

US military making progress reducing stigma tied to seeking help for mental illness

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The U.S. Department of Defense has made progress in reducing the stigma associated with seeking help for mental illnesses such as depression and post-traumatic stress disorder, but more improvement is still needed, according to a new RAND Corporation study.

Despite efforts of both the Defense Department and the Veterans Health Administration to enhance mental health services, many service members still do not seek needed care for mental health problems. Defense officials have made a concerted effort to promote treatment as a way to reduce stigma, according to the study. The department also has worked to create a culture shift where mental health is discussed in the context of readiness and resilience, and where seeking help is defined as a sign of strength.

"We found numerous examples of how the military is encouraging service members with mental illness to get help and treatment, but we also found some gaps," said Joie D. Acosta, lead author of the report and a behavioral scientist at RAND, a nonprofit research organization. "For example, we found language in 12 percent of relevant military policies that characterizes mental health issues in a negative light. In addition, the perceived stigma around getting help isn't the only barrier service members face."

Acosta and her colleagues were asked to inventory and assess stigmareduction strategies across the military services and the Defense Department as a whole, and to identify strengths and gaps that should be



addressed.

RAND researchers reviewed relevant literature on the topic and did micro-simulation modeling of the potential costs associated with stigma, including costs from cycling in and out of treatment, lost productivity, suicide attempts and deaths by suicide. They also interviewed program staff and convened an expert panel.

Many experts believe that the fear of stigma can prevent military members from seeking help for mental health problems, Acosta said. The RAND study did not find an evidence-based link between stigma and the long-term outcomes of not treating those with mental health issues, although stigma may have an influence on treatment success.

Other barriers, such as the perception that support from family and friends provides a more-helpful alternative to professional mental health treatment, influence whether an individual seeks care. Reducing that barrier by half would increase treatment costs by just under \$3 million, but would result in more than \$9 million in savings in lost productivity and other costs, Acosta said.

The biggest issue for the Defense Department to address is the tension that exists between a command's need to know a service member's mental health status and treatment history, and the service member's right to privacy, Acosta said. The study recommends that a task force assess what type of information mental health providers should share with commanders, and develop clear processes for these exceptions.

The study also recommends the U.S. military explore interventions that directly increase the rate of service members seeking mental health treatment. Focusing primarily on a single barrier to care, such as stigma, may cloud other potential interventions to promote help. Military officials also should consider evidence-based approaches to empowering



service members with mental health concerns to support their peers who have mental health needs.

Service members' preferences for self-management may be a key barrier to their getting help for <u>mental health issues</u>, Acosta said. So she and her colleagues recommend that the military develop alternative mechanisms for treatment delivery, such as Internet-based tools.

The military also should better define when a specific mental health issue would prohibit a service member from certain jobs or actions; currently, a large number of policies are vague.

Much of stigma research focuses on schizophrenia or general mental health concerns, rather than post-traumatic stress disorder, anxiety or depression, which are the disorders that may be of most interest to the Defense Department, Acosta said. Understanding how stigma differs among these disorders and whether there are different beliefs about treatment success for these disorders would help the department better target stigma reduction efforts.

More information: The study, "Mental Health Sigma in the Military," can be found at www.rand.org

Provided by RAND Corporation

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