Perceived Stigmas and Barriers for Veterans with Mental Health Disorders

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Perceived Stigmas and Barriers for Veterans with Mental Health Disorders

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Background

Life threatening traumatic experiences of soldiers may lead to long-term mental health issues. Research has shown a low percentage of veterans taking advantage of these mental health services.

Purpose

• Evaluate the help-seeking behaviors of veterans screening positive for mental health problems
• Determine which modifiable risk factors of perceived stigma and barriers to mental health utilization are most consistent with veterans screening positive for mental health problems

Methods

• Integrative review of literature using Whittemore and Knaff’s updated methodology
• Research databases used consisted of PsycINFO, PubMed, and Cumulative Index of Nursing and Allied Health (CINAHL) Complete
• Multiple search words used in various combinations included: “veterans”, “stigma”, “stigmatize”, “stigmatization”, “seek”, “seeks”, and “seeking”
• A total of 9 articles were selected, reviewed independently, and divided into subgroups: help-seeking behaviors of veterans and perceived stigma and barriers to mental health care
• Relevant data was extracted from studies, displayed in a chart matrix, and data comparison was performed

Findings

Help-Seeking Behaviors of Veterans:

• No more than 39% of veterans screening positive for at least one mental health disorder in any study sought mental health care post military service
• Veterans reported choosing initially to cope on their own without medical treatment and sometimes using non evidence-based forms of relief with some turning to substance abuse
• Negative beliefs on mental health care were associated with the underutilization of mental health services
• However, veterans with more severe mental disorders were more likely to seek and accept treatment despite perceived stigma

Perceived Stigma and Barriers to Mental Health Care:

• Perceived stigma barriers identified by the veterans included concerns about social consequences and discomfort with help-seeking, as well as institutional barriers such as poor Veterans Administration (VA) staff interactions and care
• The most common barrier to mental health care identified by all studies in the literature review was fear of social consequences (the second most common barrier identified was decreased unit support)
• Veterans with negative perceptions on mental health care, as well as the lack of support from military staff and their families, often contributed to a decrease in mental health care utilization

Nursing Implications

• Tend to the negative beliefs and barriers identified by veterans through support groups and cognitive-behavioral or motivational interventions
• Utilize the Theory of Planned Behavior to identify the attitudes and beliefs of both veterans and their support systems
• Educate veterans and their support systems of mental health and the benefits of treatment
• Educate military leaders about mental health to increase unit support and engagement in mental health care

Conclusion

Future research should focus on increasing the engagement for mental health treatment through cognitive-behavioral or motivational interventions for veterans in an effort to help veterans overcome stigma and decrease underutilization of mental health care. Additionally, research on military policy, as well as mental health support and promotion by military leaders may also be beneficial, considering decreased perceived unit support was identified as the second most common barrier to mental health help-seeking behavior.