

# History and the life course: Combat, disability, and work\*

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Running head: Combat, disability, and work

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## **History and the life course: Combat, disability, and work**

**ABSTRACT:** Sociologists have long recognized that historical events, such as wars, depressions, and natural disasters, can affect the trajectories of people's lives and can, more broadly, alter social structure. The following paper examines the effect of a particular type of event, war, on a particular facet of people's lives, their ability to work. The paper uses longitudinal data from the Panel Study of Income Dynamics to test three competing accounts regarding the effect of wars on veterans' lives. The traumatic stress account sees wars as having uniformly negative effects on all service-members who are exposed to combat. The cumulative disadvantage account suggests that combat positively or at least neutrally affects people with greater pre-war status, while negatively affecting those with lower pre-war status. The turning point account suggests the reverse: wars negatively affect those with greater pre-war status, while improving the lot of those with lower pre-war status. The evidence suggests that, with regard to disability and unemployment, the effects of combat are most consistent with the theory of cumulative disadvantage.

Sociologists have long recognized that historical events, such as wars, depressions, and natural disasters, can affect the trajectories of people's lives and can, more broadly, alter social structure (Mills 1961). Along with other scholars, life course theorists have outlined these effects, suggesting that historical context combines with human agency and social relations to shape people's life course trajectories (Elder and Johnson 2002). Accordingly, previous research has examined the impact on lives of various historical events, including the Great Depression and the second World War (Elder 1974; Elder, Shanahan, and Clipp 1994).

The following paper builds on this previous research by examining the effect of a particular type of event, war, on a particular facet of people's lives, their ability to work. It explores the impact of war on the lives of some of those it involves most closely, the soldiers who experience combat. It extends previous research by examining the impact of wars on the lives of people who came of age across a broad sweep of history, the last half of the twentieth century. The paper develops three competing accounts regarding the effect of wars on veterans' lives. The first account sees wars as having uniformly negative effects on all service-members who are exposed to combat. This account sees combat as a traumatic event with long-term ramifications for all who experience it. The paper contrasts this account with two alternative ones, both of which suggest that the effects of wars differ according to the pre-service status of those exposed to them. The cumulative disadvantage account suggests that combat positively or at least neutrally affects people with greater pre-war status, while negatively affecting those with lower pre-war status. The turning point account suggests the reverse: wars negatively affect those with greater pre-war status, while improving the lot of those with lower pre-war status. The paper also considers the possibility that the apparent association between combat and later life

outcomes stems not from the experience of combat but from selection into it. Finally, it considers the possibility that the impacts of wars on people's lives differed in different eras.

The paper uses data from the Panel Study of Income Dynamics, which is one of the premier longitudinal surveys used to examine questions relating to socioeconomic attainment. Despite the fact that the PSID includes relatively detailed information regarding military service, these data have rarely been used to examine questions about veterans. The paper addresses the following questions: Does combat lead to higher rates of disability and unemployment? Do these relationships differ across socioeconomic groups and historical eras? To answer these questions, the paper uses growth curve models based on the PSID data to examine the disability and employment trajectories of combat and non-combat veterans and non-veterans who served in wars stretching from World War II to the first Persian Gulf War.

Previous research has arrived at contradictory conclusions regarding the effects of military service on people's socioeconomic attainment. These effects have been shown to vary with pre-service status, and type and era of service. On the one hand, men benefit from military service if they enter the armed forces with fewer pre-service advantages. Non-white and less educated veterans have improved their socioeconomic status relative to their nonveteran counterparts (Angrist 1998; Bryant, Samaranayake, and Wilhite 1993; Cohany 1992; Teachman and Tedrow 2004). Other research finds a neutral effect of service among nonwhite veterans though a negative effect among whites (Angrist 1990; Cooney, Segal, Segal, and Falk 2003; Teachman 2004). Thus, military service should have reduced the gap between less and more privileged men. On the other hand, men also benefited from military service if they served as officers, who

tend to have higher average educational attainment than enlisted service-members (Dechter and Elder 2004; Hirsch and Mehay 2003; MacLean 2008a). Thus, military service should have increased the gap between more and less privileged men. These contradictory predictions could arise because people serve in different historical contexts. Indeed, previous research suggests that the impact of service also differs by historical era. One of the most important differences between service in different eras has been whether the nation is at war or peace, which affects the likelihood that service-members see combat. Yet no previous research has examined the extent to which the different effects of service stem from combat exposure.

Combat could lead military service to have different effects in one of two possible ways. First, the different effects of military service could stem from differences in the likelihood of combat exposure. Everyone who is exposed to combat could be negatively affected by it. Yet different types of service-members may be more or less likely to see combat. Second, the different effects could stem from the fact that combat affects people differently according to their pre-service status.

### **Wars as traumatic events**

Perhaps the most common view of wars sees them as traumatic events. According to this view, everyone is negatively affected by the experience of combat. Combat veterans have difficulty recovering from the trauma of violence, killing, and death. Regardless of their pre-war characteristics or of the era during which they served, they experience the same psychological trauma. Thus, the difficulties that Odysseus had returning home after the Trojan War have been compared to the difficulties experienced by veterans returning to civilian society after the

Vietnam war (Shay 2002). In turn, Vietnam combat veterans described war in similar terms as did Civil War combat veterans (Dean 1997). Consistent with this view, two separate areas of research suggest that wars may disrupt people's later work lives. One body of research has shown that combat exposure negatively affects veterans' mental and physical health (Elder, Shanahan, and Clipp 1997; Zatzick, Marmar, and Weiss 1997). Another body of research suggests that health affects socioeconomic attainment (Adams, Hurd, McFadden, Merrill, and Ribeiro 2003; Smith 1999). The links between combat and health, on the one hand, and between health and socioeconomic status, on the other, suggest that there should be a link between combat and socioeconomic status. Indeed, preliminary research suggests that wartime veterans have lower socioeconomic attainment in their later civilian lives than do people not exposed to war.

Previous research suggests that combat negatively affects health. Returning troops are both mentally and physically affected by their experiences of war for decades to come. Many combat veterans suffer from post-traumatic stress disorder (PTSD), which consists of the flashbacks and jumpiness that survivors experience after a traumatic event. PTSD is a formal diagnosis that was developed by psychiatrists in response to the Vietnam war (Yager, Laufer, and Gallops 1984). Since then, the diagnosis has been applied to a variety of populations, including survivors of sexual abuse and Cambodian refugees. Early reports suggest that servicemembers deployed to Iraq and Afghanistan were more likely to suffer PTSD than those not deployed (Hoge, Castron, Messer, McGurk, Cotting, and Koffman 2004). Even if they are not formally diagnosed with PTSD, combat veterans suffer worse physical and mental health than do people who did not see

combat. They are more likely to die of all causes, and more likely to commit suicide at younger ages.

Another body of research has shown that health is associated with socioeconomic attainment.

People with more education and income report better health than those with lower education and income, and they live longer (Williams and Collins 1995). Scholars have examined this association according to two competing hypotheses: social causation and health selection.

According to the social causation hypothesis, socioeconomic status causes health differences.

Within limits, increases in income, education, status, and wealth cause health to improve. The

health selection hypothesis posits the reverse, that health causes socioeconomic status. Healthy

people can work more, earn more, and accumulate more wealth than unhealthy people. Research

that demonstrates the importance of health selection has tended to argue for a reciprocal

relationship between health and socioeconomic status. It has suggested both that socioeconomic

status affects health and that health affects socioeconomic status (Smith 1999). Some scholars

have demonstrated that health affects socioeconomic attainment by looking at health shocks that

negatively affect health. They then show that these events lead to lower socioeconomic

attainment (Smith 1999). The following paper examines one such shock: the experience of

combat. It can therefore provide insight into broader questions of whether and how health

affects socioeconomic status.

Indeed, little is currently known about how combat exposure affects veterans' later

socioeconomic attainment. There are apparently only three studies that look at the effects of

combat exposure on veterans' socioeconomic attainment. One study finds no effect of combat on

Vietnam veterans' socioeconomic attainment as measured by years of schooling and occupational status (Vogt, King, King, Savarese, and Suvak 2004). However, the remaining two studies find that combat veterans were more likely than non-combat veterans to have difficulty finding work, to have lost a job, and to be unemployed (Prigerson, Maciejewski, and Rosenheck 2002; Savoca and Rosenheck 2000). In addition, one of the studies finds that combat veterans from the Vietnam era earned less than other veterans from that era who were not exposed to combat (Savoca and Rosenheck 2000). Only one of these studies examines data from combat veterans of a variety of eras, but it does not consider that the effects of combat may differ by era (Prigerson, Maciejewski, and Rosenheck 2002). Nonetheless, these previous findings suggest the possibility that veterans experience wars as traumatic events with consequences for socioeconomic attainment. Together, the findings of previous research lead to the following hypothesis:

*Traumatic stress hypothesis:* The service-members who were exposed to combat were more likely to be disabled and unemployed than the service-members who were not so exposed.

## **Combat and the life course**

While the traumatic stress account implicitly assumes that the effects of combat are uniform, life course research suggests that the effect may differ across eras and groups. Life course researchers have conceived of historical events as affecting people's lives according to two competing accounts. Thus, they see these events as serving either as turning points or as contributing to cumulative advantage or disadvantage. According to the turning point account, historical events can reverse the trajectories of people's lives. They disrupt the normal course of people's lives and divert people from the paths they were following. After an event, people who were on negative trajectories should have better outcomes, while those on positive trajectories should have worse ones than they would have had before it. In this view, service-members who

had more pre-service resources should be negatively affected by combat. Those with fewer pre-service resources should be positively or at least less negatively affected by combat.

While the turning point account suggests that combat most negatively affects people with greater pre-service advantages, the cumulative disadvantage account suggest the reverse. According to this view, combat most negatively affects people with fewer pre-service advantages. The theory of cumulative advantage describes a process in which people who start life with more advantages tend to do better while those who start with fewer tend to do worse over the life course.

According to the theory, then, less privileged people should be more negatively affected by combat exposure than more privileged people. They may have fewer financial and emotional resources to draw on to overcome the negative effects of combat. By contrast, people who grew up in families with more resources should be positively or at least less negatively affected by combat.

There has been very little research looking whether and how combat affects people differently according to pre-service status. However, among Vietnam veterans, men who had pre-service school and emotional problems were more likely to behave in an anti-social fashion and experienced more stress as a result of combat (Gimbel and Booth 1994). If the men who have such pre-service problems are more likely to come from families with fewer resources, this finding is consistent with the cumulative disadvantage account. However, in a sample of juvenile delinquents who were eligible to serve during World War II, veterans who served overseas experienced higher socioeconomic attainment than they would have without such

service (Sampson and Laub 1996). Veterans who served overseas were more likely than those who did not to see combat. Therefore, this finding is consistent with the turning point account. These findings may simply indicate that the role of combat is different in different eras. However, they leave open the possibility that the impact of wars differed based on pre-service status, leading to the following competing hypotheses:

*Cumulative disadvantage hypothesis:* Among service-members who were exposed to combat, those who had fewer pre-service advantages were more likely to be disabled and unemployed than those who had greater pre-service advantages.

*Turning point hypothesis:* Among service-members who were exposed to combat, those who had fewer pre-service advantages were less likely to be disabled and unemployed than those who had greater pre-service advantages.

## **Selection**

While the preceding three accounts all assume that combat affects those who experience it, an association between combat and later life outcomes may also stem from the factors that select people into combat. The people who fight in wars may differ from those who do not. They may have experienced different outcomes regardless of their combat exposure. For example, previous research has shown that the US troops who fought and died in Korea and Vietnam were more likely to come from families and neighborhoods with fewer resources and to have lower AFQT scores (Gimbel and Booth 1996; Mayer and Houtt 1955; Zeitlin, Lutterman, and Russell 1973). By contrast, the Vietnamese troops who died in their war with the US tended to come from families with higher educational attainment (Merli 2000). An association between combat exposure and later outcomes may simply reflect the pre-service differences between those who saw combat and those who did not.

Previous work exploring the effect of military service on socioeconomic outcomes has been concerned with selection into military service (Angrist and Krueger 1994). However, the comparison of veterans and non-veterans masks differences within the veteran population, particularly those between combat and non-combat veterans. In theory, different types of veterans should be more similar to each other than non-veterans are to veterans in terms of their measured and unmeasured characteristics. Indeed, combat veterans tend to be more similar to non-combat veterans than veterans are to nonveterans (MacLean 2008b).

## **Data and methods**

### ***Data***

The following analyses are based on data from the Panel Study of Income Dynamics (PSID), a longitudinal survey of families and individuals, which has been conducted since 1968. The PSID is a unique resource for assessing how the various factors affecting selection into service and combat may have changed over time. It is the only nationally representative survey covering respondents born in a wide range of years that includes measures of pre-service class and race, of military service and combat exposure, and of post-service work and health outcomes. The original PSID sample consisted of a nationally representative sample of 3,000 families and an over-sample of 2,000 low-income families. This original sample has been supplemented by what the PSID refers to as “split-offs,” children of the original sample members, as well as spouses who divorce and form new families.

The analyses draw on information from multiple waves of the survey, focusing on the 1994 wave, during which the male heads of household were asked detailed questions about their military service. During 1994, approximately 7,649 male heads of household responded to the survey, including split-offs and members of the Latino sample. Approximately 74 percent of these respondents had data on all of the analysis variables. The regression analyses are based on unweighted data.

### ***Methods***

The following analyses take advantage of the longitudinal nature of the data to estimate multilevel models that include multiple observations of the respondents at different ages and during different survey years. In contrast to a traditional logistic model, the observations are not assumed to be independent within respondents. The dependence of the observations is captured by a respondent-specific random intercept that captures unmeasured differences between the respondents. In theory, the random intercept captures all omitted characteristics that may cause particular men to be more likely to be disabled or unemployed. In a relatively simple version, the reduced form model is written as:

$$\log it\{\Pr(y_{ij} = 1 | x_{ij}, \zeta_j)\} = \beta_1 + \beta_2 x_{2j} + \beta_3 x_{3ij} + \beta_4 x_{4ij} + \beta_5 x_{2j} x_{3ij} + \zeta_j$$

Where  $y_{ij}$  refers to the outcomes (unemployment and disability) for occasion  $i$  and respondent  $j$ ;  $x_2$  refers to an indicator that captures whether the respondent was exposed to combat; while  $x_3$  refers to age in years; and  $x_4$  refers to cohort measured in birth year. The random intercept that reflects the individual level variation in the outcome is captured by  $\zeta$ . In more complex versions of the model, other time-constant effects, in addition to combat, are added to the model, including race, family structure as a child, and parents' finances. In addition, I test for interactions between combat and the other independent variables.

## **Findings**

Table 1 contains the proportions of veterans and non-veterans who reported having a physical or mental limitation at different ages. Across all cohorts and periods covered by the PSID, veterans were less likely than non-veterans to report having a such a disability. When the men were in their twenties, slightly more than 5 percent of veterans and 6 percent of non-veterans reported being disabled. By the time the men were in their fifties, 19 percent of veterans and 23 percent of non-veterans reported a physical or mental limitation. This pattern is consistent with previous research that shows that the men who entered the military were healthier than the men who did not. In part, at least, the difference stems from selection on the part of the armed forces. The military has traditionally excluded men who have health problems such as asthma and flat feet.

As mentioned above, simply comparing veterans to non-veterans masks differences among veterans. Indeed, combat veterans exhibit similar patterns to non-veterans in terms of their disability. At all ages across all cohorts and periods, combat veterans were the most likely to report having a health limitation. When they were in their twenties, 4 percent of non-combat veterans, while 8 percent of combat veterans reported that they had a physical or mental condition that limited their ability to work. When the men were in their fifties, nearly 23 percent of combat veterans had such a disability compared to only 17 percent of non-combat veterans.

The patterns are similar in the relationship between combat exposure and unemployment.

Unemployment among all groups follows the familiar u-shaped curve. Young men just entering the labor market are less likely to be employed than men in the middle of the work life, but more likely than older men approaching retirement. When the veterans were in their twenties, 13 percent of those who saw combat were unemployed, compared to 11 percent of non-combat

veterans. When they were in their thirties, nearly 10 percent of the nonveterans were unemployed while just 7 percent of the non-combat veterans. By the time they were in their fifties, nearly 20 percent of the combat veterans were unemployed compared to just 15 percent of the non-combat veterans. These patterns suggest that the higher levels of disability among the combat veterans led them to be less likely to work.

Table 2 contains simple growth curve models in which the observations are respondents at each age that they were included in the survey measured according to their odds of reporting a disability. These models are limited to the veterans in the survey. The simple variance components model (not shown) indicates that 73 percent of the variance in disability is between rather than within subjects. Following most previous research on disability, the measure of cohort or birthyear assumes a linear affect of age on the likelihood of disability. Column 1 contains estimates of the effects of combat, along with age, and cohort. Column 2 adds the measures of pre-service status that reflect measured differences between combat and non-combat veterans in terms of their racial and economic family background and family structure. Age had a relatively constant effect on disability across all specifications. Each year of age increased the odds of reporting a disability. Combat also had a large and statistically significant effect on the odds of reporting a disability. Blacks were less likely than non-blacks to report a disability in this sample of veterans. This could be consistent with the view that blacks are positively selected into military service, which has been the conclusion of much research. (Indeed, in the full sample, there is not a statistically significant relationship between race and disability.) In addition, veterans from intact families were less likely to report a disability than were veterans

from non-intact families. Men from rich families or those with average finances were also less likely to report a disability than were those from poor families.

I also tested for interactions between combat and age, cohort, and the background characteristics. Only one of these interactions was statistically significant. While combat veterans were more likely than non-combat veterans to report a disability, the effect of combat on disability did not change as the veterans grew older. Nor did it change across cohorts. There was, however, an interaction between combat and family finances shown in column 3. Net of age and cohort effects, veterans from rich families were less negatively affected by combat than were veterans who grew up in families that were not rich. This finding is consistent with the cumulative disadvantage hypothesis.

Table 3 presents estimates from a similar series of regressions predicting unemployment. The variance components model (not shown) shows that just 54 percent of the variance in unemployment in this sample is measured between rather than within respondents. Previous research and the descriptive results presented above suggest that age affects unemployment in a curvilinear fashion. Therefore, the models include a linear and quadratic term for age. Across all of the columns, combat had a large and statistically significant effect on unemployment. Net of age and cohort effects, combat veterans were more likely than non-combat veterans to be unemployed.

As above, I tested for a variety of other interaction effects between combat and veterans' characteristics. Column 3 includes the interactions between combat and age, race, and family

structure. The interaction with age suggests that the impact of combat on unemployment increased as veterans aged. In addition, black veterans were more negatively affected by combat than were non-black veterans. Veterans from intact families were less negatively affected by combat than were veterans from non-intact families. These findings provide further evidence consistent with the cumulative disadvantage hypothesis.

## **CONCLUSION**

The preceding analyses suggest that people who entered the armed forces with fewer pre-service resources were more negatively affected than were people with more resources by combat exposure. These findings are consistent with the cumulative disadvantage argument. Taken together, they provide additional evidence of the reciprocal nature of the relationship between health and socioeconomic status.

The paper has imposed a narrative structure on the data. According to this structure, service-members experience combat, which affects their physical and mental health. In turn, they are less likely to be able to work. An alternative narrative might suggest that service-members are assigned to combat because they have worse health or other characteristics that make it less likely that they can work otherwise. In this view, the higher rates of disability and unemployment among combat veterans stem not from their wartime experiences, but rather from their pre-war characteristics. The preceding analyses cannot definitively adjudicate between these competing accounts.

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Table 1. Proportions with a disability and not employed by age, veteran, and combat status

	Nonveterans	Veterans	Veterans	
			Non-combat	Combat
Proportion with disability				
Twenties	0.06	0.05	0.04	0.08
Thirties	0.09	0.07	0.06	0.11
Forties	0.15	0.13	0.11	0.17
Fifties	0.23	0.19	0.17	0.23
Proportion not employed				
Twenties	0.13	0.11	0.11	0.13
Thirties	0.10	0.07	0.07	0.09
Forties	0.11	0.08	0.07	0.11
Fifties	0.19	0.17	0.15	0.19

Source : PSID 1968-2003.

Table 2. Random intercept logistic regressions of disability on selected characteristics among veterans

	1	2	3
Combat	0.906*** (0.18)	1.297*** (0.12)	1.098*** (0.17)
Age-18	0.120*** (0.0045)	0.120*** (0.0044)	0.120*** (0.0044)
Birthyear (centered)	0.0394*** (0.0069)	0.0419*** (0.0063)	0.0347*** (0.0054)
Black		-0.694*** (0.18)	-0.476*** (0.12)
Intact family		-1.116*** (0.20)	-0.888*** (0.11)
Parents finances (reference: poor)			
Average		-0.291* (0.16)	-0.530*** (0.16)
Rich		-0.706*** (0.15)	-0.666*** (0.18)
Interaction of combat with parents' finances			
Average			0.631*** (0.22)
Rich			-0.0669 (0.26)
Constant	-7.371*** (0.18)	-5.800*** (0.26)	-5.986*** (0.19)
Random intercept	2.217*** (0.066)	1.948*** (0.054)	1.947*** (0.046)
Observations	27871	27871	27871
Number of respondents	1819	1819	1819

Standard errors in parentheses

\*\*\* p<0.001, \*\* p<0.01, \* p<0.05

Table 3. Random intercept logistic regressions of unemployment on selected characteristics among veterans

	1	2	3	4
Combat	0.535*** (0.13)	0.688*** (0.16)	0.636** (0.27)	0.362*** (0.12)
Age-18	-0.225*** (0.011)	-0.224*** (0.011)	-0.229*** (0.011)	-0.229*** (0.012)
	0.00635*** (0.00024)	0.00634*** (0.00024)	0.00636*** (0.00024)	0.00599*** (0.00026)
Birthyear (centered)	5.529*** (1.16)	4.975*** (1.07)	5.416*** (1.01)	5.352*** (1.09)
Birthyear squared (centered)	-0.00141*** (0.00030)	-0.00127*** (0.00028)	-0.00138*** (0.00026)	-0.00137*** (0.00028)
Black		0.710*** (0.15)	0.662*** (0.14)	0.601*** (0.13)
Intact family		-0.0411 (0.13)	0.0787 (0.16)	-0.00265 (0.14)
Parents finances (reference: poor)				
Average		-0.582*** (0.13)	-0.637*** (0.12)	-0.382*** (0.14)
Rich		-0.432*** (0.14)	-0.461*** (0.15)	-0.434*** (0.15)
Disability				1.793*** (0.076)
Interactions of combat with				
Age-18			0.0131** (0.0061)	
Black			0.388* (0.23)	
Intact family			-0.459* (0.24)	
Constant	-2.425*** (0.14)	-2.252*** (0.19)	-2.192*** (0.21)	-2.054*** (0.20)
Random intercept	1.456*** (0.064)	1.287*** (0.057)	1.295*** (0.052)	1.084*** (0.063)
Observations	29964	29964	29964	27856
Number of respondents	1832	1832	1832	1819

Standard errors in parentheses

\*\*\* p<0.001, \*\* p<0.01, \* p<0.05