Generational Welcomes:
Comparing the Reintegration of Vietnam Veterans and Iraq Veterans

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Honors Thesis
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Abstract:
Vietnam veterans went through an imperfect reintegration experience while they were readjusting to living in civilian society after their service. They would receive estrangement from society due to their connection to the war, experience high unemployment levels, struggle with the VA in securing medical care and benefits, and many would deal with post-traumatic stress disorder. The harsh nature of Vietnam veterans readjusting to society would be acknowledged with the construction of the Vietnam War Memorial, leading to veterans’ well-being becoming a top priority. America would enter another large scale conflict in 2003 with the Iraq War. After that war ended, Iraq veterans would attempt to reintegrate back into society. Because of the experiences of their predecessors, Iraq veterans would not experience the same estrangement from society and were prioritized in federal hiring practices. But they would also struggle with the Department of Veteran Affairs securing medical help and dealing with another combat induced affliction called Traumatic Brain Injuries.

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Alienation
Draft
Draftee
Volunteer
Deployment
America
Suicide
George Packer followed Charlie Company as they embarked on their nightly patrol within Baghdad. Packer, a journalist with the New Yorker magazine, was covering Charlie company’s presence in Baghdad since they arrived earlier in 2003. Following the soldiers through the city, his Iraqi translator described the US’ presence in the country as “like Vietnam”. Packer was of the same mind, feeling that America’s new desert conflict was alarmingly similar to the decade spanning jungle conflict which captivated Americans with seemingly no end in sight during its time. In Packer’s opinion, America was moving into a region of the world they had only select knowledge of and despite their technological superiority felt the US was not in a position to effectively achieve their overall objectives. History wasn’t repeated note for note, but the stage was set for another generation of Americans to be negatively affected by war. Americans would go overseas and fight a war that did not have a clear conclusion, and potentially millions would be scarred and have difficulty reintegrating when their tours were done. After the Vietnam War, it took time and hardship for Americans to realize the lessons of Vietnam and the status of America’s veterans. Their reintegration into society was hard, with millions struggling and only recognized when the Vietnam War Memorial opened in 1982 and brought America’s attention to the men and women they sent overseas. The Iraq War started in 2003 and lasted until 2011. Despite America’s renewed military ventures, did the lessons of Vietnam translate into Iraq veterans having a smoother readjustment to civilian society? Some lessons translated while others didn’t when observing the acceptance of reintegrating Iraq veterans into society and prioritized for hiring, but also struggling with the VA in a similar fashion and experienced concerning levels of PTSD, suicide, and TBIs.

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2 Ibid, 19.
America’s involvement in the Vietnam and Iraq Wars started in order to combat larger forces the US deemed to be a hostile threat. The motivation to get involved in the Vietnam War related to containing the spread of communism in the world. For the Iraq War, it was considered an expansion of operations during the War on Terror. Both wars share a violent prelude to their respective starts. The setup to the Vietnam War had its origins in the breakup of Indochina and the Vietnamese fighting against the French. After they secured independence from France, Vietnam became divided along the 17th parallel into North Vietnam and South Vietnam. While the South remained in the political orbit of America, North Vietnam became a communist nation under the direction of Ho Chi Minh. The Vietnam War occurred when North Vietnam invaded South Vietnam, drawing in American involvement at the beginning of the conflict. However, the fighting escalated after the Gulf of Tonkin incident. President Lyndon B. Johnson ramped up support for the war by increasing troop levels in the region. Direct American involvement lasted from 1964 to 1973, with the war ending in 1975 when Saigon fell to North Vietnam. An estimated 882,000 to 1,050,000 people died in the Vietnam War when accounting for all groups of people connected to the conflict. Over 3 million Americans served in the Vietnam War, and there were over 58,000 US casualties as a result of the fighting.

The Iraq War was not the first time America had fought the Iraqis. They had previously engaged one another during the Gulf War from 1990 to 1991. It led to a major depletion in Iraq’s military capabilities. It provided the US government a justification to re-engage in foreign military operations as it supposedly neutralized the specter of failure that Vietnam created. During the early 2000s, there was speculation that Iraq was developing a weapons based nuclear program. In 2002 the United Nations Security Council ordered Iraq to abide by Resolution 1441

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and submit a review of its nuclear program for evidence of WMDs. President Bush also made alleged claims that Iraq was connected to Al-Qaeda’s actions during 9/11, but these claims were never proven. Despite having no UN approval, US forces invaded Iraq during Operation Iraqi Freedom, suspecting that Saddam Hussein’s nuclear program had WMDs. Operation Iraqi Freedom began on March 20, 2003. The US led coalition overwhelmed the Iraqi forces and secured territory in Iraq while Hussein was captured in December 2003. A new government would be installed in Iraq. The US stayed in the region until formally withdrawing in 2011. From the beginning of the occupation of Iraq to the withdrawal in 2011, American troops patrolled and defended US military locations from new sectarian factions and remnants of Saddam’s forces. Over 461,000 Iraqis were estimated to have died in the Iraq War. 2.7 million Americans had served in the conflict. For casualties, 5,286 US soldiers were killed and 36,021 soldiers became wounded in combat. With the war over, Iraq veterans would be sent home.

The nature of veterans deploying and returning from combat affects the type of reintegration they experience as well as when their reintegration actually begins. Vietnam veterans were made to serve at least one tour during the Vietnam War. While some volunteered to fight in Vietnam, a large number of veterans were drafted to go overseas. They would serve for 13 months and then be cycled out with new soldiers coming in. Some soldiers stayed at

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military bases on US soil while others got the chance to reintegrate immediately. Due to the controversial nature of the Vietnam War along with the draft forcing people to go overseas, most veterans were very content to stay stateside and not volunteer to go back. This is different from Iraq veterans. There were crossovers between Iraq veterans and Afghanistan veterans where someone who fought in one region would fight in the other. The status of modern soldiers in the armed forces of America is of total volunteership. The draft was discontinued after the Vietnam War and those who would fight in Iraq would make up a complete volunteer force. However, the peak of the Iraq War during the initial stages of combat saw veterans serve tours longer than their Vietnam counterparts. Tours could last up to 15 months instead of 13.\(^9\) This is coupled with some soldiers serving more than one tour, usually opting to return to Iraq or most likely serve in Afghanistan. Not all soldiers liked their 15 month long tours, so in 2012 the tour of a soldier entering a combat zone would be reduced to 9 months.\(^10\) About forty percent of veterans who were deployed to Iraq were redeployed, with 263,150 veterans serving more than two tours.\(^11\) Soldiers who were deployed for more than one tour would increase their chances of having difficulty readjusting to civilian life.\(^12\) Serving in a combat environment changes a person’s social status and public image that can produce acceptance or alienation.

Feelings of alienation were prevalent amongst Vietnam veterans as they returned home. They felt alienated from multiple areas of society including their government, members of their family or community. Not every veteran was ostracized but a large part of them felt a passive

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alienating experience from society and an active estrangement from their government. Vietnam veterans did not feel fully welcomed when they returned and especially did not feel any recognition after the war ended. This estrangement was not one of directed systemic discrimination, but a sense of exclusion and cutting off of support. When surveyed in a 1971 Louis Harris poll for their opinion on veterans returning home from the war, US citizens leaned towards viewing Vietnam veterans as “dumb” for going overseas and fighting. This is a condescending attitude that many held towards Vietnam veterans and the overall public opinion would only be geared towards the well being of Vietnam veterans with the construction and opening of the Vietnam War Memorial. It can be hypothesized that the draft forcibly grafted the controversial nature of the war onto its veterans, despite many having no choice in the matter.

However, Iraq War veterans are in a different situation. The plight of Vietnam veterans had been fully realized after their memorial was constructed, with the well-being of America’s troops no longer obscured or ignored. Rather than being viewed in a negative or condescending light, Iraq veterans were at the very least recognized for their service even as the popularity of the Iraq War decreased. Even by 2011, over 90 percent of US citizens were vocal in their support for the welfare of Iraq veterans. This is the overall majority of Americans and shows a clear progression from the 1970s outlook on veterans. Citizens were surveyed and seventy percent of them viewed Iraq veterans’ desire for support and comfort to be valid and were vocal about how they should be taken care of. These citizens who were supportive were also aware of the potential risk of PTSD that veterans carried from seeing combat but their answers proved sympathetic rather than disapproving. Interestingly, disapproval was geared towards private

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16 Ibid, 141
military contractors who fought in Iraq; those who fight for a private military instead of a national military. This dichotomy shows that American society in the 21st century is greatly supportive of the troops, as they volunteer to fight for the safety of their country instead of fighting for monetary gain. While the Iraq War would decrease in popularity after the initial fighting ended, Iraq veterans were viewed as separate from the political nature of the war since it is a personal act to volunteer to fight. Citizens wanted to support Iraq veterans, regardless of whatever PTSD risks they could have.

Post traumatic stress disorder is a long term medical condition that is combat induced and affects a veteran’s readjustment to society. While the understanding of it had come a long way from simply labeling it as “shellshock”, the consequences of possessing this condition would become more realized as large numbers of Vietnam veterans returned and struggled to reintegrate into society. Some veterans coped and recovered quickly while others lived with it for almost a decade after the war ended. PTSD is a disorder that impairs the afflicted with latent stress and creates conflict in educational, occupational and familial routines. These disruptions can be short instances of fatigue and lack of concentration or can be very violent episodes of action. For an estimated lifetime number of veterans who at one point in their lives had an experience that would qualify as PTSD, the total would be around 1.7 million or close to 30% of Vietnam veterans. This is an alarming number and demonstrates the massive amounts of Americans that were affected by this disorder. While the number would decrease to around 829,000 by the mid-1980s, the remaining high number highlights the detrimental nature of long term disabilities impacting the process of reintegration for Vietnam veterans.

18 Ibid, 2.
The amount of Iraq veterans with PTSD and other combat induced disabilities differs due to the different conditions the Iraq War possessed. American soldiers went into the Iraq War with upgraded capabilities, equipment, and logistics. The US Armed Forces by the early 21st century had developed more effective ballistic and explosive weaponry, were able to distribute more body armor to their soldiers, and coordinate their combined armed branches into more effective combat offensives. The nature of combat was different as well, with conventional combat tactics used in the beginning and counterinsurgency tactics used later in the war. This form of warfare led to less American casualties and the US having an advantage over the Iraqi forces. There still is the potential for PTSD to affect soldiers even if battles are won and casualties are low. Rates of post-traumatic stress disorder for Iraq veterans are recorded alongside Afghanistan veterans, as they are considered to be simultaneous conflicts of a larger combat initiative in the War on Terror. A study organized by the VA, the “National Health Study For a New Generation of Veterans”, found that an estimated 15.8% percent of actively deployed veterans to Iraq developed PTSD.\footnote{Dursa, Erin K. “Prevalence of a Positive Screen for PTSD Among OEF/OIF and OEF/OIF-Era Veterans in a Large Population-Based Cohort.” \textit{Journal of Traumatic Stress} 27, no. 5 (October 2014). 542.} While the count of PTSD is usually higher than recorded, it is noticeable that instead of 30% percent of veterans developing this order it is around 15.8%. This number itself is smaller than the PTSD of Vietnam veterans, but still should not be ignored.

Despite this, another similar and new disorder should be examined to fully consider the struggle that Iraq veterans would face, Traumatic Brain Injuries. Due to the increased quality of body armor soldiers had, there were less casualties during the Iraq War. Instead of over 50,000 Americans dying, it was much lower and slightly over 5,000 casualties. This reduced casualty rate was instead transformed into a higher number of soldiers being wounded in combat, with
there being 36,021 veterans wounded in action. These injuries were in part caused by the increased use of explosives. The US Army, the Iraqi Army, and later sectarian factions in Iraq would utilize large amounts of explosive weapons. Soldiers now could be caught in a battle with the enemy using IEDs, grenades, and rockets, resulting in large numbers of soldiers subjected to blast exposure. An estimated number of 10% to 20% of soldiers sustained mild Traumatic Brain Injuries, with 19.1% of soldiers reporting mental health problems occurring after their tour ended. These mental health problems included dizziness, losing consciousness, migraines, irritability, memory problems, and balance issues. These numbers indicate that while not a majority, Iraq veterans would struggle in adjusting to their civilian lives because of having to deal with TBIs. PTSD would also affect Iraq veterans, albeit at a smaller rate than Vietnam veterans. The mental health issues affecting US soldiers in the Iraq War demonstrate that new issues complicate learning from the past and delay veterans’ readjustment.

Employment and participation within the general labor force are signs of successfully reintegrating into society for soldiers who previously had jobs and those who are of working age. Those who are unemployed are generally displaced from society and are not considered integrated. When veterans return from active duty, they return to their lives they left behind including their participation in labor. Vietnam veterans experienced record unemployment when they returned home in massive numbers. This occurred because a massive influx of men and women who were previously siphoned away from the job market annually are now relocated back into the population. Vietnam veterans experienced an unemployment rate of slightly over twelve percent. This was higher than the non-veteran population. This unemployment

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21 Ibid, 29.

especially hurt Vietnam veterans as they were mostly from working class backgrounds.\textsuperscript{23} Having a working class background means holding a job is crucial to one’s economic status because that is their main source of income. Veteran withdrawals outpaced veteran deployments in 1970 which increased veteran unemployment for the next two years. This created an alarming spike but by 1973, enough veterans had been reintegrated into the labor force for unemployment levels to match other groups.

However, their troubles would not disappear as the American economy experienced an economic recession in 1974. The economic downturn decreased the chances of success in finding employment for unemployed veterans and threatened employed veterans job status. For veterans that did manage to find employment, they did not enjoy promotions and advancement even after working in those fields for years after their service ended. Veterans who did not serve in Vietnam at the time were found to enjoy job promotions and economic advancement while their Vietnam counterparts had no such luck.\textsuperscript{24} While discrimination against potential employees based on military backgrounds is illegal, there are accounts that some Vietnam veterans struggled in their job searches due to their specific military experience. Vietnam veterans could be viewed as “baby killers” for their service overseas and be deprioritized in hiring processes.\textsuperscript{25} All of this would generate difficulty for Vietnam veterans securing employment during their adjustment to society.

Iraq veterans also faced a tough economic situation on their immediate arrival home. Beginning in 2008 the US experienced the Great Recession, a time of unprecedented economic decline. With millions unemployed and opportunities becoming slim, veterans were coming

home to a nation that did not have a healthy economy. Withdrawal from Iraq wrapped up in 2011, and the increased rate of unemployment amongst Iraq veterans would be seen from 2011 to 2012. Similar to their Vietnam predecessors, Iraq veterans would experience an unemployment rate of over twelve percent. In unemployment and job findings from the Department of Labor and other government agencies concerned with the quantity and quality of jobs for veterans, those who fought in Iraq are considered to be “Gulf War era-II” veterans or “Post-9/11” veterans. One vulnerable group that should be noted is Iraq veterans aged eighteen to twenty-four. This specific age group of veterans returning to the US experienced an alarming rate of unemployment at twenty percent. Veterans who were older than 24 had a lower unemployment rate than their younger compatriots. However, forty-eight percent of young Iraq veterans aged 18-24 became enrolled in schools and other education institutions after they were discharged. The Joint Economic Committee found that 1.7 million post-9/11 veterans have taken advantage of the GI Bill to further their education at the college level or higher; by 2016, one third of post 9/11 veterans have a bachelor’s degree or higher while forty four percent have earned an associate’s degree.

Iraq veterans who were not students then began reintegrating themselves into the workforce. Data for such recent trends and phenomena are slim, but in 2016 the Joint Economic Committee released a report that detailed the economic status of post 9/11 veterans. The JEC found that post-9/11 veterans will most likely have encountered a period of unemployment for

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about six months before successfully entering the workforce and that four out of five veterans who enlisted after 9/11 have secured employment by 2016.\textsuperscript{30} The unemployment rate for veterans was over twelve percent in 2012 but has fallen to 4.9\% by 2016.\textsuperscript{31} While Vietnam veterans with service-related disabilities struggled to find work, over seventy percent of post-9/11 veterans with a service related disability have found work by 2016.\textsuperscript{32} One major initiative that was created after the end of the Iraq War by the Department of Labor, when they amended regulations in the Vietnam Era Veterans’ Readjustment Assistance Act in 2013. They admit the act in the past was inadequate and did not fully support Vietnam veterans, so they have updated it to better support the new generation of veterans returning from Iraq and Afghanistan.\textsuperscript{33} These changes involve increasing and incentivizing the amount of hiring veterans by contractors. This effort by the Department of Labor shows how the struggles that Vietnam veterans went through translated into a renewed effort to prevent the same struggle that Iraq veterans would be facing. Another government initiative was sparked by Congress with the passage of the VOW to Hire Heroes Act in 2011. VOW stands for “Veterans Opportunity to Work”, and makes veterans eligible for hire in federal agencies even before their deployment is finished.\textsuperscript{34} Providing an employment safety net for veterans even before they have finished their service shows the level of importance that is placed upon the occupational aspect of veteran reintegration and a desire to not repeat the mistakes of the past.

Previous mistakes of the past include Vietnam veterans having a complicated and stressful history with the Department of Veteran Affairs. The Department of Veteran Affairs, or

\textsuperscript{30} Ibid, 1.
\textsuperscript{31} Ibid, 1.
\textsuperscript{32} Ibid, 2
the VA, is the government organization tasked with assisting veterans in dealing with physical and mental disabilities that have occurred during combat and present long lasting disruption for the veterans. Besides healthcare, the VA is to give all eligible veterans educational and economic assistance along with rehabilitation treatment in a civilian setting. Vietnam veterans would be on track to become acquainted with Veterans Affairs as they returned home from their tour. However, the VA was already preoccupied with two other generations of soldiers, WWII and Korean War veterans. Due to the negative outcome of the Vietnam War, previous generations of soldiers viewed the incoming group of veterans as not worthy of benefits or support and blamed them for the war’s outcome.\textsuperscript{35} Besides the other groups of veterans, the VA alienated Vietnam soldiers by prioritizing older groups of soldiers and excluding Vietnam veterans who were afflicted with illness caused by herbicide chemicals disbursed by the US Air Force. An instance of the VA prioritizing non-Vietnam soldiers was when they were deciding on how to spend their budget on two competing petitions from veterans. WWII veterans and Korean veterans petitioned the VA for an increase in their pension compensation, which would cost nine billion dollars. Vietnam veterans petitioned the VA for a reform in their GI Bill that would increase compensation for veterans, including those with disabilities and would cost seven billion dollars. Of the two choices, the VA chose the more expensive option of giving more money from their limited budget to the older and politically powerful generation of pre-Vietnam veterans and alienating those who served in Vietnam.\textsuperscript{36}

Besides missing out on monetary assistance, soldiers who served in Vietnam were denied assistance and misdirected about the origin of illnesses related to Agent Orange. Agent Orange was a chemical used to kill vegetation in Vietnam so as to deprive the Viet Cong foliage to use in


the war. Soldiers who were caught in its path could later develop migraines, major fatigue, rashes, heart attacks, rapid weight loss and temporary blindness. Veterans afflicted with these service related illnesses asked for assistance in determining the cause of their ailment and treating it. The VA said they would investigate the matter, but then later denied that Agent Orange was the cause of their illness, therefore not being a service related illness. Congress would get involved in this matter as more and more veterans became sick from the effects of Agent Orange and would task the Center for Disease Control to investigate the matter. The CDC found that the Vietnam veterans who displayed symptoms that were caused by exposure to chemical compounds were in fact caused by Agent Orange. This revelation would result in the VA admitting the truth and it would later result in lawsuits. Despite proving their case, this altercation with the VA over chemical illnesses displayed the abusive relationship they shared with the department and it would go on to spread publicly the harsh nature of Vietnam veteran readjustment.

Iraq War veterans would have a similar but not identical relationship to the VA and Army medical centers when compared to their Vietnam predecessors. Because of the publicity of the deprioritized assistance and lack of support in the past, any contemporary scandal would receive wide attention. Tens of thousands of Iraq veterans were wounded in combat, with many of them also suffering from physical ailments and TBIs. A directive was released by the Department of Veteran Affairs that mandated all troops returning from deployment would be screened for TBIs. The screening would include a questionnaire that included symptoms of TBI, and if a veteran answered “Yes” on a symptom, they would be scheduled for a later evaluation at a health

37 Ibid, 147.
center. This upfront system seems positive and prepared from a certain angle, so that veterans with a high probability to have difficulty of reintegration may be found sooner. However the actualization of this process would not be adequate. In 2007, a Washington Post article detailing the lives of multiple veterans who were neglected, left in unacceptable conditions, and sparsely checked upon by medical staff at the Walter Reed Medical Center was published. The medical complex is not limited to the hospital, but extends to other buildings and hotels used by the hospital. One of the worst areas of the Walter Reed compound is Building 18, which was found to have rotting ceilings, black mold on the walls, stained rugs and evidence of mouse and cockroach infestations. While this was not the case in every building at Walter Reed, the complex was staffed with what patients described as overworked managers, disengaged clerks, and unqualified platoon officials with the bureaucratic nature of the place turning into an ever present form of stalling. While there is quality care within the main medical center, seventy percent of patients polled by Walter Reed found the experience they had there to be stressful. The revelation of this scandal was met with the firing of the official in charge of the hospital, Major General George Weightman, with the resignation of Secretary of the Army Frances Harvey following immediately after. Both Republicans and Democrats expressed immense disapproval and outrage at the treatment soldiers were receiving, with President Bush personally delivering an apology to the patients of Walter Reed. However, prior to the scandal President Bush’s appointees lobbied against military pensions and health insurance for veterans.

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41 Glantz, 50.
43 Glantz, 52.
Unfortunately, Iraq veterans’ medical troubles would continue with the VA, whose scope dwarfs Walter Reed and is supposed to guide and aid veterans nationally. Veterans and their families do say that quality care can exist within the VA, but that the bureaucracy is slow and very difficult to work with. The mismanagement of the VA continues when inspecting their backlog of unprocessed disability pay claims. From the start of the Iraq War in 2003 to 2009, the VA had a backlog of 325,000 unprocessed claims which grew to over 600,000. If a veteran were to lose a claim and wish to make an appeal, the process could take up to three years. Even veterans with traumatic brain juries, a very critical disability, could have to wait more than a month to get an appointment from a VA doctor. Journalist Aaron Glantz, interviewed a VA psychiatrist, who said that many within the VA are qualified to help but cannot handle the volume of patients. Glantz agrees with his interviewee, with the motivation of his work “The War Comes Home” to highlight the slothful nature of the VA in order to raise awareness so veterans can get the help they need. The Obama Administration did take notice of the overloaded nature of VA healthcare, so in 2014 President Obama passed the Veterans Access, Choice, and Accountability Act. The passage of the act includes the hiring of more medical staff, ensuring timely care, and holding negligent VA staff accountable while giving whistleblowers protection when reporting on mistreatment. This response indicates that rather than ignoring the problem or denying it is happening, acknowledgement and action is possible within a shorter time span than what Vietnam veterans went through. Rather than multiple generations in a hierarchy competing for finite resources, it seems the VA was overloaded with two simultaneous groups of veterans to care for, both the Iraq and Afghanistan veteran groups. The Iraq War did not exist in a

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44 Ibid, 61.
46 Ibid, 137
vacuum, being part of the larger War on Terror. Overall, this trouble with the VA and Army medical centers shows that not all the lessons of Vietnam were translated into a better experience for Iraq veterans. The strained relationship between the VA and veterans indicates a larger systemic issue. While this problem has been identified, government and societal responses should be measured at a future time to correctly measure the outcome of how Iraq veterans were treated after the war and if their stressful relationship with the VA resolved.

The ultimate negative outcome of a veteran not being able to readjust and reintegrate into society is when a veteran takes their own life. It is a tragedy when an individual suffering from intense dissatisfaction and discomfort in life decides to inflict a fatal amount of self-harm upon themselves. This phenomenon occurs in both the civilian and veteran populations in America. There were Vietnam veterans who committed suicide, however there is no reliable statistical count of how many suicides there truly were in the aftermath of the Vietnam War.\textsuperscript{48} Data counts by different researchers vary, with different studies producing numbers that are widely apart. What is agreed upon is that there is an increased risk of suicide found in Vietnam veterans who suffered from combat trauma.\textsuperscript{49} Unfortunately, there also is no verified total statistical count on Iraq veteran suicides. However, it is agreed upon that the rate of suicide for military personnel in 2009 was increasing at an alarming rate.\textsuperscript{50} This would make the US government pass Executive Order 13625, which focused on making a national effort toward suicide prevention in veterans. Unfortunately, this effort would not stop the increase in veteran suicides. In a 2020 report published by the Department of Veteran Affairs, they analyzed the most recent reliable data from

\textsuperscript{50} Wolfe-Clark, Andrea L., and Craig J. Bryan. “Integrating Two Theoretical Models to Understand and Prevent Military and Veteran Suicide.” \textit{Armed Forces & Society} 43, no. 3 (July 2017): 479
2018. They found that from 2008 to 2018, veteran suicide amounts were annually over 6,300 deaths.\textsuperscript{51} Of this recorded count, Iraq and Afghanistan veterans would make up a large amount.

Within veteran populations, those with TBIs are at an increased risk for suicide and suicidal behavior.\textsuperscript{52} With its connection to TBIs, this alarming occurrence of military suicides within the Iraq veteran population presents a prominent issue that exists on a scale that wasn’t previously faced by the Vietnam generation. This sad phenomenon suggests that despite being widely accepted by society, there is a subset of Iraq veterans who are at risk for suicide. The passage of Executive Order 13625 means the problem is seen and recognized, but that the quality or reach of suicide prevention programs at the moment are inadequate. This specific aspect of Iraq veterans’ lives communicates that their reintegration into society is different from Vietnam veterans in terms of visibility and prioritization, but similar in that both struggled to fully readjust after their service. It is hoped that improved suicide prevention programs can manage to stop this increase in deaths and give veterans quality psychological and medical aid.

When a war ends and the troops are called back home, it is paramount to acknowledge the efforts of those who have served and to guide them back into the fold of society. As they were sent overseas to answer the call of duty, it is only fair to record their readjustment progress and raise awareness to any widespread struggle veterans may face so that they can be appropriately assisted. For Vietnam veterans, they came home from a violent experience in Southeast Asia only to be shunned and left to struggle. For Iraq veterans, they came home from a similar long term conflict in the Middle East as they were welcomed home with open arms and


seen as a priority. Vietnam veterans were alienated from society, struggled in the workforce, dealt with record levels of PTSD and had to contend with an unresponsive VA for a large portion of their time back on American soil. They were only largely acknowledged for their service and provided with proper care long after their immediate return. However, their struggle would shift national thought towards the well-being of veterans. While Iraq veterans would be acknowledged from the beginning of their readjustment, that did not mean there wasn’t trouble in their reintegration. Even with acknowledgement, there were still those among the population of Iraq veterans who suffered physical and mental disabilities that were a result of their service. Despite not being exposed to Agent Orange or fighting in a guerilla like environment, some Iraq veterans still had to deal with TBIs and PTSD as they returned home to overloaded and underprepared medical support networks hosted by the VA. Suicide is also an alarming occurrence that must be prevented effectively.

While the majority of them have found employment and the respect of their peers, their lingering struggles should not be discounted and proper healthcare and assistance should be allocated towards Iraq veterans. Because of the relatively recent end of the Iraq War, this overall comparison should not be taken as a final judgment of affairs but as a contemporary effort that attempts to form a conclusion based on current information. As time moves forward and more information comes out, a more comprehensive picture can be formed by researching more factors into the overall comparison of the two generations of veterans. Other comprehensive data that should be taken into account in the future is veteran marriage retention, veteran social and political views after deployment, views on the Iraq War, type of occupation pursued and education attained after deployment, relationship with other veteran generations, etc. For future generations, the negative experiences of those who fought for America should be taken into
consideration so that if there is a new generation of soldiers coming home from a war, they can be adequately assisted with enough medical, social, and financial assistance. A quote from President George Washington encapsulates the overall meaning of this sentiment,

“The willingness with which our young people are likely to serve in any war, no matter how justified, shall be directly proportional to how they perceive the Veterans of earlier wars were treated and appreciated by their nation.”

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