

Pentagon perpetuates stigma of mental health counseling, study says

May 6 2016, by Gregg Zoroya, Usa Today

Even as troop suicides remain at record levels, the Pentagon has failed to persuade servicemembers to seek counseling without fears that they'll damage their careers, a stinging government review concludes.

Despite six major Pentagon or independent studies from 2007 through 2014 that urged action to end the persistent stigma linked to [mental health](#) counseling, little has changed, analysts said in the April report by the Government Accountability Office.

One key problem is that many Defense Department policies covering job assignments and security clearances still discriminate against anyone who receives [mental health care](#), the report said.

"The potential for inconsistent decision making by commanders and leaders in suspending clearances or removing individuals from sensitive positions may further impede the department's efforts to address stigma," the report said.

The Pentagon largely agreed with all the conclusions and recommendations. Air Force Maj. Benjamin Sakrisson acknowledged that the problems described in the report can cause servicemembers to pay for their own counseling to keep it "off the books."

"The Department of Defense has been actively engaged in addressing the problems of stigma and other barriers to care," Sakrisson said.

The most recent health survey of U.S. troops from 2011 shows that 37% of active duty servicemembers, nearly 600,000, felt that seeking mental [health care](#) through the military would probably or definitely hurt their career. Results from a follow-up survey last year, while not yet made public by the Pentagon, shows little change in that percentage, according to Brenda Farrell, the GAO analyst overseeing the review.

"They haven't been able to get their arms around it," Farrell said.

Suicides across the military rose precipitously from 2005 to 2009 and have remained at record numbers since then, according to Pentagon data. The most recent suicide rate provided by the Pentagon, for 2014, is 19.9 per 100,000. The national civilian rate for that year was 12.93 per 100,000, according to the American Foundation for Suicide Prevention.

The number of post-traumatic stress disorder and depression diagnoses, along with traumatic brain injuries, have soared during years of fighting in Iraq and Afghanistan.

GAO analysts conducted 23 focus group interviews from June 2015 to April 2016 with servicemembers who complained about being called "malingerers" for seeking counseling. At one military installation, the mental health clinic is accessed by a single elevator—dubbed the "elevator of shame"—so anyone visiting is readily identified.

Among other findings:

- * A 2014 RAND study identified 203 Pentagon policies that may contribute to stigma and need to be reviewed, but nothing has been done about them, in part, because they are not a big enough priority for the Pentagon.

- * Despite a 2012 directive from the secretary of Defense that seeking

mental health care should not adversely impact security clearances, this practice continues. Analysts found that people who see a therapist are at least temporarily losing their access to classified information.

* Department of Defense civilians who deploy overseas are not asked about whether stigma is a problem, so it is impossible to gauge whether they are also avoiding mental health care because of it.

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