Veteran Identity (Perceptions) in Higher Education: A Veteran/ Scholar/Advocate's Story

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ABSTRACT

Through autoethnography, a research method that considers how personal lived experiences are impacted and made visible through inquiry into cultural and systemic issues, the author shares her story of being a research administrator and staff member at a veteran center within a US research university. As both a veteran and a scholar of veteran studies, the researcher paints a picture of the consequences of a multidecade war on the post-9/11 generation of veterans, veteran-centric scholarship, and veteran services within university settings. Her story illustrates the consequences of a lack of military cultural insight and attunement of higher-education leadership and demonstrates why administrators of veteran centers and spaces must be well versed in military cultural awareness. The overarching themes of this piece reify how truth, empathy, and cultural competency are paramount to overcome barriers of both research and praxis related to veteran issues. Most importantly, this piece both shows and tells why veterans need a seat at the table.

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"I QUIT!"

I waited a long time to write this piece—many months. I knew it would be an arduous process to sit with, look at, name, and process all the difficult emotions I have felt and am still feeling since I quit my job. I know I have important things to say about what happened there, about military culture, about veterans in higher education, and about my own lived experience as a veteran. But I also know speaking one's truth is no easy task.

Before my last day, I wrote a letter to the chancellor of the university I had worked at for several years. I fantasized about sending it to his assistant and to the Office of the Provost; the Vice Chancellor for Research Office; the Office of Diversity, Equity, and Inclusion; and the university Ethics and Compliance Office. I wrote and rewrote that letter several times, adding more and more to it until finally it ended with me scrolling through an eight-page incoherent mess with tears streaming down my cheeks. Only the first two pages were an actual letter, followed by six pages of a timeline of events intended to paint a picture of failed leadership, inequitable workplace practices, and a culture fostered within our veteran center that was at best, exclusive, and at worst, unsafe for individuals who do not embody dominant identity standpoints. On the second page I wrote that my intention was to have the opportunity to express my lived experiences, of what I perceived to be mismanagement and misconduct at the veteran center. Through doing so I hoped to foster progressive, systemic change for military service members (SM), veterans, and their families at the university.

I knew I could not send the letter. It was not clear. I was not fully and completely speaking my truth. *You don't want to sound like a disgruntled employee*, kept ringing in my ears—a direct quote I recall from a supervisor when we met to discuss my departure and how I might share the news to my colleagues. I shared the letter with a mentor who worked on campus and with one of my best friends from graduate school who studied diversity, equity, and inclusion. She called me right after reading it.

"I think it's very *sterile*," she said.
Sterile? That's the oppositive of what I want, I thought.
"Where is your voice in this?" she asked. "You're holding back."

She knows me well. She had read my dissertation and now book on veteran identity and military culture (Hunniecutt, 2022). She had witnessed my painful and stressful journey of separating from the military 7 years earlier, just weeks before I moved from Virginia, where I served in the Army National Guard for 6 years, to Denver, Colorado for a Ph.D.

program. She had read all my papers I wrote throughout our graduate program about veteran suicides, reintegration, transitions, and healing. She had heard me debrief from the special topics veteran health and military family courses I taught. She helped me gain confidence for my interview to be Outreach Specialist at the newly established Sturm Specialty in Military Psychology Program at the University of Denver. She encouraged me to build and lead, from the ground up, a new chapter of Student Veterans of America on our campus in Denver. She saw me take charge, she heard me speak my truth about issues impacting veterans many times, in many ways, to many people in positions of leadership. I trusted her completely when she compassionately, yet firmly told me this letter was not my way forward.

I knew she was right. Then my mentor validated it and advised I take some time to step away from it all and release the urgency of needing to *do* something. So, I did. I chose to "protect my peace" and bowed out as gracefully as I could, telling myself all along that I was leaving the place better than how I had found it.

But I knew that could not be it. As a veteran, veteran advocate, and scholar of veteran studies, I knew that for me to stay true to who I am and the work that I do with veterans, I must find a way to tell my story and speak my truth about the veteran center I worked at. A few weeks after my last day on the job, I found this special issue call for the *Journal of Veteran Studies*. The call invited autobiographical accounts of changes in perceptions of veteran identity, new disciplinary approaches to social problems, reflections on the future of the post-9/11 generation, and emerging trends or topics in veteran studies. I read the call as an invitation for stories that could shine light on systemic, hegemonic, invasive issues impacting the national community of veterans and scholars working in these spaces. The call could not have come at a more perfect time for me. It was my chance to tell my story.

STORY AS A TOOL FOR CHANGE: RESEARCH AND WRITING

Several months later after time away to process, regroup, and heal, as I engage this important task of speaking my truth, I am reminded of wisdom imparted to me by a cherished former professor. In an Indigenous qualitative methods class during my Ph.D. program, my professor taught me to question and to share from a place of, "what is the story I *need* to tell? *Only I* can tell?" She taught us to question conditioned epistemological and ontological ways of being (Denzin & Lincoln, 2008; Foley, 2003). She helped me to understand the ways in which my time, not only within the US Military institution, but also within higher education, had taught me to see knowledge production

and generation through one lens—empiricism. I had learned objectivity is valued over subjectivity. *Observation, quantification, replication; the scientific method ruled.*

What this Indigenous woman who taught her students how to ritually dance, write poetry, and share photos and music as ways of producing and sharing knowledge taught us, was about *unlearning*, decolonizing our subject selves and taking up space (Archibald, 2008; Furman et al., 2007; Gubrium, 2009; Joyce, 2005; Szto et al., 2005). It was about seeing what we are not able to see hidden behind the curtain of power, domination, and oppression. It was about seeking little "t" truth (micro) over asserting capital "T" truth (macro) in ways that never fit. It was about finding and sharing voice in ways that evoked emotion, empathy, perspective taking, and collective meaning-making. It was about looking in the mirror and facing our own compliance and participation in systems created by and for certain types of people at the expense of others.

This methodological training complemented my disciplinary training in the field of communication studies, where I learned how the process of interaction and communication among and between others and the self creates identity, meaning, and common unity. In my earliest academic training, I learned autoethnography as a method of inquiry. It was through learning and doing autoethnography that I first fell in love with research.

Autoethnography is a fully subjective research method that privileges the writers' lived experiences as valuable insight into cultural and systemic problems. Adams (2012) said it best when he wrote that autoethnography produces "a story to think and live *with* rather than sterile facts and findings to think *about*" (p. 190). Ellis and Bochner (2000) taught us how *auto* (experiences of the self), are rooted in *ethno* (cultural phenomenon and discourses), which may be seen and understood through *graphy* (systemic description and analysis—the research and writing process). Autoethnography helps us to consider our "social, cultural, political, and personal lives" in a different light (Jones, 2005, p. 767).

As my Indigenous methods teacher taught, autoethnography is a process by which I can do the *unlearning*. It is through autoethnography that I can see, understand, and show how my own personal lived experiences have been shaped and influenced by larger cultural discourses and systems, like the military and higher education. As Ellis and colleagues (2011) taught us, "When researchers do autoethnography, they retrospectively and selectively write about epiphanies that stem from, or are made possible by, being part of a culture and/or by possessing a particular cultural identity" (p. 4). Because I was part of the US Military, I can provide insight into this institution and culture in ways those outside of it never could.

Even more importantly, I can use this insight as a tool for change. Bochner (2000) claimed, "narrative is used as a source of empowerment and a form of resistance to counter the domination of canonical discourses" (p. 271). After leaving my role in a veteran center within academia, after coping with fear of what I can or cannot say, what repercussions I might face if I speak my truth, questioning my decisions, navigating regrets, burning bridges, and building new ones, I now write my story from a place of empowerment. I write my story firmly rooted in self-awareness of my ability to practice, "resistance to counter the domination of canonical discourses" (Bochner, 2000, p. 271). *Lived experience is my power*. *Story is my weapon*. I am guided by the story *only I* can tell. My story is not meant to represent the experiences of others, nor does it capture my own experience fully and completely. It is, however, meant to say something important about the culture in which I am part of as a veteran and as a scholar of veteran studies. Thus, I lead with my lower case "t" truths *only I* can share to explicate hidden, hard to see capital "T" truths about veteran identity and higher education.

BACKGROUND AND CONTEXT

Through my graduate program at the University of Denver, I experienced what it was like to be a student veteran in higher education. I suffered from transition stress, anxiety, depression, and later an eating disorder and addiction. I had separated from the Virginia Army National Guard a few short weeks before moving across the country to Colorado for my Ph.D. program. I was completely unprepared for the psychosocial and adjustment challenges that awaited me as I ended my service and transitioned out of the military. I was among hundreds of thousands of student veterans entering higher education around the country at that time, thanks to education benefits such as the G.I. Bill (Veterans in Higher Education, 2019). I also wasn't the only one struggling with mental health. Rudd et al. (2011) found that nearly half of student veterans on college campuses across the US had thoughts about suicide. *Nearly half of us*. For comparison, roughly 9–10% of US college students seriously considered suicide in 2009 (Hirsch et al., 2011). Veterans in higher education are nontraditional students in need of spaces and support unique to our struggles. For me transition stress was all encompassing, and there was a great need for community and feeling a sense of belonging again after separating from military service.

As many other veterans do, I eventually created a way to continue my service through helping others like me. Within a few months of being in my graduate program, I had committed to focusing my research exclusively on solving

issues impacting military/veteran (M/V) communities. By the time I completed my graduate program 4-years later, I had co-built and led a Student Veterans of America Chapter on our campus, written several papers and given several talks at academic conferences about veteran issues, taught special topics courses on veteran issues, served in leadership positions in the robust Denver veteran nonprofit community, and worked full-time as an Outreach Specialist in the newly established Sturm Specialty in Military Psychology graduate program and outpatient community clinic at the University of Denver's Graduate School of Professional Psychology. I was *busy* healing through advocacy, research, and writing about my pain, lived experiences, and the suffering of my military brothers and sisters. I had a new mission and purpose through this work. I felt a calling to influence research in veteran studies and to help facilitate the merging of theory and practice within this space.

But it was through doing my own research in veteran studies that I had come to identify a great concern and need within this academic space: cultural awareness and competency. My own military service experience was unique and did not fit the dominant narrative of what military service typically looks likes. I did not serve on active duty, and I never deployed to war. Yet I still struggled intensely with transition stress; I had even experienced suicide ideation. In doing my own research on the topics of veteran reintegration, identity, and suicide, *I did not see my lived experience of military service represented* in the existing literature. And it infuriated me.

It hurt to be excluded, to feel invalidated in my pain—pain that was largely about transitionary stress of separating from the military. In 2012 when the first US Department of Veterans Affairs report on veteran suicides released (Kemp & Bossarte, 2013), the corresponding dominant narrative that emerged was that military service was equated to combat experience. Most participants included in human-subjects research evaluating topics like veteran suicides and reintegration, were war veterans. Everyone was looking at combat as a primary factor rather than the psycho, social, and/or environmental factors of joining, serving in, and belonging to the military institution. Very few scholars were considering *culture*.

What I came to understand through my own personal experience with transition stress and my professional experience studying veteran identity and reintegration, was that many researchers doing the research on these issues simply lacked military cultural awareness. This was consequential of the US military civilian divide (Demers, 2011). Many researchers studying these issues were unknowingly asking the wrong questions. The intention of doing work in this space was good, but the impact of lack

of cultural awareness in doing this work often resulted in an unintended impact, exclusion, and misdirection in the work. The lack of insider knowledge was at the core of this exclusionary issue infecting the research in veteran studies, hence the need for insiders as researchers (Hunniecutt, 2022). With cultural outsiders dominating research on veteran issues, it allowed for non-veterans to drive the public perception of veteran identity.

I saw a problem from both research and a praxis perspective. I believed the research on veteran suicides would just go in circles and be slow to evolve without cultural nuances driving it forward. I saw how the lack of cultural insight led to other veterans like me being left out of the conversations and unable to access needed services. I did not have access to resources or support that I needed when I experienced mental health issues during my transition out of military service. I never had access to help when I needed it most because with cultural outsiders primarily driving the work forward, no one knew to ask how simply being part of the military might increase susceptibility to mental health problems post service. The impact of military culture was rarely considered because most people doing the research had never served in the military. Their lived experiences were simply not shaped and influenced by the larger cultural discourses and systems inherent within the US Military.

As someone who intimately knew military culture, I understood there were cultural factors heavily influencing the high rates of suicidality, stress, and other mental health struggles in the veteran communities I inhabited (and for myself). And though I was among a small group, I was not the only researcher seeing these trends and identifying these issues stemming from lack of cultural insider status and cultural awareness. Notably, Higate and Cameron (2006) argued for the importance of military researchers writing (our)selves into (our) work. I agree. Most of my own healing happened through doing autoethnography, through vulnerably and accessibly writing myself into my research. *I lead with story*. The more we (veterans) do this, the more we can provide valuable insight into the issues that those who do not have lived experiences with the military institution could not possibly know. But for our (veterans) lived experiences and stories to influence research, *we need researchers and leaders who will invite us to the table and actively listen*.

As my graduate program neared an end, I knew my future work would be focused on influencing veteran research to privilege veterans' voices. I wrote my Ph.D. dissertation as an autoethnography and I told my story of joining, serving in, and separating from the US Military. I argued for the importance of prioritizing military culture and psychosocial factors in all research within veteran

studies. And I proposed a new conceptualization of veteran identity and military transitionary experiences. I was determined to make a difference, to create a seat at the table for those with lived experience, to unlearn empiricism as the dominant mode of inquiry, and prioritize new ways to create and disseminate knowledge. So, when a new job posting for a research position at a veterans center in a US research university (R1) showed up in my inbox one day, I saw my chance.

VETERAN IDENTITY, PERCEPTIONS, AND CULTURE

The job was a perfect match. I applied, was invited for an interview, and flew out to spend a day meeting with potential new colleagues and seeing the spaces that I would inhabit in the newly created role. When I sat down for lunch and had a chance for more informal conversation, one of the first things I asked was about the name of the veterans center, which included the word "injured"[1] in its title.

"Why is the word 'injured' in the name of the veteran center?" I asked with an eyebrow raised.
   "Oh, that's being worked on and will be changed before you get here. We're aware it's an issue," my future new boss quickly responded.

I accepted this answer, accepted the offer, moved, and started my new position. I was ready to hit the ground running and simultaneously managing a bit of imposter syndrome. It was my first time being on an R1 campus, and I knew the university I was working at was a research powerhouse. I realized a lot of grant-funded research happened there. At the time, I was completely unfamiliar with the research-grant world. What I did know, however, was how to evaluate and build systems. Part of my master's program training was in organizational communication. I knew how to study culture, identify patterns and issues, and create solutions for organizational problems. I had a successful track record of doing this at my previous university and was fueled by that experience as well as my burning desire to make positive change in the lives of veterans.

   The first couple of weeks on the job were full of ambiguity. I was adjusting to a new place, but more than that, this was a new position, and no one seemed to really know what the focus of this new role should be. There was no clear script. My job description was vague and included job duties such as "facilitate interdisciplinary veteran-related research involving campus faculty and external

stakeholders," and "develop and foster relationships with military and research communities at the institution, state, and national level." But the *how* part was essentially left up to me. During one of my first meetings with my new supervisor, he pushed a notebook towards me across a large conference room table. It had a handful of names written on it. "Make veteran research happen here," he instructed. With an apprehensive nod, I assured him I would do my best.

   But first I had to get my bearings. Initially I was not given an office in the veterans center, but was instead assigned an office in another building across campus that housed most of the faculty and administrative offices for the academic college the veteran center was organized within. I quickly learned that the veteran center was part of this academic college within the university, rather than being situated in a central campus office like student services. There was, however, another veteran office in central campus that was a separate entity than the veteran center I worked at. It was an office of veteran support services for military connected students to receive assistance with applying for and receiving military education benefits and to get general support transitioning from the military to campus. It seemed odd to me there were two different and separate veteran spaces on campus.

   The center I worked at was known as the place for severely physically injured veterans to receive support while pursuing their education (hence the title of the center). It was housed in a large building on campus that was designed to exceed Americans with Disabilities Act standards. After only a week on the job I requested an office space in this building. I also made inquiries as to why my supervision did not include the director of the veteran center. Instead, my position was part of a research unit within the academic college and there was no overlap with the veteran center. I knew that if I were to create robust veteran research activity through facilitating interdisciplinary veteran research and cultivating research relationships at the local, state, and national levels, I would need to be part of, within, and close to leadership at the veteran center. Shortly after my inquiry, the then veteran center director was added as a co-supervisor of mine.

   I quickly came to understand that this veteran center operated primarily as a service center for military-connected students on campus. The new position I inhabited was leadership's attempt to ignite more research activity around the center. I learned that a couple years prior to creating the new position I was in, the academic college housing the veteran center hosted a research seed-grant program and awarded several small grants with the intention of jump-starting veteran-centric research. Apparently, this seed-grant program was not successful (as

explained to me by leadership), in that most of the projects did not lead to research publications or larger, external research grant funding. Through reading final reports from the grantees, I learned that researchers who had received seed funding expressed challenges with two issues: the first and most prevalent was a struggle to recruit veteran research subjects for their studies, the second was getting their veteran-focused studies approved by the university's Institutional Review Board (IRB).

My position had been created to solve the issue of recruitment. We had a plethora of brilliant and diverse faculty across campus who were interested in and well equipped to conduct research on issues relevant to the veteran population. And we had this veteran center on campus offering services to student veterans. But the center was part of an academic college that focused on disability research and education. Most of the early research efforts with the veteran center were centered on disability. But the research was unsuccessful because the faculty needed veteran research subjects. The veteran center was *not* full of disabled veterans ready and willing to participate in research, as the administration originally hoped and planned for. After spending some time at the veteran center, I observed that veterans with physical injuries also *were few and far between* on our campus.

Per the literature, this is typical across all US higher education institutions (Vacchi & Berger, 2014). Further, physical injuries are few and far between within the post-9/11 generation of warriors in general. For example, individuals with battle-injury major limb amputations for post-9/11 conflicts between October 2001 and June 2015 totaled 1,645 and *only 16 occurred in 2014* (Fischer, 2015). For comparison, there were 138,197 annual new posttraumatic stress disorder (PTSD) diagnoses within all military branches between 2000 and 2015 (Fischer, 2015). During my years at this veteran center, I only saw *one* student veteran with a limb amputation. This same veteran pictured in a lot of the media and marketing materials for the center. It did not take me long to form a perception that the academic college that controlled the veteran center was driving to define our veteran population, regardless of the reality. This perception only further motivated me to create change through my new role.

After spending a couple of weeks getting my footing in my new position, I decided to conduct a 30-day needs assessment and situational analysis. I was initially instructed to simply make a list and generate a database of veteran subjects who could be recruited for research projects, but I knew from my own lived experience as a veteran that would not work. *We didn't want to be poked and prodded, we wanted to be heard*.

I also knew from my own training in community engaged research it was simply unethical to do research *on* a culture/community without real engagement *with* the community. Instead, I needed to better understand the big picture and fully grasp the barriers to veteran research engagement before I could construct any plan for success. Though I was met with some resistance to this approach, I forged ahead and spent the next month investigating, *ethnography style*.

UNDERSTANDING VETERAN SERVICES AND RESEARCH IN HIGHER EDUCATION

I got to work. I met and brainstormed with former seed grant recipients and analyzed all the literature I could find on recruitment for research with M/V populations. I met with IRB staff, analyzed their protocol and processes for M/V research, and read national policy on protecting military SMs in human-subjects' research. I met with administrators and scholars from other research institutions on campus to gather information and brainstorm about infrastructure development. I met with student veterans to learn about their experiences and perspectives with the veteran center and about participating in M/V research on campus. I looked through old center documents, reports, websites, and social media posts, talked with residents and staff, met with community veterans, and assessed visual artifacts around the center. I analyzed patient-centered models of care and community engaged research practices being designed and implemented throughout the US Department of Veterans Affairs. And finally, I drew from my own personal and professional lived experiences of being a Veteran, a Veteran Studies scholar, and of working in veteran community spaces for several years prior. After 30 days I submitted a report to my supervisor.

The 20-page report included a summary of the need and situation on a national scale, an overview of the need and situation specific to our campus, and my main findings around why veteran research engagement was so challenging. I concluded the report with a proposal for creating a new infrastructure at the veteran center to facilitate transdisciplinary veteran research. I kicked the report off by painting a picture of the national landscape of the increasingly complex challenges and issues faced by military SMs, veterans, and military families (MFs) in today's era. I argued the post-9/11 generation of SMs, veterans, and MFs are presenting unique challenges and issues necessitating large-scale, collaborative initiatives across communities and sectors at local, state, and national levels. I articulated how many of the issues undergirding the current national challenges and the movement to improve quality of and access to care for the current generation can be attributed to several factors.

Of these factors, the most important and relevant is that the post-9/11 conflicts comprise the longest active conflict the US Military has been part of in the history of our nation. The consequences of this multi-decade war are expansive. The post-9/11 generation represents an all-volunteer force, which means that the amount of people who have served in the US Military is smallest now than it has ever been, with less than 1% of the population currently serving (Parker et al., 2017). As such the military-civilian divide in US culture is larger than it has ever been. Given the length and magnitude of the post-9/11 conflicts, SMs and veterans of this era are experiencing polytrauma, comorbidities, and co-occurring health problems and diagnoses at unprecedented rates (Pugh et al., 2014). Consequentially, post-9/11 veterans are more likely than their counterparts to have a service-connected disability, use food stamps, have no health insurance coverage, and no income (Vespa, 2020). Veteran suicide rates are the highest they have ever been throughout our nation's history (Inoue et al., 2021). As veterans' lived experiences become more dire trust in governance continues to decline. Fewer than half (46%) of all veterans say the VA (US Deptartment of Veterans Affairs) is doing an excellent or good job meeting veterans' needs (Parker et al., 2019). And more troubling, less than half of all veterans are enrolled in the VA (Bagalman, 2014).

I went on in my report emphasizing the drastic need for community support and collaboration in addressing veteran issues, and how that related to higher education. I overviewed the role of Veteran Service Organizations (VSOs) at the community level. I further explained how institutions of higher education across the country are also creating and implementing initiatives to contribute knowledge and services in response to the growing needs of M/V populations. I wrote about how as the post-9/11 M/V generation continues to age and phase out of their military service many are cashing in their military education benefits. Student veterans are one of the fastest growing groups of nontraditional students entering into higher education (Falkey, 2016). Across the country universities are rising to be "military-friendly" campuses and aggressively recruiting M/V populations into their institutions. As student veterans transition from military service into higher education and step foot on college and university campuses in masses, institutions are working diligently to assess the needs of this nontraditional population and design and implement programs and services that foster success.

Namely, schools are responding through actions such as: (a) hiring veteran services representatives/coordinators to help veterans apply for and access their education benefits; (b) incorporating student veterans into university human resources, diversity, and inclusive excellence initiatives; (c) designating and providing physical spaces on campus to create and foster M/V community (e.g. student veteran lounges and centers); (d) designing and implementing curriculum that aids student veterans in their transition process from military service to higher education; (e) designing and implementing cultural-competency trainings for campus faculty and staff who interact and work with student veterans; (f) facilitating the development of student veteran campus groups and clubs (e.g. Student Veterans of America chapters); and (g) designing and implementing service, training, and research centers focusing on M/V populations. I explained how our campus was already ahead of most other universities when it came to responding to the unique needs and providing services to military connected populations, but how the emphasis on "injured" was creating barriers to both service and research development at the center.

The next section of my report answered the questions, "Why is the M/V population so hard to access and incentivize for research participation? What do SMs and veterans need to engage in research? What will motivate them to participate?" First, I explained why there are unique difficulties recruiting and retaining health study research participants from military populations. Though human subjects' recruitment is a challenge in research regardless of the target population, it is exacerbated with M/V populations. There are cultural and organizational characteristics relevant to this demographic that are necessary to understand when considering how to best engage them in research. For both actively serving SMs and their families, as well as veterans enrolled in the VA, free high-quality health care may leave this population less powerfully motivated by potential personal health benefits to participate in clinical research. For current SMs logistics challenges are heightened and the law limits the ability to conduct research with them.

M/V populations are considered by regulatory bodies to be an especially vulnerable population, which makes IRB approvals more challenging; disabled veterans are considered a protected population by the federal government. Further, frequent service-mandated health screenings and assessments, and multiple research studies on effects of post-9/11 conflicts have resulted in increased volunteer burnout with this generation. As post-9/11 warriors have experienced more frequent war deployments than any other generation, they are experiencing a high level of burnout (deployments mean more health screenings and assessments before, during, and after rotations) pertaining to assessments/screenings in general.

Given the multi-decade war, the last several years have seen considerable attention and research funding aimed at improving our understanding of the impact of military service on a range of physical and mental health

outcomes. This, in turn, has resulted in a proliferation of research groups and a sizeable number of research studies that compete for access to the relatively small population that makes up the samples of interest within the US Military (Bush et al., 2013). Many veterans have experienced institutional betrayal (in the military) and as a result, can be skeptical to trust and participate in other large institutions. Finally, the military is a collectivist and total institution, which creates distinct cultural elements only insiders are privy too. As such, access to these populations can be particularly challenging for cultural outsiders.

Drawing from both my own experience as a veteran whose lived experience was generally not included in research on reintegration and my professional experience researching veteran identity, suicides, and transitions, I knew *true engagement approaches mattered most* when it came to moving research with this community forward. I explained in my report how M/V populations must be centered in research for it to motivate engagement of this community. M/V populations are likely to be highly motivated to participate in research if they believe it ultimately will benefit their military comrades (Bush et al., 2013). I understood this personally as someone who had dedicated my career to work that helps improve the lives of my military brothers and sisters. *I was a living example of this truth*. The military is a collectivist and total institution (Goffman, 1958), and as such, members are conditioned with values such as selfless service, loyalty, and comradeship. *We want to help each other*.

Through this needs assessment, I had learned that on my campus, researchers interested in pursuing research projects with M/V populations were abundant, diverse, and transcended paradigmatic, ontological, and epistemological boundaries. I had also learned that originally the veteran center had developed its organizational story and mission with an explicit focus on serving *physically injured* veterans. As the academic college the center is home to is a leader in research and service for individuals with disabilities, the structural positioning of the veteran center within that college was well-intended and aligned with the original vision.

The impact, however, was not aligned with the intention. Most challenges M/V populations face today are not a physical injury from war. The focus on physical disability was creating issues for the military connected community on campus and locally. At best I believed it was perpetuating a harmful and inaccurate stereotype and binary of wounded veterans. At worse I believed it was exploiting veterans. Critical inquiry into the needs of student veterans was lacking. Truly listening to and hearing this community was missing. A story of veteran identity

was being driven by cultural outsiders on our campus, and it was causing harm. Critical considerations of the veteran center were drastically needed.

THEORETICAL CONSIDERATIONS

Phillips and Lincoln (2017) proposed Veteran Critical Theory (VCT) to offer an approach "which will give researchers a voice to question and assess structures, policies, and processes that affect Veterans" (p. 660). VCT includes 11 tenants covering aspects of identity, privilege, systems of power, and culture. Though all these tenants are relevant to research in veteran studies, six of them are directly relevant to my experience of working within this veteran center. Tenant 1 claims structures, policies, and processes privilege civilians over veterans. VCT draws attention to the reality that higher education institutions are designed by and for civilians and asks that we recognize and question the innate privilege of being a civilian when creating spaces, programs, and policies for student veterans. Tenant 2 explains how veterans experience various forms of oppression and marginalization including microaggressions.

> Some of these include denial of privacy (assuming one should have free access to a student-Veteran's story), spread effect (the assumption that one disability implies multiple disabilities in student-Veterans), secondary gain (the emotional or social gain that come with treating someone with a disability or perceived disability with respect), and helplessness (assuming student veterans are in constant need or help or assistance). (p. 660)

It is my experience that the veteran center I worked at created oppression and marginalization for student veterans on our campus. Because there were two veteran spaces on campus, one distinctly named as a place to serve "injured" veterans, a binary emerged, and with it, spread effect, secondary gain, and helplessness.

Tenant 7 overviews how veterans are constructed (written) by civilians, often as deviant characters— "media (and some scholarship) tells students, faculty, staff, and administration of colleges and universities who (or more often what) veterans are" (Phillips & Lincoln, 2017, p. 662). In constructing and allocating abundant resources for a veteran center that did not match the veteran community on campus, campus administration was constructing a perception of veterans—telling veterans, as well as civilians, what they are. Tenant 8 posits that veterans are most appropriately positioned to inform policy and practice regarding veterans. Our lived experiences should be heard and understood when creating spaces intended to serve

us, but this was rarely my experience during my time employed with this veteran center.

Relatedly, tenant 9 claims that some services advertised to serve veterans are ultimately serving civilian interests. Phillips and Lincoln (2017) argued that "While there are productive reasons why Veteran-centered orientations, classes, cohorts, learning communities, and even living spaces exist, it is important to consider wholly who is benefiting and how" (p. 663). For example, I question who benefits most from the multimillion-dollar building constructed to serve primarily physically injured veterans on our campus when that population was virtually nonexistent. Finally, tenant 11 suggests veteran culture is built on a culture of respect, honor, and trust. "As policies, procedures, and practices are dissected, researchers and student affairs professionals must recognize how they can capitalize on this culture or how their current agendas may undermine (or be perceived as undermining) this culture" (p. 663). From the very beginning of my time at this veteran center and throughout my nearly four years of employment there, I questioned how leadership within the college, and at the veteran center, was undermining this culture. And as a veteran, I did my best to capitalize on the culture and center it in all my work.

But I wore many hats. My role was to administer veteran research on campus. And in a civilian higher education institution largely disconnected from military culture, it often felt impossible to stay true to myself as a veteran, as someone who centered my own professional goals on advocating for and serving veterans and as a diligent employee of this institution.

CONFLICTING PERCEPTIONS

I had a lot at stake when I started my job with this university veteran center. It was my first job post earning my Ph.D., and I had moved across the country for the position. I was committed to making it work. The position itself was an opportunity for me to learn more about veteran research, grant writing for research, research administration, and infrastructure development within a higher education veteran center. From the beginning I sensed the position would be a steppingstone for me to hone my skills, form a strong network of colleagues, and to become well-versed in veteran studies. The first couple of months, though I perceived many red flags regarding the center mission, organization, and public narrative, things went relatively smoothly. Because it was a new position with no clear script, I was given a lot of autonomy for how to construct the role and achieve the tasks set before me. My initial needs assessment report was well received by leadership, and I was quickly given a green light to move forward with my plans to build and lead a community engaged research

infrastructure for veteran studies on campus. Around my third month on the job, however, this all quickly and abruptly came to a halt.

This next part of my story is the most difficult to write partly because it implicates me, but also because I still struggle in my own process of meaning making around what happened. As mentioned, I was clearly and quickly able to identify the ways in which the veteran center focus on "injured" was causing harm and preventing growth in that space. I was vocal about it and when I was, I felt heard. My leadership acknowledged that our center name was problematic and promised they were working to address it. I knew developing a research infrastructure that fostered research with, not on veterans was going to be difficult, but again, my leadership agreed with my reasoning and my plans for my role. I was prepared to help tackle the issues impacting the veteran center that was now my professional home. What I was not prepared for, however, was being a woman in that space.

During my needs assessment and situational analysis, I also unintentionally tuned in to what I believed to be ongoing problems and tension within the veteran center culture related to issues around gender. Though I only had hearsay to go on, I had learned that two full-time women employees working at the center had both left before I started. One, the former psychologist on staff, had taken another job at a local hospital and the other had apparently transferred to another unit within the college. It was also my perception that there didn't seem to be a strong female student presence at the center either. At first I didn't think much of this because women made up only a small percentage of the veteran population, so there being many more men around the center wasn't out of the ordinary.

But then, on my second week on the job, I received my first personal email from the then center director. It seemed innocent enough at first, just asking how I was adjusting to the new town, the position, and praised me on the work I was doing at the center. It was sent to my personal email address (the one I used when I applied for the job), during a weekend. He was my boss (or one of my supervisors, at least, since I had requested that), so I responded. Over the following weeks he continued to email me and I continued to respond. We had more one-on-one work meetings where we gradually began to discuss nonwork topics just as frequently as we discussed work. Our interactions become less and less professional and more and more flirtatious in nature. One day I received an email inviting me to his house for coffee the following Saturday morning. Though I knew it was against institutional policy, I went, and then engaged in a consensual relationship with him for several weeks that followed. Regardless of how the relationship was initiated and how it unfolded, though it was consensual,

there was still a power differentiation given his supervisory status over me and was thus therefore against institutional regulation. On numerous occasions I suggested we report our relationship, which would have entailed completing a simple form and having my supervision switched to where he would not have authority over my position (which was how my position was originally designed). Before we could do that though, he was unexpectedly removed his position as director of the veterans center.

The removal happened swiftly and came as a complete shock to all center staff, students, and the surrounding community. When I first learned of what happened I was terrified the dean of the college knew about our relationship and it was the cause of this removal. But this was not the case. The dean's public narrative about the change was that it was part of a restructuring of veteran center staff to fulfill the intended purpose of the center, which was to serve student veterans at a high level and to incorporate our research and educational missions into the center's goals and strategies. The then associate director was also reassigned to other duties at that time. In the weeks to follow I felt I had become caught in the crossfires between the former director and the dean, and I continuously received conflicting messages about what was happening. Because of my relationship with the former director, I heard his side of the story. As I understood him, he believed he was removed from his position for challenging the dean about the mission and organization of the veteran center, particularly as it related to the emphasis on injured veterans. This reasoning made sense to me, because I, too, had issues with the ways in which this perception of veteran identity was being fostered and perpetuated by the center. I had seen it in action. Yet I was conflicted, because when a local news article was published about the "restructuring" of the veteran center positions, I learned about an investigation regarding "unfounded allegations" at the center. Though I had no way to confirm what the allegations were about, I wondered about what, if any truth might exist among the unofficial, unknowable murmurings. I wondered this because I had my lived experience to draw from—I was in an unprofessional, intimate relationship with the director. If it had happened with me, could it have happened elsewhere or with others?

The best metaphor I can use to explain what it felt like to work at the veteran center at that time, is that a bomb went off there. It was utter chaos. The competing narratives about the motivations behind the center's restructuring and leadership changes created uncertainty and instability for many, me included. Local news circulated stories about what happened, petitions were signed and dispersed widely, and all the while, I felt sick with confusion, guilt, and fear. After a couple of weeks that felt like months, I

made a very difficult decision to disclose my relationship with the director (that had since ended) to the dean.

I did this for two reasons. My first reason was because I felt I would be silencing myself if I did not. By this point I felt like a complete fool. I was angry, felt used, and by that point, believed that the culture of the veteran center was not only perpetuating a harmful and inaccurate perception of veteran identity, but it was also a toxic culture for women. I did not necessarily place blame on anyone specifically for this toxicity, as I knew this was a systemic issue inherent in military culture and the issues surrounding women in service filtered into veteran spaces. Admittedly, it was difficult for me to get perspective because of my close relationship with the former director. However, I knew there was fault in us going against institutional regulation. I knew I was complicit in the relationship—I had even welcomed it. I also knew he was in a position of authority over me at work, and this made it unethical. I knew it had happened to me and that if I did not come forward about my experience, I would only become part of the problem.

Apart from that, because of what was happening at the center, it had suddenly become incredibly difficult to do my job I had been hired there to do—build a research infrastructure for veteran studies. The success of the research infrastructure to create research with, not on veterans, relied on my ability to form community partnerships and motivate veterans to engage with the veteran center on research projects. The restructuring of positions, ambiguity about what happened, and rumors abound created a host of new (additional) challenges for this work. In part, I knew disclosing the truth of my relationship with the former director would help shift the competing narratives and dissipate the smoke reverberating through the center from the metaphorical bomb that had exploded weeks prior. I reported the relationship to help clear some of the air and it was the most difficult thing I did during my entire time employed at this veteran center.

I wish I could say that was the end of the issues I experienced, but my story was just beginning. It took several months for the restructuring to happen, and with it, several months for the remaining staff to get our bearings again. The first year-or-so that followed, things slowly but surely felt like they were looking up. Shortly after the new interim director was put into place, he and the dean held multiple "listening sessions" with military connected students on campus and in the subsequent spring, the name of the center was changed! The center combined resources and oversight with the other veteran services office on campus. We revised our mission, vision, and values at the center. We got a new website and I got busy fostering veteran research across campus. Over the year to follow, I created the community engaged research infrastructure at the

veteran center, designed and administered a campus seed grant research program, created and hosted an annual Veterans Day symposium, helped generate external research grant submissions on veteran issues among faculty, and facilitated research partnerships with multiple state and national VSOs.

Finally, I was having success with my research efforts on campus. Not without resistance, however. It was difficult to move forward a community engaged approach to veteran research in a system designed for empirical, objective knowledge generation. VCT tenant 9, some services advertised to serve veterans are ultimately serving civilian interests (Phillips & Lincoln, 2017), applied directly to the work I was trying to do in fostering research with, not on, veterans. I was constantly challenged in working with faculty to create research projects that would move beyond seeing veterans simply as research subjects to take surveys or test their interventions on. It was difficult to strike a balance between working with faculty who needed to get research grants and advance their work, and advocate for the veteran voice to be central to veteran research. I was determined though and researchers across campus were eager to apply their areas of expertise to issues impacting this community. New partnerships and research activity around veteran studies were spreading across campus and things were looking up. My leadership took notice because they approached me with discussions and plans to create a new permanent research position at the veteran center. I was asked to write up a tentative job description for what this (my) new position could be.

I did, we met about it, and then the following fall I was told of a change in plans: my current position had no expiration date and everything would remain as is until a new director was hired at the center. Meanwhile because the university publicly publishes the salaries of all employees, my colleagues and I at the veteran center learned that when the former associate director was "restructured" to become an assistant director, his salary was not adjusted for this change. Though he had the same job title as another at the center (the only other woman there), he was making substantially more money than both her and I. I chatted with human resources about my concern for this perceived pay inequity, but my efforts led to no change.

Not long after, leadership informally offered the center directorship to a faculty member on campus. The faculty member respectfully declined. In response, the administration put together a steering committee charged with making recommendations for the restructuring of the new center director position. The committee was comprised of several people who had backgrounds of military service. It felt promising to know those with cultural knowledge

were part of making important administrative decisions for the future of the veterans center. As VCT tenant 8 explained, veterans are more appropriately positioned to inform policy and practice regarding veterans (Phillips & Lincoln, 2017). I began to feel hopeful as I witnessed my leadership creating space for the veteran voice to be heard. After many interviews (including with staff), observation, and research, the steering committee submitted a report with recommendations to split the center directorship into two positions: one over services and operations and the other over research engagement and development. But my hope was quickly diminished, as the advice was not heeded. Oppositional to the advice of the steering committee, a new search for a center director went underway. One viable candidate was interviewed. The candidate was offered the position and respectfully declined. As time transpired, I grew more and more *tired*. I felt like I was on a roller coaster—one moment the leadership in charge (cultural outsiders) were listening to and hearing us (as veterans). It felt like they were truly considering our input when making decisions for our veteran center. Then the next moment, our insights did not matter, were invalidated, or made to feel silenced.

After the restructuring happened, nothing changed to specifically address the culture of the center as it related to gender. Things felt okay for some time; I think we all wanted the chaos and uncertainty to be behind us and we wanted to help the veteran center realize its potential. But as more time passed, I began seeing and noticing things that I thought were undermining a culture built on respect, honor, and trust. For example, it was not uncommon for me to walk into the lobby of the center and overhear a group of male students sitting around talking in degrading and objectifying ways about women's bodies. It was not uncommon for me to hear sexist, homophobic, or racist rhetoric among the students who occupied the center or even, at times, among male staff. And in times where I did hear it, I rarely ever saw my leadership address it. Over time, as these behaviors remained unchecked, I believe the environment grew worse.

But then, before Christmas break, our interim director organized our first staff workshop about "crucial conversations" where a representative from a diversity and inclusion office on campus led us in a discussion about problems related to workplace culture and the nature of microaggressions. As VCT tenant 2 described, veterans experience various forms of oppression and marginalization including microaggressions (Phillips & Lincoln, 2017). As the only female veteran on staff, it was difficult for me to identify and name the intersections of microaggressions related to my identity as a veteran and my identity as a woman working in that space. As previously shared, my

military service experience did not include a deployment to war, nor active-duty time beyond training. Some of my male peers at the center often questioned my own identity as a veteran and worse, encouraged male student veterans at the center to do the same. I struggled to cope with these instances of my military service being questioned and dismissed, while simultaneously dealing with what felt like ongoing objectification of women's bodies and sexuality in that space. Beyond this "crucial conversations" meeting, the interim director sent additional emails about microaggressions, and the dean even had a meeting with me and the other woman on staff about the culture at the center as it related to women. Without filing formal reports, however, very little beyond these actions could be taken.

I understand that with microaggressions there is often a misalignment between intention and impact. I know the interim director never intended to cause a negative impact to the workplace culture or to my lived experiences as a woman working in that space. But as the leadership and administration over the space, the responsibility fell to him and to the dean to educate themselves on military culture and make informed decisions from a culturally competent place. If they had they would know the military institution is considered "hypermasculine" (Schaefer et al., 2021) and is still predominantly comprised of white, heterosexual men. They would know that one in four women report military sexual trauma (MST) and one in two women report sexual harassment during their time in service (Wilson, 2018). They would understand that veteran spaces are inhabited by the same people who were part of military culture, and that military culture is not always inclusive and welcoming for people who are not white, heterosexual men. They would understand it is paramount to include programming and tactics to address the filtration of these cultural elements from military settings to veteran spaces, even in settings as progressive and liberal as higher-education institutions. The difficulties I experienced as a woman working in that veteran center are largely a result of cultural outsiders making decisions about what is best for my community.

And ultimately it's what led to my resignation. In the months leading up to my decision to resign, I was leading the development of our third annual Veterans Day event. Each year we focused on a different topic and that year we had decided to focus on providing education and generating dialogue about MST. Though as a staff at the veteran center we had agreed on the event theme, we had several heated discussions about the nature of the event. The culture of the center already felt like it was in a fragile state; we had no resolution after our "crucial conversations" workshop, we were still without a permanent director (nearly four years after the restructuring happened), and it was the

height of the Covid-19 pandemic. From what I observed, tensions felt high between female and male staff members and in planning an event focused on MST, an experience that drastically and disproportionally impacts women in service, tensions only grew higher.

One day during a virtual staff meeting, I found myself tempted to secretly record the meeting in case I needed proof of the inappropriate conversations and microaggressions that to me felt more like the rule than the exception. It was in that moment when I realized it had gone too far. I had stayed too long. After being on this metaphorical roller coaster for years, I found myself experiencing something that felt beyond burnout. I was defeated trying to survive in a system that is not created by or meant for people like me. VCT tenant 11 explains how veteran culture is built on customs of respect, honor, and trust (Phillips & Lincoln, 2017). By the time I submitted my resignation, I did not feel respected, I did not feel honored in that space, and trust was broken. And the feeling was mutual; I did not respect or trust my leadership. Not only did I not trust them to value me as an employee and part of that team, but I did not trust them to lead our veteran center. I knew I could no longer be part of system in which it is professionally and socially acceptable for those who are not part of my community to lead my community.

Eventually I had nothing left to give. When I resigned I was riddled with anxiety, depression, and rage. I was defeated and deflated. I wanted nothing more than to see this veterans center reach its full potential—to become a place that fostered empathetic community, nurtured generative leadership, and created ground-breaking, transformative research. But instead, between the day it opened its doors to the day I resigned it saw: three different directors, three out of only four women full-time employees quit or transfer out, military connected students have to petition and write letters to campus leadership demanding for a name change so they did not have to associate their military service with "injured," and multiple rejections from viable candidates to take over and lead this space.

CONCLUSION

I believe the veteran center I worked at failed veterans due to a lack of understanding of military culture and ignorance to the consequences of a multi-decade war. The wars led to more psychological injuries, which led to a need for more research to understand the impacts of this conflict and the injuries. This then led to a need for more healing modalities—more treatments, services, and benefits. But these injuries and issues are rooted in and related to the lived experiences of joining, belonging to,

serving in, and separating from the US military during the time this military has been in active conflict longer than it ever has before. If one does not understand the lived experiences of these little "t" truths, how can one ask the right research questions that lead to big "T" truths? How can one provide the best services? How can one even know what we [veterans] need if one is not listening? If one does not *see* this culture, *understand* this culture, *experience* this culture, then how does one lead it?

Less than 1% of the US population serves in the military now, so, the military civilian divide in the US is larger than it has ever been. That means more and more people in positions of power and authority—those making the decisions of what is best in terms of the research, services, and benefits for those of us who have served—must do their due diligence to listen, see, and understand. As leaders of veteran spaces within higher education, one must, as VCT tenant three advocates, avoid making veterans victims of deficit thinking (Phillips & Lincoln, 2017). *We are not all wounded*.

Ultimately, I believe the veteran center I worked at served the institution more than veterans. I believe the perception of veteran identity as being "injured" garnered much donor support and financial gifts to support the multimillion-dollar building that served only a few hundred veterans during my time there (rarely any that were physically injured). This perception that the academic college housing the center was adamant to hold onto is what I believe prevented the center from reaching its potential and serving student veterans in the ways that were needed. For me it boils down to failed leadership. Leadership failed not only to listen to veterans, including both staff and students about what we needed, but neglected to address the hyper-masculine culture that made the center feel like, at least to me, an unwelcoming and exclusive place for nondominant identities. Their failure made the veteran center a place where it felt very difficult to be a woman and especially a woman veteran. If we are not part of the conversation, however pure and innocent one's intention may be, the impact is exclusion, invisibility, and harm.

As I conclude my story and reflect on my time there, it is important to re-emphasize that my story is not meant to represent the story of all those who interacted in this veteran center, of all veteran centers in higher education, or of all veterans in general. It is, however, meant to tell my story of how I believe cultural outsiders aimed to create a perception of veteran identity at the expense of not only millions of dollars, but student veterans themselves, to benefit an institution. It is meant to share my own lived experience combined with research, to say something important about the culture in which I belong.

During my time at this center, there were multiple people across campus who did listen, who advocated for me and for student veterans, and who worked toward incremental and progressive change. It is also worth mentioning that during my time there I developed rapport with the original donor of the veteran center, who is also a veteran, and who repeatedly asked center leadership to focus on offering services more aligned with the post-9/11 generation of veterans, like treating PTSD and preventing suicide. Though those services were part of the center, I believe the overarching narrative of "injured," coupled with the exclusive culture at the center, all stemming from again, cultural outsiders leading and not listening, overshadowed everything else.

After I resigned, wrote that lengthy letter to send to leadership across campus, then decided not to send it, a mentor from campus sent me a TED Talk to watch. She knew I was struggling with whether I should and how to best tell my story. In her TED Talk "Get Comfortable with Being Uncomfortable," Jones (2018) taught us that a professional troublemaker is a truthteller, change agent, and trailblazer. She advised that when speaking truth, do so with three guiding questions: (a) Do I mean it, (b) can I defend it, and (c) can I say it with love?

I was afraid of speaking my truth about my experiences working at this university's veteran center. I questioned many things, most importantly, I questioned both if sharing this story might open myself up to liability, and worse, if sharing my story would even matter, would make any sort of difference. As Jones (2018) said in her talk, I do not do this because I want to, and I do not do it without fear. I do it because I *must*. I mean it when I say veteran research *that is not community engaged* is harmful. I can defend it when I claim higher education administrators *who are not culturally competent on veteran issues* should not lead veteran centers. *I am a veteran*. I have been personally and professionally impacted by both of these systemic issues. And through this story, I share my *righteous anger with love*.

I speak my truth so that my story may influence the decisions, leadership, and governance of systems that impact my community—my brothers and sisters in arms. Post-9/11 military SMs, veterans, and family members are contending with the consequences of the longest war in the history of the United States of America. We need solutions to the problems consequential of our service. We need leaders who will *listen*. We need researchers who will do research *with, not on* us. We need change agents who will advocate for our right to access programs and services to help us heal. We need troublemakers who will speak their truths and share their stories. *We need a seat at the table*.

NOTE

1 This moniker is being used to protect the identity of the center.

CORRIGENDUM

At the author's request, some modifying details have been redacted from this article to improve de-identification and clarify perceptions and perspectives. No substantive changes to the argument in the original article have been made.

COMPETING INTERESTS

The author has no competing interests to declare.

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