.
    a. Are you still in contact with people you served with?

4. Please tell us about your experience in the military.
    a. How close were you to the people in your unit? Working/professional relationship? Friends?
    b. What was being deployed like?

5. Please share how your transition from the military to civilian life has affected you.

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References

Acker, J. (1990). Hierarchies, jobs, bodies: A theory of gendered organizations. *Gender & Society*, *4*, 139-158.

Adler, J., & McAdams, D. (2007). Time, culture, and stories of self. *Psychological Inquiry*, *18*, 97-128.

Baerger, D., & McAdams, D. (1999). Life story coherence and its relation to psychological well-being. *Narrative Inquiry*, *9*, 69-96.

Berntsen, D., Willert, M., & Rubin, D. (2003). Splintered memories or vivid landmarks? Qualities and organization of traumatic memories with and without PTSD. *Applied Cognitive Psychology*, *17*, 675-693.

Bruner, J. (1987). Life as narrative. *Social Research*, *54*, 11-32.

Burnell, K., Hunt, N., & Coleman, P. (2009). Developing a model of narrative analysis to investigate the role of social support in coping with traumatic war memories. *Narrative Inquiry*, *19*, 91-105.

Butterfield, M. I., McIntyre, L. M., Stechuchak, K. M., Nanda, K., & Bastian, L. A. (1998). Mental disorder symptoms in veteran women: Impact of physical and sexual assault. *Journal of the American Medical Women's Association*, *53*, 198-200.

Carney, C., Sampson, T., Voelker, M., Woolson, R., Thorne, P., & Doebbeling, B. (2003). Women in the Gulf War: Combat experience, exposures, and subsequent health care use. *Military Medicine*, *168*, 654-661.

Chang, B., Skinner, K., & Boehmer, U. (2001). Religion and mental health among women veterans with sexual assault experience. *International Journal of Psychiatry and Medicine*, *31*, 77-95.

Collins, J. (1998). The complex context of American military culture: A practitioner's view. *The Washington Quarterly*, *21*, 213-226.

Crist, J., & Tanner, C. (2003). Interpretation/analysis methods in hermeneutic interpretive phenomenology. *Nursing Research*, *52*, 202-205.

Davis, T., & Wood, P. (1999). Substance abuse and sexual trauma in female veteran population. *Journal of Substance Abuse Treatment*, *16*, 123-127.

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Demers, A. L. (2011). When veterans return: The role of community in reintegration. *Journal of Loss and Trauma*, *16*, 160-179.

Dunivin, K. (1988). There's men, there's women, and there's me: The role and status of military women. *Minerva: Quarterly Report on Women and the Military*, *6*, 43-68.

Dunivin, K. (1994). Military culture: Change and continuity. *Armed Forces & Society*, *20*, 531-547.

Erickson, D., Wolfe, J., King, D., King, L., & Sharkansky, E. (2001). Posttraumatic stress disorder and depression symptomatology in a sample of Gulf War veterans: A prospective analysis. *Journal of Consulting Clinical Psychology*, *69*, 41-49.

Fenell, D. (2008, June). A distinct culture. *Counseling Today*, *50*. Retrieved from http://ct.counseling.org/2008/06/a-distinct-culture/

Fontana, A., & Rosenheck, R. (1998). Duty-related and sexual stress in the etiology of PTSD among women veterans who seek treatment. *Psychiatric Services*, *49*, 658-662.

Fontana, A., & Rosenheck, R. (2006). Treatment of female veterans with posttraumatic stress disorder: The role of comfort in a predominantly male environment. *Psychiatric Quarterly*, *77*, 55-67.

Geertz, C. (1973). *The interpretation of cultures*. New York, NY: Basic Books.

Harned, M., Ormerod, A., Palmieri, P., Collinsworth, L., & Reed, M. (2002). Sexual assault and other types of sexual harassment by workplace personnel: A comparison of antecedents and consequences. *Journal of Occupational Health Psychology*, *7*, 174-188.

Herbert, M. (1998). *Camouflage isn't only for combat: Gender, sexuality, and women in the military*. New York, NY: New York University Press.

Himmelfarb, N., Yaeger, D., & Mintz, J. (2006). Posttraumatic stress disorder in female veterans with military and civilian sexual trauma. *Journal of Traumatic Stress*, *19*, 837-846.

Howard, G. (1991). Culture tales: A narrative approach to thinking, cross-cultural psychology, and psychotherapy. *American Psychologist*, *46*, 187-197.

Jones, S., & McEwen, M. (2000). A conceptual model of multiple dimensions of identity. *Journal of College Student Development*, *41*, 405-414.

Kang, H., Natelson, B., Mahan, C., Lee, K., & Murphy, F. (2003). Post-traumatic stress disorder and chronic fatigue syndrome-like illness among Gulf War veterans: A population-based survey of 30,000 veterans. *American Journal of Epidemiology*, *157*, 141-148.

Kerr, D. (1996). Democracy, nurturance, and community. In R. Soder (Ed.), *Democracy, education and the schools* (pp. 37-68). San Francisco, CA: Jossey Bass.

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Kimerling, R., Gima, K., Smith, M., Street, A., & Frayne, S. (2007). The Veterans Health Administration and military sexual trauma. *American Journal of Public Health*, *97*, 2160-2166.

Krueger, R., & Casey, M. A. (2000). *Focus groups: A practical guide for applied research* (3rd ed.). Thousand Oaks, CA: Sage.

Lincoln, Y., & Guba, E. (1985). *Naturalistic inquiry*. Beverly Hills, CA: Sage.

Lipari, R., Cook, P., Rock, L., & Matos, K. (2008). *2006 gender relations survey of active duty members*. Arlington, VA: Department of Defense Manpower Data Center.

Lopez, K., & Willis, D. (2004). Descriptive versus interpretive phenomenology: Their contributions to nursing knowledge. *Qualitative Health Research*, *14*, 726-735.

Magley, V., Waldo, C., Drasgow, F., & Fitzgerald, L. (1999). The impact of sexual harassment on military personnel: Is it the same for men and women? *Military Psychology*, *11*, 283-302.

Mahalingam, R. (2008). Power, social marginality, and the cultural psychology of identities at the cultural contact zones. *Human Development*, *51*, 368-373.

Main, M. (1995). Recent studies in attachment: Overview, with selected implications for clinical work. In S. Goldberg, R. Muir, & J. Kerr (Eds.), *Attachment theory: Social, developmental, and clinical perspectives* (pp. 407-474). Hillsdale, NJ: Analytic Press.

McGurk, D., Cotting, D., Britt, T., & Adler, A. (2006). Joining the ranks: The role of indoctrination in transforming civilians to service members. In A. Adler, C. Castro, & T. Britt (Eds.), *Military life: The psychology of serving in peace and combat: Vol. 2. Operational stress* (pp.13-31). Westport, CT: Praeger Security International.

Morgan, D. (1998). *The focus group guidebook*. Newbury Park, CA: Sage.

Ouimette, P., Wolfe, J., & Chrestman, K. (1996). Characteristics of posttraumatic stress disorder-alcohol abuse comorbidity in women. *Journal of Substance Abuse*, *8*, 335-346.

Ouimette, P., Wolfe, J., Daley, J., & Gima, K. (2003). Use of VA health care services by women veterans: Findings from a national sample. *Women & Health*, *38*, 77-91.

Pasupathi, M., Mansour, E., & Brubaker, J. (2007). Developing a life story: Constructin relations between self and experience in autobiographical narratives. *Human Development*, *50*, 85-110.

Pasupathi, M., Weeks, T., & Rice, C. (2006). Reflecting on life: Remembering as a major process in adult development. *Journal of Language and Social Psychology*, *25*, 244-263.

Paulson, D. (2005). *Walking the point: Male initiation and the Vietnam experience*. New York, NY: Paraview.

Pierce, P. (1997). Physical and emotional health of Gulf War veteran women. *Aviation, Space, and Environmental Medicine*, *68*, 1-5.

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Ricoeur, P. (1992). *Oneself as another* (K. Blamey, Trans.). Chicago, IL: University of Chicago Press.

Rosen, L., & Martin, L. (1998). Psychological effects of sexual harassment, appraisal of harassment, and organizational climate among U.S. Army soldiers. *Military Medicine*, *163*, 63-67.

Sadler, A., Booth, B., Cook, B., & Doebbeling, B. (2003). Factors associated with women's risk of rape in the military environment. *American Journal of Industrial Medicine*, *43*, 262-273.

Sarbin, T. (1986). The narrative as the root metaphor for psychology. In T. R. Sarbin (Ed.), *Narrative psychology: The storied nature of human conduct* (pp. 3-21). New York, NY: Praeger.

Silva, J. (2008). A new generation of women? How female ROTC cadets negotiate the tension between masculine military culture and traditional femininity. *Social Forces*, *87*, 937-960.

Skinner, K., Kressin, N., Frayne, S., Tripp, T., Hankin, C., & Miller, D. (2000). The prevalence of military sexual assault among female Veterans Administration outpatients. *Journal of Interpersonal Violence*, *15*, 291-310.

Soldier. (n.d.). In *Merriam-Webster's online dictionary*. Retrieved from http://www.merriam-webster.com/dictionary/soldier

Street, A., Vogt, D., & Dutra, L. (2009). A new generation of women veterans: Stressors faced by women deployed to Iraq and Afghanistan. *Clinical Psychology Review*, *29*, 685-694.

Stuart, J., Murray, K., Ursano, R., & Wright, K. (2002). The Department of Defense's Persian Gulf War Registry Year 2000: An examination of veterans' health status. *Military Medicine*, *167*, 121-128.

Suris, A. M., & Lind, L. (2008). Military sexual trauma: A review of prevalence and associated health consequences in veterans. *Trauma, Violence, and Abuse*, *9*, 250-269.

Suris, A. M., Lind, L., Kashner, T. M., & Borman, P. D. (2007). Mental health, quality of life, and health functioning in women veterans: Differential outcomes associated with military and civilian sexual assault. *Journal of Interpersonal Violence*, *22*, 179-197.

Suris, A., Lind, L., Kashner, T., Borman, P., & Petty, F. (2004). Sexual assault in women veterans: An examination of PTSD risk, health care utilization, and cost of care. *Psychosomatic Medicine*, *66*, 749-756.

Suter, E., Lamb, E., Marko, M., & Tye-Williams, S. (2006). Female veterans' identity construction, maintenance, and reproduction. *Women & Language*, *29*, 10-15.

Tick, E. (2005). *War and the soul: Healing our nation's veterans from post-traumatic stress disorder*. Wheaton, IL: Quest Books.

Turner, V. (1974). *Dramas, fields, and metaphors: Symbolic action in human society*. Ithaca, NY: Cornell University Press.

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U.S. Department of Defense. (2009). *Representation of women in the U.S. military*. Retrieved from http://prhome.defense.gov/PopRep2008/summary/chap4.pdf

U.S. Department of Defense. (2010). *2010 Workplace and gender relations survey of active duty members*. Retrieved from http://servicewomen.org/SAPRO%20 Reports/DMDC_2010_WGRA_Overview_Report_ of_Sexual_Assault.pdf

U.S. Department of Veterans Affairs, Veterans Health Administration, Office of Research and Development. (2004). *VA R&D women's health research conference*. Retrieved from http://www.research.va.gov/programs/womens_health/conference/default.cfm

U.S. Department of Veterans Affairs, Advisory Committee on Women Veterans Report. (2010). *Women veterans—A proud tradition of service*. Retrieved from http://www.va.gov/WOMENVET/docs/ACWV_Report_2010.pdf

U.S. Department of Veterans Affairs. (2011). *Women veterans health care*. Retrieved from http://www.womenshealth.va.gov/WOMENSHEALTH/healthcare.asp

U.S. Department of Veterans Affairs. (2012). *Military sexual trauma*. Retrieved from http://www.mentalhealth.va.gov/msthome.asp

Van Gennep, A. (1960). *The rites of passage* (M. Vizedom & G. Caffee, Trans.). London, England: Routledge.

Washington, D., Kleimann, S., Michelini, A., Kleimann, K., & Canning, M. (2007). Women veterans' perceptions and decision-making about Veterans Affairs health care. *Military Medicine*, *172*, 812-817.

Weber, L. (1998). A conceptual framework for understanding race, class, gender, and sexuality. *Psychology of Women Quarterly*, *22*, 13-22.

White, M., & Epston, D. (1990). *Narrative means to therapeutic ends*. New York, NY: W. W. Norton.

Whitty, M. (2002). Possible selves: An exploration of the utility of a narrative approach. *Identity: An International Journal of Theory and Research*, *2*, 211-228.

Williams, I., & Bernstein, K. (2011). Military sexual trauma among U.S. female veterans. *Archives of Psychiatric Nursing*, *25*, 138-147.

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