

DEFINING OUR FUTURE LEADERS

THE CIVIC HEALTH OF POST-9/11 VETERANS









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THE MISSION CONTINUES

The Mission Continues is a national veterans organization dedicated to empowering veterans as community-based leaders. We invest in veterans by equipping and training them to volunteer, mobilize and lead others in service. We deploy veteran volunteers in more than 40 cities nationwide alongside nonprofit partners and community leaders to improve educational resources, address food insecurity, increase access to parks and green spaces, foster neighborhood identity, and more.

Through this unique model, veterans are provided opportunities for personal connection and professional growth while generating visible community impact. This work is made possible through the generous contributions of our mission partners: James & Alice B. Clark Foundation, The Boeing Company, Lowe's, The Marcus Foundation and Raytheon Foundation.

To learn more, visit http://www.missioncontinues.org or follow us on Twitter at @missioncontinue

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The National Conference on Citizenship is a congressionally chartered organization dedicated to strengthening civic life in America. We pursue our mission through a nationwide network of partners involved in a cutting-edge civic health initiative and innovative national service project, and our cross-sector conferences. At the core of our joint efforts is the belief that every person has the ability to help his or her community and country thrive. www.ncoc.org



TABLE OF CONTENTS

Foreword	4		
		Chris Marvin, Founder and Principal, Marvin	
Introduction		Strategies	
Veteran Civic Health	7		
Today's Veteran: An Overview	8		
The Post-9/11 Generation	10	CONTRIBUTORS:	
20 Years of Sustained Conflict	11	Cameron Blossom, Communications	
Veterans and Public Office	13	Director, National Conference on Citizenship	
The Civic Health of Veterans	14		
Voting & Electoral Participation	15	Mary Beth Bruggeman, President, The Mission Continues	
Volunteering	16		
Soical Connectedness	17	Jeremy Butler, President, Irag and	
Political & Community Involvement	18	Afghanistan Veterans of America	
The Outlier	18	0	
Civic Health of Post-9/11 Veterans	19	Jeff Coates, Research & Evaluation Director,	
Comparison to Previous Surveys	22	National Conference on Citizenship	
Recommendations	24		
Technical Note and Endnotes	25	Susan Thaxton, Chief Programs Officer, The	

AUTHOR:

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FOREWORD

In 2015, the National Conference on Citizenship published its first ever Civic Health Index focused on the United States' veteran population. This groundbreaking report was produced in partnership with American Express, Got Your 6, and Points of Light. Among other things, the first Veterans Civic Health Index established that veterans were more civically engaged, on average, than non-veterans. The report demonstrated that veterans vote, volunteer, talk to their neighbors, help their neighbors, and belong to civic organizations at higher rates than their civilian counterparts.

The title of the 2015 Veteran CHI was "America's Greatest Assets: How Military Veterans Are Strengthening Our Communities." Throughout the report, the authors highlighted ways in which veterans were giving back to their communities through volunteerism and civic participation. The work of organizations like Team RWB, Team Rubicon, and The Mission Continues were provided as quintessential examples of the ways veterans have proven to be assets to our nation, after they remove their uniforms. These groups, and others formed since the terrorist attacks of 2001, stand out as a new type of veteran-focused organization. Where as many long-standing veterans' groups are dedicated to services for and advocacy on behalf of the veteran community, these new organizations bring to the fore the desire that many veterans (from all generations) possess to continue their service long after their time in the military is complete.

In 2016 and 2017, follow-on companions to the original Veteran CHI were published. These reports took the chance to more closely examine the diversity of the veteran population, including the outcomes of female veterans and a deeper dive into the acute community needs that certain veterans' groups were addressing. Meanwhile, the overall civic health indicators of the veteran population remained strong in each report. Since 2017, NCoC has not produced another Veteran CHI.

In 2021, NCoC is reviving the Veteran CHI through a partnership with The Mission Continues and Iraq & Afghanistan Veterans of America. In the six years since the first Veteran CHI was produced, many things have changed in the United States, including an increase in ideological division, high-level political discord, and a global pandemic. Now, as 20 years of war in Afghanistan come to an end, the country is at a perfect moment to again examine the role that veterans do and will play in our communities for decades to come.

This fourth edition of the Veteran Civic Health Index tells both a similar story to that of previous installments – veterans exceed non-veterans in civic health – and, at the same time, explores the unique impacts of post-9/11 veterans in a way that was not tackled by previous Veteran CHIs. Additionally, the amount of time that has passed since the issuance of the initial trio of reports offers a chance to look at the veteran population over time in terms of civic health to see which factors have remained constant and which have changed, for better or worse.

Welcome to the 2021 Veteran Civic Health Index, Defining Our Future Leaders: The Civic Health of Post-9/11 Veterans



INTRODUCTION

Unless otherwise cited, all findings presented in this report are based on NCoC's analysis of the U.S. Census Bureau's 2019 Current Population Survey, 2019 Volunteering and Civic Life Supplement, and 2020 Voting and Registration Supplement.

Goals of this Report

- Reaffirm the valuable civic role that veterans play in all American communities
- Encourage American institutions to understand and leverage the power of veteran engagement to advance their own projects, programs, and policies
- Share the stories of veterans who have stood out as civic leaders
- Provide recommendations that will increase the civic engagement and health of veterans and civilians alike

What is Civic Health?

Civic health is the way that communities are organized to define and address public problems. It is a community's capacity to work together, defined by the degree and frequency by which people trust each other, convene together, help their neighbors, and interact with government. Communities with strong indicators of civic health have higher employment rates, stronger schools, better physical health, and more responsive governments.



VETERAN CIVIC HEALTH

More than 18 million living Americans have served in the military. All who joined after 1974 – and some before – voluntarily chose to join the cause of defending the country from all enemies foreign and domestic. It is logical that a subpopulation with a demonstrated disposition for military service would also have a predilection toward the behaviors that indicate civic health.

Yet, the civilian population has not always recognized the veteran population at large as an asset to communities and often focus on the challenges that some veterans face. Others are moored to the aftermath of war and trauma. While these elements are part of many veterans' stories, they are not the only narratives.

This report conducts an empirical and longitudinal examination of the way that veterans have interacted with their communities in order to explain the ways that veterans are civically healthy, and the way that veterans, therefore, can aid in making all of our communities stronger.

The government, corporations, and non-profit organizations have made significant investments in our veterans through employment, skills training, further education, and social benefits. The American people also have a lot of trust and confidence in these men and women who served in uniform. Veterans can and should be viewed as assets whose skills and talents should be engaged here at home.

Veterans can and should be viewed as assets whose skills and talents should be engaged here at home.

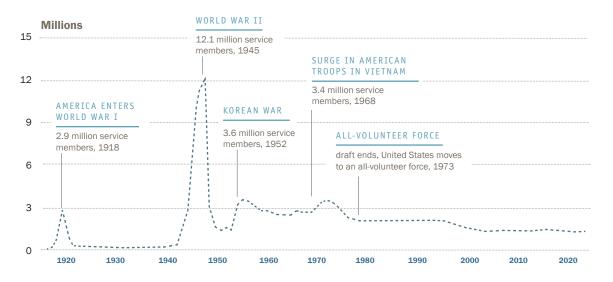


TODAY'S VETERAN: AN OVERVIEW

The veteran population is shrinking. At the peak in 1980, there were 28.6 million veterans in the United States.1 World War II, the Korean War, and the Vietnam War created a subpopulation of veterans that was ubiquitous in most parts of American life. In that era, nearly three-quarters of the members of Congress had served in uniform.2

THE SHRINKING VETERAN POPULATION (WORLD WAR I - PRESENT)

In 1980, there were approximately 28.6 million veterans, compared to 18 million today.



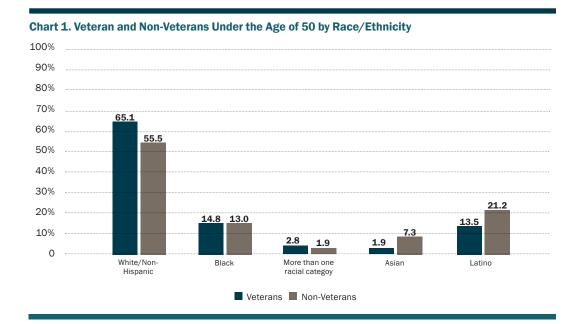
Today, there are about 18 million living veterans. Each year that number decreases by about 400,000. Experts predict that - without a major change in the current military population - by 2046 the veteran population will stabilize at about 13 million veterans.3 This is not a decline in the prevalence of veterans so much as a recovery from the wars of the mid-20th century that demanded a much larger military and the use of conscription to fill its ranks. The country is essentially now recovering from a mobilization of troops beginning in the 1940s and the residual impacts that had on the population over the next eight decades. The end of the draft and the institution of the all-volunteer force used to feed a relatively stable military population will eventually lead the veteran population to plateau at a relatively stable level.

Most Americans probably know veterans, whether they realize it or not.

In 2021, veterans comprise about 7 percent of the adult population in the United States. 4 That is, veterans are one in every 14 adult Americans. For the sake of comparison, the veteran population is about half that of the total African American population (13.4 percent), and roughly equal to the total Asian-American population (5.9 percent).5 When limited to just the male population, one in seven adult American males alive today has served in the military. All this to say, it is not uncommon to come across a veteran in daily life. Most Americans probably know veterans, whether they realize it or not.

Veterans always have and continue to be majority male, but year-over-year the population trends show and predict a growing proportion of female veterans. Currently, 89 percent of veterans are male compared to 11 percent female. However, for veterans under 50 years old, the ratio is 81 to 19.

Racially, veterans tend to reflect the population at large with some exceptions. Black, Native American, Native Hawaiian-Pacific Islander, and multi-racial people are comparably represented in the veteran population, while Latinx and Asian people are under-represented as veterans. Whites are slightly over-represented. However, for veterans over 50, all non-white race groups are under-represented. It is the more racially diverse veteran population under 50 years old that brings certain non-white groups into parity with the proportion seen in the general population.



Veterans tend to be older than the average American, with an average age of 62. They are more likely than non-veterans to be married, to have completed high school and attended college, and to be employed.

Veterans over 50 years old are predominant in the veteran population. With 14 million veterans over 50, they comprise 73 percent of all veterans. But as draft-era veterans slowly pass on, the comparison of older and younger veterans continues to even out. According to VA estimates, by 2046 just two-thirds of veterans will be 50 or older, and one-third will be under 50 – bringing the ratio much closer to that of the overall American population. For these reasons, this edition of the Veteran CHI is a good opportunity to examine those younger veterans.

By 2046, just twothirds of veterans will be 50 or older.



THE POST 9/11 GENERATION

For the purposes of this report, much of the analysis will focus on veterans under the age of 50. There are 5.1 million living veterans under the age of 50. There are 5.2 million living veterans who served after the terror attacks of 9/11.6 Though the populations don't overlap completely, using Census data, veterans under 50 - nearly one-third of all veterans – are the best proxy for the post-9/11 generation.

The VA generally groups veterans of the wars in Afghanistan and Iraq (along with other combat operations of the era) into a category called the Persian Gulf War Era, which includes any service member who began service after August 2, 1990.7 It is a very broad category that includes veterans of Operations Desert Storm and Desert Shield, post-Cold War era veterans, and veterans who served exclusively in peace time. However, for the purposes of Post-9/11 GI Bill benefit eligibility, the VA defines a "Post-9/11 Veteran" as a service member who served on active duty after September 10, 2001.8 This is a more narrow and useful definition.

THE AGE OF VETERANS IN AMERICA



Veterans under 50 will make up the core of the veteran population for decades to come.

VETERANS UNDER 50 YEARS OF AGE

Combining these two VA subpopulation distinctions, for the purposes of this report, a "post-9/11 veteran" shall be defined as anyone who served in the military - active, national guard, or reserve - after September 10, 2001, whether they served in combat or not. This group may include veterans who also served in Vietnam, as well as veterans who joined just five years ago. By examining veterans under 50 we get a sample that is not only primarily made up of post-9/11 veterans, but also a look at the veterans who will make up the core of the veteran population for decades to come. Veterans in their 30s and 40s are setting the standard today for what veterans will become in this country by the middle of the 21st century.

While there are still veterans who exited the military prior to 9/11 and have yet to reach 50 years old, for our purposes, that number is negligible. There are also a fair number of veterans who served after 9/11 and who are now 50 or older. The exclusion by age of these veteran will be unlikely to impact the overall analysis of post-9/11 veterans.

Throughout this report, veterans under 50 will be called "young veterans" and veterans over 50 will be called "older veterans."

20 YEARS OF SUSTAINED CONFLICT

Never in the history of the United States has the country engaged in a war longer than the war in Afghanistan. Combat operations began on October 7, 2001 and drew to a close in 2021. During that time, combat operations occurred in Syria, the Horn of Africa, Southeast Asia, and most notably, in Iraq.

Michael Matos was in his first-grade class in the Chelsea neighborhood of Lower Manhattan when the World Trade Center was attached on 9/11. "Out of all the memories I kept from that day, the one that stood out the most was the smell. If there was ever a smell to define the word "death", it was those fumes," recalled Michael.

Fast forward 12 years, and Michael enlisted in the U.S Coast Guard. He notes that he specifically chose that branch, because of the role the Coast Guard played during that traumatic day in 2001. In the midst of the turmoil, the Coast Guard coordinated and the led the largest maritime evacuation in the history of the United States, with over 500,000 New Yorkers rescued. After six years of active duty, Michael now serves in the Coast Guard Reserve based on Staten Island, NY and specializing in Maritime Law Enforcement and Anti-Terrorism.

After witnessing the events of 9/11 as a child, Michael believes that his life's mission is "to be able to serve my community and help prevent against another attack."



Michael Matos

Unlike previous sustained wars, the U.S. did not dramatically increase the size of the military at any point during these wars. The advent of the U.S. involvement in World War II saw the active military force balloon from 500,000 to 12.1 million service members. Likewise, every other major conflict in the 20th century saw an increase in troop mobilization, primarily through use of conscription. In 1968, during a surge in troops in Vietnam, the active military numbered 3.5 million. But after the end of the draft in 1973, and through a series of drawdowns and troop reductions over the next three decades, the size of the military before, during, and after the wars in Iraq and Afghanistan has mostly remained between 1.35 million and 1.55 million members.

Less troops means fewer new veterans. The use of the all-volunteer force has professionalized the military, meaning that fewer service members serve short stints, and a larger proportion of service members are likely to stay for a decade or two, or longer. Consequently, the average American is less likely to know someone who is serving in the military. In 1946, nearly a quarter of all U.S. adult males had served in World War II over the past four years. Compare that to less than 0.5 percent of the U.S. population serving on active duty today.

This disconnect has caused a rift in civilian-military relations. For years now, journalists and academics have talked of a "warrior caste" that provides recruits for our military. Military service tends to run in families and successful recruitment is somewhat more concentrated in certain parts of the country (e.g. the South and the Mountain West). Non-military families have virtually no connection to military service and little connection to the wars that rage on overseas for a generation.

of the U.S population serves in the U.S. Military compared to nearly 25% of all U.S. adult males in 1946.

The 2020 report *Inspired to Serve* from the National Commission on Military, National, and Public Service discussed the dismal state of military recruiting, particularly in the vein of eligibility. The commission points out that, "Today 71 percent of youth ages 17 to 24 cannot join the All-Volunteer Force without a waiver, as they fail to meet eligibility criteria in areas including physical and mental health, grooming standards, criminal records, education and aptitude, and drug use.

Of those eligible, less than half report getting the high academic marks required for military accessions. Of those remaining, just 14 percent express a desire to serve. Therefore, less than 2 percent of the enlistment age population are potential targets for recruitment.

THOSE WITH HIGH PERSONAL TRUST HAVE HIGHER CONFIDENCE IN LEADERSHIP GROUPS

% of U.S. Adults in each group who have a great deal/fair amount of confience that _____ will act in the best interets of the public.

A 2019 Pew Research Center report indicated that the military was highly trusted by Americans.

Source: Pew Research Center

But lack of connection to or interest in service does not mean lack of faith in the military. In fact, the Pew Research Center published a report in 2019 indicating that the military was highly trusted by Americans. The only group that scored higher on the trust scale were scientists, and the trust in the military exceed that of police, teachers, religious leaders, journalists, businesspeople, and elected officials. The same report indicated that Americans generally have confidence in each other when it comes to civic obligations. For example, Americans trust that other citizens will obey laws, report serious problems to authorities, help and trust others, and work together to solve community problems. This interesting juxtaposition of American attitudes on trust with regard to both the military and civic life may speak to the civic health of veterans.



VETERANS AND PUBLIC OFFICE

When it comes to federal-level public service, the veteran picture is complex yet clear. On one hand, the number of veterans in Congress has diminished every year since 1973, when nearly three-quarters of the members of Congress had served.16 In 2021, just 91 veterans were elected leaders on Capitol Hill. The Senate has 17 veterans and the House has 74 – precisely 17 percent in each chamber.17 Female veterans are underrepresented by almost half, with just six female veteran members of Congress making up 7 percent of the Congressional veterans. Twelve states have no veterans in their Congressional delegation.

At the same time, overall, veterans are more than twice as likely to appear in Congress as in the civilian population, and that over-representation is correlated with the general trust and admiration that Americans have for veterans. Looking at future trends, it's likely that as an older generation of veteran lawmakers retire or leave office, the younger generation may begin to stabilize veteran membership numbers. In 2020, amongst all newly-elected lawmakers age 45 or younger, 27 percent (21 of 79) served in the military. The higher proportion of young members of Congress with military service speaks highly of the post-9/11 generation. Likewise, 50 veterans (55 percent) currently serving in Congress served in the military after the year 2000.

Beyond Capitol Hill, veterans are five times more likely than their non-veteran peers to work for the federal government. One in ten employed veterans held federal jobs in 2018, compared to only one in fifty non-veterans. This speaks to both the skillsets of veterans and their obligation toward service and civic engagement.

91 VETERANS serve in the U.S Congress in 2021.

SPOTLIGHT: NEW POLITICS

After working on a failed Senate campaign, Emily Cherniack began to wonder if the system for recruiting political talent was broken. Social exclusivity, financial hurdles, and other significant barriers prevented transformational leaders from running for office. In 2013, she founded New Politics to change the paradigm. The organization aims to revitalize American democracy by recruiting, developing, and electing servant leaders who put community and country over self. New Politics targets veterans and national service leaders to run for offices at the state and federal levels, giving them the training, network, and support they need to continue their service in the political arena. Since its inception, New Politics has helped elect veterans from both sides of the aisle including: Rep. Seth Moulton (D-MA), Rep. Kai Kahele (D-HI), Rep. Peter Meijer (R-MI), Rep. Mikie Sherril (D-NJ), and dozens more at all levels.



Emily Cherniack



THE CIVIC HEALTH OF VETERANS

From 2015 to 2017, the Veteran Civic Health Index told a story of veterans – old and young – who were more civically engaged and healthy than their non-veteran counterparts. For the most part, this report tells a similar story. But nuances in comparisons over the years and between generations lead to some interesting conclusions about the civic health of America's military veterans, now and in the future.

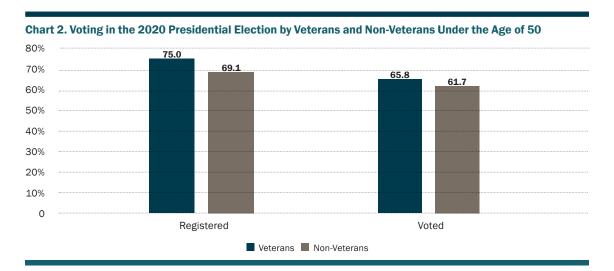
Voting & Electoral Participation

Given the propensity of veterans to serve in elected roles, it should not be a surprise that veterans fare well on civic health indicators related to voting and electoral participation. Veterans are more likely than non-veterans to be registered to vote, to vote in local elections, to talk to family and friends about politics, to post views about politics on the internet or on social media, and to give money to a political party.

Specific to the 2020 election cycle, nearly four in five veterans (79.8 percent) were registered to vote, compared to 72.8 percent of non-veterans. Almost three quarters of all veterans (74.7 percent) voted in 2020, compared to just two thirds (66.9 percent) of non-veterans. While both voter registration and voting habits tend to be more popular amongst the older population, young veterans – those under the age of 50 – are registered and do vote at higher rates than their civilian counterparts.

74.7% of veterans voted in the

voted in the 2020 presidential election compared to 66.9% of non-veterans.



Overall, 64.6 percent of veterans regularly vote in local elections, including 48.4 percent of young veterans. The voter participation of young veterans is particularly heartening considering that just 53.5 percent of non-veterans of any age vote in local elections.

Many veterans have a vested interest in the political process. The debate to send service members to war, the oversight of national security, and the budget decisions that impact pay for military members come down to elected leaders in the federal government. The immediate and direct connection to the military for decision makers in Washington can make a real difference. When those direct connections do not exist, the voter participation of veterans, service members, and military families becomes even more important.

In a 2017 report, the Bipartisan Policy Center recommended expanding the Selective Service System to include all young adults 18 to 24 years old (selective service registration is currently only required of men) and that all registrants must take a military vocational aptitude test.¹⁹ The National Commission on Service also recommended female participation in Selective Service, and other similar arguments have suggested that a gender-inclusive Selective Service System could also be used as an automatic voter registration system.²⁰ Not only would a requirement like this enhance voter registration for all young people, but it would create a significant connection between the potential obligation of military service and the privilege of voting. In 2021, the House Armed Services Committee voted to expand Selective Service to include women.²¹

The immediate and direct connection to the military for decision makers in Washington can make a real difference.

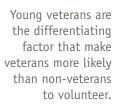
Voting trends among veterans have followed a pattern for the last six years, with veterans, old and young, out pacing non-veterans. In the 2015 Veteran Civic Health Index, it was reported that 74.0 percent of older veterans voted in the most recent presidential election, a proportion that has increased to 77.4 percent in the 2020 election. Young veterans also saw an increase in presidential election voting from 61.2 percent to 65.7 percent. It is necessary to note that the 2020 election saw record voter turnout overall in both raw numbers and proportionality.

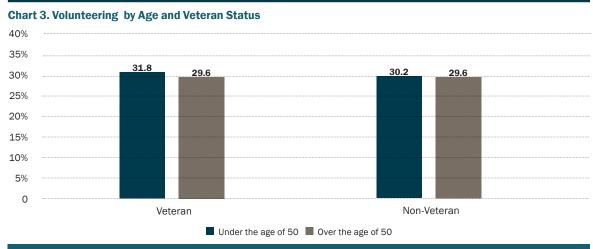
Volunteering

Volunteering is a crucial civic health indicator. Certain civic health measures, like talking to neighbors and boycotting products, can be missing from an otherwise civically healthy community, but high levels of volunteer service in communities are almost always correlated to high scores in civic health overall. Volunteer hours and likelihood to volunteer are, therefore, bellwether indicators of a community's civic health.

Historically, veterans have significantly outperformed non-veterans when it comes to volunteering. One of the highlights of the 2015 Veteran CHI was the positive disparity between hours volunteered by veterans and non-veterans. The numbers for 2021 tell a very similar story.

Interestingly, young veterans are the differentiating factor that make veterans more likely than non-veterans overall to volunteer. That is because there is no difference between the rates of older veterans and older non-veterans, in both cases 29.6 percent report being regular volunteers. However, young veterans volunteer at slightly higher rates (31.8 percent) than young non-veterans (30.2 percent). Additionally, veteran volunteering is up 20 percent from the rates reported in the 2017 Veteran CHI.





Though they are less likely to volunteer, the older veterans who do volunteer are able to log more hours than younger veterans, averaging 100 hours per year compared to 78. In all categories, veterans log more hours than non-veterans.

YOUNGER VETERANS LEADING THE WAY IN VOLUNTEERING

The fact that the younger demographic of veterans leads the way in rates of regular volunteering is corelated with the activities and missions of some of the prominent post-9/11 veteran organizations. Groups like the Travis Manion Foundation, Team Rubicon, and The Mission Continues all provide substantive opportunities for young (and older) veterans to volunteer. Differentiating themselves from the traditional veteran service organizations, which advocate for veterans' issues, these newer organizations restore a sense of purpose and comradery that veterans are seeking through mentoring, disaster relief, and community service

According to the annual survey produced by Iraq and Afghanistan Veterans of America, post-9/11 veterans have stood out in the veteran community for their desire to continue to serve once they return home. Many IAVA members have discovered the psychological, emotional, and social benefits from serving in their local communities. Of those who volunteer on a regular basis, 63 percent report feeling like a valued member of their community, compared to 47 percent of those who do not. Volunteer activities include serving youth, helping elderly, addressing poverty and homelessness, environmental conservation, disaster relief, and supporting other veterans in need.

Social Connectedness

Perhaps the quintessential question about veteran civic health is: Would you want to have a veteran living next door to you? Based on the data, veterans tend to be better neighbors. People who live near veterans should be confident that their veteran next-door neighbor is more likely to water their house plants when they are on vacation or pull in their garbage cans before the wind blows them down the street.

SPOTLIGHT: VETERANS ADJUSTING TO CIVIC LIFE

Sgt. Yaritza Perez found that the transition from military to civilian life was not as easy as she had imagined. In fact, she had never really imagined life out of the Marine Corps. However, an injury cut her enlistment short, and she found herself hanging up her uniform early.

"My purpose, my friends, my entire world changed, pulling pieces of myself in every direction," says Yaritza, "How I loved being a Marine. But not long after I finished with my military service, I found myself lost with no real sense of direction."

Then Yaritza earned a fellowship from The Mission Continues. As they have done for hundreds of veterans, the organization paired Yaritza with non-profit organization and asked her to apply the skills she learned in the military. Yaritza was eventually began working with the National Parks Conservation Association to support issues of conservation and advocacy in ways that only veterans can. Soon, Yaritza found her sense of purpose and her pathway for giving back to her country and her community, after her time in uniform.

"The Mission Continues Fellowship experience helped me develop the skills to be a more efficient and effective advocate and leader for the environment [and] to protect our natural resources," recalls Yaritza, "I can still save the world, not just as a Marine."



Sgt. Yaritza Perez

Neighborliness is represented in the civic health data by the set of measures that define social connectedness. The data tells us that veterans are more likely to speak frequently with, spend time with, talk politics with, and do favors for neighbors. They are also more likely to do something positive for their neighborhood.

Veterans are nearly 10 percent more likely than non-veterans to spend time with neighbors. Likewise, 23.3 percent of veterans report doing something positive for their neighborhood, compared to 20.5 percent of non-veterans.

Both old and young veterans follow these trends in their neighborhoods, across all measures with one exception. Young veterans are slightly less likely (17.9 percent) to do something positive for the neighborhood than are young non-veterans (18.6 percent). This is a surprising finding, given young veterans' propensity for service. It may speak to any number of factors, including overall decrease in neighborhood activities or the predilection for young veterans to spend their volunteer time with a formally organized group. That said, young veterans outpace their non-veteran counterparts in every interpersonal category related to neighborhood interactions.

Political & Community Involvement

The final category of civic health measurement is political and community involvement, or the likelihood of individuals to participate in and remain informed about their communities. In all categories, veterans are more likely to be civically engaged than are non-veterans.

Veterans are more likely to watch, read, or listen to the news. They are more likely to belong to a group. They are more likely to contact public officials and to attend a public meeting. They are also more likely to give money to charity.

Veterans stand out, in particular, with their propensity to give to charity and belong to a group. Nearly 60 percent of veterans, including more than half of young veterans, give money to charity, while only 52 percent of all non-veterans and just 45 percent of non-veterans under 50 make charitable contributions. Likewise, veterans are almost 10 percent more likely than non-veterans to belong to a group, with more than 36 percent of all veterans and 27.5 percent of young veterans reporting membership in some kind of group.

The higher level of charitable contributions correlates with the higher income levels that veterans experience, on average. When people have more money, they are more likely to donate it. However, that is not always true of the asset of time, so the fact that veterans belong to groups at significantly higher rates is somewhat significant. It may speak to the sense of belonging developed through the military and the desire to seek that after service.

SPOTLIGHT: VETERANS AND ADVOCACY

Staff Sergeant Jen Burch's aspirations to become an officer in the Air Force were cut short. Following a seven-month deployment to Kandahar, Afghanistan in 2010-11, she remained on active duty for three years battling post traumatic stress disorder and other service-related illnesses. She was medically retired in 2014. Soon thereafter, she found a new purpose through policy advocacy for veteran-related issues. Iraq and Afghanistan Veterans of America helped Jen use her story and her voice to advocate for veterans, particularly female veterans. While completing her bachelor's degree, she became passionate about advocacy work and earned an IAVA fellowship advocating on Capitol Hill and speaking with media outlets. Burch says "The IAVA fellowship has been a wonderful opportunity for me to hone my advocacy skills to empower me to be a more effective advocate and leader within the community."

The Outlier

Of all the civic health measures examined, veterans overall only performed worse that non-veterans in one measure. Veterans are less likely to frequently talk to family and friends. Amongst non-veterans, 84.4 percent talk or spend time with friends and family, while this is true of only 79.3 percent of veterans. These numbers don't change much when controlling for age. Young veterans and older veterans report talking with family at rates of 78.9 percent and 79.5 percent – one of the smallest departures between veterans based on age. Likewise older and younger non-veterans' propensity to talk to neighbors remains within one percentage point of the overall rate.

A hypothesis about why veterans lack connection to family and friends could be the impact of geography. In a typical active-duty military career, a service member will be assigned to a different duty station every three years, not including training assignments. So, inherently, most veterans have spent time away from their homes of record. While many veterans return home after service, veterans on the whole may be more likely to settle down somewhere else. The geographic distance between a veteran and his or her family may play a role in the frequency of communication with family and friends.

THE CIVIC HEALTH OF POST 9/11 VETERANS

Over the next half-century, the story of veterans and civic health will be written by the attitudes and behaviors of the post-9/11 generation. According to VA estimates, by the middle of the 21st century, post-9/11 veterans will make up nearly half of all living veterans. Even as the 20-year conflict in Afghanistan comes to an end, an additional half million post-9/11 service members with combat experience will depart the military and join the veteran ranks over the next 20 to 25 years.

This lag in the emergence of the post-9/11 generation of veterans in the civilian world somewhat resembles the long-lasting, outsized impact of World War II veterans in the 1960s and 1970s; though, two key differences stand out. One, the post-9/11 generation is less than half the size of the World War II generation. Two, World War II veterans all served across a four-year period, making their impact concentrated, though lasting. Post-9/11 veterans are spread across 20 years of combat service, and therefore have the ability to cast a long – if not broad – shadow on American society in years to come. We have already begun to see this impact in the higher proportion of veterans amongst the young people elected to Congress in 2020.

The post-9/11 generation of veterans is the most diverse in American history

It is likely that as the next service era begins, the generation following post-9/11 veterans will be even more diverse. For now, the post-9/11 generation of veterans is the most diverse in American history.

Post-9/11 veterans are more diverse in gender and race than any past generation. Young veterans are more almost 2.5 times more likely to be female. More than 17 percent of young veterans are women, compared to just 6.7 percent of older veterans.



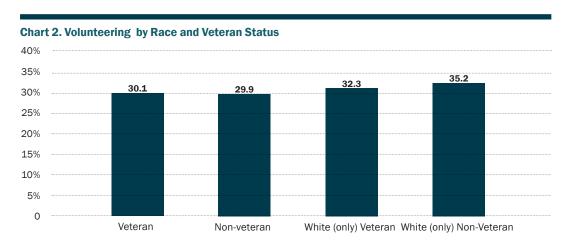
Post-9/11 veterans - represented in this report as veterans under the age of 50 - are more likely to be Black, Native American, Native Hawaiian and Pacific Islander, multi-race, Latinx, and Asian American. Simply put, they are less likely to be white. Young veterans are more than three times more likely to be Native Hawaiian and Pacific Islander and three times more likely to be multi-racial. They are also 2.7 times more likely to be Latinx and twice as likely to be Native American. Young veterans are nearly 20 percent less likely to be white.

While older veterans are 80.9 percent white, younger veterans are 65.1 percent white Shifting from a military that was predominantly white for generations to a population that is less than two thirds white has profound impacts. While older veterans are 80.9 percent white, younger veterans are just 65.1 percent white. As the demographics of the country shift to be less white, there is reason to assume that the proportions will continue to trend in a similar manner year over year.

All of the data on changing racial demographics belies the question: How might racial diversity impact civic health? Does a more racially diverse veteran population lead to a population that is more civically healthy? If it does, is the causation likely to stem from veteran status, era of service, or racial background?

To examine these questions, we can focus on volunteering. Controlling for race also paints an interesting picture of the volunteer rates of veterans. The data on veterans by race is only statistically significant for white, Black, and Latinx veterans. For other groups, the sample sizes are too small. So, the best method of comparison is the volunteer rates of white veterans versus the volunteer rates of all veterans.

For all veterans, 30.1 percent are regular volunteers. For white veterans alone, it is 32.3 percent. This is not surprising considering three factors: roughly three quarters of veterans are over the age of 50, more than 80 percent of older veterans are white, and, in general, older Americans have more time to volunteer. Looking deeper, however, we can note that for non-veterans, 29.9 percent overall are regular volunteers, while 35.2 percent of white non-veterans are. The larger disparity between the baseline and white non-veterans alone, compared to a smaller disparity when making the same comparison amongst veterans, means that non-white veterans volunteer at higher rates than non-white non-veterans. This leads to the hypothesis that an increasingly diverse veteran population will volunteer at higher rates, which could potentially correlate to higher civic health overall for the future veteran population.



What we know now about young veterans can also help to predict future patterns. Today, young veterans are more likely than older veterans to volunteer regularly. Amongst veterans under 50, 30.1 percent volunteer regularly, while 29.6 percent of older veterans do. The distinction is small, but it stands out as the only civic health measures in which younger veterans outpace older veterans. Because of this, there is reason to believe that there is something about the era of service – as opposed to just age or available free time – that makes post-9/11 veterans likely to volunteer at increasing rates.

Another trend that would support the inherent tendency for post-9/11 veterans to volunteer are the primary missions of the most popular post-9/11-focused national non-profit organizations. Team Rubicon, the Travis Manion Foundation, Iraq and Afghanistan Veterans of America, and The Mission Continues all engage veterans in volunteer and civic activities. Together they represent tens of thousands of veterans, the vast majority of which are post-9/11 service era veterans. Compare these missions to the traditional veteran service organizations, which are more focused on advocacy for veteran interests and services. Though, it is worth mentioning that the American Legion has traditionally been involved with little league baseball, Boys and Girls State, and other programs that serve the greater civic health of the community. The popularity of these programs has diminished, but it is still fair to say that these kinds of American Legion programs were an inspiration for modern-day veteran empowerment organizations – those that allow veterans to give back to their community.

On the other hand, as previously mentioned, young veterans are less likely than their non-veteran counterparts to do something positive in their neighborhoods. This is the only civic health marker for which young veterans do not outperform young non-veterans. Though, it's worthwhile to point out that the difference – 18.6 percent for non-veterans versus 17.9 percent for young veterans – is not large. And in all other community involvement measures, young veterans perform well.



Comparison to Previous Surveys

A benefit of analyzing information that has been similarly analyzed previously is the ability to contrast civic health indicators of veterans from years past. The first Veteran Civic Health Index in 2015 set benchmarks for much of the data used to evaluate the civic health of veterans. However, because of the evolution of the Census Bureau's survey questions and other changes in the collection process, direct comparisons can sometimes be challenging. This report attempts to look at how veteran civic health has changed since the release of the first index.

The release of the 2015 Veteran CHI generated numerous talking points, including, "Veterans vote, volunteer, talk to their neighbors, help their neighbors, and belong to civic organizations at higher rates than non-veterans."

This statement outlined the quintessential take away that, in almost all measures, veterans - old and young - were more civically healthy than non-veterans. These guidepost measures also provide a good set of comparison points over time.

It is important to note at this point that civic health data for the 2015 CHI (and the two subsequently published Veteran CHIs) came from the 2013 Volunteering Supplement and the 2013 Civic Engagement Supplement - two separate surveys from the U.S. Census Bureau. Since that time, the two surveys have been combined, and thus, for this report, civic health data comes the Census Bureau's 2019 Volunteering and Civic Life Supplement. The combination of these surveys resulted in some changes to the wording of questions. It also had a generally negative impact on response rates, more for some questions than for others. All of these factors must be considered when comparing historical to current measures. Additionally, veteran voting data in 2015 came from the 2012 presidential elections, while voting data for this report comes from the 2020 presidential elections.

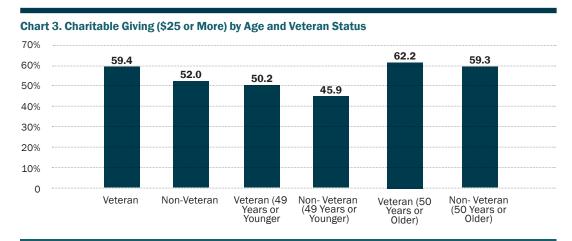
VETERANS ARE IMPROVING IN SOME KEY AREAS OF CIVIC HEALTH

		Veterans in 2013	Veterans in 2019	Non-Veterans in 2019
1	Volunteering	26.0%	30.1%	29.9%
	Group Participation	43.3%	36.5%	26.5%
		Veterans in 2012	Veterans in 2020	Non-Veterans in 2020
	Voting	71.0%	74.7%	66.9%
	Registration	78.5%	79.8%	72.8%

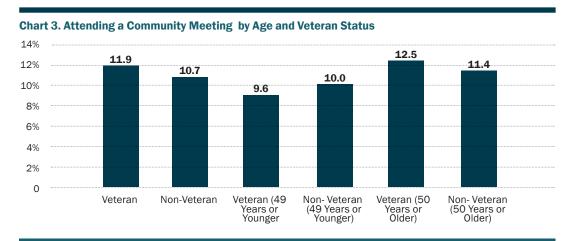
In 2013, veterans reported volunteering at a rate of 26 percent, compared to 25.3 percent for non-veterans. For both populations, that proportion has increased. Veterans now volunteer at 30.1 percent, compared to 29.9 percent of non-veterans. A challenge for this question is how various survey respondents define volunteering. For some people and cultures donating time is not "volunteering," per se, but rather a way of life. So, it's likely that amongst both veterans and non-veterans, true rates of volunteering are higher. For the purposes of this report, the side-by-side comparison and the increased rate over time both serve as a positive indicator of veteran civic health.

Volunteer hours were reported at 160 (annually) for veterans and 121 for non-veterans in 2013. Recent data shows significantly lower numbers. In 2019, veterans averaged 95 hours of annual volunteering, compared to 74 hours for civilians. In both instances, veterans volunteer about 30 percent more hours than non-veterans, a strong relative measure of civic health. The reason for the significantly diminished numbers can be explained by a change to the way the question was asked in the Census Bureau's survey specifically the range of multiple-choice options for volunteer hours. This change lowered the overall mean by eliminating the possibility of large outlier responses and thereby reducing the standard deviation. That is to say, the 2019 numbers are believed to be a better representation of the average hours volunteered by both veterans and non-veterans.

Veterans making charitable contributions – making some kind of financial contribution worth \$25 of more – remained approximately the same for veterans in 2019 at 59.4 percent (down 0.3 percent from 2013), while non-veterans increased from 50.6 percent to 52 percent. Though veterans still outpace civilians by 15 percent, the gap has decreased in the past six years.



Veterans who attend a community meeting went up slightly from 11.2 percent to 11.9 percent. Non-veterans also increased in this measure from 8.2 percent to 10.7 percent. Again, veterans are still more likely to civically participate in this manner, but not as much as before.



Similarly, veterans' propensity to belong to a group went down – this time more significantly – from 43.3 percent to 36.5 percent. Meanwhile, non-veterans dropped from 35.7 percent to 26.5 percent. However, unlike community meetings and charitable contributions, veterans' edge over non-veterans jumped, as in 2019 veterans were 37 percent more likely to belong to a group than their non-veteran peers.

Finally, in voting, all measures saw an upward trend between 2012 and 2020. In 2012, 78.5 percent of veterans were registered and 71.0 percent voted. Compare that to 70.5 percent of registered non-veterans of whom only 60.9 percent voted. By 2020, 79.8 percent of veterans were registered and 74.7 percent voted, while 72.8 percent of non-veterans were registered with 66.9 percent voting. Non-veteran voter participation grew faster than veteran participation, but veterans still are registered and vote in much higher numbers, despite a population that is getting smaller and younger on average.

So many factors play into the changes we see in veteran civic health from 2012 and 2013 to 2019 and 2020. The changing dynamics of the veteran population are certainly a major factor. With a younger, more diverse, and smaller veteran population, it is not surprising to see some civic health measures moving back toward the baseline. That said, it is telling that veterans consistently show more signs of strong civic health. In particular the numbers on veteran voting and volunteering – particularly amongst post-9/11 veterans – allow for the assumption that veteran civic health will continue to outpace non-veteran civic health for years to come.



Based on current trends, veteran civic health can continue to outpace nonveteran civic health for years to come.

RECOMMENDATIONS

The size and prevalence of the veteran population over the last seven decades was an anomaly. The huge military force assembled and conscripted for World War II produced tens of millions of new veterans all at once. Those veterans pervaded all aspects of American life from local American Legion halls to the corridors of Capitol Hill.

Only now, as the all-volunteer force and post-9/11 veteran generations take the mantle, does a more current picture of veterans in America begin to emerge. We are beginning to understand the impacts of a smaller veteran population who volunteered to fight the longest war in the history of America. Never in the modern age has the veteran population looked as it does today. That means that many trends will shift, while others will remain the same.

There is much to learn about this emerging generation of veterans. They will inevitably be the leaders of the next half century. Therefore, what Americans know about their civic health is crucial to how to meaningfully engage them. Fellow veterans, civic leaders, nonprofits, and corporations all must think critically about post-9/11 veterans, their relationship with civic engagement and civic health, and the impact they can have.

Recommendations for Veterans

To veterans: You served faithfully and in the process received the best leadership training, team building experiences, and problem-solving skills that any person could imagine. It is incumbent upon you – veterans – to take what you learned and gained in the military and apply it to making our communities better and stronger. The willingness for veterans to be not just productive members of society, but also leaders in neighborhoods, churches, schools, and workplaces is evident in the data put forth in this report. Veterans, you felt called to serve when you volunteered to join the military. There are many challenges in communities throughout the country and you can have tremendous impact by continuing that service through civic engagement in these communities. Beyond having a significant impact on your community, your continued service and leadership will have an impact on you. You will reap the benefits of expanding your network, building new skills, and rekindling your purpose.

Recommendations for Nonprofit Organizations

To nonprofit organizations: Whether you are a veteran service organization, social service provider, community builder, or any other non-profit focused on creating solutions, empower veterans to accomplish your mission. From community service to disaster relief to continuing education, veteran empowerment organizations are great examples of nonprofits engaging veterans to put their advanced civic health qualities to work for the benefit of all. Veterans' leadership skills, diverse experiences, and desire to engage in a new mission makes them tremendous assets to non-profit organizations. Engage them in your capacity building and problem solving efforts to transform communities and empower veterans.

Recommendations for Civic Leaders

To civic leaders: Recruit, empower, and leverage veterans. Veterans are respected for their service and trusted for their opinions on so many aspects of American society. Utilize the voices of veterans and their willingness to serve to lift up your communities. Engage veterans in town hall meetings. Ask veterans to run for elected office. Encourage veterans to vote and to get out the vote. Challenge veterans to lead at work and in the community. These are the men and women who volunteered to fight our nation's longest war. Recognize their desire and skills to serve and actively recruit and engage them in making impact in communities

Recommendations for Corporations

To corporations: Hire veterans. They get promoted faster, make more money, stay longer, and are more employed than nonveterans. They are better employees who will ultimately boost the company's bottom line. Once they are on board, ensure that veterans are integrated into the company culture and that the culture inherently values veterans in the workplace. With that culture in place, ensure that veteran empowerment is imbedded into your company's corporate social responsibility strategy. To lift up veteran empowerment and veteran civic health, the engines of wealth must be willing to invest to empower our veterans to make our communities stronger.

TECHNICAL NOTE

When analyzing the veteran population, data presented by the Department of Veterans Affairs and that presented by the U.S. Census does not always match. For the purposes of this report, population data from the Census Bureau is prioritized, when possible. When utilizing VA data for ratios and comparisons, VA data is used exclusively.

Unless otherwise noted, data findings presented in this report are based on the National Conference on Citizenship (NCoC)'s analysis of the Census Current Population Survey (CPS) data. Any and all data errors are our own. Volunteering estimates are from the CPS September Volunteering and Civic Life Supplement, 2019; voting and registration data come from the CPS November Voting/Registration Supplement, 2020. Using a probability-selected sample of about 60,000 occupied households drawn from geographically based sampling units, the CPS collects monthly data on employment and demographic characteristics of the nation. Depending on the CPS supplement, the single-year CPS sample sizes for veterans included in this report were 4,873 (Civic Engagement Supplement) and 6,762 (Voting/Registration Supplement).

In order to get the demographic estimates of the veterans' background, the sample data was weighted by the veteran weight, computed by the Census Bureau. The veteran weight is designed in such a way that estimates will accurately track the of official statistics reported by the Department of Veterans Affairs. The comparative non-veteran sample demographics are estimated using the final population weight, also computed by the Census Bureau. For all estimates of civic health indicators, we use the specific weights computed for each supplement. These civic engagement weights account for non-response bias.

In this report, we include all veterans for demographic reporting. For age-specific, group-based reporting, we include veterans and non-veterans who are 20 years old and older. We did this because there are very few veterans who are 19 or younger. In this report, we made comparisons between veterans and non-veterans between ages 20 and 49, and comparisons between veterans and non-veterans aged 50 and older.

All surveys, including federal surveys, are subject to sampling error. Margin of error is influenced by multiple factors including sample size, estimate size, population size, and other parameters. Therefore, we do not report one margin of error across all indicators. With that said—due to the large sample sizes in this report (4,873 for the smallest supplement)—sampling error is quite small, within one to two percentage points. However, any analysis that breaks down the sample into smaller groups (e.g., gender, education) will have smaller samples, and therefore the margin of error will increase.

ENDNOTES

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CIVIC HEALTH INDEX

State and Local Partnerships

NCoC began America's Civic Health Index in 2006 to measure the level of civic engagement and health of our democracy. In 2009, NCoC was incorporated into the Edward M. Kennedy Serve America Act and directed to expand this civic health assessment in partnership with the Corporation for National and Community Service and the US Census Bureau.

NCoC now works with partners in more than 30 communities nationwide to use civic data to lead and inspire a public dialogue about the future of citizenship in America and to drive sustainable civic strategies.

Indiana University Center on Representative

STATES

Alabama

University of Alabama David Mathews Center for Civic Life Auburn University

Arizona

Center for the Future of Arizona

California

California Forward
Center for Civic Education
Center for Individual and
Institutional Renewal
Davenport Institute

Colorado

Metropolitan State University of Denver The Civic Canopy Denver Metro Chamber Leadership Campus Compact of Mountain West History Colorado Institute on Common Good

Connecticut

Everyday Democracy
Secretary of the State of Connecticut
DataHaven
Connecticut Humanities
Connecticut Campus Compact
The Fund for Greater Hartford
William Caspar Graustein Memorial Fund
Wesleyan University

District of Columbia

ServeDC

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Florida Joint Center for Citizenship Bob Graham Center for Public Service Lou Frey Institute of Politics and Government

Georgia

GeorgiaForward Carl Vinson Institute of Government, The University of Georgia Georgia Family Connection Partnership

Illinois

McCormick Foundation

Indiana

Government
Indiana Bar Foundation
Indiana Supreme Court
Indiana University Northwest
IU Center for Civic Literacy

Kansas

Kansas Health Foundation

Kentucky

Commonwealth of Kentucky,
Secretary of State's Office
Institute for Citizenship
& Social Responsibility,
Western Kentucky University
Kentucky Advocates for Civic Education
McConnell Center, University of Louisville

Maryland

Mannakee Circle Group Center for Civic Education Common Cause-Maryland Maryland Civic Literacy Commission

Massachusetts

Harvard Institute of Politics

Michigan

Michigan Nonprofit Association Michigan Campus Compact Michigan Community Service Commission Volunteer Centers of Michigan Council of Michigan Foundations Center for Study of Citizenship at Wayne State University

Minnesota

Center for Democracy and Citizenship

Missouri

Missouri State University Park University St. Louis University University of Missouri Kansas City University of Missouri Saint Louis Washington University

Nebraska

Nebraskans for Civic Reform

New Hampshire

Carsey Institute
Campus Compact of New Hampshire
University System of New Hampshire
New Hampshire College & University
Council

New York

Siena College Research Institute New York State Commission on National and Community Service

North Carolina

Institute for Emerging Issues

Ohio

Miami University Hamilton Center for Civic Engagement

Oklahoma

University of Central Oklahoma Oklahoma Campus Compact

Pennsylvania

Center for Democratic Deliberation National Constitution Center

South Carolina

University of South Carolina Upstate

Texas

The University of Texas at Austin
The Annette Strauss Institute for Civic Life
RGK Center for Philantrophy & Community
Service

Virginia

Center for the Constitution at James Madison's Montpelier Colonial Williamsburg Foundation

ISSUE SPECIFIC

Latinos Civic Health Index

Carnegie Corporation

Veterans Civic Health Index

The Mission Continues
Iraq and Afghanistan Veterans of America

Economic Health

Knight Foundation Corporation for National & Community Service (CNCS) CIRCLE

Atlanta

Community Foundation of Greater Atlanta

Austin

The University of Texas at Austin RGK Center for Philanthropy and Community Service

Annette Strauss Institute for Civic Life Leadership Austin Austin Community Foundation KLRU-TV, Austin PBS KUT 90.5 - Austin's NPR Station

Chicago

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CIVIC HEALTH ADVISORY GROUP

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Seattle City Club

Twin Cities

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