VETERAN DISABILITY COMPENSATION
AND THE ARMY PROFESSION:
GOOD INTENTIONS GONE AWRY

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FOREWORD

Through incisive research and analysis, Leonard Wong and Stephen J. Gerras show how rising disability compensation rates reflect the emergence of a culture that includes exploiting the permissive disability process. Unfortunately, capitalizing on a permissive disability system has the potential to threaten societal trust in the military, jeopardize US Army readiness, and encourage an entitlement culture that is eroding the Army’s notions of selfless service—the very foundation of the Army institution. Discussing the unintended consequences of disability compensation is a delicate endeavor because the essence of the entitlement—taking care of our nation’s veterans—must remain inviolable. Nevertheless, the military profession must initiate a conversation concerning the unintended effects of disability compensation.

CAROL V. EVANS
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SUMMARY

For 40 years, from 1960 to 1999, about 8 percent of the veteran population received disability compensation. In 2000 the percentage edged up to 9 percent or 2.3 million veterans. By 2018 the percentage had tripled to 24 percent or 4.7 million veterans. Although many researchers attribute this upward trend to the influx of wounded from the Iraq War and the Afghanistan War, the authors show that favorable legislative action, Department of Veterans Affairs (VA) policy changes, societal developments, and improved information flow enabled and encouraged many more veterans to file for disability. The rise in the number of veterans receiving disability compensation signaled a cultural transformation concerning disability compensation that would eventually spread throughout the US Army and the other services.

The culture surrounding disability compensation gained strength after the 9/11 attacks as it moved from loosely connected groups of veterans to units in the repetitively deployed Army reserve components. Eventually, the culture developed in active units as participants in the VA Benefits Delivery at Discharge program and a surge of retirees in the Department of Defense shared their insights about the disability process with those still in uniform. Underlying the situation is the good-news story that more soldiers and veterans have gained awareness of a valuable entitlement and are understanding the process for obtaining the entitlement. Today, nearly two-thirds of all soldiers depart the Army with a disability rating. Unfortunately, the data also point to less benign implications for the military.
Many of today’s soldiers are exploiting a generous veteran disability compensation system overextended far beyond its original purposes. Three consequences of this exploitation deserve the profession’s attention. First, if the Army is viewed as complicit in encouraging soldiers to capitalize on an overly permissive entitlement, the trust between society and the Army may be strained. Second, rising disability rates may affect readiness should the substantial lifelong annuity of disability compensation be added to the total cost of bringing a soldier onto active duty. Fortunately, these two consequences have yet to occur. Unfortunately, the third consequence, which has already materialized and is the authors’ main concern, is today’s soldiers are reconceptualizing disability compensation as something earned and subsequently owed to them. Soldiers believe they are owed disability compensation—not for a debilitating injury or disease, but the hardships of service as a soldier. Viewing disability compensation as recompense for the sacrifices and selflessness demanded of soldiers allows soldiers to rationalize the exploitation of a permissive disability system. This unsettling development is diluting the profession’s principle of duty and undermining the Army’s concept of selfless service.

The authors propose a two-pronged strategy to address this situation. To reduce the likelihood of using the hardships of service to rationalize capitalizing on a lenient disability system, the Army must minimize any needless sacrifices demanded of today’s soldiers. The recently unveiled Army People Strategy is a step in the right direction. Unfortunately, the financial gain from an easily manipulated disability system will continue to be alluring until the overall VA disability system is
reevaluated and reformed. Because Congress, the VA, and veterans service organizations all have an interest, a voice, and a vote in any reform to the disability system, the Army should request the formation of an independent commission tasked with developing a mutually agreed-upon solution that will address the detrimental impact disability compensation is having on the military profession. This call for reform is driven not by fiscal considerations but by the desire for the Army to remain both an esteemed institution trusted by society and an honorable profession marked by selfless service.
To care for him who shall have borne the battle and for his widow, and his orphan.
—Abraham Lincoln, Veterans Affairs Motto

Our system incentivizes disability, when our system should be incentivizing health and well-being.
—David Shulkin, former Veterans Affairs secretary

I just gotta get one more deployment so I can catch me some of that PTSD disability. But not so much that they take my guns away.
—Interviewed soldier

This monograph analyzes how the noble obligation to care for our nation’s veterans, as espoused by Abraham Lincoln and embraced by the Department of Veterans Affairs (VA), devolved into a system that, while rightfully aiding millions of veterans, is having an unnoticed impact on the military profession.¹ The monograph examines how the intersection of well-intentioned policies, changes in societal and organizational cultures, and soldiers acting as rational

actors has set the stage for unanticipated—and yet totally predictable—detrimental outcomes.  

Many of today’s soldiers are exploiting a permissive veteran disability compensation system overextended far beyond its original purposes. Three subsequent consequences deserve the US Army profession’s attention. First, if the Army is viewed as complicit in encouraging soldiers to capitalize on an overly permissive entitlement, the trust between society and the Army may be strained. Second, rising disability rates may affect readiness should the substantial lifelong annuity of disability compensation be added to the total cost of bringing a soldier onto active duty. Fortunately, these two consequences have yet to occur. The third consequence, however, has already materialized and is our main concern. Today’s soldiers are rationalizing disability compensation as something earned and subsequently owed to them—not for a debilitating injury or disease, but for the hardships of service to the nation. This unsettling development is diluting the profession’s principle of duty, depleting the military’s moral capital, and ultimately undermining the Army’s concept of service.

Interestingly, this study did not identify any villains to be blamed. Our research did not uncover evidence of outright fraud or treachery. In dozens of interviews across the Army, we did not encounter any instances of soldiers violating the law. Nevertheless, our quantitative analysis reinforced by our qualitative research reveals something has changed in soldier attitudes and behavior concerning disability compensation. A policy change that started off as a

2. Unless noted, quotations are from servicemembers interviewed during the course of this study. Special thanks to Colonel John Plunkett for inspiring this analysis.
much-needed correction to an underused entitlement for veterans has developed into a potent organizational culture—a culture that encourages soldiers to exploit a disability system to the point where two-thirds of today’s soldiers receive disability compensation upon departing the Army.

The intent of this study is to prompt the Army to act before the culture surrounding disability compensation becomes a permanent fixture and endangers the health of the Army profession. Prompting the Army to change the culture is precarious because in the end, the essence of the entitlement—taking care of veterans—must remain sacrosanct. In addition, the vast majority of people involved in this study—from the authors, to soldiers reading these pages, to senior military decision makers—have a vested interest in the topic. Veteran disability compensation, by most measures, is the consummate “third rail.”

Undoubtedly, some readers will interpret this study as an attack by callous liberals, stingy conservatives, witless academics, or grumpy boomers oblivious to the sacrifices of those who serve in our nation’s defense. Nothing could be further from the truth. We have spent careers in uniform and have seen up close the harsh costs military service exacts from soldiers and their families. We ourselves receive disability compensation from the VA and believe no disabled veteran should ever be left behind. But we have also listened to the accounts of rank-and-file soldiers, military and civilian health professionals, wounded warriors, and senior leaders in the Army and VA. We have witnessed the growing, pernicious impact unchecked disability compensation is inflicting on the ethos of the profession of arms. This observation as
well as concern for our profession drive this research and analysis.

**A QUICK OVERVIEW**

The VA disability compensation program is intended to provide monthly, tax-free payments to veterans with disabilities resulting from diseases or injuries incurred or worsened during active military service. Disabilities presumed to be related to military service, even though they occur after soldiers have departed the military, can also qualify for compensation. Qualifying conditions include both physical and mental disabilities. Additionally, no statute of limitations restricts how long a veteran can wait before submitting a claim for disability benefits.

The VA disability system rates each service-connected disability on a scale of 0 to 100 percent in 10 percent increments. A veteran with a 10 percent rating receives a monthly check of $142. A 60 percent rating qualifies the veteran for a $1,131 payment, and a 100 percent rating leads to a monthly payment of $3,106. Unlike many federal and private-sector benefit programs, VA disability is unaffected by the income level, employment status, ability to work, or age of the veteran. Most payments continue for the duration of a veteran’s life, though veteran disability ratings may increase or decrease with VA reevaluations.

Although VA disability compensation is relevant to the veterans and members of every service, we focus on the US Army because it is the institution with which we are most familiar and hold most dear. We began our inquiry by obtaining Army personnel data sets and VA disability files from the Defense Manpower Data Center. Analyzing the merged data allowed us
to examine trends across time and subpopulations within the Army.

To obtain the perspectives of the force, we conducted interviews with soldiers—both officer and enlisted—at Fort Hood, Texas; Fort Benning, Georgia; Fort Lee, Virginia; Fort Leonard Wood, Missouri; and Carlisle Barracks, Pennsylvania. Scores of soldiers were interviewed in focus groups or individual sessions lasting approximately 45 minutes. Interviews were voluntary and confidential. Interview audio was recorded, transcribed, and analyzed for themes and trends. We also interviewed civilians and retirees across the Army for their views on disability compensation. Finally, we spoke with senior leaders in the Army and the VA to gain their opinions and policy insights.

HOW WE GOT HERE

The central theme of this monograph is the Army is incurring unforeseen present and future costs to the profession. Before delving into those costs, examining how disability compensation began rising in the first place is worthwhile. As shown in figure 1, we are in the midst of a rapidly changing situation.3

For 40 years, from 1960 to 1999—a time in the nation’s history containing both war and peace—the percentage of the veteran population receiving disability compensation held steady at around 8 percent. In 2000 the percentage edged up to 9 percent, or 2.3 million veterans. By 2018 the percentage had climbed sharply to 24 percent or 4.7 million veterans.\(^4\) In addition to more veterans claiming disability, the amount of disability claimed by each veteran also increased. In 2000, beneficiaries had an average of 2.5 disability conditions and an average disability rating of 33 percent. By 2017, beneficiaries were being compensated for an average of 5.1 conditions and

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averaged a 51 percent disability rating. At first glance, the influx of combat-wounded veterans from the Iraq War and the Afghanistan War emerges as a logical explanation for this trend. According to this reasoning, because today’s wars are resulting in fewer soldiers dying in combat, more are returning home wounded and subsequently disabled. Although improved survival rates have certainly influenced the number of combat-wounded soldiers, closer analysis reveals the reason the growth in disability rates was, and continues to be, driven by more than just an increase in casualties from the wars.

First, if an influx of casualties drives up disability rates, one would expect a similar spike in disability resulting from the casualties of the Vietnam War. Instead, the percentage of veterans receiving disability before, during, and after the Vietnam War remained stable at 8 percent. Second, the percentage of veterans claiming disability started rising months before the 9/11 attacks and years before the invasion of Iraq. By the time the first bombs were dropped in the 2003 “shock and awe” campaign, disability levels were already climbing. Third, the number of post-9/11 veterans receiving disability far exceeds the number of wounded from the wars. About one-million Iraq


or Afghanistan veterans receive VA disability.\textsuperscript{7} To date, 53,000 soldiers have been wounded in combat in the wars in Iraq and Afghanistan—a number that accounts for less than 6 percent of all post-9/11 veterans receiving disability payments.\textsuperscript{8} Finally, the most common conditions for which post-9/11 veterans receive disability include tinnitus, knee problems, hearing loss, lower back strain, and limited motion of an arm. These types of conditions led the Congressional Budget Office to conclude, “rather than arising from combat injuries, the higher disability rates of the veterans who were deployed to Iraq or Afghanistan appear to be related to environmental or occupational factors.”\textsuperscript{9}

If the current wars cannot completely account for the growth in disability rates, then other factors must be at work driving the dramatic change that began in 2000 and continues today. Our analysis shows the sharp increase in disability compensation originated with the confluence of a series of seemingly unrelated developments that created an increasingly permissive environment for veteran disability. This environment emanated from favorable veteran legislation, changing societal attitudes, and improved information flow to veterans.

\begin{itemize}
\item \textsuperscript{7} National Center for Veterans Analysis and Statistics, “Key Statistics by Veteran Status and Period of Service,” n.d., https://www.va.gov/vetdata/docs/SpecialReports/KeyStats.pdf.
\item \textsuperscript{8} Office of the Secretary of Defense Public Affairs, “Casualty Status,” news release, January 11, 2021, 10:00 a.m. (EST), https://www.defense.gov/casualty.pdf.
\item \textsuperscript{9} CBO, Veterans’ Disability Compensation: Trends and Policy Options (Washington, DC: CBO, August 2014), 14.
\end{itemize}
Legislation

In 2000 the context for veteran disability compensation changed dramatically with the passage of the Veterans’ Claims Assistance Act (VCAA). Before the VCAA, the VA routinely rejected disability claims because of insufficient supporting documentation. With the VCAA, Congress specified that the relationship between the VA and veterans was to be nonadversarial in nature, and the VA’s obligation was to assist veterans with the development of their claims. Unlike most other federal agencies, the VA was charged by Congress with a “duty to assist” beneficiaries, rather than merely serving as a gatekeeper to federal benefits. The VCAA was significant because it set the stage for growth in disability by redirecting the VA’s focus toward assisting veterans in the claims process.

Also contributing to favorable conditions for rising disability compensation were policy changes concerning presumptive disability conditions—disabilities presumed to be service-connected, regardless whether the veteran is able to prove it. Exposure to Agent Orange, an herbicide used in Vietnam, is probably the best-known presumption. In 2001 the number of Vietnam veterans claiming type 2 diabetes was zero. Beginning in fiscal year 2002, Congress passed legislation presuming type 2 diabetes to be caused by Agent Orange. By 2003 over 135,000 Vietnam veterans were claiming diabetes. In 2005,


diabetes was the most widely compensated disability among Vietnam veterans.\textsuperscript{12} To date, 14 presumptive diseases, ranging from prostate cancer to Parkinson’s disease, have been associated with Agent Orange.

**Societal Changes**

The increase in veterans filing for disability was also encouraged by shifting societal attitudes toward the military. Since the end of the Vietnam War, when societal regard for the military reached its nadir, America’s trust in the military has gradually increased. The September 11, 2001, attacks and subsequent wars, however, ratcheted public support for the military up to new levels. For example, from 1985 to 2000, except for a brief spike after Operation Desert Shield and Operation Desert Storm, about 65 percent of Americans said they were confident in the military. Following the 9/11 attacks and the nation going to war, the percentage of society expressing confidence jumped up to the mid-70s.\textsuperscript{13} The goodwill extended to the military subsequently spilled over into public attitudes toward veterans. When a recent poll asked how Americans would adjust the federal


budget for veterans’ benefits, an amazing 53 percent of Americans said they would increase spending.\textsuperscript{14}

Another facet of the environment that facilitated a surge in VA disability rates was America’s changing perception of mental health. As awareness of mental health in American society increased in the 1990s and early 2000s, the stigma associated with mental illness lessened significantly. In 1999 the first White House Conference on Mental Health was convened with the stated goal of providing a “signal to our nation that we must do whatever it takes not only to remove the stigma from mental illness, but to begin treating mental illness as the illness it is on a parity with other illnesses.”\textsuperscript{15} Within the military, awareness of mental illness—and, specifically, post-traumatic stress disorder (PTSD)—was also growing. Surprisingly, some of the first indicators came from the Vietnam veteran cohort as disability claims for PTSD began rising. In 2000 91,000 Vietnam veterans were receiving disability for PTSD.\textsuperscript{16} Four years later, the number had increased over 75 percent to 161,000.\textsuperscript{17}


Societal perspectives toward disability in general also changed. Influenced by the goals, rhetoric, and tactics of the civil rights movement, the modern disability rights movement brought about the Americans with Disabilities Act of 1990—the world’s first comprehensive declaration of equality for people with disabilities. By 2000 the Americans with Disabilities Act had made significant advances in reducing the policy and physical barriers preventing the integration of people with disabilities into American society. More importantly, the Americans with Disabilities Act led to the stigma associated with disability being considerably reduced. Though previous generations of veterans might have scoffed at disability compensation because of the stigma of being considered disabled, changing societal views greatly reduced the reluctance of many veterans to file for disability.

Finally, changing societal views that regarded disability as broader than just the inability to work also influenced the environment surrounding veterans. These evolving societal perspectives expanded the concept of disability to include a diminished quality of life or a decline in the range of activities most people enjoy. Although VA disability compensation, by law, is intended to be based “upon the average impairments

18. Department of Justice Civil Rights Division, Enforcing the ADA: Looking Back on a Decade of Progress (Washington, DC: Department of Justice, July 2000).

of earning capacity,” actual practice gradually aligned with changing societal perspectives. Thus, a 2007 Institute of Medicine study pointed out the VA and Congress were implicitly pushing a much broader view of disability by recognizing disabilities that had “little if any effect on ability to work.” A more relaxed definition of disability made disability compensation a potential entitlement for a much larger proportion of the veteran population.

**Information Flow**

Despite a supportive Congress, a more cooperative VA, and an increasingly benevolent society, veteran knowledge of disability benefits and the claims process remained limited in the early 1990s. Mailings, phone calls, and an occasional trip to the closest regional VA office could only do so much in helping a veteran get the proper documents into their claims file. Three key developments in information flow significantly increased the information, assistance, and support veterans received: transition assistance programs, veteran service officers (VSOs), and the World Wide Web.

When the Cold War ended, America was eager to reap the economic peace dividend by shrinking the military. Memories of the painful downsizing after the Vietnam War prompted policies to minimize the detrimental effects of a drawdown. One such policy was the establishment in 1990 of the Army Career


and Alumni Program—later renamed the Transition Assistance Program—which provided guidance and help to soldiers transitioning into the civilian sector. Though previous generations of soldiers had left the Army with little more than a handshake and a train ticket home, the newly formed transition assistance programs eased the soldier’s burden of becoming a civilian during the mandated reductions. In 1991 five sites were established across the Army that provided separating soldiers transition assistance, including a class on VA benefits. By 1998 the program had expanded to 45 locations, allowing thousands of departing soldiers to be introduced to VA disability compensation. The establishment of transition assistance programs provided a platform through which information on disability compensation could be explained, discussed, and distributed to thousands of soon-to-be veterans.

Although transition assistance programs raised awareness of available VA benefits, the complex process of filing a disability compensation claim was still an obstacle for many veterans. The difficulty of filing a claim was not a recent problem. After the Civil War, Congress chartered veterans service organizations to assist veterans struggling to assemble their claims files. Veterans service organizations provided their credentials to Congress and, in return,

Congress provided tax exemptions.\textsuperscript{23} This unique concept of outsourcing VA assistance eventually evolved into trained and accredited VSOs from recognized veteran organizations assisting veterans with their claims and appeals before the VA—all at no cost. In the early 2000s VSOs began to be assigned to military bases, where they were easily accessed by soldiers passing through the newly established transition assistance programs. The VSOs became the embodiment of the VA’s duty to assist: experts eagerly helping veterans to understand the benefits to which they were entitled and to navigate their claim through the VA wickets. Not surprisingly, one veterans service organization recently reported its 27-year decline in membership was finally halted after its VSOs had secured a record $8.3 billion in disability compensation.\textsuperscript{24}

Finally, the introduction of the World Wide Web brought the disability process into the information age. Although the web was established in 1991, vast amounts of information were not available to be retrieved by average Internet users until the late 1990s and early 2000s. For the VA, the web brought transparency and access to information essential to the claims process. Crucial references, such as the disability benefits questionnaires specifying exactly

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what physicians would look for during an exam and
the VA Schedule for Rating Disabilities listing the
criteria used in determining disability rating levels,
became available to veterans, VSOs, and disability
attorneys. (Citing abuse of the system, the VA recently
removed the disability benefits questionnaires from
public view.)^{25} With Facebook debuting in 2004, VA
disability compensation forums emerged that afforded
veterans an almost limitless network for eliciting
advice, voicing complaints, and sharing experiences.
In 2001 12.2 percent of veterans reported using the VA
website to gather information.^{26} By 2010 68.8 percent
of veterans expressed willingness to use the Internet
to obtain information about VA benefits. Of the post-
9/11 veterans, 93.2 percent said the Internet was their
gateway for VA information.^{27}

The coalescence of favorable legislation, societal
changes, and increased information led to a
rectification of the disability rate. The sharp rise in
disability compensation was remarkable considering
the veteran population was, for the most part, a loosely
connected community of individuals, each of whom
was tasked with retrospectively proving a disabling
injury or disease was service-connected. One could
hypothesize a more tightly coupled, highly organized

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^{25} See Jim Absher, “VA Removes Disability Benefits
Questionnaires from Public View,” Military.com, April 3,
2020, https://www.military.com/daily-news/2020/04/03/va-
removes-disability-benefits-questionnaires-publicview.html.

^{26} VA, *2001 National Survey of Veterans (NSV) Final Report*

^{27} Westat, *National Survey of Veterans, Active Duty Service
Members, Demobilized National Guard and Reserve Members, Family
Members, and Surviving Spouses* (Rockville, MD: Westat, October
18, 2010), 75.
population with the ability to proactively prove a connection to service would push the disability claim rate even higher. The post-9/11 use of the Army reserve components (RCs) provided a natural experiment for examining this proposition.

A PREVIEW OF THINGS TO COME

The Army’s RCs—the Army National Guard (ARNG) and US Army Reserve (USAR)—were mobilized for active duty at unprecedented rates with the commencement of the global war on terrorism. Interestingly, when RC soldiers demobilize from an active-duty deployment, they are eligible to file for disability compensation. Thus, repetitive deployments of reserve units presented multiple opportunities for RC soldiers to be evaluated for disabilities. Additionally, RC soldiers receive disability compensation payments while still serving in the RC; they do not have to separate from the military—although payments are suspended for drill days or time spent on active duty. As a result, the post-9/11 RC deployments provide a time-compressed preview of what happens when soldiers still in uniform can proactively prepare for the disability claim process.

Beyond the individual level, the RC deployments also shed light on the impact of organizational culture. Culture, in an organizational context, is “what ‘has worked’ in the experience of a society that [is] worth transmitting to future generations.”

Not surprisingly, disability compensation became embedded into the organizational cultures of many RC units as it was informally examined, analyzed, and

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discussed. Interviews with RC soldiers revealed that units determined what worked in getting disability ratings and passed this information along to unit members. For example, an ARNG soldier described how disability compensation became part of the unit’s deployment process:

When you come back from a deployment and you go back to the armory, your leadership—everybody across the chain of command—is saying, “Go get your VA physical!” You’re entitled to one because you’re switching from Title 10 to Title 32. You’re getting a DD-214 [Certificate of Discharge].

A USAR soldier related how proactively creating a paper trail to prove the service-connectedness of a condition became a routine part of mobilization:

I know that every time we hit [demobilization], there was someone there telling us we must ensure that if we have something like halitosis [foot stomp], or jock itch [foot stomp], or fungal infection [foot stomp], we needed to document it. I went through [demobilization] three times and this happened each time.

One ARNG soldier recounted how the prospect of receiving disability was passed along from soldier to soldier in his unit:

They pick up [disability compensation] from the [noncommissioned officer (NCO)] next to them in formation or from their uncle. Because the majority of the people who are in the National Guard, just like the Army, come from someone who was in the National Guard. In fraternity terms, there are a lot of legacies. And they’re talking about it.
For the veteran community, a progressively favorable environment combined with a much-improved information flow encouraged an upsurge in disability compensation. For mobilized RC units, the effects of organizational culture were added to the mix, and the result was sharp growth in RC disability compensation rates, as shown in figures 2 and 3.29

![Graph showing percentage of serving ARNG soldiers receiving disability compensation](image)

**Figure 2. Percentage of serving ARNG soldiers receiving disability compensation**

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29. Figures 2, 3, 4, and 5 were created with active-duty transaction files, Reserve Common Components Personnel Data System files, VA compensation files, and VA pension files provided by the Defense Manpower Data Center.
The RC experience provided a natural experiment for observing the impact of organizational learning and culture on the disability compensation process. This experiment revealed that units were quick to develop informal norms and processes concerning disability that were passed on to organizational members. Analyzing the data to a deeper level finds that the culture appears to have engulfed all ranks. For example, from 2001 to 2015, the percentage of ARNG officers receiving disability in the ranks of major to colonel jumped from 3 percent to 19 percent. For the same ranks in the USAR, the percentage jumped from 7.8 percent to almost 25 percent.

The RC experience also provides insights into the shifting of disability compensation from a retrospective to a proactive process. For the veteran population, disability claims were submitted after separating from the military. The degree to which a
disability was connected to service was established by paging through years of medical records, searching for proof of a key event, or verifying past exposure to hazardous materials. For the RC population, each deployment presented an opportunity for soldiers to insert confirmatory evidence of the service-connectedness of a disability condition into their medical records before submitting a disability claim.

Unfortunately, with the ability to prepare for a claim, the potent organizational culture surrounding disability sometimes led to undesirable motivations and outcomes. As one ARNG soldier related:

My first [demobilization] was for guarding Washington, DC, with air defense assets after 9/11. We got DD-214s, and a bunch of guys filed for VA disability for sitting in a building in DC. They got it for sleep apnea.

Another RC soldier sarcastically described how a PTSD diagnosis was often a cure-all for the stress of deploying:

You had a tough time because of “combat.” You didn’t have all that mental and emotional stress because your wife left you, is with somebody else, and spent all your money. No, you’re traumatized by guarding the [dining facility] and some rounds came in 800 yards away.

A USAR soldier serving alongside reservists with civilian jobs at the VA recounted some advice passed around their unit:

Take someone who has bad knees as a banker. They may be trying to get some VA disability for that, and it was common for the VA docs or administrators assigned to my unit to advise them: “You know, for the military, you have to do a [physical training] test, but for your civilian
job, you don’t. So just say that you hurt your knees
training for your military service.”

BRINGING THE CULTURE TO THE ACTIVE
FORCE

Despite the steep increase in disability compensation for both the veteran community and the RC, for the average active-duty soldier in the early 2000s, disability compensation was simply not a subject of casual conversation. For most active-duty soldiers, disability compensation was a distant abstraction applicable to veterans—not soldiers still in uniform. This situation changed with several developments that helped import disability compensation cultural norms into the active-duty Army. One mode of transmission resulted from the repeated use of the RC, as described above. With deployed RC soldiers working alongside active-duty soldiers in motor pools, military hospitals, and forward operating bases throughout the world, active-duty soldiers were presented a rare opportunity to discuss disability compensation with someone who had recently experienced—possibly repeatedly—the entire disability process.

Another entry point into the active force for the organizational culture surrounding disability compensation emerged with the establishment of Warrior Transition Units (WTUs). In response to the deplorable conditions revealed by the 2007 Walter Reed Army Medical Center scandal, the Army established WTUs to provide comprehensive health care for injured soldiers as they transitioned either
to civilian life or back to military duty. In addition to health care assistance, WTU soldiers also received counsel on legal and financial matters—including VA disability compensation. Over 72,000 soldiers have passed through WTUs since their inception, with over 40 percent returning to duty in the Army. The soldiers returning to duty bring back to their units both facts gleaned from VA briefings and insights from watching 60 percent of their WTU peers navigate the disability process. One officer described some of the informal advice about the VA exam heard in the WTU:

There were some extremely educated privates and specialists going through the system, and I was like, “Wow, maybe I could learn something from them.” I can recall a specialist telling me how after you get dressed when the provider is still with you, be sure to sit down to put your pants and your footwear back on. Because if you stand up, your provider—even if he’s writing things down—he’s looking at you. So if you’re bending down to put your shoes on and if you just told him this is as far as you can go, he’s going to get you.

Although informal contact with RC soldiers and the dispersion of WTU soldiers throughout the active Army helped raise awareness of disability compensation, the effects were mostly localized throughout the Army. A more instrumental means


of embedding the topic of disability compensation into Army culture was the establishment of the VA Benefits Delivery at Discharge (BDD) program. The BDD program, introduced in 1995 and significantly expanded in 1998, was a predischarge program for soldiers leaving the military within 60 to 180 days. The BDD program streamlined the disability process by combining the military separation physical and the VA disabilities assessment into a single exam.

The BDD program was important because it was intended to allow soldiers to undergo medical examinations and file for disability before leaving the military. Before the BDD program, veterans would have to negotiate the disability claims process after separating from the military—often away from military medical facilities as well as friends and peers. With the introduction of the BDD program, soldiers in transition assistance programs could participate in the VA disability process while on active duty and thus establish service-connectedness for potential disabilities in the remaining months they were in uniform. Although some critics claimed the BDD program was underused—by 2008, claims under the BDD program still constituted less than 5 percent of the annual claims received by the VA—the significant impact of the BDD program was the opportunity for participants to pass on their disability compensation knowledge, experiences, and advice to soldiers back in the barracks.32

Although the BDD program was fielded to reduce the processing time for disability claims, an

32. Examination of the US Department of Veterans Affairs Benefits Delivery at Discharge and Quick Start Programs, 111th Cong. (2010) (statement of Gerald Manar, Deputy Director, National Veterans Service).
An unanticipated consequence was the emergence of disability compensation as a subject of interest to serving soldiers. One interviewed soldier, when asked how she knew so much about the disability compensation process, commented, “You get most of your information from people who have already been through it.” Another soldier provided more specifics:

It’s usually the people that are getting out. . . . Soldiers who are transitioning, they already went through the process and are like, “Okay, well, you know, this is worth this much and this is worth this much. So go get it documented. That way, when it’s time for you to get out, you can get this much as well.”

Another soldier described how participants in the BDD program were often eager to share their VA disability experiences:

So what happens is a soldier comes back and they say, “I just got my VA ratings!” They want to brag about it. “Well, that means I’m getting $2,300 a month for the rest of my life!” Boom! What did you do to get that?!

A senior NCO spoke of the information he was given:

Just in this last year, in the last 12 months, I’ve had three of my best friends retire, and every one of them has said, “Dude, this is what I did when I went through the VA process.”

A junior soldier explained:

I’ve heard others speak of, “Oh, if you do this, or say this, you can get certain percentages for this and that.” And I’m hearing this from people already in the process. They’re not necessarily speaking to me. They’re speaking to each other, other NCOs, or leadership.
The BDD program was significant because it opened the eyes of a large proportion of the active force to the world of disability benefits. For decades disability compensation had been an entitlement addressed after separating from the military. With the BDD program sending out soldiers eager to share about the profitable value of a disability rating and what was needed to qualify for it, soldiers still in uniform began considering disability compensation as part of their total compensation package. Although the average young soldier probably cannot comprehend that a 10 percent disability rating is worth over a half-million dollars (assuming a 23-year-old soldier, a 75-year lifespan, and a 6 percent return on investment), he or she almost certainly can appreciate the value of receiving a monthly check for the rest of his or her life. As foreshadowed by the RC experience, the allure of potential financial gain began leading many soldiers to be proactive in their approach toward disability. As a result, disability compensation gradually shifted from being the VA’s retrospective examination of a soldier’s time in service to a future windfall which soldiers—as rational actors armed with passed-on knowledge—could influence during their time in uniform.

Another development that significantly facilitated the embedding of disability compensation into the culture of the active Army was a change in the federal law addressing military retirees. From 1964 to 2001, to avoid a revolving door in the civil service hiring process, a law was enforced requiring military retirees to wait 180 days after leaving the military before starting a civilian job with the Department of Defense (DoD). After the September 11, 2001 attacks, a national emergency was declared, and the law was waived. As a result, thousands of retirees were hired.
by the DoD. From 2001 to 2014 more than 41,000 military retirees started jobs as DoD civilians. This deluge of recently retired servicemembers brought maturity, expertise, and continuity into the force, but the influx also delivered a cohort of veterans eager to share with active-duty soldiers their recent VA disability experiences. One particularly influential subpopulation of the military retiree cohort is retired senior NCOs.

Retired senior NCOs working as DoD civilians have a special role in bringing awareness of disability compensation into the active force because they have the respect and trust of soldiers. These NCOs have accumulated a considerable amount of knowledge and experience, so their advice and counsel hold more weight than that of barracks lawyers, transition assistance briefers, or VA brochures. These NCOs have an enduring affection for soldiers, so sharing their experience with the disability process, from their perspective, is just another way of taking care of soldiers. As one retired senior NCO in a civilian position commented: “It’s a bond. We stick by each other. We take care of each other. We help each other. We’re a family.” He went on to describe his interactions with soldiers:

On any given day, I probably talk to anywhere from 10 to 30 people a day about disability. Just informal conversations. . . . Let’s say a young sergeant calls. We talk [business], and then I put my first sergeant hat on. We get to talking about the future, when they [will] decide to retire or get out, and the importance of getting

everything medically documented. For success as a soldier and success as a civilian, they need to make sure everything lines up.

With their new experience as civilians, retired senior NCOs now understand life after the military and how retirement or separation—especially for the enlisted ranks—is not as easy as people think. For many retired senior NCOS, disability compensation helps take the financial sting out of retirement for today’s soldiers:

When we get out, we get kicked in the side and get our $1,900-a-month retirement checks. How can I make it a little easier for them? It’s already tough enough to get a job. All these companies say how much they want to hire vets, but when you get out, they want you to start off at $10 an hour. You’re making way more money than that as a first sergeant or sergeant major.

With the active force being influenced by soldiers in the BDD program; senior NCOs working as DoD civilians; and, to a lesser degree, interactions with RC and WTU soldiers, the attitudes of active-duty soldiers toward disability compensation began to change.

THE CULTURE OF DISABILITY COMPENSATION

Not surprisingly, interviews revealed an uneven distribution of the unwritten norms and rules in the culture surrounding disability compensation. First-term soldiers years away from separating from the Army give little thought to life beyond the Army, let alone receiving veterans’ benefits. Nevertheless, many junior soldiers reported being advised to “document everything”—although the rationale for doing so was
not always understood. In the words of one young soldier: “As we go into our careers, we’re always told if you go to the doctor, make sure you get it recorded. But nobody ever says why.”

Eventually, soldiers take in the culture around them and discover that documenting everything is the first step toward receiving disability compensation. A junior soldier described the moment he realized why disability was a popular topic:

You start to go to retirement ceremonies and stuff like that, and you hear, “I’m getting out with 100 percent disability.” You start to piece things together. You look into why is everyone saying these things, and you realize that with disability comes money. Then you start to think, “OK, maybe I have a disability. And if I have a disability, then I want to get paid for it too.”

In the quest to document every medical issue in case it could someday become a disability, one particular process—sick call—has been pushed by the culture into an outsized role. Previous generations of soldiers have used sick call for two reasons: seeking medical treatment for disease or injury or obtaining official excusal from duties. Today sick call has moved beyond attending to the sick, lame, or lazy, and is now a critical first step for soldiers to get any and all ailments entered into their medical records. One soldier described the advice he heard concerning sick call:

It’s like, “Go to sick call, document everything. Put everything on paper. Anything that’s wrong with you, put it on a piece of paper.” It’s just kind of a thing that goes around. It’s word of mouth; it travels quick [sic].
A senior NCO who is now a Department of the Army civilian described the counsel he gives to soldiers concerning sick call:

My theory now that I’m on the other side of retired is, “Hey, go get seen [at sick call]. Go get checked out. Get everything documented. But go get it documented and then get back to your job.”

With the VA disability benefits questionnaires available online, savvy soldiers could look up exactly what needed to be communicated during a sick-call visit to support a future disability claim. For example, one soldier described what to say at sick call about migraine headaches: “Just Google it. See what the symptoms are and say you have them. You can actually look up how many headaches a month you need for each level of disability.”

Of course, as sick call is used increasingly to establish service-connectedness for a potential disability, the risk of overloading the medical system increases. As one NCO pointed out:

I have to continuously go to sick call for the same issue or problem because they see so many people that come in [for disability documentation]. . . . They think you’re faking. After you come six or seven times, then they finally think, “Maybe this guy is serious about being hurt.”

One disability condition commonly addressed in the culture is sleep apnea—probably because a prescription for a continuous positive airway pressure (CPAP) machine brings a 50 percent disability rating. Consequently, sleep apnea provides an illustrative example of the proactive nature of the disability compensation culture. One soldier described the
detailed steps given to him to secure a future disability rating for sleep apnea:

You go to your [primary care manager]. You tell them, “I’m having sleep issues; I’m up every night.” They’ll probably try to give you some sleep meds. You come back and tell them, “This is not working for me.” If you’re going to [Embedded Behavioral Health], you go in there and you say, “Okay, I’m still having problems sleeping. Now it’s interfering with my day-to-day schedule. Like, I can’t focus, I’m falling asleep behind the wheel, or I’m falling asleep at work. Every chance I get, I go to sleep.”

After establishing a documented history, soldiers are advised to seek a referral for a sleep study. Advice received for preparing for a sleep study ranged from “Eat a big meal—like, a big, greasy meal from Burger King” to “Stay up the day before; when your body is so exhausted, you automatically snore . . . 50 percent!” One soldier reported receiving this straightforward guidance: “So when you go to the briefing before you get your sleep study, they’ll tell you all the things NOT to do. DO IT. Plain and simple.”

As soldiers near the end of their enlistment or careers, their attention to disability compensation understandably increases. A soldier’s focus gradually shifts from establishing service-connectedness by documenting all medical issues to understanding the disability process to maximize the soldier’s disability rating. In interviews across the force, soldiers spoke of being advised the disability system can be manipulated by using the right vocabulary and demonstrating the right physical limitations. One NCO was told, “These VA docs that see you—it’s all about wording and flexibility.” Thus, one soldier reported he was advised to use specific examples of the activities of daily living during the VA medical exams:
When the doctor says, “Hey, I see you’ve got a little bit of pain in your knee,” you need to say you have “great difficulty climbing stairs.” You have “excessive pain in the morning.”

Active-duty soldiers reported being coached, but they seldom said they were told to lie outright during the VA disability process. One medical officer explained:

I have never witnessed anybody overtly committing fraud. There’s just a lot of stuff done with a wink and a nod. It’s like, “Let’s just see if we can get a little more icing on the cake. If you use this verbiage, you’ll probably see your disability increase.”

Advice to use the right buzzwords to cue a particular disability rating is often accompanied by counsel on how to approach the VA medical examination. One frequently heard piece of advice is to prepare for the exam by “making it your worst day.” One soldier said: “Some of the best advice I got was do a four-mile ruck march before you go in for your VA appointment. Go in there in pain.”

As for the actual exam, soldiers were often counseled: “Anyone can fool the range of motion. You might be feeling like this, but show them this.” A soldier described the specific guidance he received:

When you go in and do the [range-of-motion] test, the doc will ask you to put your hands on your shoulders. Put your hands up, squint your eyes, and say, “Aaagh, can’t get there!”

In the veteran community, external factors such as presumptive conditions, changing societal attitudes, and increased information flow set the stage for individual veterans to begin filing for more
disability. In the RC, repetitively deployed units developed strong organizational cultures that added to the upward trend. In the active Army, attention to disability compensation was not limited to individuals, as in the case of the veteran population, or deployed units, as in the case of the RC. Instead, disability compensation became a topic that spread across the entire force. The result was the emergence of an Army-wide organizational culture and a subsequent surge in disability compensation for the active Army.

Figure 4 shows the sharp rise in disability ratings for soldiers—both enlisted and officers—separating (not retiring) from the active Army. Several startling observations emerge. In 1998 12 percent of soldiers received disability compensation. By 2017 the percentage of soldiers receiving disability payments had skyrocketed to 62 percent. In 1998 only 2 percent of soldiers received a disability rating of 50 percent or higher. By 2017 a whopping 51 percent were awarded a disability rating of 50 percent or higher. Figure 4 is a graphic illustration of the strength of the disability compensation culture that continues to influence disability rates, even as deployments decrease.
Interviews throughout the Army provided evidence of differences in the distribution of the disability compensation culture across military specialties. Some believed soldiers in administrative and medical specialties were more likely to file for disability because they were more adept with bureaucratic processes in general and more familiar with the disability system in particular. As one interviewed soldier stated: “You see [disability claims] a lot from the smarter, more astute soldiers. It’s typically really bright people that are willing to go through the trouble to run the wickets.”
Interestingly, some believed soldiers in the combat arms were less likely to file for disability because of the stigma of seeking medical treatment. One combat arms NCO stated simply, “We’re brainwashed and stereotyped that if you’re injured and go on sick call, you’re a turd.” An infantry NCO provided more detail on how differences between the combat arms and the “soft-skill” military occupational specialties (MOSs) can explain the situation:

I’m not trying to offend anybody, but medical treatment is pushed more for the soft-skill MOSs. For the combat arms side of the house, it’s mission, deployment, training. Mission, deployment, training. You’re constantly pushing, and if you are labeled as a medical issue, it’ll affect your career. The combat arms are more broken, but the soft-skill MOSs are more documented.

A sergeant major in a “soft-skill” MOS described the situation from the other perspective:

I come from a medical command. And being in a medical command, they most definitely make sure you go on sick call, even to the point where they will escort you. I have never not gone on sick call.

Ordinarily, one would expect soldiers in combat arms specialties—branches characterized by a physical and rigorous lifestyle—to have higher disability rates. To explore the perception soldiers in administrative and medical specialties have higher disability rates because of their savvy and soldiers in the combat arms have suppressed rates because of the stigma of medical treatment, disability ratings were compared for retired enlisted soldiers in each branch. Data analysis supports the perspectives heard in the interviews. Figure 5 groups the branches into the categories of
combat arms, combat support, and combat service support and illustrates the counterintuitive trend of noncombat arms soldiers receiving the same (or more) disability compensation as combat arms soldiers.

For example, in 1998, 32 percent of infantry soldiers retired with a 50 percent or greater disability rating. In the same year, 30 percent of adjutant general corps and 37 percent of medical corps soldiers retired with a 50 percent or greater disability rating. By 2014, 76 percent of retiring infantry soldiers were receiving at least 50 percent disability. For soldiers in the adjutant general corps and medical corps, the percentages had increased to 76 percent and 84 percent, respectively. This trend is also reflected in the RCs, where 11 percent of soldiers in the predominantly combat arms ARNG are receiving disability compensation, compared to

Figure 5. Percentage of retired enlisted soldiers receiving over 50 percent disability by type of branch

For example, in 1998, 32 percent of infantry soldiers retired with a 50 percent or greater disability rating. In the same year, 30 percent of adjutant general corps and 37 percent of medical corps soldiers retired with a 50 percent or greater disability rating. By 2014, 76 percent of retiring infantry soldiers were receiving at least 50 percent disability. For soldiers in the adjutant general corps and medical corps, the percentages had increased to 76 percent and 84 percent, respectively. This trend is also reflected in the RCs, where 11 percent of soldiers in the predominantly combat arms ARNG are receiving disability compensation, compared to
15 percent of soldiers in the mostly “soft-skill” USAR. Though one could hypothesize soldiers in combat support and combat service support roles would have higher disability rates because they are more prone to injury, the evidence leans more toward a stronger disability culture in the noncombat arms specialties.

**IMPLICATIONS OF THE CULTURE OF DISABILITY**

In the previous pages, we presented evidence of a quiet cultural transformation occurring in America’s armed forces. This transformation started in the veteran community with legislative action, VA policy changes, and societal developments enabling and encouraging veterans to file for disability. Repeatedly mobilized RCs then demonstrated how the disability culture could gain strength as it moved from loosely connected groups of veterans to organized units of soldiers. Eventually, the culture emerged in active formations as savvy participants in the BDD program and a surge of retirees in the Department of Defense shared their insights with those still in uniform. Underlying the resulting growth in disability compensation is the good-news story that more soldiers and veterans are gaining awareness of a valuable entitlement and understanding the process for obtaining the entitlement. Unfortunately, the data also point to less benign implications for the military at three levels of analysis.

**The Institution**

At the institutional level, society’s confidence in the military as an ethical profession is imperiled by the military’s inaction toward rising disability
compensation. From squad leaders to senior decision makers, leaders at all ranks are aware of the permissive environment encouraging soldiers to exploit the disability system. For example, during his tenure from 2015 to 2017, former Secretary of Defense Ash Carter observed a disability culture being cultivated in the military’s transition assistance programs. He noted:

I found that these programs basically consisted of short tutorials about how to go on welfare, qualify for unemployment payments, and maximize the number of “disability points” they scored to earn the most benefits from the Veterans Administration. I thought this didn’t serve the institution or the service members well at all.34

Interestingly, Carter groups disability compensation with another entitlement: veteran unemployment compensation. Like disability compensation, spending on veteran unemployment compensation increased dramatically as payments jumped from $230 million in 2000 to over $600 million in 2006. Unemployment claims continued to rise sharply through the Great Recession and, by 2011, unemployment compensation for veterans was costing the government an astonishing $1 billion a year.35 Because each military service reimburses the Department of Labor for veteran unemployment, the Army’s bill for unemployment had risen from $83 million in 2000 to over $515 million in 2011. Confronted with an unsustainable cost and the growing perception


35. CBO, Transitioning from the Military to the Civilian Workforce: The Role of Unemployment Compensation for Ex-Servicemembers (Washington, DC: CBO, May 2017), 3.
of unemployment compensation as an earned benefit (for example, in 2013, 59 percent of all eligible soldiers applied for unemployment), the Army recognized the criticality of reducing unemployment claims.  

To address the situation, the Army partnered with the Department of Labor, the VA, the Small Business Administration, various corporations, and veterans service organizations to provide job training and employment to departing soldiers. Transition assistance programs were revamped, remodeled, and revitalized to better prepare and persuade soldiers to pursue employment instead of applying for unemployment benefits. By fiscal year 2018 the cost to the Army had dropped to a remarkable $98.5 million. Although low unemployment rates and fewer soldiers on active duty certainly contributed to the cost savings, the noteworthy takeaway is that the Army acknowledged skyrocketing unemployment claims were a problem, and action was taken to remedy the situation.

In stark contrast to the impressive efforts to rein in unemployment claims, Army initiatives to counter soaring disability compensation rates have been largely absent. Of course, a key difference between unemployment and disability compensation is that the latter is paid by the VA, not the services. Financially


speaking, the rapid rise in disability compensation has incurred zero cost to the Army, and is therefore the VA’s budget and business. Eventually, however, the American people will question why the cost of disability compensation now exceeds the annual budgets of the Department of State, the Department of the Interior, the Department of Labor, the Department of Transportation, and the Department of Commerce combined. Institutional inaction concerning disability compensation has the potential to rattle society’s perception of the military as an ethical profession.

The Organization

At the organizational level, rising disability compensation may affect future Army readiness as personnel costs are drastically underestimated. The main elements of military personnel costs currently include pay and benefits paid during military service and retirement and health care benefits paid to qualified personnel after leaving the military. In 1984 a law was enacted requiring each service to fund its military retirement benefit liability by placing funds into an accrual account for future financial commitments. Forcing the services to use accrual accounting was intended to improve manpower management by including a measure of future costs—in this case, military retirement—alongside current personnel costs when considering force structure decisions.38

The federal accrual account for future military commitments is $1.6 trillion when military retirement costs are included, but this amount does not take into account the long-term liability of VA disability compensation.39 Because disability compensation is paid as a mandatory appropriation from the General Fund of the Department of the Treasury, the military services are not required to set aside any of their budgets for future disability payments. Given the average annual VA disability payment to a post-9/11 veteran has grown to $17,972, an accrual account including disability compensation would require nearly $3 trillion more from the services.40 For a personnel-centric service such as the Army in which manpower costs make up the preponderance of the budget, the omission of VA disability from the accrual account masks the true cost of bringing a soldier into the Army.

Should the disability compensation liability be included in the accrual account, budget analysts may be tempted to reevaluate the Army’s current force structure—especially with the growing federal budget deficit and the emerging fiscal impacts of battling a pandemic. Such budgetary pressure may lead to adjustments to the Army’s congressionally authorized end strength by either shifting the workforce mix to more civilians or contractors or eliminating positions altogether. The result would be a threat to the Army’s


ability to respond to existing and future threats in the increasingly uncertain global security environment.

The Profession

The institutional and organizational consequences of diminished societal trust and reduced Army readiness share two characteristics. First, both are only potential implications. Nothing has indicated societal trust in the military is currently waning or plans are being formulated to include disability compensation liability in the Army’s accrual account. Second, both implications could be avoided with additional funding. If through divine intervention the nation experienced a series of budget surpluses and federal coffers were filled to overflowing, concern over the cost of disability compensation and the Army’s reluctance to address it would probably dissipate.

The impact of the current disability system at the level of the profession, however, is already occurring and cannot be averted with more resources. Aspects of the culture surrounding disability compensation are eroding the values upon which the Army profession is based. In The Masks of War, Carl Builder’s classic journey into the personalities of each of the military services, Builder writes:

What do the services revere most as a principle or cherish as an ideal? How do the services differ in the altars at which they choose to worship? . . . Altars worshiped are revealing about how the worshipers see themselves and their values.

Tradition, according to Builder, is the altar at which the Navy worships, and technology is the altar at which the Air Force worships. But for the Army, he states:

Of all the military services, the Army is the most loyal servant and progeny of this nation, of its institutions and people. If the Army worships at an altar, the object worshiped is the country; and the means of worship are service.42

The well-intended disability compensation program has engendered a culture of entitlement that is incompatible with the Army’s value of service—the very foundation, as Builder suggests, of the Army profession. The Army encourages this culture by naively expecting soldiers to refrain from exploiting a system in which sleep apnea gains a higher disability rating than a below-the-knee amputation, a soldier can claim as many medical conditions or file as many appeals as he or she chooses, and briefers in transition assistance programs and leaders in the chain of command subtly encourage soldiers to exploit the system.

As with most organizational cultures, the culture surrounding disability compensation is unwritten, intangible, and difficult to assess. Interviews with soldiers of all ranks, however, revealed that the allure of disability compensation is palpable and pervasive, especially for soldiers nearing separation from the Army. As one senior officer commented, “There is a culture of ‘I better get it all before I get out.’” A senior NCO described the culture this way:

42. Builder, Masks of War, 20.
It’s as if someone said there’s free stuff on the shelves of the commissary for whoever wants it. And you rush to the commissary to get your stuff because you don’t know if the shelves will be empty when you get there or if they’re getting ready to close the doors.

Taking advantage of an opportunity to grab “free stuff,” however, contradicts how most soldiers view themselves. This sentiment is antithetical to the lofty notions of honor and virtue that soldiers embrace the day they first put on the uniform. To assuage their consciences of the conflict between the ideal of integrity and the ease of gaming the system, many of today’s soldiers are reconceptualizing disability compensation.

This new conceptualization of disability compensation goes far beyond the original intent of making up for civilian earnings lost because of a service-connected disability. The conceptualization moves past the view of compensation for a future limited by a diminished quality of life or the inability to enjoy everyday activities. Instead, this new view looks to disability compensation as an equitable payment for the trials and tribulations endured while serving as a soldier.

With disability compensation increasingly viewed as reimbursement for the demanding life of a soldier, any soldier can feel justified in claiming disability. As one soldier explained:

We deal with so much crap being in the military day in, day out. . . . Like me, personally, I’ve missed my daughter’s first steps. Missed her first birthday. I’ve missed so much stuff being in the military — I want all that time back. Compensate me for something . . . I deserve it.

A junior soldier provided this perspective:
Of course good people are gaming the system. It’s because this is how we look at it—I busted my ass for this. I’ve been hard on my body. I’ve gone to a whole lot of deployments. For me to get out of the Army and not get anything is wrong.

Viewing disability as payment for the demands of service is an especially attractive rationalization when few are perceived to have accepted the call to serve. As one interviewed soldier opined, “Service gives you a certain entitlement based on the fact that 99 or 97 percent of the population won’t do it.”

Using service as a rationale for taking advantage of a permissive disability system is intuitively appealing to soldiers—especially soon-to-be retirees. In the words of one almost-retired NCO: “It’s good. It’s kinda like payback after 22 years.” A senior officer offered these words to describe the situation: “When you lease a car, you pay for the wear and tear that you put on the vehicle over a period of time. I’ve served for three decades, so now it’s time to get paid for that wear and tear.”

Ironically, though many senior officers and NCOs may feel vindicated in capitalizing on a lax disability system, the idea of extending the disability entitlement to less senior soldiers is not always welcome. One senior NCO stated:

I would almost say it’s justified in the older guys. They’ve been around; they’ve put in the time. The youngsters are just looking for a paycheck. . . . I feel I’m entitled to something because I’ve put in so much. These kids that come in—they haven’t deployed. They haven’t done anything crazy—combat, out-of-the-country stuff. I’m like, “You have a nine-to-five job and you expect to be paid for the rest of your life for that?” It’s because they feel entitled!
Rationalizing the decision to exploit the disability system is grounded in a basic truth: Life in the Army is hard. Two decades of war have created an Army in which everything—including families and personal aspirations—is subordinated to the mission. But life in the Army is also hard because although the Army may be effective, it is seldom efficient. Nearly every soldier can recount frustration with “hurry up and wait” and exasperation with pointless directives emanating from every level of bureaucracy, ranging from battalion to the Department of the Army. Thus, one is not surprised when a soldier asks: “If you got screwed over, wouldn’t you try to get what you can get while the getting’s good? It makes sense. It sounds bad, but it’s reality.”

For some soldiers, disability compensation makes up for the opportunity costs of being a soldier. As one soldier related:

For the enlisted population, what opportunities do we have to get a better education? It leads to spitefulness, a disgruntled employee—an employee that has no other option to have some sort of security [like disability compensation].

One soldier described the thought process of justifying disability as payment for the hardships of service:

Most people get into the service and they want to do the right thing. But at some point, you can have some negative things happen. It can create a negative attitude where you feel like you’re entitled to more than what you are getting, and you get frustrated with what you’ve got. So, you feel justified in going after something that’s a little bit sketchy.
This feeling of being justified led a senior officer to offer this reflection:

I wonder if the disability payment becomes a surrogate for the Army demonstrating to me that it valued my sacrifice and my family’s sacrifice over the last 17 years of war. And I deserve this disability because you [screwed] with me and my family.

Service and the Army Profession

In 1977 sociologist Charles Moskos introduced the institutional/occupational thesis that cautioned the fledgling all-volunteer military about taking on more of the characteristics of an occupation rather than those of an institution. According to the thesis, an institution is “legitimated in terms of values and norms, that is, a purpose transcending individual self-interest in favor of a presumed higher good.”43 Members of an institution (or profession) view themselves as following a calling, and words such as duty, honor, and country describe their motivation to serve. An occupation, on the other hand, is legitimated in terms of the marketplace. Pay, compensation, and monetary inducements describe much of the motivation in an occupation.

Of course, Moskos’s thesis was not that the military was moving from being an institution to becoming an occupation in a literal sense. Instead, his concern was that the all-volunteer military must pay particular attention to its motivations for service. In his words:

Is motivation rational or subjective, oriented toward moral concerns of altruism, strongly affected, perhaps, by internal emotional concerns, or is it efficient and rational, concerned primarily with objective calculations?44

Moskos argued that the military profession rests upon a foundation of service that emanates principally from intrinsic motivations. Although soldiers certainly can be motivated externally—by salary, bonuses, or compensation—the health of the Army profession relies mainly on internal motivations.

Interestingly, the potency of internal motivations can be influenced by the introduction of external motivations. In their development of cognitive evaluation theory, prominent psychologists Edward Deci and Richard Ryan found that “strategies that focus primarily on the use of extrinsic rewards do, indeed, run a serious risk of diminishing rather than promoting intrinsic motivation.”45 Applying this insight to the military profession, George Mastroianni proposed the Army is able to encourage an institutional culture based on superordinate values and beliefs because most soldiers do not have an extrinsic motivator to potentially explain their commitment to military service. He explained:

Military service as a calling that transcends self-interest is an especially compelling explanation when behavior and self-interest may appear quite dissonant. . . . Military service entails sacrifice: [W]hy do we make those sacrifices? If incentives are offered to serve . . . the transcendent component of motivation to


serve may be less necessary as a way of understanding and explaining one’s behavior.46

Thus, as soldiers increasingly view disability compensation as payment for the hardships of service, more intrinsic forms of motivation—such as duty, sacrifice, and selflessness—run the risk of being demeaned and devalued. The result is a subtle shift from an institutional orientation to an occupational orientation to the detriment of the Army profession.

THE WAY AHEAD

Previous studies analyzing disability compensation have decried its $76 billion annual price tag and the toll on the federal deficit or warned of the perverse ability of disability compensation to incentivize veterans to remain sick and out of the workforce.47 This study focuses on the impact of disability compensation on the Army profession. We argued that the trust between American society and its military may be threatened if the Army continues to look the other way while soldiers capitalize on an extremely permissive disability system. We pointed out that future Army readiness may be jeopardized by underestimating the marginal cost of each soldier. And we argued that the disability system is already increasingly prompting soldiers to redefine disability compensation as an


entitlement expected in exchange for enduring the hardships of military service.

The Army finds itself in a difficult situation. Soldiers with disabilities must be cared for and compensated, yet over half of all soldiers departing the Army are now leaving with a disability rating of 50 percent or greater. The Army’s professional ethos is being eroded by rational-actor soldiers taking advantage of a disability system that many have found to be easily manipulated. The initial step in addressing this situation is for Army senior leaders to acknowledge that the culture surrounding VA disability compensation is indeed resulting in inadvertent detrimental consequences. Policy makers must recognize that disability compensation, though well-meaning and benevolent, has unintentionally engendered behaviors and attitudes that contradict the profession’s values.

Because many soldiers use the hardships of service to rationalize gaming the disability system, Army policy makers should identify the aspects of soldiers’ lives that can be altered to eliminate needless stress and aggravation. Sacrifice and selflessness are essential to the Army profession, but many of the sacrifices demanded of today’s soldiers emanate from an engrained organizational attitude that a soldier is a free good. A free good is a resource that is not perceived as scarce and is therefore believed to be available without limit. Viewing soldiers as free goods makes their time and their family relationships expendable. Thus, a two-hour wait to be seen at a medical treatment facility becomes routine; approval of a leave request is held hostage to verification of unrelated administrative data, current weapon qualifications, and up-to-date dental readiness; and
the impact on families of frequent moves, repetitive deployments, and a frenetic pace of life can go unnoticed. Fortunately, the Army unveiled *The Army People Strategy* in October 2019: an effort to shift Army priorities after decades of emphasizing readiness at the expense of soldier and family well-being.\(^{48}\) In a document signed by the secretary of the Army, chief of staff of the Army, and sergeant major of the Army, the intent of *The Army People Strategy* is described as such:

The Army invested significant resources and leadership into restoring readiness and modernizing our Army. However, our readiness focus resulted in an unsustainable operational tempo (OPTEMPO) and placed significant demands on units, leaders, and Soldiers and Families and stress on the force. Therefore, we are prioritizing People as the #1 Army priority. We will strive to reduce OPTEMPO, adjust policies to prioritize People, and reduce requirements to provide leaders additional time to invest in their People.\(^{49}\)

If the intent of *The Army People Strategy* can be accomplished and the Army transforms to a more people-centric organization, unnecessary sacrifices will hopefully be minimized, and their appeal as justification for exploiting the permissive disability system will lessen. Unfortunately, managing a million-person Army will always result in some bureaucratic annoyances. More importantly, the financial gain from an easily manipulated disability system will continue to be alluring until the VA disability system is reevaluated and reformed. Of course, the

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VA disability system is much larger than the Army and even the entire uniformed military. Congress, the VA, and veterans service organizations all have an interest, a voice, and a vote in any reform to the disability system.

The solution to this predicament will require the Army to perform an act that all professions are hesitant to perform: looking to outside assistance. Disability compensation will continue to spiral upwards unless the Army—and the other services—request Congress, the VA, and veterans service organizations to form an independent commission tasked with developing a mutually agreed-upon solution that will address the detrimental impact that disability compensation is having on the military profession. The solution will require all parties to compromise on a plan that will seemingly benefit no one in the near term, and yet assuredly benefit all in the future.

Though the primary task of the independent commission will be to reevaluate the structure and processes of the disability system, true reform will only come with an examination of some of the weightier issues involved with disability compensation. For example, the independent commission should consider questions such as the following:

* What is the purpose of VA disability compensation? If the purpose is no longer to make up for the average impairments of earning capacity, then a new purpose must be defined, and that purpose should circumscribe the system.

* How is VA disability compensation affecting America’s image of veterans? Over 40 percent of employers believe mental illness is a major
impediment when hiring veterans.\textsuperscript{50} Is disability now perceived as an inevitable consequence of serving in the military?

- **What is the extent of the impact, and how robust across all levels of society are factors beyond VA monetary compensation that incentivize veteran disability?** Interviewed soldiers described the allure of incentives for disabled veterans, such as free college tuition for dependents, property tax relief, the waiving of substantial VA home mortgage fees, and waived licensing fees.

The Army profession has an enduring responsibility to care for its veterans. Disability compensation is an essential part of that responsibility. The intent of this study is not to prescribe the reduction or elimination of disability compensation. America’s support for its veterans must remain sacrosanct. Instead, we wish to initiate a conversation from within the Army that acknowledges the detrimental consequences of a disability system that has overreached its intended purposes. Our call for reform is driven not by fiscal considerations, but by our desire for the Army to remain both an esteemed institution trusted by society and an honorable profession marked by selfless service.

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