American Perspectives on Veterans

A July–September 2021 American Life Panel Survey About Americans’ Support for Veterans’ Benefits and Services
This report provides survey questions and weighted responses from a July–September 2021 survey of adults in the United States. The survey asked adults about their perspectives on veterans’ benefits. The results are intended to inform national discourse and policy decisions about benefits for veterans.

The survey was conducted through the American Life Panel, a nationally representative panel of American adults. A technical report describing the American Life Panel survey and weighting methods is available at www.rand.org/t/RR1651.

In the interest of rapid release, this report was not edited or proofread. It will be superseded by a final version.

**RAND Epstein Family Veterans Policy Research Institute**

Funding for this publication was made possible by a generous gift from Daniel J. Epstein through the Epstein Family Foundation, which established the RAND Epstein Family Veterans Policy Research Institute in 2021. The institute is dedicated to conducting innovative, evidence-based research and analysis to improve the lives of those who have served in the U.S. military. Building on decades of interdisciplinary expertise at the RAND Corporation, the institute prioritizes creative, equitable, and inclusive solutions and interventions that meet the needs of diverse veteran populations while engaging and empowering those who support them. For more information about the RAND Epstein Family Veterans Policy Research Institute, visit veterans.rand.org.

More information about RAND can be found at www.rand.org. Questions about this report or about the RAND Epstein Family Veterans Policy Research Institute should be directed to veteranspolicy@rand.org.

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Overview of the Survey

• RAND researchers developed a survey of U.S. adults who are part of the American Life Panel (ALP). The ALP is a nationally representative, probability-based panel of more than 5,000 participants.

• We asked respondents whether veterans should be guaranteed certain benefits, whether receipt of benefits should be dependent on veterans’ military service history, and whether the U.S. government was doing enough to care for veterans.

• We also used a “choice experiment” to test preferences for different packages of benefits for veterans and their willingness to pay for these benefits as taxpayers.

• More than 2,000 adults took the survey between July 22 and September 7, 2021. (More than 2,400 were invited to participate in our survey, reflecting an 84-percent completion rate.)

• Analyses were restricted to adults age 25+ and weighted to be nationally representative of U.S. adults because there was a small sample size of adults ages 18-24 (n = 21).

1 For more information about the ALP, visit https://www.rand.org/research/data/alp.html. Technical documentation about the ALP is available at www.rand.org/t/RR1651.
Key Findings

- **Support for veterans:** Very few American adults (3 percent) feel that the U.S. government is doing an excellent job of caring for its veterans (21 percent said it was doing a good job and 76 percent a fair/poor job)
  - 87 percent support the need to do more for veterans.
  - Half of American adults (51 percent) think that mental health care is the biggest need among veterans.

- **Support for veterans versus all Americans:** American adults are more likely to support a guarantee of benefits for veterans than for all Americans.
  - For example, 85 percent support a guarantee of free college for veterans, while 57 support free college for all Americans.
  - Most Americans support providing some public assistance programs to all community members, but even more support some provision specifically for veterans, even when provided through increased taxes.

- **Willingness to pay for programs:** American adults are willing to pay large amounts in annual taxes for public assistance programs—both for community members and for veterans.
  - Among programs for veterans, Americans are willing to pay more for housing and employment programs than for drug treatment programs.

- **Bonuses for veterans:** Americans support additional income (in the form of bonuses) for veterans who sustained either physical or mental health disabilities related to military service and are willing to pay at least $100 in taxes to provide these bonuses.
One way to understand public demand and willingness to pay for a policy that has not been implemented is to conduct a 
discrete choice experiment (DCE). A DCE is a quantitative method in which people are asked about their preferences 
regarding policies that require them to pay more in taxes.

By varying the policy attributes and tax levels across questions, a DCE measures

- preferences for policies
- aversion to taxes
- how much people are willing to pay for the policies.

Our survey implemented two discrete choice experiments: one about the provision of assistance programs and one about 
the provision of bonuses to veterans.
Choice Experiment 1: Public Assistance Programs

- Respondents read a narrative explaining that their state government was considering a new program for people in need.
- We randomized the respondents: Some read that the program would help “veterans in your community.” Others read that the program would help “members of your community.” In all other respects, the questions were the same.
- We varied elements of public assistance packages (housing assistance, employment assistance, drug treatment services, and cost), and respondents were asked to select which public assistance package they preferred.
- Respondents could choose one of the two packages offered, or they could opt out, thereby indicating that they would not pay for either assistance package.
- We used the responses to identify how people value housing, employment, and drug treatment and whether people value housing, employment, or drug treatment for veterans more, less, or the same as for members of the community in general.
Choice Experiment 2: Bonuses for Veterans

- Respondents read a narrative describing a package of annual benefit bonuses for veterans.
- We varied which types of bonuses were offered and the cost of the package.
- The bonus could depend on when veterans served in the military, whether they had a physical disability as a result of their military service (such as an amputation), or whether they had a service-related mental health condition (such as PTSD).
- The package could cost the respondent $20, $50, or $100 per year in taxes.
- We asked respondents to select which bonus package they preferred. Respondents could also opt out, thereby indicating that they would not pay for either bonus package.
- We used the responses to determine whether—and to what degree—people value different military experiences.
We calculated raw (unadjusted) statistics, such as means and proportions, for survey questions about whether veterans should be guaranteed certain benefits, whether receipt of benefits should be dependent on veterans’ military service history, and whether the United States was doing enough to care for veterans.

For the choice experiments, our methods were as follows:

• We separately estimated respondents’ preferences for more taxpayer-funded assistance programs and for veterans’ benefits. Specifically, we estimate which program features respondents are in favor of providing, and which features are more preferred.²

• We calculated willingness to pay (WTP) based on the “value of a tax dollar” and the value of the policy.³ WTP is calculated from two pieces of information.
  1. The amount of satisfaction derived from a policy feature, identified from the analysis. For example, after running the analysis, suppose we found that providing benefits for physically disabled veterans increased the probability of choosing a program by 20 percent.
  2. People’s dissatisfaction with giving money through a tax increase. For example, suppose the analysis indicated that for each $10 increase in tax, a person is 5-percent less likely to choose a benefit.

• We calculated WTP for each program type (e.g., housing assistance versus employment assistance) and determined whether respondents were willing to pay more for a program feature if it were provided to veterans versus community members.

More details can be found in the appendix.

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² We modeled the probability of choosing a package as a function of the policy attributes of that package compared to the policy attributes of the other packages offered.

³ WTP is the amount of tax at which respondents no longer prefer to provide the policy.
Questions About Americans’ Views on the Support Provided to Veterans, Veterans’ Needs, and How Support Should Be Allocated
Respondents believed that the United States was doing a fair or poor job of caring for veterans.

How would you rate the job the United States is doing in caring for its veterans?
The majority of respondents believed that the U.S. government should do more to care for veterans.

In general, do you think the U.S. government should do more to take care of veterans and their families, should it do less, or is it doing the right amount?

- **Do more**: 87%
- **Do less**: 11%
- **Right amount**: 2%
Most respondents saw the greatest need for mental health services for veterans, followed by housing for homeless veterans and physical health care.

In which area do you think veterans are the most in need of services?

- Physical health care: 51%
- Mental health care: 19%
- Housing for homeless vets: 15%
- Job training/employment assistance: 9%
- Other: 6%

13
The majority of respondents agreed that all Americans deserve access to free health care, affordable housing, and college.

Please indicate the extent to which you agree with the following statements: “All Americans should be guaranteed . . . .”

- Free medical care for physical health conditions
  - 11% Strongly disagree
  - 13% Somewhat disagree
  - 30% Somewhat agree
  - 46% Strongly agree

- Free medical care for mental health conditions
  - 10% Strongly disagree
  - 9% Somewhat disagree
  - 28% Somewhat agree
  - 53% Strongly agree

- Affordable housing
  - 10% Strongly disagree
  - 12% Somewhat disagree
  - 33% Somewhat agree
  - 45% Strongly agree

- Free college
  - 24% Strongly disagree
  - 18% Somewhat disagree
  - 27% Somewhat agree
  - 30% Strongly agree
Larger majorities agreed that veterans deserve access to free health care, affordable housing, and college.

Please indicate the extent to which you agree with the following statements: “All veterans should be guaranteed . . . .”

- Free medical care for physical health conditions originating during military service:
  - Strongly disagree: 0.8%
  - Somewhat disagree: 7%
  - Somewhat agree: 92%
  - Strongly agree: 9%

- Free medical care for mental health conditions originating during military service:
  - Strongly disagree: 0.4%
  - Somewhat disagree: 6%
  - Somewhat agree: 93%
  - Strongly agree: 7%

- Free medical care for physical health conditions regardless of when or where they originated:
  - Strongly disagree: 3%
  - Somewhat disagree: 9%
  - Somewhat agree: 21%
  - Strongly agree: 68%

- Free medical care for mental health conditions regardless of when or where they originated:
  - Strongly disagree: 2%
  - Somewhat disagree: 7%
  - Somewhat agree: 19%
  - Strongly agree: 71%

- Affordable housing:
  - Strongly disagree: 4%
  - Somewhat disagree: 9%
  - Somewhat agree: 23%
  - Strongly agree: 64%

- Free college:
  - Strongly disagree: 4%
  - Somewhat disagree: 12%
  - Somewhat agree: 27%
  - Strongly agree: 58%
Between two-thirds and three-quarters of respondents agreed that veterans should be provided with more benefits if they served longer, were exposed to combat, or were severely injured.

Please indicate the extent to which you agree with the following statements: “Veterans’ benefits should be based on . . . .”

How long they served in the military (that is, those who served in the military longer should receive more generous benefits than those who served for only a short time).

- Strongly disagree
- Somewhat disagree
- Somewhat agree
- Strongly agree

- 10% strongly disagree
- 14% somewhat disagree
- 40% somewhat agree
- 36% strongly agree

Whether they were exposed to combat (for example, those who were in combat should receive more generous benefits than those who were never in combat).

- 13% strongly disagree
- 23% somewhat disagree
- 33% somewhat agree
- 31% strongly agree

The degree to which they were injured during military service (that is, those with more severe injuries should receive more generous benefits than those who were not severely injured).

- 16% strongly disagree
- 19% somewhat disagree
- 31% somewhat agree
- 33% strongly agree
Choice Experiment 1: Public Assistance Programs
Respondents were asked to provide their preferences four times; each time, the program features changed.

This year, your state government is considering a new program to help \textit{(military veterans)(members)} of your community. There are two programs proposed. Both programs would provide housing, employment, and/or drug treatment for veterans in need. A program would cost your household $100 or $200 in taxes per year.

<table>
<thead>
<tr>
<th>Question 1 out of 6</th>
<th>Program A</th>
<th>Program B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing assistance</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Job assistance</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Drug treatment</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Additional tax to you each year</td>
<td>$100</td>
<td>$200</td>
</tr>
</tbody>
</table>

Which one do you prefer?
- [ ] I prefer Program A.
- [ ] I prefer Program B.
- [ ] I prefer neither of these (currently, $0).

NOTES: Some respondents saw questions about programs for military veterans, while others saw questions about members of their community. The questions were otherwise identical.
More respondents indicated support for veterans’ programs than for programs that targeted all community members.

Findings:

- The majority of respondents showed some support for providing these programs.
- More people opt out of all questions for programs to support members of the community than programs to support veterans.
  - Indicates broader support for tax-provided assistance programs for military veterans in the community than for members of the community in general.

NOTES: “No support” is defined as a respondent opting out of every question in the experiment. The difference in the proportion showing support is statistically significant.
There was broad-based support for all three types of public assistance programs for both veterans and community members.

<table>
<thead>
<tr>
<th>Program Feature</th>
<th>Community Members</th>
<th>Veterans</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug treatment</td>
<td>+ ***</td>
<td>+ ***</td>
</tr>
<tr>
<td>Employment assistance</td>
<td>+ ***</td>
<td>+ ***</td>
</tr>
<tr>
<td>Housing assistance</td>
<td>+ ***</td>
<td>+ ***</td>
</tr>
<tr>
<td>$100 tax</td>
<td>- **</td>
<td>- **</td>
</tr>
</tbody>
</table>

NOTES: This table summarizes the sign and strength of preferences from the discrete choice experiment. + = prefer having this program feature over not having it. – = prefer not having this program feature over having it. Asterisks indicate significance level of preference: ** p < 1%, *** p < 0.1%.

Findings:

• There were no statistically significant differences in preference for programs for community members versus programs for veterans.

• Respondents expressed a preference for housing assistance and employment assistance programs for veterans over drug treatment programs for veterans.4

• Respondents expressed no differential preferences across program types for community members.

• Respondents’ aversion to paying $100 in annual taxes was smaller than their support for the programs.

4 See appendix for more detail.
Among those who support public assistance programs, there was a high willingness to pay for programs of all types.

NOTE: Differences in WTP for programs for community members versus veterans were not statistically significant.
Choice Experiment 2: Annual Bonuses for Veterans
Respondents were asked to provide their preferences six times; each time, the program features changed.

There is discussion about an annual benefit bonus for military veterans. The annual bonus would depend on when the veteran served in the military, whether they have a physical disability from their military service (for example, chronic back pain or an amputation), and whether they have a mental health disability from their military service (for example, PTSD).

The bonus for veterans could cost your household $20, $50 or $100 in taxes per year.

Bonus features that are highlighted in yellow differ; otherwise, they are the same. Please assume veterans’ benefits are the same in all other ways, including those not listed.

<table>
<thead>
<tr>
<th>Question 1 out of 6</th>
<th>Status Quo</th>
<th>Bonus A</th>
<th>Bonus B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Served in military before Sept 11, 2001</td>
<td>No bonus</td>
<td>No bonus</td>
<td>No bonus</td>
</tr>
<tr>
<td>Served in military on or after Sept 11, 2001</td>
<td>No bonus</td>
<td>$300 bonus</td>
<td>No bonus</td>
</tr>
<tr>
<td>Physical disability related to military service</td>
<td>No bonus</td>
<td>No bonus</td>
<td>$300 bonus</td>
</tr>
<tr>
<td>Mental health disability related to military service</td>
<td>No bonus</td>
<td>$300 bonus</td>
<td>$300 bonus</td>
</tr>
<tr>
<td>Additional tax to you every year</td>
<td>$0</td>
<td>$20</td>
<td>$50</td>
</tr>
</tbody>
</table>

Which one do you prefer?
- □ I prefer Bonus A.
- □ I prefer Bonus B.
- □ I prefer neither of these (currently, $0).
Respondents supported both bonuses for military service–connected mental health and physical health disabilities.

<table>
<thead>
<tr>
<th>Bonus Feature</th>
<th>Probability of Preferring Bonus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Veterans who served before 9/11</td>
<td>− *</td>
</tr>
<tr>
<td>Veterans who served after 9/11</td>
<td>+ *</td>
</tr>
<tr>
<td>Veterans with a mental health disability</td>
<td>+ ***</td>
</tr>
<tr>
<td>Veterans with a physical health disability</td>
<td>+ ***</td>
</tr>
<tr>
<td>$100 tax</td>
<td>0(^a)</td>
</tr>
</tbody>
</table>

NOTES: This table summarizes the sign and strength of preferences from the discrete choice experiment. + = prefer providing this bonus over not providing it. − = prefer not providing this bonus over providing it. Asterisks indicate significance level: * \(p < 5\%\), *** \(p < 0.1\%\).

\(^a\) not statistically significantly different from 0.

**Findings:**

- There was a slight preference for a bonus for post-9/11 veterans, however the size of the preference was small and indicated very little support in general for bonuses tied to era of military service.\(^5\)

- Respondents exhibited no aversion to taxes, as a result we can only estimate that respondents were willing to pay at least $100 in taxes (the maximum amount asked) for a disability bonus for veterans.

\(^5\) See Appendix for more detail.
Appendix. Support for Choice Experiment Conclusions and Model Estimation Results
Support for Discrete Choice Experiment Conclusions

A random utility model assumes that utility of a program is a linear function of program characteristics and allows for unobserved individual heterogeneity in baseline utility. A respondent is assumed to select the program that gives the highest utility. The probability of selecting a program thus depends on the attributes of that program compared with the other possible choices.

We developed a conditional logit discrete choice model and produced estimates in Stata. The following tables provide the coefficients from the estimated model. The coefficient values do not have inherent meaning, but the sign and statistical significance indicate preference. For example, a positive and statistically significant coefficient on drug treatment indicates that including a drug treatment policy increases the likelihood that respondents will choose that program bundle.

Relative magnitudes of coefficients indicate differential strength in preferences. For example, the magnitude of the coefficient on housing is more than 300 times the magnitude of the coefficient on tax, and that difference is statistically significant (see next slide). This indicates that respondents prefer providing a housing assistance program significantly more than they dislike paying $100 in annual taxes. For the group asked about programs for veterans, the coefficient on housing and the coefficient on employment are each statistically significantly different (and larger) than the coefficient on drug treatment, indicating that respondents statistically significantly prefer providing housing or employment assistance programs to veterans over drug treatment programs.

Note that all analyses were conducted using survey weights and limited to the subsample of respondents over 24 years old.
## Choice Experiment 1 Model Estimation Results: Within Group Preferences for Assistance Programs

<table>
<thead>
<tr>
<th>Program</th>
<th>For Community Members</th>
<th>For Veterans</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>b/se/p</td>
<td>b/se/p</td>
</tr>
<tr>
<td>Housing</td>
<td>1.04946 (0.111)</td>
<td>1.19007 (0.134)</td>
</tr>
<tr>
<td></td>
<td>[&lt;0.001]</td>
<td>[&lt;0.001]</td>
</tr>
<tr>
<td>Employment</td>
<td>0.94958 (0.103)</td>
<td>1.22721 (0.113)</td>
</tr>
<tr>
<td></td>
<td>[&lt;0.001]</td>
<td>[&lt;0.001]</td>
</tr>
<tr>
<td>Drug treatment</td>
<td>0.99210 (0.121)</td>
<td>0.87903 (0.147)</td>
</tr>
<tr>
<td></td>
<td>[&lt;0.001]</td>
<td>[&lt;0.001]</td>
</tr>
<tr>
<td>Tax</td>
<td>-0.00321 (0.001)</td>
<td>-0.00357 (0.001)</td>
</tr>
<tr>
<td></td>
<td>[0.001]</td>
<td>[0.002]</td>
</tr>
<tr>
<td>p_Housing vs. Employment</td>
<td>0.355</td>
<td>0.714</td>
</tr>
<tr>
<td>p_Housing vs. Drug</td>
<td>0.693</td>
<td>0.015</td>
</tr>
<tr>
<td>p_Employment vs. Drug</td>
<td>0.747</td>
<td>0.011</td>
</tr>
<tr>
<td>p_Drug treatment vs. Tax</td>
<td>&lt;0.001</td>
<td>&lt;0.001</td>
</tr>
</tbody>
</table>

**Findings:**

- Strong preferences for all programs.
  - Results were positive and statistically significant at the 1% level when it came to preferences for each program.
  - There were stronger preferences for housing or employment assistance for veterans than there was for drug treatment programs for veterans.
    - p-values for housing versus drug treatment and employment versus drug treatment
  - Respondents’ aversion to paying $100 in annual taxes was smaller than their support for programs.
    - p-value for drug treatment versus tax. Other p-values for tests against tax were even smaller because the relative magnitude was even larger.

**NOTES:** b/se/p = coefficient/standard error/p-value. Standard errors in parentheses and p-values in brackets below coefficient estimates. Estimation results from conditional logit random utility model. Estimation in column 2 on 8,895 choice observations from 745 respondents. Estimation in column 3 on 10,569 choice observations from 881 respondents. Standard errors clustered at the respondent level. In the last four rows, p X vs. W is the p-value from a test of equality between the coefficient on X and the coefficient on W.
Choice Experiment 1 Model Estimation Results: Across Groups
Preferences for Assistance Programs

<table>
<thead>
<tr>
<th>Program</th>
<th>For Community Members</th>
<th>For Veterans</th>
<th>Tests Across Groups</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>b/se/p</td>
<td>b/se</td>
<td>p</td>
</tr>
<tr>
<td>Housing</td>
<td>1.04946 (0.111)</td>
<td>1.19007 (0.134)</td>
<td>0.42 [&lt;0.001] [&lt;0.001]</td>
</tr>
<tr>
<td>Employment</td>
<td>0.94958 (0.103)</td>
<td>1.22721 (0.113)</td>
<td>0.069 [&lt;0.001] [&lt;0.001]</td>
</tr>
<tr>
<td>Drug treatment</td>
<td>0.99210 (0.121)</td>
<td>0.87903 (0.147)</td>
<td>0.552 [&lt;0.001] [&lt;0.001]</td>
</tr>
<tr>
<td>Tax</td>
<td>-0.00321 (0.001)</td>
<td>-0.00357 (0.001)</td>
<td>0.81 [0.001] [0.002]</td>
</tr>
</tbody>
</table>

Finding:
- There were no statistically significant differences in preferences for programs for community members versus programs for veterans.
  - Differences across groups not statistically significant at the 5% level.

NOTES: b/se/p = coefficient/standard errors/p-value. Columns 2 and 3 are from previous table. The rightmost column gives the p-value from a test of the null hypothesis that the coefficient is the same in the two groups. For example, the p-value for the test that the coefficient on housing is the same for both groups is 0.42.
Choice Experiment 1 Model Estimation Results: WTP
Willingness to Pay for Programs

<table>
<thead>
<tr>
<th>Program</th>
<th>Group A WTP (asked about programs for community members)</th>
<th>Group B WTP (asked about programs for veterans in the community)</th>
<th>Group A WTP vs. Group B WTP (p-values for test of equality of WTP across groups)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing</td>
<td>$327***</td>
<td>$334***</td>
<td>0.948</td>
</tr>
<tr>
<td></td>
<td>(77.632)</td>
<td>(79.203)</td>
<td></td>
</tr>
<tr>
<td>Employment</td>
<td>$295***</td>
<td>$344***</td>
<td>0.671</td>
</tr>
<tr>
<td></td>
<td>(70.725)</td>
<td>(92.820)</td>
<td></td>
</tr>
<tr>
<td>Drug treatment</td>
<td>$309***</td>
<td>$247***</td>
<td>0.506</td>
</tr>
<tr>
<td></td>
<td>(76.653)</td>
<td>(53.668)</td>
<td></td>
</tr>
</tbody>
</table>

NOTES: Standard errors in parentheses. *** p < 1%.

Findings:
• Large WTP for all programs.
• Differences in WTP for programs for community members versus veterans were not statistically significant.
# Choice Experiment 2 Model Estimation Results

## Preferences for Bonuses

<table>
<thead>
<tr>
<th>Bonus</th>
<th>Choice Experiment 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>b/se/p</td>
</tr>
<tr>
<td>Veterans who served before 9/11</td>
<td>-0.12158 (0.061)</td>
</tr>
<tr>
<td></td>
<td>(0.045)</td>
</tr>
<tr>
<td>Veterans who served after 9/11</td>
<td>0.11712 (0.055)</td>
</tr>
<tr>
<td></td>
<td>(0.034)</td>
</tr>
<tr>
<td>Physical health disability</td>
<td>0.68486 (0.052)</td>
</tr>
<tr>
<td></td>
<td>[&lt;0.001]</td>
</tr>
<tr>
<td>Mental health disability</td>
<td>0.64138 (0.052)</td>
</tr>
<tr>
<td></td>
<td>[&lt;0.001]</td>
</tr>
<tr>
<td>Tax</td>
<td>0.00214 (0.001)</td>
</tr>
<tr>
<td></td>
<td>(0.091)</td>
</tr>
<tr>
<td>p_Physical vs. Mental</td>
<td>0.507</td>
</tr>
<tr>
<td>p_Physical vs. PostSept11</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>p_Mental vs. PostSept11</td>
<td>&lt;0.001</td>
</tr>
</tbody>
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**Findings:**

- (Almost) zero preferences for bonuses tied to era of military service
  - The point estimates are significant at the 5% level. With this sample size in an experimental setting, that is marginal significance. The other preference are significant at the 0.1% level.
  - The point estimates are relatively small, with the point estimates on the disability bonuses over five times as large.
  - The ratio of probabilities of choosing between two different packages, one of which includes a bonus for service after September 11\(^{th}\) and the other of which does not, is given by the exponential of the coefficient: \(\exp(0.117)\), which is roughly 1.12, meaning roughly a 12% increase in the likelihood of choosing the package with the bonus for post September 11\(^{th}\) service. A 12% increase in likelihood is like going from 50% likely to almost 57% likely. We consider that small.
  - Marginal statistical significance and substantially small point estimate means we consider the coefficient a noisy zero as opposed to capturing a non-zero preference.
- Support for both bonuses for military service-connected mental health and physical health disabilities
- Respondents were willing to pay at least $100 in taxes for a disability bonus for veterans
  - $100 was the highest level of tax, and it was not enough to pick up any tax aversion.

**NOTES:** b/se/p = coefficient/standard error/p-value. Standard errors in parentheses and p-values in brackets below coefficient estimates. Estimation results from conditional logit random utility model. Estimation sample of 30,696 choice observations from 1,706 respondents. Standard errors clustered at the respondent level. In the last three rows, p X vs. W is the p-value from a test of equality between the coefficient on X and the coefficient on W.