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Post-mission reintegration of veterans: challenges and solutions

Social, professional, physical and psychological challenges and the role of military social work

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Abstract

The article analyzes the complex and multidimensional process of post-mission reintegration of veterans, highlighting the essential role of the military social worker as a strategic binder between the individual, the family, and civilian and military institutions. The paper examines the difficulties of adaptation on three fundamental levels: social-relational, professional-economic and physical-mental. The conclusions underline the need to implement integrated support mechanisms, such as reskilling programmes, academic partnerships and specialised rehabilitation services.

Keywords: family dynamics, labor market, military social work, occupational health, post-mission reintegration, transferable skills, veterans.

1. Introduction

The post-mission reintegration of veterans into civilian society is often a complex process through which they attempt to redefine their personal and professional identity. The end of missions in theatres of operations (T.O.) marks the conclusion of one battle, but simultaneously signals the beginning of another: adapting to a different value system and a distinct pace of life, characterised by social structures that generate new challenges.

Even though post-mission reintegration is sometimes viewed as a simple administrative act, this process can significantly influence mental health, family stability and dynamics, as



well as professional reintegration. This article examines the veteran's adaptation difficulties across three essential levels: social-relational, professional-economic, and, not least, physical-mental.

2. Methodology

This analysis employs a qualitative approach, grounded in the synthesis of the main barriers identified in the post-mission process. Consideration was given to the impact of visible and invisible traumas on the veteran, the dynamics of role changes within the family, and the discrepancies between military skill sets and the requirements of the civilian labour market.

In pursuit of optimal reintegration, the article correlates data on specific symptomatology (PTSD, TBI) with best practices and governmental and non-governmental support mechanisms (social policies) required for this purpose.

3. Results and discussion

3.1. The social-relational level

The post-mission reintegration of veterans through the transition from military to civilian life may require a rebalancing of family dynamics, a process that is often a source of tension. In families where one spouse is a military member, a shift occurs in the role the veteran initially held, such that upon return, they will either attempt to reclaim their former role or feel powerless in decision-making — both of which make post-mission reintegration far from straightforward.

The partner may have difficulty relinquishing the control they previously exercised and re-accepting the role of the veteran-spouse. The relationship with children may also be affected, as the veteran may be perceived with a new authority, given that their absence has created an emotional distance.

Upon returning to civilian life, veterans may face a profound sense of isolation, even in the company of their loved ones. They have lived through experiences that civilians, including family members, cannot fully comprehend. Veterans develop their own defence mechanism



based on emotional detachment (*numbsense*), which can cause difficulties in expressing emotions and feelings.

Interactions with family and civilian friends can sometimes be frustrating, and comments related to risky experiences in theatres of operations („*Thank goodness you made it out alive!*”, „*Lucky it wasn't worse!*”) can intensify the veteran's sense of isolation, leading them to seek the company of fellow veterans.

Many veterans return from combat missions with various psychological traumas, the most commonly encountered being post-traumatic stress disorder (PTSD), manifested through irritability, hypervigilance or nightmares, all of which can directly affect intimacy.

The constant state of „alert” acquired during missions can cause the veteran to startle at loud noises or crowds and to avoid public spaces and social events, all of which drastically limit the family's social life. At the same time, in attempting to suppress painful memories, the veteran may also avoid positive emotions, which can lead to a cooling of the relationship with their partner and difficulties in communication.

3.2. The professional-economic level

One of the greatest challenges for veterans in civilian life may lie in the technical language used in the military environment and its difference from that used in the civilian sphere. A major barrier in the post-mission reintegration of veterans is the equivalency of technical competencies.

Terms such as „technical planning”, „logistics in theatres of operations”, „crisis management”, „operational assessment” and „tactical situation” are often difficult to translate into civilian equivalents. Whereas advancement in the military is based on seniority and military merit, progression in the private sector is tied to specific performance, certifications and networking skills — factors that frequently lead to underqualification.

The competencies and skills acquired during military service (discipline, teamwork under pressure, rapid decision-making) are very difficult for civilian employers to understand and are rarely recognised as transferable.

Employers tend to focus on military functions rather than transferable competencies. A particularly notable situation is that of veterans who served in the military from a young age,



having no civilian professional history — a factor that makes it difficult for them to position themselves against civilian candidates with a more linear career trajectory in the labour market.

Additionally, there may be an unjustified fear on the part of civilian employers regarding veterans, perceiving them as unstable or a security risk, which can lead to a form of covert discrimination.

In order to prevent or overcome such issues, the implementation of support mechanisms is necessary, such as:

- Government support — veteran status provides official recognition, access to dedicated medical services, tax exemptions and benefits in certain situations, and employment priority, supporting post-mission reintegration both socially and professionally;
- Reskilling and professional certification programmes — helping veterans obtain civilian certificates recognised in the labour market: project management, cybersecurity, logistics, computer programming, data processing, media applications, etc.;
- Professional counselling, through which veterans can be assisted in reformulating their CVs and navigating the interview process;
- Access to veteran-specific programmes, such as employment priority in certain economic sectors and incentives for employers who offer jobs to veterans;
- Internal retraining programmes, through which the Ministry of National Defence organises internal professional retraining courses (IT, foreign languages, management) for personnel leaving the system, facilitating the acquisition of civilian certifications;
- Academic partnerships, through which the military collaborates with civilian higher education institutions (universities) for certification and further training;
- Partnerships with private companies and NGOs such as Invictus, CAMARAZII and AMVVVD, which can offer complementary services: therapy, specific legal counselling, mentoring.

3.3. The physical-mental level

Veterans frequently face a wide spectrum of physical conditions resulting from intense physical effort, carrying heavy equipment, and wounds sustained in theatres of operations.



Chronic back, knee and joint problems can lead to partial disability and require long-term treatment.

Repeated exposure to shock waves can cause traumatic brain injuries (TBI), manifested through persistent headaches, memory problems, concentration difficulties and hormonal imbalances.

Veterans with visible physical injuries (amputations, severe burns, gunshot wounds) require not only prosthetics and surgical reconstruction, but also long-term dermatological care. Those who have undergone amputation may experience pain in the limb or limbs that no longer exist — the so-called phantom pain — for which specialised therapies are recommended, such as mirror therapy.

In order to alleviate physical or psychological pain, veterans often resort to powerful medications, such as opioids, which can create a major long-term risk of physical dependency, adding yet another dimension of vulnerability in the employment context.

The success of the adaptation process to civilian life depends on constant access to specialised rehabilitation:

- continuous physiotherapy and kinesiotherapy for maintaining mobility and reducing pain;
- occupational therapy, which helps veterans regain their motor skills and learn to use assistive devices or prosthetics in daily activities and, crucially, in the civilian work environment;
- integration of physical and psychological treatment, given that chronic pain can exacerbate the symptoms of PTSD and depression, creating a vicious cycle of suffering.

4. Conclusions

The post-mission reintegration of veterans is a complex process involving social, professional, and physical-psychological challenges. This process entails the reassessment of family roles, the management of trauma or chronic conditions, and the valorisation of military competencies in the civilian environment.



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The military social worker plays an essential role in this process, facilitating the connection between the veteran, the family, and military and civilian support institutions, thereby contributing to the implementation of effective rehabilitation and integration mechanisms — including counselling, professional retraining programmes, social support, and access to specialised services — so that the veteran may reclaim their autonomy, self-confidence, and quality of life as a fully integrated member of civilian society.

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