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Published online: 25 Jan 2022.

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Please Don't Assume: Development of the Student Veteran Stigmatization Scale

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An instrument to measure the amount of perceived stigmatizing experiences of veterans on campus was developed, and 201 participants completed it as part of a larger study. Over half met criteria for PTSD and reported some type of stigmatizing experience. Implications of this study include the need to educate individuals in higher education on veteran culture in order to decrease negative interactions on campus, as well as provide culturally appropriate support to student veterans.

Over 3.3 million veterans have served in the U.S. military in the Post-9/11 era (Holder, 2018). As the number of veterans increases, so does the number of student veterans, with them comprising 4.5% to 5.1% of all U.S. higher education students (Holian & Adam, 2020). An attractive benefit of serving in a branch of the military is the GI Bill, which provides funding to veterans to attend higher education institutions. Existing research indicated that many student veterans may have experienced stigmatizing experiences on campus, but a full instrument does not exist to measure these experiences (Elliott, 2015). This study examined the psychometric properties of a created scale to measure stigmatizing experiences of student veterans on campus.

Student Veteran Identities

Student veterans can contribute to campus diversity and knowledge by sharing their life experiences and using their skills to enhance the learning environment (Syracuse University, 2017). Their contributions in the academic setting can also continue to benefit society once they gain a degree and bring their talents to their next professional setting. Recent findings indicated that student veterans have similar job opportunities as other students upon graduation, but differences between them and others on campus may create difficulties while gaining an education on campus (Syracuse University, 2017).

In addition to having military experience, student veterans may be demographically different from civilian students, as they are generally older, are more likely to be a first-generation student, married, and hold a lower socioeconomic status (American Council on Education, 2008; Kim & Cole, 2013). For example, at the time of entry to college, 78.9% of student veterans are over the age of 24 compared to 13.5% of civilian students, while 61.8% of student veterans are first-generation students compared to 42.8% of civilian students (Kim & Cole, 2013). Like veteran

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status, any of these non-traditional student characteristics have also been associated with lower retention rates, mental health concerns, and a disconnect from the institution (Thompson-Ebanks, 2017; Wyatt, 2011). These potential negative outcomes may be increased if others on campus respond negatively to veteran status.

Student Veterans' Experiences of Microaggressions on Campus

Research posited that the degree to which institutions can create cultures where students feel that their presence, engagement, and educational fate are important to the institution, the greater chance students have at succeeding in this environment without feeling stigmatized (Kotewa, 1995; Schlossberg, 1989). For instance, having a dedicated space for veterans on campus can help them feel like they matter (Griffin & Gilbert, 2015). Fernandez et al. (2019) examined factors related to student veteran and service member consideration of leaving institutions of higher education. During this research, it was found that some individuals decided to not leave due to perceived positive interaction with faculty members, but some also reported that the environment could be challenging to stay in.

Research indicated that student veterans often feel stigmatized on campus, yet historically, veterans have not been viewed as a marginalized group in academia (DiRamio et al., 2008; Kato et al., 2016). While the term microaggression is typically applied to the experiences of racial minority groups, and has not yet been applied to the veteran population, the concept of micro-aggressions is beginning to be applied more widely to the experiences of other marginalized populations (Kattari, 2015; Sue, 2010). Microaggressions are "the brief and commonplace daily verbal, behavioral, and environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory or negative racial, gender, sexual, and religious slights and insults to the target person or group" (Sue, 2010, p. 6). Microaggressions may be verbal, behavioral, or environmental cues that indicate a negative belief about an individual based on their identity (Sue, 2010).

Sue (2010) wrote about three ways in which microaggressions may be perpetrated and termed them as microassaults, microinsults, and microinvalidations. Microassaults occur when someone intentionally makes a comment that is offensive but does not realize the harm it may cause. An example of a microassault against a student veteran is saying that that the veteran must have killed somebody. It is offensive to state a person must be a killer, but the person making the comment may not realize that it could negatively impact a student veteran since they consider it the person's choice to have joined the military. Microinsults are comments or acts people say or do that are unintentionally offensive. For instance, saying a student veteran is "actually pretty smart" could be considered a microinsult. This is because by saying this, it is implying that most student veterans are not smart. Third, microinvalidations are comments people make that imply the stigmatized group should not feel marginalized. As an example, if somebody tells a veteran to "suck it up, you chose to serve," this can invalidate their stress or mental health concerns. Veterans have noted military bias on campus and that these types of reactions have come from other students as well as faculty members (DiRamio et al., 2008).

At times, stigmatizing experiences on campus are more overt. Ackerman et al. (2009) reported that one student veteran's professor "referred to the American soldier as a terrorist" (p. 11). Another study conducted by Elliott et al. (2011) highlighted student veterans' views on how they are perceived on campus. Elliott et al. (2011) began important work in starting to measure these experiences by including four questions regarding alienation of student veterans, as well as including open-ended questions to address different experiences. In one example given by

a student participant, a professor referred to the U.S. troops as "baby killers" and "torturers." This participant reflected on the experience by saying that they felt that:

> Veterans are the only group of people on the campus that are openly slandered, disrespected, and hated. Most professors would claim to embrace diversity among the student population, but some would like to exclude veterans from the multiplicity list due to our war services. (Elliott et al., 2011, p. 287)

Standing against derogatory comments made by faculty in higher education toward veterans, one assistant professor wrote a commentary on being surprised that the veteran students he had in his classroom were some of his best (Thompson, 2011). He wrote that other faculty members often made assumptions about military personnel's education level, ability, and politics and thought that "military intelligence is an oxymoron" (p. 3). In his writing he urged professionals in higher education to be cognizant of their feelings about veterans and to better support them, as assumptions can be disruptive to student veterans' learning.

One barrier to faculty members being able to fully support student veterans may be what Barnard-Brak et al. (2011) found. Their research indicated that faculty members who have negative feelings toward the Post-9/11 conflicts and the military service of student veterans have less self-efficacy around working with student veterans. This may lead to these instructors not being able to successfully work with student veterans in the classroom (Barnard-Brak et al., 2011).

Current Study

Understanding of microaggressions is a useful framework for understanding how stereotypes, for example, are transmitted into the day-to-day stigmatized experiences of marginalized groups. By focusing on perceived stigmatization that may be indicated through microaggressions, this study not only points to possible targets for intervention, but also creates space for veterans to be recognized as a marginalized group in academic settings. While prior studies have examined student veteran stigmatization in higher education, there is no validated, reliable measure to examine this construct.

For example, the student veteran alienation questions used in the studies conducted by Elliott (2015) and Elliott et al. (2011) did not include information on the development of their alienation questions or discuss the validity and reliability of it. Elliott et al. (2011) also called for a systematic assessment of troubling experiences on campus, which development of a reliable and valid scale can assist with. With this call in mind, an instrument to examine amount of stigmatization and microaggressions experienced by student veterans was created by building upon existing research and prior qualitative findings. This article reports the development of that instrument, as well as the amount of perceived stigmatizing experiences student veterans reported through an online study.

Methods

This study received Institutional Review Board approval from the University of Denver. It employed a cross-sectional design for feasibility. As part of a larger dissertation study, survey development techniques (Groves et al., 2009; Logan et al., 2003) were utilized to create an instrument to measure the construct of perceived stigmatization. Data were collected from December of 2016 to May of 2017.

Instrument Development

A previous study by Elliot et al. (2011)used four questions to measure veteran alienation on campus ("I sometimes feel like I do not fit in with other students," "when I hear my teachers talking about U.S. military operations I feel unfairly judged," "sometimes feel like I am looked down upon because I am a veteran," and "I do not like it when people I meet at [the university] want to know the details of my military experience"). This was a start to creating an instrument to measure stigmatization, but these questions were not enough to gauge the full range of discrimination veterans have reported in previous research since those questions were created in 2008.

As such, questions from The Everyday Discrimination Scale (Williams et al., 1997) were also included to assess discrimination or microaggressions veterans have experienced. This measure has been used with various populations in research around the world but seemingly never with student veterans. Modifications were based on how student veterans have reported about negative experiences on campus in past literature (for example, works previously as cited in Ackerman et al., 2009; Elliott, 2015; Thompson, 2011). For example, an item that reads "you receive poorer service than other people at restaurants or stores" was changed to "you have poorer interactions than others with faculty or staff."

In total, the new instrument, the Student Veteran Stigmatization Scale (SVSS), started with 15 items measured on a Likert-type scale of 1-"strongly disagree" to 5-"strongly agree." The items included:

- You are treated with less respect than other students are.
- You have poorer interactions than others with faculty or staff.
- People act as if they think you are not smart.
- People act as if they are afraid of you.
- People act as if they think you are crazy.
- People act as if they are better than you are.
- You are called names or insulted (such as baby-killer or war-monger).
- People assume you have PTSD.
- You have been asked if you have ever killed someone.
- You are expected to be a spokesperson for veterans.
- You have been asked to disclose your veteran status.
- You feel you can ask for accommodations (like a specific seat) and will be given them with no issue.
- You feel like veterans matter to your institution.
- You feel like you do not fit in with other students.
- When you hear teachers talking about U.S. military operations you feel unfairly judged.

Once the initial version of the SVSS was created, feedback was obtained from experts on student veterans in order to ensure the questionnaire was valid for measuring student veteran perceived stigmatizing experiences as suggested by measure expert Willis (2005).

Expert Reviews. A survey analysis to ensure content validity of the SVSS was conducted through expert reviews. Individuals who had more than five years of experience working with

student veterans and were past and current colleagues of this researcher were identified and told about the current study via a group telephone call. Individuals were told to e-mail this researcher if interested in participating. In total, four individuals participated. Participants included a retired military social worker and college instructor, a director of mental health social work within the VA, a student veteran outreach coordinator, and a VA social worker.

Participants were asked to rate each potential item on the SVSS using a five-point Likert scale from 1-"strongly disagree" to 5-"strongly agree" on (a) whether it was clear and easy to understand, (b) whether it was relevant to the variable being studied, (b) whether it was well formatted, (d) whether it was free of bias, and (e) whether it was easy to provide an answer. Any item that averaged less than 4, indicating that overall participants' responses did not average at least "agree," was dropped. Space was also provided for participants to provide general feedback on each item regarding wording or other information the participant wanted to share, including if anything seemed to be missing from accurately measuring the constructs.

All expert feedback collected was also incorporated into modifications of the SVSS. As a result of expert feedback, the following changes were made. A response option of "not sure" was added to the scale for each question. The question regarding accommodation requests was split into two; one asking if the respondent feels they can ask for accommodations and the other asking if the respondent feels the request will be considered the same as other students. Some of the wording on the items were also updated to be clearer.

Focus Group. After the SVSS was modified, a focus group with five student veterans from a local university took place to further validate it. These participants were recruited through an e-mail sent by the university's president of the student veteran organization there, which stated the purpose of the study and a date and time to be present at the student veteran organization office in order to be included in the focus group. The SVSS was given to the student veterans to complete in front of this investigator and any hesitancy in answering questions was noted and inquired about. At the end, the student veterans were asked if any item was confusing or too difficult, and if the SVSS made sense overall. The student veterans reported that they felt the questions were appropriate and no further changes were made. After the expert feedback and focus group, the final SVSS was distributed as part of the larger dissertation study.

Recruitment and Data Collection

Previous studies yielded low student veteran participant rates, possibly because students do not always identify themselves as a veteran to their schools but may instead be known to be a student veteran through other students. In an attempt to gain better access to more student veterans, snowball sampling was utilized. Recruitment was conducted by contacting individuals involved in working or networking with student veterans via e-mail or Facebook messenger. Information about the study, as well as contact information for this investigator was included in the messages. Over 50 individuals sent e-mails to their student veteran population at their schools or posted information on their school's student veterans Facebook page. Individuals were also asked to forward the survey link to other student veterans they know and share the information on their personal Facebook page. Initially, recruitment methods were slow and a Facebook page for the study was created and the information was shared multiple times on personal Facebook pages. In order to reach student veterans who may not be at a school with a veteran support system in place, recruitment ads were placed on Craigslist.

Inclusion criteria included: (a) Veteran status and served in the military since September of 2001, (b) enrolled in a higher education program, and (c) attending at least two classes on

campus. Student veterans attending a program solely online were excluded as this study examined experiences of student veterans on campus. Of 291 initial respondents, 48 participants were ineligible as they did not meet inclusion criteria, 17 did not finish past the inclusion criteria questions, 10 were unengaged respondents who stopped the survey, and another 15 cases had missing data. The final sample was comprised of 201 student veterans from various institutions of higher education around the United States.

Data were collected using a survey hosted by Qualtrics, a secure online survey platform that has been used with this population in the past. When potential participants clicked on the study link, they were presented with an IRB approved information sheet for exempt research. In order to continue to the survey, each participant had to click yes to reading, understanding, and agreeing to participate. Questions to ensure potential participants were eligible for the study were then asked. If a person answered a question in a way that made them ineligible for the study, they were sent to a page thanking them for their time. Each participant then completed each measure in the same order. Participants were also offered the opportunity to be included in a random lottery for an Amazon gift card.

Data Analysis

Two statistical programs were used in the analysis of this study data. First, SPSS for Windows (v.22) was used to examine demographic information, to run univariate analyses, to check for reliability of measures, and for the EFA. Prior to data analysis, all variables were examined through descriptive analysis (Tabachnick & Fidell, 2013). The descriptive analysis indicated there were no concerns with skew and kurtosis, and multivariate normality was confirmed. Variance Inflation Factors (VIF) showed no concerns with multicollinearity as all values were less than 2, and tolerance was greater than 0.1. The data was also analyzed to ensure that any outliers that could influence statistical analyses in an inaccurate way using Mahalanobis distance and examining Cook's distances (Tabachnick & Fidell, 2013). No extreme outliers were discovered.

As data relies on amount and patterns of missing data, determinations were made on why data is missing. There was no evidence that missing data were not missing completely at random and only 6.9% of participants had missing data after non-completers were removed. No variable had more than 5% of missing data. Due to these findings, listwise deletion was used so any case that had missing data was excluded from the analysis.

Results

Data Transformation. Due to created instruments including a response category of "I don't know," these responses needed to be recoded. Values were recoded to "disagree" and mean of each item was checked and compared to recoding these values as "neither agree or disagree." Differences were not significant when the responses were recoded into either response category, so all "I don't know" responses were recoded to "neither agree or disagree" as "I don't know" appears to be more related to this response category. The decision was made to not drop responses that included "I don't know" as recoding them did not appear to affect the data as much as deleting them would have.

Additionally, each item was examined to ensure it received a range of responses. The item "you are called names or insulted (e.g., baby-killer or warmonger)" was removed as only 15 respondents (7.5%) reported they experienced this in the classroom setting.

Reliability Analysis. Next, a statistical analysis was run to examine the internal consistency of the SVSS. Items that lowered the Cronbach's alpha were removed. Initially, the Cronbach's alpha for the SVSS was 0.876. As Larwin and Harvey (2012) suggest, while it was not necessary to remove items for the SVSS to have an adequate Cronbach's alpha, questions were examined to see if they could be dropped in order to create the least burdensome instrument that is unidimensional. Review of the items that lowered the instrument's reliability indicated that these items are all more action-oriented items as compared to the final items, and it theoretically made sense to drop them. After examination, seven items were removed. First, "you feel you can ask for accommodations (like a specific seat)" was deleted, which raised it to 0.882; "you feel like Veterans matter to your institution" was deleted, which raised it to a 0.885; "you have been asked to disclose veteran status in front of others" was deleted, which raised it to a 0.887; "you feel your accommodation requests will be considered the same as other students" was deleted, which raised it to 0.890; "you have been asked if you have ever killed someone" was deleted, which raised it to a 0.894; "you are expected to be a spokesperson for veterans" was deleted, which raised it to a 0.900; and finally "you feel like you do not fit in with others" was deleted, which raised it to a 0.903 for 8 items to create the final version of the SVSS. These items are:

1. You are treated with less respect than other students.

2. *Your interactions with faculty or staff are not as good as other students.*

3. *People act like you are not smart.*

4. *People* act as if they are afraid of you.

5. *People act like they think you are crazy.*

6. *People act as if they are better than you are.*

7. *People assume you have posttraumatic stress disorder (PTSD).*

8. When you hear teachers talking about U.S. military operations, you feel unfairly judged.

Exploratory Factor Analysis. Finally, an exploratory factor analysis (EFA) was run in order to examine the underlying structure of the SVSS (Hinkin et al., 1997). This helped ensure each item loaded on a singular factor and that the instrument only measures one construct. First, assumptions that indicate if it is appropriate to run an EFA were examined, including the Kaiser-Meyer-Olkin Measure of Sampling (KMO) and Bartlett's Test of Sphericity (Tabachnick & Fidell, 2013). The KMO measure should ideally be above a 0.70, though anything above a 0.50 is considered to be adequate. Bartlett's test should be significant, less than 0.05. Items were then examined to ensure they loaded high enough, with a loading above a 0.4, as loadings below this indicate that the item is not representing the intended construct.

Using Maximum Likelihood and Promax Rotation, the most conservative methods, the EFA showed acceptable results. The SVSS results were: KMO = 0.89, sig = 0.000; and 54.76% variance explained by one factor with each item having a loading above a 0.4.

PTSD.

In addition to the SVSS, this article also reports results from the PTSD Checklist-Short Form (PCL-SF) (Lang & Stein, 2005) that was given to participants in the overall study. The PCL-SF is a self-report measure of PTSD symptomatology. There are six items that use a Likert

scale ranging from 1, not at all, to 5, extremely. Questions include how much the person has been bothered by each of the following problems in the past month: (a) "Repeated, disturbing memories, thoughts, or images of a stressful experience from the past?"; (b) "Feeling very upset when something reminded you of a stressful experience from the past?"; (c) "Avoided activities or situations because they reminded you of a stressful experience from the past?"; (d) "Feeling distant or cut off from other people?"; € "Feeling irritable or having angry outbursts?"; and (f) "Difficulty concentrating?." A total symptom severity scale is obtained by summing all of the questions and a range of 6–30 can exist. For this study, a cutoff score of 14 indicated a presence of PTSD (Lang & Stein, 2005).

Scores from the PCL-SF have been shown to be correlated with scores from the full PCL which has strong internal consistency, test-retest reliability, and convergent validity based off of a sample of different studies with different populations including veterans (Bryan et al., 2014). Cronbach's alpha for the overall measure was found to be 0.93 for the PCL-SF in a study conducted by Bryan et al. (2014).

Results

Demographics

A total of 201 participants were included in this sample. Participants in this study ranged from 20–55 years of age, with the average age being 31.9 years (SD = 7.02). The majority identified as White (75.1%, n = 151), while 24.9% (n = 50) identifying as other races or ethnicities. Participants mostly identified as being male (71.6%, n= 144) with 27.4% (n = 55) identifying as female, and 1% (n = 2) identifying as transgender or other. The participants largely identified as being heterosexual (91.5%, n= 184). Slightly under half of the participants reported being currently married (42.3%, n = 85). The majority of participants had no children (65.7%, n = 132). Over half of the participants reported working, with 37.8% (n = 76) not working at all.

In regard to military background, all participants had at least some service time after September 11, 2011 and represented all branches including the Army, Marines, Air Force, Navy, National Guard, the Reserves, and Coast Guard descending in that order. Approximately three quarters of the participants were deployed, with only 24.4% having not been. Areas of deployment included Kuwait, Afghanistan, Romania, Jordan, Iraq, Korea, and Cambodia. Fifteen percent of participants reported they are still currently in the military.

Participants reported attending different types of institutes of higher education, with over half (59.7%, n = 120) attending public universities. More than three-quarters reported utilizing the GI Bill, with 17.4% (n = 35) not using GI Bill funding. Two other questions relevant to educational status were added after data collection started, so only 152 participants responded to them. These questions asked what level of study the students were in and if they were full-time or part-time students. These were the only questions that only had the lower number of 152 respondents. The majority of participants were undergraduates (58.6%, n = 89), with 28.9% (n = 44) being graduate other than doctoral, and 11.2% (n= 17) identifying as doctoral students. The majority of participants reported attending school full-time, with only 7.9% (n = 12) attending part-time.

PCL-SF total scores ranged from 6–30, with the average being 13.71 (SD = 5.68). A total score of 14 is the cutoff score for PTSD, and using that number 44.3% (n= 89) of the study participants appear to have PTSD. In terms of GPA, 57.2% (n = 115) reported a GPA of 3.5–4; 29.9% (n = 60) reported a GPA of 3.0–3.4; 10.4% (n = 21) reported a GPA of 2.5–.3.0; and the remaining 2.5% (n = 5) reported a GPA lowered than a 2.5.

Analysis

This section provides information on the univariate analyses conducted on the measures. Table 1 provides the means, standard deviations (SDs), and percent of participants who rated the item agree or strongly agree for every item of the SVSS. While the majority of participants reported low amounts of perceived stigmatization on most items, approximately 58.7% of the participants reported yes to at least one of the items. The item least endorsed was "you are treated with less respect than other students" (M = 2.19, SD = 0.98) with only 7.5% of participants indicating they agreed or strongly agreed with the statement. The highest endorsed item was "people assume you have posttraumatic stress disorder (PTSD)" (M = 2.91, SD = 1.26), with over half (59.2%) of the sample reporting they agreed or strongly agreed with the statement.

Discussion

Previous research has found that student veterans report experiencing varying amounts of stigmatization experiences on campus. As there is a high prevalence of PTSD in this population, with approximately half of student veterans not graduating in the time the GI Bill allots, information on how schools can better support veterans around these negative experiences is necessary. As an existing reliable and valid instrument to measure perceived stigmatization of veterans does not yet exist, this study included the beginning steps of creating a valid and reliable measure for this construct. Noting how these experiences may be similar to microaggressions may lead to veterans being viewed as a group that may experience negative experiences on campus simply because of their identity.

More than half (58.7%) of the participants in this study reported some type of perceived stigmatization. Similar to other research findings, this indicates that many student veterans may not feel like they are understood on campus, accepted, or that they fit in with others. These negative interactions due to veteran status may be as harmful as microaggressions have been found to be in other populations. In addition, just under half (44.3%) of the participants' scores on the PCL-SF were indicative of PTSD. If students are struggling with symptoms of PTSD

Table 1

Means, SDs, and % Agree/strongly Agree for SVSS, n = 201

	M	SD	%
SVSS			
You are treated with less respect than other students.	2.19	0.98	7.5
Your interactions with faculty or staff are not as good as other students.	2.19	1.06	13.0
People act like you are not smart.	2.18	1.10	14.4
People act as if they are afraid of you.	2.59	1.20	28.9
People act like they think you are crazy.	2.48	1.14	22.4
People act as if they are better than you are.	2.45	1.20	22.4
People assume you have posttraumatic stress disorder (PTSD).	2.91	1.26	59.2
When you hear teachers talking about U.S. military operations you feel unfairly judged.	2.97	1.18	32.3

Note. Each item was rated 1–5, from strongly disagree to strongly agree.

and experiences of stigmatization are added, there may be more of a potential to not succeed as well as could be.

Despite this study's concerning findings, more than half of the participants (57.2) reported having a GPA above a 3.4, with only 2.5% reporting a GPA lower than a 2.5. This is consistent with reports that student veterans may have higher GPAs than their civilian counterparts. While additional research is required to better understand how perceived stigmatization of student veterans may impact them, findings from this study in conjunction with what is known about microaggressions experienced by other populations provide potential implications for many different areas of higher education.

Implications for Higher Education

Overall, this study's findings suggest that student veterans may experience microaggressions on campus similar to what has been shown in other populations. Perhaps, working with veterans to support them and minimize these experiences required rethinking of them as just being "veterans" to a group who may be marginalized on campus. Working to eliminate stigmatizing experiences needs to involve campus wide initiatives that target everybody on campus including employees, other students, and the student veterans.

In order to increase support and reduce stigmatization student veterans may perceive from others on campus, school staff and student veteran organizations should work to provide education regarding student veterans on campus. Misinformation concerning the experiences of veterans still separates the groups. Many non-veteran students may not acknowledge that the way they react to their veteran peers is highly influential. If one asks if a veteran has ever killed anyone for instance, the veteran may be forced to defend themself and actions in the military. These experiences of feeling stigmatized lend to difficulties in the transition process.

In order to help support students who may feel stigmatized, Schlossberg (1989) suggested that institutions should attempt to make students feel like they belong by making them feel like they matter as this serves as an influential motivating factor in human behavior. If the learning environment does not work to make a student veteran feel like they matter, they may not want to be involved on campus and lose the ability to cope with the transition as they feel misunderstood (Astin, 1984). If Post-9/11 student veterans feel like others cannot work with them properly on campus, this may lead to feelings of stigmatization with a loss of possible social supports to help cope with the additional stressors in higher education, and their well-being may decline.

On the other hand, if veterans feel supported and integrated into the academic environment through positive interactions with faculty, staff, and other students, institutions of higher education may be better at retaining and supporting them. As Barnard-Brak et al. (2011) found that faculty members may not feel competent to teach to student veterans as a result of their feeling about Post 9/11 conflicts, one way to better support student veterans is through providing thorough education on military culture to those working on campus, and having them evaluate their feelings. One way to do this may be through Uniformed Services University's cultural competence test and trainings (https://deploymentpsych.org/learn-now) as they are free and available at a self-paced rate. In addition, programs that use peer support and educations to modify attitudes about PTSD and veterans may be beneficial in terms of reducing stigmatization. Programs including these elements could be included on campus.

In order to better offer services to student veterans who may be impacted by stigmatizing experiences, restructuring of support services will be useful. Traditional campus disability and

counseling services are often tasked with seeing student veterans, but may not be adequately trained to work with this unique population as there continues to be a lack of understanding of their specific needs, with many student veterans not seeking help through them (Elnitsky et al., 2018). While there is a wide range of clinical and nonclinical veteran outreach programs that have been launched to provide services on college campuses, many campuses do not have veteran-specific mental health services.

Similar to other research findings, rates of PTSD in this sample were higher than rates found in the general veteran population, which may be due to the additional stressors of school. Even if veterans may not appear to be struggling in school, left untreated, PTSD among this population may be detrimental in other aspects of their life. GI Bill funding should include an allocation for PTSD interventions to be provided directly on campus, or to assign a VA representative to visit schools on a regular basis to help with healthcare enrollment and to schedule initial healthcare appointments.

Limitations and Future Research

This study offers a potential instrument to measure perceived stigmatization on campus, but there were limitations in the study. Given that reliable and valid measures did not exist for perceived stigmatization of student veterans on campus, this measure may be valuable in future research. While the SVSS was found to be reliable in this study, future measurement studies are required to validate these measures that fixes an error in this study. Due to expert opinion on the scales, a category of "I don't know" was added to the scales. This may have affected the validity of the analysis as the category was transformed to equate to "neither agree nor disagree" and it is not sure if this is what the participant meant by choosing the "I don't know" response.

Perhaps the biggest limitation of this study was that the data did not offer evidence on how the perceived experiences of stigmatization directly impacted student veteran outcomes. The SVSS can be used in the future to further understand this. Eventually, a randomized controlled trial examining different types of campus interventions to mitigate student veteran stigmatization would help to establish guidelines and best practices.

This study is not generalizable to all student veterans as it examined a small sample of student veterans who served Post-9/11. The majority of the recruitment was conducted through student veteran organizations, so it is also likely that many of the participants are relatively more involved in student veteran organizations than the general student veteran population. It is likely that veterans who are not engaged with their student veteran organizations, may look different than those sampled, and these findings cannot be generalized to other groups.

In addition, many student veterans have unique identities and shared aspects with other nontraditional students. Some of the findings may be attributed to other characteristics other than veteran status, such as age, being a first-generation student, or employment status. A larger sample size may have yielded different results. The vast majority of this sample were white, heterosexual males which is unlike the overall veteran population.

Conclusion

As a result of military service, Post-9/11 veterans have many strengths that can be useful in higher education. They rely on their institutions of higher education to help them continue to forge these skills and use them upon graduation, but student veterans may experience negative experiences on campus. If we recognize these issues through a lens of microaggressions, we may

better be able to support student veterans who experience different types of stigmatization on campus. In order to improve support for student veterans and alleviate negative experiences on campus, institutional programs should be modified based on research, and more education should be provided regarding military culture to those working with veterans on campus. Continued changes in these areas will better allow veterans to use their skills from military life and higher education upon graduation.

Disclosure Statement

No potential conflict of interest was reported by the author(s).

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References

Ackerman, R., DiRamio, D., & Mitchell, R. L. G. (2009). Transitions: Combat veterans as college students. *New Directions for Student Services*, *2009*(126), 5–14. https://doi.org/10.1002/ss.311

American Council on Education. (2008). *Serving those who serve: Higher education and America's veterans* [Issue brief]. http://www.acenet.edu/Content/NavigationMenu/ProgramsServices/MilitaryPrograms/Veterans_Issue_Brief_1108.pdf

Astin, A. W. (1984). Student involvement: A developmental theory for higher education. *Journal of College Student Personnel*, *25*(4), 297–308 https://www.middlesex.mass.edu/ace/downloads/astininv.pdf

Barnard-Brak, L., Bagby, J., Jones, N., & Sulak, T. (2011). Teaching Post-9/11 student-veterans with symptoms of PTSD: The influence of faculty perceptions and self-efficacy. *Journal of Vocational Rehabilitation*, *35*(1), 29–36. http://vets.syr.edu/wp-content/uploads/2014/04/ResearchBrief_Barnard2011.pdf

Bryan, C. J., Bryan, A. O., Hinkson, K. J., Bichrest, M., & Ahern, D. A. (2014). Depression, posttraumatic stress disorder, and grade point average among student service members and veterans. *Journal of Rehabilitation Research and Development*, *51*(7), 1035–1046. https://doi.org/10.1682/JRRD.2014.01.0012

DiRamio, D., Ackerman, R., & Mitchell, R. L. (2008). From combat to campus: Voices of student- veterans. *Journal of Student Affairs Research and Practice*, *45*(1), 73–102. https://doi.org/10.2202/1949-6605.

Elliott, M., Gonzalez, C., & Larsen, B. (2011). US military veterans transition to college: Combat, PTSD, and alienation on campus. *Journal of Student Affairs Research and Practice*, *48*(3), 279–296. id=EJ954924. https://doi.org/10.2202/1949-6605.6293

Elliott, M. (2015). Predicting problems on campus: An analysis of college student veterans. *Analyses of Social Issues and Public Policy*, *15*(1), 105–126. https://doi.org/10.1111/asap.12066

Elnitsky, B., Findlow, A., & Wiese. (2018). Student veterans reintegrating from the military to the university with traumatic injuries: How does service use relate to health status? *Archives of Physical Medicine and Rehabilitation*, *99*(2), S58–S64. https://doi.org/10.1016/j.apmr.2017.10.008

Fernandez, F., Merson, D., Ro, H. K., & Rankin, S. (2019). Do classroom interactions relate to considerations of institutional departure among student veterans and service members? *Innovative Higher Education*, *44*(3), 233–245. https://doi.org/10.1007/s10755-019-9460-8

Griffin, K. A., & Gilbert, C. K. (2015). Better transitions for troops: An application of Schlossberg's transition framework to analyses of barriers and institutional support structures for student veterans. *The Journal of Higher Education*, *86*(1), 71–97. https://doi.org/10.1353/jhe.2015.0004

Groves, R. M., Fowler, F. J., Couper, M. P., Lepkowski, J. M., Singer, E., & Tourangeau, R. (2009). *Survey methodology* (2nd ed.). Wiley.

Hinkin, T. R., Tracey, J. B., & Enz, C. A. (1997). Scale construction: Developing reliable and valid measurement instruments. *Journal of Hospitality & Tourism Research*, *21*(1), 100–120. https://doi.org/10.1177/109634809702100108

Holder, K. A. (2018). *Veterans who have served since 9/11 are more diverse.* United States Census Bureau. https://www.census.gov/library/stories/2018/04/post-9-11-veterans.html

Holian, L., & Adam, T. (2020). *Veterans' education benefits: A profile of military students who received federal veterans' education benefits in 2015–2016.* United States Department of Education. https://nces.ed.gov/pubs2020/2020488rev.pdf

Kato, L., Jinkerson, J. D., Holland, S. C., & Soper, H. V. (2016). From combat zones to the classroom: Transitional adjustment in OEF/OIF student veterans. *The Qualitative Report*, *21*(11), 2131–2147. http://nsuworks.nova.edu/tqr/vol21/iss11/14

Kattari, S. K. (2015). Examining ableism in higher education through social dominance theory and social learning theory. *Innovative Higher Education 40*(5) , 375–386. https://doi.org/10.1007/s10755-015-9320-0

Kim, Y. M., & Cole, J. S. (2013). *Student veterans/Service members' engagement in college and university life and education*. National Survey of Student Engagement. http://www.acenet.edu/news-room/Documents/Student-Veterans-Service-Members-Engagement.pdf

Kotewa, D. (1995). Transitions and adaptations: Theory and thoughts to ponder. *Journal of Student Affairs, 4,* 45–52 .

Lang, A. J., & Stein, M. B. (2005). An abbreviated PTSD checklist for use as a screening instrument in primary care. *Behaviour Research and Therapy*, *43*(5), 585–594. https://doi.org/10.1016/j.brat.2004.04.005

Larwin, K., & Harvey, M. (2012). A demonstration of a systematic item-reduction approach using structural equation modeling. *Practical Assessment, Research & Evaluation*, *17*(8). http://pareonline.net/pdf/v17n8.pdf

Logan, D. E., Zelikovsky, N., Labay, L. E., & Spergel, J. M. (2003). The illness management survey: Identifying adolescents' perceptions of barriers to adherence. *Journal of Pediatric Psychology*, *28*(6), 383–392. https://doi.org/10.1093/jpepsy/jsg028

Schlossberg, N. K. (1989). Marginality and mattering: Key issues in building community. *New Directions for Student Services*, *48*(48), 5–15. https://doi.org/10.1002/ss.37119894803

Sue, D. W. (Ed). (2010). *Microaggressions and marginality: Manifestation, dynamics, and impact*. John Wiley & Sons.

Syracuse University. (2017). *Student veterans: A valuable asset to higher education*. https://ivmf.syracuse.edu/wp-content/uploads/2017/09/Student-Veterans_Valuable_9.8.17_NEW.pdf

Tabachnick, B. G., & Fidell, L. S. (2013). *Using multivariate statistics* (6th ed.). Pearson.

Thompson-Ebanks, V. (2017). Leaving college prematurely. *Journal of College Student Retention: Research, Theory & Practice*, *18*(4), 474–495. https://doi.org/10.1177/1521025115611395

Thompson, J. (2011). Our student soldiers: Lessons from the north and left. *Journal of College and Character*, *12*(3 1–5). https://doi.org/10.2202/1940-1639.1766

Williams, D. R., Yu, Y., Jackson, J. S., & Anderson, N. B. (1997). Racial differences in physical and mental health: Socio-economic status, stress and discrimination. *Journal of Health Psychology*, *2*(3), 335–351. https://doi.org/10.1177/135910539700200305

Willis, G. (2005). *Cognitive interviewing: A tool for improving questionnaire design*. Sage Publications, Inc.

Wyatt, L. G. (2011). Nontraditional student engagement: Increasing adult student success and retention. *The Journal of Continuing Higher Education*, *59*(1), 10–20. https://doi.org/10.1080/07377363.2011.544977