

Differences in Adjustment to Civilian Life between Male and Female Canadian Armed Forces Veterans

By Krystal K. Hachey, Kerry Sudom, Jill Sweet, James M. Thompson, Mary Beth MacLean & Linda VanTil

Male/ female differences in military members' transition to civilian life are becoming more important for several interconnected reasons. First, there are many factors that can impact successful transition after returning from combat (Bando, Berg & Pendleton, n.d.), and research has shown that women and men have differing experiences during and after transition. For example, research has suggested that males and females have different health issues and patterns of health care use.¹ However, studies examining the impact of military service on later life have largely focused on males.² Women's roles in the military have attracted researchers' attention, because women's military roles have diversified as their numbers in the military have increased.³ A clearer understanding of the experiences of male and female veterans in transition to civilian life is important to meet the specific needs of veterans and militaries.

Most military members adjust well to civilian life; however, 25% of veterans report a difficult adjustment (MacLean *et al.*, 2014). Military deployment (Huynh-Hohnbaum *et al.*, 2003) and level of preparedness for retirement (Marshall, Matteo & Pedlar, 2005) can affect retiring male and female military members in different ways. As a result, interest has grown in male/ female differences in transition to civilian life among Canadian Armed Forces (CAF) members. For example, male veterans were found to be more likely than female veterans to report an easy adjustment to civilian life (Thompson *et al.*, 2011). In addition, lifetime suicidal ideation was significantly different for male (17%) and female (25%) veterans (Thompson *et al.*, 2014a). Female veterans, compared to men, had higher odds of disability as measured by limitations in activities of daily living (Thompson *et al.*, 2014b) and they also reported a lower quality of life than males (Thompson *et al.*, 2013). It has been shown that female veterans also have a higher prevalence of mental health conditions (Thompson *et al.*, 2012). In light of this, further research examining male/ female differences in transition is needed.

The current study adds to the literature on male/ female differences by focusing on the transition from military to civilian life in the context of the CAF. The following were the research questions:

¹ Cf. Haskell *et al.*, 2011 ; Frayne *et al.*, 2007.

² Greenberg & Rosenheck, 2007 ; Iversen *et al.*, 2005 ; Goldzweig, Balekian, Rolón, Yano & Shekelle, 2006.

³ Bean-Mayberry *et al.*, 2010 ; United States Census Bureau, 2003 ; National Defence, 2012.

1. What are the differences between **male and female** veterans in transition to civilian life experiences, including experiences related to physical health conditions (PHC) and mental health conditions (MHC), level of adjustment, mastery, life stress, and level of satisfaction with elements of civilian life?
2. To what extent is adjustment to civilian life similar for both men and women after adjusting for MHCs and PHCs, mastery, life stress, and satisfaction with job, leisure, family, and finances?

Materials and Methods

The Survey on Transition to Civilian Life (STCL), which was developed based on content from the Canadian Community Health Survey (CCHS; Statistics Canada, 2008), examined former CAF members 2 to 12 years after they had released to civilian life. The STCL was designed to measure the health and the determinants of health of former Regular Force members who had released from the CAF between 1998 and 2007, an estimated population of about 36,000 (MacLean *et al.*, 2011). The questionnaire was administered by Statistics Canada in February and March 2011 using the computer-assisted telephone interviewing system (*ibid.*). The response rate on the STCL was 71.0%; subsequently, 94% (n = 3,154) agreed to share their data with Veterans Affairs Canada and the Department of National Defence, yielding a sample of 2,780 males and 374 females (Thompson *et al.*, 2011). A secondary analysis of the STCL data was performed to examine **male/ female** differences among CAF veterans.

Measures

The STCL addresses a range of measures (Thompson *et al.*, 2011); however, the current study focused on the examination of measures for adjustment to civilian life, PHCs and MHCs, life stress, mastery, and satisfaction with elements of civilian life (i.e., job, finances, leisure, family, and friends).

Demographics

Age and education were included in the analyses, because these demographic factors can play a role in the **male/ female** differences in the veteran population (Frayne *et al.*, 2007). Age was categorized into 11 groups based on **five-year** increments, ranging from 15–19 to 65–69. For education, participants were asked about their “*highest certificate, diploma, or degree completed*” and were given seven choices: less than a high school diploma or equivalent/ high school diploma or a high school equivalency certificate/ trade certificate or diploma/ college, CEGEP⁴ or other non-university certificate or diploma/ university certificate or diploma below the bachelor’s level/ bachelor’s degree/ university certificate/diploma, degree above the bachelor’s level.

⁴ CEGEP (*Collège d'enseignement général et professionnel*) is a post-secondary collegiate education in Quebec.

Adjustment to Civilian Life

Veterans' adjustment to civilian life was assessed using a single item adapted from Spiegel and Shultz (2003): "*In general, how has the adjustment to civilian life been since you were released from the Canadian Forces ?*" The item was rated on a 5-point scale ranging from *very difficult* to *very easy*, which was collapsed into *difficult adjustment*, *neither difficult nor easy adjustment*, and *easy adjustment* for the current study.

Physical and Mental Health Conditions

PHCs were grouped as musculoskeletal (arthritis, back problems), cardiovascular (high blood pressure, heart condition, effects of stroke), respiratory (asthma, emphysema, chronic bronchitis, chronic obstructive pulmonary disease), gastrointestinal (stomach ulcers, bowel disorders), hearing problem, obesity, diabetes, cancer, and chronic pain or discomfort. MHCs included mood disorder, anxiety disorder, depression, and posttraumatic stress disorder. The current study presents whether a participant self-reported a PHC (yes/ no) and how many (0-8), and whether a participant self-reported a MHC (yes/ no).

Life Stress

The question measuring life stress was "*Thinking about the amount of stress in your life, would you say most days are...*", and was rated on a 5-point scale ranging from *not at all stressful* to *extremely stressful*.

Mastery

Defined as an individual's perceived control over life events (Pearlin & Schooler, 1978), mastery was assessed with seven items rated on a 5-point scale, and then summed to obtain a final score of up to 28 for each participant. The 5-point scale ranged from *strongly agree* to *strongly disagree*, to questions such as "*You often feel helpless in dealing with problems of life*" and "*You can do just about anything you really set your mind to*". Those with a total score of 7 or lower were considered to have low mastery and those who scored 23 or greater were considered to have high mastery (Lee, Whitehead & Dubinecki, 2010). These categories were used for the *chi-square* tests, and maintained as a continuous variable for the ordinal regression analysis.

Satisfaction

Satisfaction was measured using a range of items, including "*How satisfied are you with your...: job or main activity/ leisure activities/ financial situation/ relationships with other family members/ your relationships with friends?*". The items were rated on a 5-point scale ranging from *very satisfied* to *very dissatisfied*. For the current study, the 5-point scale was collapsed into *satisfied*, *neither satisfied nor dissatisfied*, and *dissatisfied*.

Analyses

Using the sample data, *chi*-square tests were conducted to probe **male/female** differences across categories, and Kendall's tau was conducted to examine the correlations between all the variables. Using weighted data, which accounted for the complex survey design, prevalence estimates, 95% confidence intervals were calculated, and ordinal logistic regressions were conducted.

Ordinal logistic regression analyses were conducted using the *gologit2* function (Williams, 2006) in Stata version 11.1. The dependent variable was adjustment to civilian life. The first model adjusted for sex (i.e., **male and female**), age, and education. The final model was adjusted for all the independent variables at once. Both models were tested for the assumption of parallel odds ratios for the double comparisons required by the 3-category outcome variable (odds of difficult compared neither or easy adjustment, and odds of difficult or neither compared to easy adjustment) with *autofit* alpha = 0.01. The assumption was not violated for the study variables, unless indicated in the table of results.

Results

Observed Prevalences

As previously mentioned, the observed prevalences concerned veterans released from service 2 – 12 years prior to the survey. Table 1 (*infra*, pp.8-9) presents the comparison of observed prevalences of well-being indicators for males and females veterans.

Demographics

Approximately 1/4 of male (23.2%) and female (28.6%) veterans were between the ages of 45–49, followed by the ages 50–54 (male: 14.7% ; female: 18.4%). A *chi*-square test revealed a significant difference between males and females, $X^2(9, N=3154) = 34.53, p=0.000$; however, individual categories had similar proportions for males and females with overlapping confidence intervals. The majority of male (41.2%) and female (36.9%) veterans had a high school diploma, followed by a college/CEGEP diploma (male: 21.2% ; female: 29.8%), with a significant difference between males and females ($X^2(6, N=3154) = 39.02, p = 0.000$).

Adjustment to Civilian Life

The majority of male (62.8%) and female (54.7 %) veterans indicated that adjustment to civilian life was *easy*; males and females reported similar rates of difficult adjustment to civilian life with overlapping confidence intervals. A *chi*-square test revealed a significant difference between males and females, $X^2(2, N=3154) = 11.01, p = 0.004$.

Physical and Mental Health Conditions

A high proportion of male (82.0%) and female (83.3%) veterans identified the presence of one or more PHCs ; however, no significant differences were found between **male**

and female veterans. Regarding number of PHCs, a high proportion of veterans reported two PHCs (male: 21.2%; female: 28.4%); *chi-square* test revealed no significant differences between male and female veterans across the nine categories. MHCs were reported by approximately one-fourth of male (22.4%) and one-third of female (33.1) veterans and the higher rate in women was significant, $X^2(1, N=3154) = 12.79, p = 0.000$. Co-occurrence of PHCs and MHCs was reported by approximately one-fourth of male (21.5%) and one-third of female (32.6%) veterans and again the difference was significant, $X^2(3, N = 3154) = 18.63, p = 0.000$.

Life Stress

The majority of male (41.7%) and female (44.6%) veterans indicated that most days are *a bit stressful*; *chi-square* test revealed that there was a significant difference between male and female veterans across the 5 categories, $X^2(4, N = 3154) = -32.06, p = 0.000$. The only category without overlapping confidence intervals was *extremely stressful*, but the small cell size generated the note “interpret with caution”.

Mastery

About one-third of male (31.4%) and female (27.3%) veterans reported high levels of mastery. A *chi-square* test revealed no significant differences between male and female veterans on the level of mastery.

Satisfaction with Civilian Life

A high proportion of male (73.7%) and female (69.7%) veterans indicated that they were satisfied with their financial situation, and there was no significant difference between male and female veterans. The majority of male (78.5%) and female (73.1%) veterans indicated that they were satisfied with their jobs or main activities and a *chi-square* test revealed that there was a significant difference between males and females across the 3 categories, $X^2(2, N = 3154) = 13.64, p = 0.001$. However, individual categories had similar proportions for males and females with overlapping confidence intervals. A high proportion of male (75.6%) and female (69.9%) veterans indicated that they were satisfied with their leisure activities. A *chi-square* test revealed that there was a significant difference between males and females across the 3 categories, $X^2(2, N = 3154) = 12.66, p = 0.002$; however, individual categories had similar proportions for males and females with overlapping confidence intervals. In addition, a high proportion of male (89.0%) and female (90.4%) veterans indicated that they were satisfied with their relationships with friends, but no significant differences were found between males and females. A high proportion of male (87.9%) and female (87.2%) veterans were satisfied with their relationships with other family members; no significant differences were found between males and females.

Correlations

Correlations between the variables described above (except number of PHCs) were assessed separately for males and females, using Kendall's tau (data not shown). The highest correlation was found between MHCs and the combination of PHCs and MHCs (Kendall's tau males: 0.875; females: 0.887, $p < 0.01$). Therefore, PHC and MHC co-occurrence was not used in the regression model. All remaining variables had correlations less than 0.56, and were not considered to violate the assumption of independence required for the regression model.

Ordinal Logistic Regression

The first ordinal logistic regression model examined the effect of demographics (age and education) on the observed difference in adjustment to civilian life for males and females. This first model showed that female veterans had lower odds of an easy adjustment than males (OR = 0.74; CI = 0.59 – 0.92, $p = 0.007$), while adjusting for age and level of attained education.

The final ordinal logistic regression model adjusted for all the covariates at once. Female veterans had the same odds of an easy adjustment as males ($p > 0.05$). Age and satisfaction with friends did not change the odds of an easy adjustment ($p > 0.05$). For both female and male veterans, the odds of easy adjustment to civilian life were higher for those with a university degree than those with no high school diploma, and for those with a higher mastery level (Table 2: *infra*, p.10). For both female and male veterans, the odds of an easy adjustment to civilian life were lower for those with a MHC and those with a PHC than those without these conditions (Table 2). For both female and male veterans, the odds of easy adjustment to civilian life were lower for those dissatisfied with their job, leisure, family, finances, and reported life stress (Table 2).

Discussion

This study revealed differences between **male and female** veterans at 2–12 years after release from service on many measures of interest. In particular, fewer women reported an easy adjustment to civilian life. This was not explained by their age or higher level of education. However, adjustment to civilian life was similar for both men and women after adjusting for MHCs and PHCs, mastery, life stress, and satisfaction with job, leisure, family, and finances. This is consistent with findings that female and male veterans had similar rates of difficult adjustment (MacLean *et al.*, 2014).

Previous research, notably in the United States, has examined **male/female** differences in key experiences in civilian life for veterans, such as social support.⁵ The majority of research examining **male/ female** differences in the veteran population has focused on general

⁵ Haskell *et al.*, 2011; Frayne *et al.*, 2007.

and mental health, as well as health care utilization (Haskell *et al.*, 2011; Frayne *et al.*, 2007). This study addressed some of the research gaps by examining chronic health conditions and social elements within the same study of **male and female** CAF veterans.

More women reported mental health issues, and these results are in line with some past research showing that the prevalence of mental health problems is greater among female than male veterans (Cromptoets, 2011). These differences are also apparent in the retired civilian population (Afifi, 2007). Therefore, higher levels of mental health issues in women are not unique to the military. Health-related issues can greatly impact transition experiences by affecting quality of life (Teh, Kilbourne, McCarthy, Welsh & Blow, 2008).

For both men and women, easier adjustment to civilian life was associated with having a university degree, and higher levels of mastery. This may be due to the fact that level of education can impact earning potential, which can also affect financial stability (Kim & Moen, 2002). For both female and male veterans, the odds of an easy adjustment to civilian life were lower for those with a MHC and those with a PHC than those without these conditions (Table 2). Irrespective of being male or female, the odds of easy adjustment to civilian life were lower for those dissatisfied with their job, leisure, family, finances, and those who reported high life stress.

CAF members' satisfaction with elements of their social environment was found to be significantly associated with ease of adjustment to civilian life, a finding that compares with previous research (Kim & Moen, 2002). Kim and Moen (2002), for example, found that social support is a resource that can greatly affect transition experiences. In addition, findings may depend on whether social support is investigated as availability of support, quality of support, or satisfaction with support ; which in the case of the present study was satisfaction with specific types of support.

Mastery was significantly associated with adjustment to civilian life, suggesting its importance in successful transition experiences. This is particularly important, as mastery refers to the perceived control over adverse life events (Pearlin & Schooler, 1978), which can include transition experiences. Therefore, it may be beneficial to further examine this personal resource and to support self-efficacy in CAF members' transition experiences.

There were several limitations to the study including the cross-sectional nature of the data, the use of self-report data, and the fact that only CAF Regular Forces veterans released over a 10-year period were examined. As well, although we were limited in the length of the survey, it is possible that some constructs, especially adjustment to civilian life may be under-represented by using brief measures. Despite these limitations, the current study provides an initial examination into the differences between male and female veterans and their experiences in transition. There is a need for future research to help identify specific resources that may be needed for males and females in that transition.

Conclusion

The majority of both female and male CAF veterans adjusted well to civilian life, and women were less likely to report an easy adjustment than men. There was no difference in the likelihood of easy adjustment for men and women when simultaneously accounting for age, education, PHCs or MHCs, life stress, mastery and dissatisfaction with aspects of life or social relationships. This indicates that differences between men and women in those factors may differentially mediate difficulty in adjustment to civilian life. Further research is needed to determine how best to assist the 25% of **male and female** veterans that have a difficult adjustment to civilian life, with attention to similarities and differences between **male and female** veterans.

Appendix

Table 1: Prevalences of Indicators of Well-Being for Veterans, by **Male and Female**.⁶

Indicator	Category	Total		Male		Female	
		%	95% CI	%	95% CI	%	95% CI
Age	20-24	4.5	3.6–5.6	4.8	3.9–6.0	2.2	1.0–4.9
	25-29	11.3	9.9–12.8	11.3	9.8–12.9	11.0	7.8–15.4
	30-34	9.5	8.3–10.9	9.3	8.0–10.8	11.0	7.9–15.2
	35-39	8.9	7.7–10.2	8.9	7.7–10.3	8.6	5.8–12.5
	40-44	9.9	8.9–11.0	9.8	8.7–11.0	10.5	7.6–14.2
	45-49	23.7	22.3–25.4	23.2	21.6–24.9	28.6	23.9–33.7
	50-54	15.1	13.9–16.4	14.7	13.4–16.0	18.4	14.4–23.2
	55-59	9.1	8.1–10.2	9.5	8.4–10.7	6.1†	3.9–9.3
	60-64	7.1	6.2–8.1	7.6	6.6–8.7	3.6†	1.9–6.5
65-69	0.8	0.6–1.2	S		S		
Education	Less than a high school diploma	6.8	5.9–7.8	7.3	6.3–8.4	3.0	1.6–5.6
	High school diploma or equivalent	40.7	38.8–42.6	41.2	39.1–43.2	36.9	31.7–42.4
	Trade certificate	9.6	8.5–1.9	10.3	9.1–11.7	4.4†	2.6–7.4
	College/CEGEP diploma	22.2	20.6–23.9	21.2	19.5–23.0	29.8	25.0–35.1
	University certificate or diploma	4.3	3.6–5.1	4.1	3.4–5.1	5.2†	3.2–8.4
	Bachelor’s degree	10.4	9.2–11.7	9.9	8.6–11.3	14.3	10.6–18.9
University degree (Master, PhD)	6.1	5.2–7.1	6.1	5.1–7.2	6.4†	4.0–9.9	
Adjustment to Civilian Life	Difficult adjustment	25.3	23.8–26.9	25.1	23.4–26.8	27.3	22.9–32.2
	Neither difficult nor easy adjustment	12.7	11.6–14.2	12.2	10.9–13.6	18.1	14.1–22.9
	Easy adjustment	61.8	60.0–63.6	62.8	60.8–64.7	54.7	49.1–60.1

⁶ Table presents weighted population estimates and the associated 95% confidence intervals (CI). Legend : **S** = suppressed owing to small sample size, consistent with Statistics Canada guidelines ; † = Interpret with caution.

Indicator	Category	Total		Male		Female	
		%	95% CI	%	95% CI	%	95% CI
PHC	No	17.9	16.3–19.6	18.0	16.3–19.8	16.7	12.9–21.7 3
	Yes	82.2	80.5–83.7	82.0	80.2–83.7	83.3	78.3–87.4
Number of PHCs	0	17.6	16.3–19.6	18.0	16.3–19.8	16.7	12.6–21.7 3
	1	19.3	17.3–21.0	19.2	17.5–21.0	20.5	16.1–26.8
	2	22.0	20.4–23.6	21.2	19.5–22.9	28.4	23.6–33.7
	3	20.6	19.1–20.2	20.8	19.3–22.5	18.4	14.5–23.1
	4	11.9	10.8–13.0	12.1	11.0–13.4	9.8	7.1–13.4
	5	6.1	5.4–6.9	6.3	7.1–13.4	4.7†	3.0–7.5
	6	1.8	1.4–2.2	S		S	
	7	0.5	0.4–0.8	S		S	
MHC	No	76.3	74.8–77.7	77.6	76.0–79.0	66.9	61.6–71.7
	Yes	23.7	22.3–25.2	22.4	21.0–24.0	33.1	28.3–38.4
Combination of PHC and MHC	No PHC or MHC	16.8	15.2–18.5	17.0	15.4–18.9	14.9	11.0–19.9
	PHC but no MHC	59.3	57.3–61.2	60.4	58.4–62.5	50.7	45.0–56.3
	MHC but no PHC	1.2	0.8–1.8	S		S	
	PHC and MHC	22.8	21.4–24.2	21.5	20.1–23.0	32.6	27.6–37.9
Life Stress	Not at all stressful	12.3	11.0–13.6	12.7	11.4–14.2	9.0	6.2–12.9
	Not very stressful	24.5	22.8–26.3	25.0	23.2–26.9	20.4	16.2–25.5
	A bit stressful	42.0	40.1–44.0	41.7	39.6–43.7	44.6	39.1–50.2
	Quite a bit stressful	17.9	16.5–19.4	17.6	16.1–19.2	19.9	15.8–19.4
	Extremely stressful	3.3	2.8–4.0	3.0	2.4–3.7	6.1†	4.2–8.7
Mastery	Low mastery	2.0	1.6–2.5	S		S	
	High mastery	30.9	29.1–32.8	31.4	29.5–33.4	27.3	22.4–32.7
Satisfaction with Job or Main Activity	Satisfied	77.8	76.2–79.3	78.5	76.8–80.1	73.1	68.1–77.5
	Neither satisfied nor dissatisfied	10.5	9.3–11.7	10.0	8.9–11.3	13.6	10.3–17.8
	Dissatisfied	11.7	10.6–13.0	11.5	10.3–12.8	13.3	10.3–17.1
Satisfaction with Leisure Activities	Satisfied	75.0	73.3–76.5	75.6	73.9–77.3	69.9	64.8–74.5
	Neither satisfied nor dissatisfied	11.4	10.2–12.7	11.0	9.7–12.3	14.7	11.3–18.9
	Dissatisfied	13.7	12.5–14.9	13.4	12.2–14.7	15.4	12.2–19.4
Satisfaction with Finances	Satisfied	73.2	71.5–74.9	73.7	71.8–75.5	69.7	64.4–74.5
	Neither satisfied nor dissatisfied	11.6	10.4–12.9	11.5	10.2–12.9	12.2	9.0–16.3
	Dissatisfied	15.2	13.7–16.7	14.8	13.4–16.4	18.8	14.3–22.8
Satisfaction with Family Members	Satisfied	87.8	86.6–88.9	87.9	86.6–89.1	87.2	83.3–90.3
	Neither satisfied nor dissatisfied	6.3	5.4–7.3	6.2	5.3–7.3	7.2	4.9–10.4
	Dissatisfied	5.9	5.2–6.7	5.9	5.1–6.8	5.6†	3.7–8.5
Satisfaction with Friends	Satisfied	89.1	99.0–90.2	89.0	87.7–90.1	90.4	87.3–92.9
	Neither satisfied nor dissatisfied	5.5	4.7–6.4	5.6	4.8–6.6	4.5†	2.9–7.1
	Dissatisfied	5.4	4.7–6.2	5.5	4.7–6.3	5.0†	3.4–7.4

Table 2 : Adjusted Odds of Easy Adjustment to Civilian Life Model

Variables	Categories	Adjusted Odds Ratio	95% CI
Sex	Male	Reference	–
	Female	0.95	0.72-1.26
Age	Continuous	1.00	0.99–1.01
Education	Less than a high school diploma	Reference	–
	High school diploma or equivalent	1.20	0.84–1.72
	Trade certificate	1.11	0.71–1.73
	College/CEGEP diploma	1.01	0.69–1.49
	University certificate or diploma	0.97	0.57–1.65
	Bachelor’s degree	2.11**	1.30–3.43
	University degree (Master, PhD)	1.40	0.81–2.43
PHC	No	Reference	–
	Yes	0.61**	0.44–0.83
MHC	No	Reference	–
	Yes	0.36***	0.30–0.45
Life Stress	Not at all stressful	Reference	–
	Not very stressful	0.98	0.67–1.42
	A bit stressful	0.50***	0.36–0.70
	Quite a bit stressful	0.50**	0.34–0.74
	Extremely stressful	0.43**	0.23–0.78
Mastery	Continuous	1.02**	1.01–1.03
Satisfaction with Job or Main Activity	Satisfied	Reference	–
	Neither satisfied nor dissatisfied ¹	0.68* 0.44***	0.50–0.93 0.32–0.60
	Dissatisfied	0.38***	0.28–0.51
Satisfaction with Leisure Activities	Satisfied	Reference	–
	Neither satisfied nor dissatisfied	0.66**	0.50–0.87
	Dissatisfied	0.43***	0.33–0.57
Satisfaction with Financial Situation	Satisfied	Reference	–
	Neither satisfied nor dissatisfied	0.56***	0.43–0.73
	Dissatisfied	0.53***	0.40–0.71
Satisfaction with Family Members	Satisfied	Reference	–
	Neither satisfied nor dissatisfied	0.77	0.53–1.12
	Dissatisfied	0.47***	0.31–0.72
Satisfaction with Friends	Satisfied	Reference	–
	Neither satisfied nor dissatisfied	0.85	0.57–1.29
	Dissatisfied	0.65	0.41–1.03

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

¹This was the only category that did not have parallel OR:
 AOR of difficult compared to neither or easy adjustment = 0.68 and
 AOR of difficult or neither to easy adjustment = 0.44

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