U.S. MILITARY VETERANS

OVERREPRESENTED STORIES & HARMFUL STEREOTYPES

- **Heroic “He-men”:** Portrayals of white, muscled, bearded ex-Special Forces men. Given the vast array of veteran demographics, this trope erases the majority of those who served.

- **Trauma Porn:** Veterans with PTSD or other trauma from things they’ve seen or experienced. Though there are combat veterans* with PTSD, constantly depicting only trauma-fueled storylines reduces the myriad post-service experiences to this one. Trauma porn inaccurately presumes all veterans’ problems stem only from service-related trauma rather than from having to face external, universally challenging life issues.

- **Addicts & Criminals:** Veterans self-medicating and/or falling into drug addiction and alcoholism to deal with trauma. Shown as predisposed to criminality due to trauma, the nature of their service, or special skills learned during their service.

- **Socially Lost:** Depicted as unemployable, unhoused, or “loose cannons.” This fuels non-veterans’ inaccurate belief that veterans can’t contribute to society and can lead to harmful housing and hiring practices.

- **Pitiable:** Disabled veterans shown as objects of pity because they can’t cope with their service-related wounds. This exacerbates non-veterans’ false belief that veterans can no longer function in society or live fulfilling lives. It also wrongly presumes veterans who’ve been disabled struggle only due to internal challenges rather than external exclusionary practices (e.g., ableism, employment discrimination, long delays in receiving benefits). (For more tips, see our Disabled People factsheet.)

THINGS WE’D LIKE TO SEE MORE OF

- **Varied Identities:** Depictions of LGBTQIA+, BIPOC, disabled, and women veterans using unique acquired skills in civilian society (e.g., ESL teachers, nurses, service dog trainers, cryptologists). Show them in humanitaritan roles, continuing to serve in new ways (e.g., Reservists building make-shift hospitals, distributing COVID vaccines).

- **Healthcare Disparities:** Storylines about healthcare challenges and inequities, especially in Veterans Affairs* (VA) based on location (i.e., urban vs. rural), gender identities, sexual orientation, race, and/or ethnicity.

- **Struggles & Joys:** Veterans, including disabled veterans, shown leading normal, productive lives, reflecting vast, three-dimensional experiences. Though trauma exists and should be depicted as authentically as possible, suffering shouldn’t be the only story told about veterans.

- **Educated & Skilled:** Depicted as well-educated and sought-after professionals (e.g., doctors, lawyers, professors, engineers) and as creatives (e.g., writers, painters, illustrators, musicians).

- **Advocates:** Shown advocating for people where they served (e.g., Afghanistan and Iraq veterans working to resettle interpreters in the U.S.) and helping other veterans become civilians and receive benefits.

- **Policy/Legal Issues:** Storylines exploring how harmful military policies and laws (e.g., Don’t Ask, Don’t Tell) negatively impact veterans’ mental health, ability to find work, and access to benefits.

- **Humor:** Veterans enjoying each other’s company, sharing a dark sense of humor stemming from what they experienced in service.

- **Post-Service Support:** Storylines that depict veterans transitioning to civilian life (e.g., navigate VA benefits and services, find jobs, address financial challenges, apply military learned skills), available support programs (e.g., VA Solid Start, America Wants You), and veteran caregivers (e.g., spouses, children, health aides).

*Denotes a term in the glossary

WHO WE’RE TALKING ABOUT

U.S. military veterans served on active duty in at least one of six armed services—Army (soldiers), Navy (sailors), Marine Corps (Marines), Air Force (airmen), Coast Guard (coasties), and Space Force (Guardians). Reservists*, including Air or Army National Guard*, are also veterans if they served on active duty by federal orders and were disabled from a disease or injury incurred or aggravated in the line of duty. To be a veteran legally, one must’ve been discharged for any reason other than “dishonorable.”

HERE’S WHY AUTHENTICITY MATTERS

Stories about veterans are typically told via the gaze of cis white men, with cis white men characters, and primarily through the “broken veteran” or “military hero” tropes. These limited portrayals rob the community of its multifaceted life experiences, erasing the 40% of the 1.35 million active-duty service members who are from marginalized communities of varied races, ethnicities, ages, sexual orientations, and gender identities. These oversights can lead to harmful U.S. policies that fail to support the unique healthcare and social needs of veterans, and erase their contributions to society, creating a bias against them.

Though trauma exists and should be depicted as authentically as possible, suffering shouldn’t be the only story told about veterans.
QUICK FACTS

- There are ~19 million U.S. veterans (<10% of the U.S. population). ~200,000 active-duty service members a year become civilians.

- By 2046, the number of women, Black, and Hispanic veterans are expected to rise, as the number of men and non-Hispanic whites are expected to decrease.

- About 26% of veterans (~4.7 million) have a service-connected disability.

- Women veterans are more likely to be in business, management, science, or the arts than non-veterans.

- Women veterans are ~2x more likely to become unhoused than non-veteran women. Pressures of being an unhoused woman veteran often differ from an unhoused man who’s a veteran (e.g., women often must also care for dependents).

- Nearly all U.S. military officers have 4-year degrees, and 1+ million veterans a year use GI Bill funds for higher education degrees.

ONLINE REFERENCES & RESOURCES:

- Council on Foreign Relations: “Demographics of the U.S. Military”
- Military Times: “Top VA hospital lacked full-time gynecologist, facilities serving women veterans for years, report says”
- The New York Times: “Veterans discharged under ‘don’t ask, don’t tell’ may be eligible for full V.A. benefits”
- Pew Research Center: “The changing face of America’s veteran population”
- U.S. Department of Veterans Affairs: “Determining Veteran Status”
- “Profile of Veterans: 2017 Highlights”
- USA Today: “Female veterans served America, but the VA system doesn’t serve and protect them”
- Women Veterans Alliance
- VAntage Point: “VA Solid Start program helps Veterans transition to civilian life”
- “VA Research reveals circumstances that can lead to homelessness among women Veterans”

GLOSSARY

- Combat Veteran: One who deployed to and served in a combat zone, and received a Combat Action Badge or Ribbon or received hostile fire and/or imminent danger pay. Because modern wars such as Iraq and Afghanistan are “360 degree battlefields,” everyone deployed could find themselves in a combat role, regardless of duty assignment; that’s why the VA sometimes accepts other forms of documentation to determine if someone qualifies for combat veteran benefits.

- National Guard: Part of the U.S. Reserve Component, comprising soldiers and airmen from each state and the territories of Guam (Saipan included), Virgin Islands, Puerto Rico, and DC. All are also U.S. organized militia members. Most have full-time jobs while serving part-time, and all can be activated by their states’ governors and mobilized to support federal response to humanitarian and disaster relief efforts.

- Reservists: Often former active-duty service members providing and maintaining trained units for active duty in Army, Navy, Air Force, Marine Corps, and Coast Guard reserve forces. Reservists are stationed near their homes and only deployed internationally if called up for active duty. They can be deployed as individuals or units (every three years, on average).

- Student Veterans: Veterans who pursue higher education post-service via the GI Bill or tuition assistance. They’re more likely to be 4-8 years older than typical college-aged students, married, have children, work part- or full-time during the school year, graduate with higher GPAs, and move into higher paying jobs than civilian counterparts.

A federal government Cabinet-level executive branch department charged with integrating life-long health-care services to eligible military veterans at the 1,700 VA medical centers and outpatient clinics across the U.S.

Please visit our Expanded Glossary for in-depth definitions of the above terms and definitions of additional terms: Ableism, Civil Affairs, deployment, dishonorable discharge, GI Bill, healthcare disparities, MilFam/military family, Military Sexual Assault, protected veteran, service-connected disability, and Special Operations Forces.

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