# 2024 Report: Warrior Family Dynamics & Well-Being
Executive Summary

Introduction

Military and veteran families navigate unique and varied experiences, resulting in distinct differences in their journeys. The Military Family Advisory Network (MFAN) and the Wounded Warrior Project (WWP) are dedicated to supporting this population through data-driven approaches. This customized report aligns post-9/11 veteran and retiree family findings from MFAN's 2023 Military Family Support Programming Survey to WWP's current research and strategic portfolio, bridging the family experience to the warrior experience.

Overview

To ensure continued care and support for those who have served, it is essential to understand the well-being of the full warrior family population (post-9/11 veterans, retirees, and their spouses). MFAN's family health findings informed a deeper analysis of these families, as well as warrior family subpopulations related to household dynamics, time since transition, caregiving, race, ethnicity, sexual orientation, and gender identity.[1]
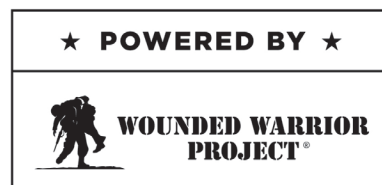
[1] The full customized report provides added context, methodology, expanded demographic comparison between studies, and expanded analysis for the dimensions of well-being.

Warrior Family Well-Being

Like MFAN's 2023 full sample of respondents, family health scores for the full warrior family population have declined since 2021. The family health scores for post-9/11 veteran and retiree families were comparable to the full survey population in 2023, with 28.7% reporting excellent family health, 43.9% moderate, and 27.4% poor family health.

Differences emerged among warrior family subpopulations, as noted below. With some variance, these patterns were echoed across the dimensions of family health, highlighting what MFAN found among the full survey population: the diverging experiences of military-connected families impact their ability to thrive.

Warrior family subpopulations more likely to report excellent family health included retiree warrior families, retiree warrior spouses, families without children (under 18), married households, families with two members (small families), and white respondents.

Warrior family subpopulations more likely to report poor family health included veteran warrior families, veteran warriors, families who recently transitioned (in the past five years), caregiving families, respondents living alone, and LGBTQ+ families.

Physical Well-Being

Healthcare: In 2023, most of the full warrior family population rated the quality of care providers positively (64.7%), but negative ratings reflected challenges with consistent care (19.6%) and accessing appointments (19.0%). Families with positive healthcare experiences reported better overall family health, while negative experiences were linked to poor family health. With variance among subpopulations, additional obstacles were reported in statistically higher proportions by families who had children, recently transitioned, had LGBTQ+ family members, and caregiving families.

Food Security: Nearly twenty percent (19.9%) of the 2023 full warrior family population indicated some level of food insecurity. Retiree warrior families and small families were more likely to report food security, while food insecurity was more commonly reported by families with children, larger households, white respondents, women warriors, and a notably high proportion of recently transitioned families (46.0%). Findings indicate that food insecurity is associated with lower levels of family well-being.

Mental Well-Being

Mental Health Care: Among the full warrior family population in 2023, 64.1% reported that someone in their household accessed mental health services in the past two years, rising from 2021 (56.1%). Though negative mental health care ratings were linked to moderate and poor family health, ratings for mental health care were largely positive. Veteran warrior families and recently transitioned reported mental health care obstacles in statistically higher proportions.

Mental Health Crises: Among the full warrior family population respondents who accessed mental health crisis resources in the past two years (17.0%), those more likely to report usage were those with children, poor family health, very low food security, caregiving homes, and those who transitioned 6-10 years ago. Suicidal ideation was reported by 13.4% of the full warrior family population and 17.1% of warriors themselves.

Social Well-Being

Reported loneliness among the full warrior family population was higher in 2023 (59.8%) than in 2021 (52.7%). Veteran warrior families reported loneliness in a significantly higher proportion (67.3%) than retiree warrior families (53.5%). Warrior family subpopulations with the highest rates of loneliness included families with LGBTQ+ respondents (77.2%), caregiving families (68.8%), women warriors (65.8%), and those who recently transitioned (65.7%). Families reporting excellent family health and food security were more likely to report not being lonely while the opposite was true for families who were food insecure or with moderate and poor family health.

Financial Well-Being

Nearly two-thirds (62.5%) of veteran warrior families reported making less than $75,000 per year, compared to 30.2% of retiree warrior families. Veteran warrior families reported low or very low financial well-being in higher proportion (70.6%) than retiree warrior families (47.6%). Warrior subpopulations more likely to report low and very low financial well-being included families with children, caregiving families, and those who were unemployed but wanted to work. Low and very low financial security scores reflected compounding challenges with food security, satisfaction with life, loneliness, and family health, while high scores reflected fewer struggles in these dimensions.

Spiritual Well-Being

Retiree warrior families were more likely to report high or very high satisfaction with life while veteran warrior families were more likely to report low or very low satisfaction with life. Among the full warrior family population, higher life satisfaction was reported by those who had excellent family health, were married, had small families, had no children, were caregivers, and identified as white. In contrast, lower life satisfaction scores were more likely for respondents who had poor family health, were separated or divorced, living alone, LGBTQ+ families, transitioned over 11 years ago, and respondents who identified as multiracial, Black or African American.

Recommendations & Conclusions

Findings presented here suggest that family experiences – positive and negative – have ripple effects across these interconnected dimensions.

Given these findings, and the striking distinctions between warrior subpopulations, MFAN suggests further research into post-9/11 veteran and retiree family well-being, focusing on several upstream areas:

Recent Transition: Examine how recently transitioned families navigate support resources

Demographic Differences: Explore how experiences differ among warrior family subpopulations

Caregiving Dynamics: Understand the caregiving experience from both the perspective of the wounded warrior and their caregiver

Warrior Relationships: Investigate the impact of military service on family and community connections for transitioned warriors