Facilitating Help-seeking Behavior for Psychological Health Concerns in Service Members

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This Conference is approved for up to 1.5 hours of continuing education. APA Division 22 (Rehabilitation Psychology) is approved by the American Psychological Association to sponsor continuing education for psychologists. APA Division 22 maintains responsibility for this program and its content.

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Webinar Overview

Service members are often susceptible to increased rates of diagnosable psychological health concerns. This is particularly true in service members who have experienced multiple deployments and/or who have served in combat roles. Data suggests that relatively few service members with psychological health concerns seek help, which may increase the risk of ongoing symptoms, diminished readiness, and career implications. These barriers to care are present across all service branches, including the National Guard and reserves, who face additional challenges and potentially reduced access to psychological health care or resources. This review presents research findings about the barriers to care for service members, along with systematic efforts to reduce stigma and facilitate help-seeking behavior. Additionally, the presentation will discuss strategies that health care providers and line leaders can implement to reduce stigma and facilitate help-seeking behavior.

At the conclusion of this webinar, participants will be able to:

- Identify the major barriers in seeking help for psychological health concerns for service members.
- Recognize systematic efforts to increase access to care, reduce stigma, and encourage help-seeking behavior.
- Learn strategies to dispel stigma and facilitate help-seeking for psychological health concerns in service members.

Bradford W. Applegate, Ph. D.

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- Dr. Brad Applegate is a clinical health psychologist and an associate at Booz Allen Hamilton. He provides subject matter expertise and content oversight to the Real Warriors Campaign, a Defense Department public health campaign aimed at increasing psychological health literacy, help-seeking behavior, and outreach to members of the military, veterans, their families, and health care providers.

- Dr. Applegate earned his doctoral degree in clinical psychology from Louisiana State University and completed a postdoctoral fellowship in primary care health psychology at the University of Mississippi Medical Center.

- Dr. Applegate has worked in a wide range of settings, including academic medicine, research, and clinical practice. Prior to joining the Real Warriors Campaign, he served as subject matter expert in psychological health to the Navy Bureau of Medicine and Surgery Wounded Ill, and Injured (BUMED-M9, WII) program management office.

Disclosures

- Dr. Applegate has no relevant financial relationships to disclose.
- Booz Allen Hamilton provided contract support for this activity.
- The views expressed in this presentation are those of the author and do not necessarily reflect the official policy or position of the Department of Defense, nor the U.S. Government.

Structure of today's presentation

- Discuss psychological health concerns and help-seeking in military and non-military populations.
- Present the important role of stigma as it relates to help-seeking.
- Illustrate different systematic approaches to facilitate help-seeking.
- Review specific techniques that health care providers and line leaders can do to facilitate help-seeking for those who need it.

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Psychological health problems are common in military and nonmilitary populations

- **Military Populations**
  - 25 percent past 30 days prevalence (Kessler, Heeringa et al., 2014)
  - Combat exposure and number of deployments strongly associated (Miller et al., 2008)
  - Pre-deployment psychological health, age, enlistment status associated (Kessler, Heeringa et al., 2014)
- **Nonmilitary Populations**
  - 18.5 percent past year prevalence (Kessler, Alonso et al., 2014)
  - Environmental, individual, and social factors contribute to problem development (WHO, 2012)

Few with psychological health problems seek care

- **Military Populations**
  - Less than 50 percent with PTSD diagnoses in treatment (Ramchand et al., 2015)
  - 21 percent with current disorder in treatment (Colpe et al., 2015)
  - 78-86 percent were able to recognize their symptoms
    - Only 38-45 percent interested in treatment
    - 13–21 percent in treatment (Hoge et al., 2004)
- **Nonmilitary Populations**
  - 50 percent of adults do not receive treatment (Substance Abuse and Mental Health Services Administration, 2012)
  - African Americans and Hispanics receive help at half the rates of Caucasian non-Hispanics (AHRQ, 2010)
  - Women more likely to seek help than men

Understanding the barriers to seeking care in the military

- **Fear that help-seeking will impact career**
- Stigma related to help-seeking
- Organizational and climate factors
- Cultural and individual factors
- Logistical factors

Service members fear help-seeking will impact their careers

- Cornish et al. (2014) identified concerns with seeking help:
  - Ability to be promoted
  - Prevented from future deployments
  - Hinder future job opportunities

- Gibbs et al. (2011) found that service members believed appointments and prescriptions could lead to disqualifications from their job duties

- Bonar et al. (2014) service members concerned over psychological health treatment as part of their service record

- Blue Star Families (2014) found service members reported concerns over maintaining / obtaining a security clearance

Stigma related to help-seeking

General Definition

"Mental health stigma is a dynamic process by which a service member perceives or internalizes the identity of someone who seeks help as outside of what is normal and acceptable." (Acosta et al., 2014)

Stigma related to help-seeking: Types of stigma

Public Stigma	The knowledge, attitudes, and beliefs about people with psychological health concerns or about psychological health treatment; the prejudicial and discriminatory behaviors coming from friends, family, co-workers, healthcare providers, and the public (Acosta et al., 2014)
Anticipated Enacted Stigma	The perception that others will react to a person in a discriminatory or hostile manner once they find out that person is seeking treatment (Ouimette et al., 2011)
Self-Stigma	The internalization of negative attitudes and stereotypes about psychological health; associated with a loss of self-esteem and self-efficacy (Acosta et al., 2014)

Stigma related to help-seeking: Public stigma

- Vogt (2011) and Kim et al. (2011) found that service members and veterans report feelings of public stigma

- Mittal et al. (2013) found that common stereotypes of a diagnosis of PTSD include viewing the person as:
  - Dangerous
  - Violent
  - Crazy

- Sharp et al. (2015) found that public stigma may or may not impede help seeking

Stigma related to help-seeking: Anticipated enacted stigma

- Fear that others will associate negative stereotypes with their treatment of a psychological health problem if it becomes "public"

- Can cause embarrassment and fear they will be perceived as "weak" for seeking care (Bonar et al., 2014)

- Sharp et al. (2015) meta analysis
  - 9 / 20 studies found no association between anticipated stigma and help seeking intentions
  - 4 / 20 studies found those who endorsed high anticipated stigma were still interested in or used health services

Stigma related to help-seeking: Self-stigma

- Individuals with self-stigma develop more negative attitudes towards seeking treatment for psychological health problems (Held & Owens, 2012)

- Negatively associated with help-seeking (Blais & Renshaw, 2013)
  - Negative associations with intentions to seek help from a psychological health professional (Blais & Renshaw, 2013)
  - Self-stigma mediates relationship between anticipated stigma and help-seeking intentions (Blais & Renshaw, 2014)
  - Correlated with treatment dropout (Britt et al., 2015)

Organizational factors and help-seeking

- **Component**
  - National Guard members with psychological health problems use services more than twice the rate of active component (Kim et al., 2011)
  - Active component reports higher rates of stigma than in National Guard (Kim et al., 2011)

- **Rank**
  - Junior enlisted Marines more likely to report psychological health problems and less likely to seek help (Farmer et al., 2014)
  - Officers more likely to report embarrassment over help-seeking (Hernandez et al., 2014)

Climate factors and help-seeking

- **Unit cohesion**
  - Higher unit cohesion associated with lower perceived stigma and perceived barriers to care (Wright et al., 2009)
  - Supportive environments associated with reduced stigma and increased comfort to address psychological health concerns (Kelley et al., 2014)

- **Leadership behavior**
  - NCO behavior associated with stigma and reported barriers to seeking help (Britt et al., 2012)
  - Service members who rate leadership positively report lower stigma and fewer barriers to care (Wright et al., 2009)

Cultural and individual factors related to help-seeking

- **Micro-cultural factors**
  - Race, sex, ethnicity
- **Recognition of psychological health problems**
  - Those unaware of or who deny presence of problems are less likely to initiate care (Britt et al., 2011; Brown et al., 2011; Spoont et al., 2014)
- **Types of problems**
  - Severe PTSD and depression associated with increased utilization of psychological health services (Hearne 2013; Hoerster et al., 2012)
- **Prior psychological health treatment**
  - Previous care associated with increased interested in treatment, especially when treatment is viewed positively (Brown et al., 2011)

Logistical factors related to help-seeking

- **Proximity to clinic**
  - 300,000 service members > 30 minutes away from clinic (Brown et al., 2015)
- **Other Possible Factors:**
  - Appointment scheduling
  - Difficulty getting to appointments / time off work
  - Parking
  - Difficulty navigating mental health services

Systematic approaches to facilitate help-seeking

- **Integrated primary care**

- **Embedded behavioral health**

- **Public health awareness / stigma campaigns**
  - Real Warriors Campaign
  - AfterDeployment
  - VA's Make the Connection

Integrated primary health care

- Primary care as the de Facto mental health care system
- Trained behavioral expert housed in primary care home
- Provides easier access to care
- Problem-focused approaches may help to de-stigmatize interactions
- Potential to facilitate easier transition to specialty mental health

Embedded behavioral health

- On-the-ground consultation to educate service members, increase efficacy for change, increase familiarity with psychological health care providers
- Potential for early intervention and positive outcomes
- Potential to raise psychological health literacy and decrease stigma

Audience poll

- Prior to today, had you ever heard of the Real Warriors Campaign?
  - Yes
  - No

Real Warriors Campaign

- The Real Warriors Campaign is a multimedia public awareness initiative designed to encourage help-seeking behavior among service members and veterans coping with psychological health concerns.

- The campaign is an integral part of the Defense Department's overall effort to eliminate the stigma that was identified in the 2007 Mental Health Task Force Report and encourage help-seeking behavior for invisible wounds.

- The campaign's audience includes service members from all components, including members of the National Guard and reservists, military family members, veterans and health care providers.

Real Warriors Campaign – formative research

- **Service members want proof.** Personal examples of service members who have received psychological health care, support or treatment and are maintaining a successful military career

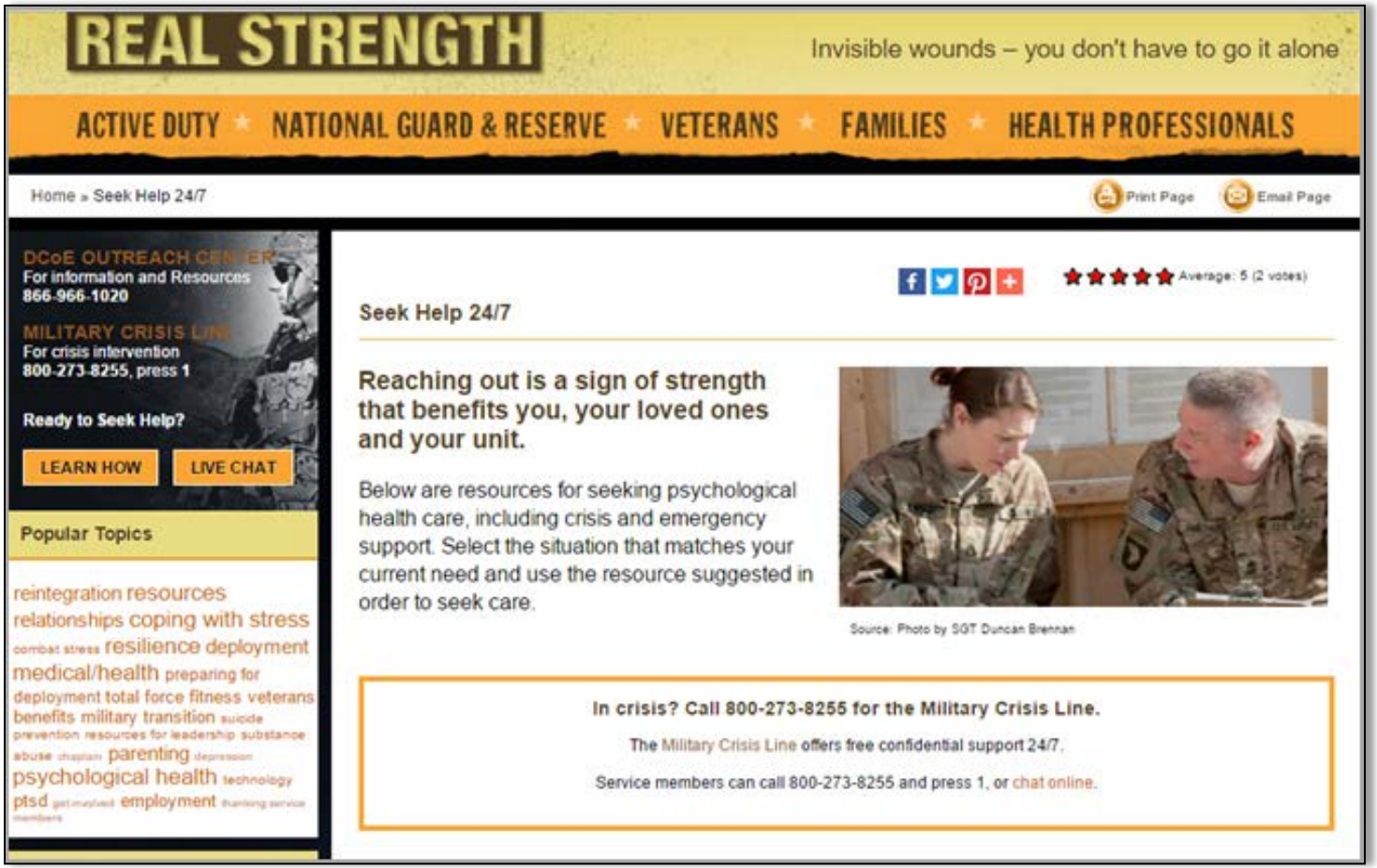
- **Service members want success, either in their military career or post-service**. Quotes include, “I’m back with my unit;” “I’m still in command;” “I needed help, I got help”

- **Service members want to see themselves.** Profiles represent a variety of services, rank (enlisted and officers) and age as well as representation of both active-duty members and National Guardsmen and reservists

5 ways providers can utilize the Real Warriors Campaign to support help-seeking

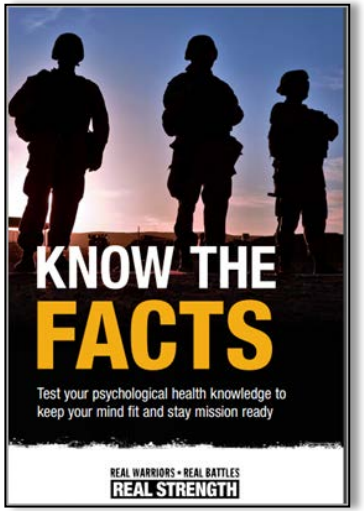
- **Direct individuals to campaign website for 24/7 access to resources**
  - Live chat with a master's level health resource consultant
- **Display and distribute tangible help-seeking resources**
  - Materials that support help-seeking and improve psychological health literacy
- **Recommend use of the Real Warriors App to support care and connect with peers**
  - Mobile app fosters a culture of support for psychological health
  - Provide access to 24/7 resources via mobile devices
- **Reach remote audiences by engaging with campaign social media**
  - Social media posts help-seeking messages at high risk times
- **Share video stories of Real Warriors to demonstrate that reaching out is a sign of strength**
  - Stories from Real Warriors demonstrate that reaching out is a sign of strength

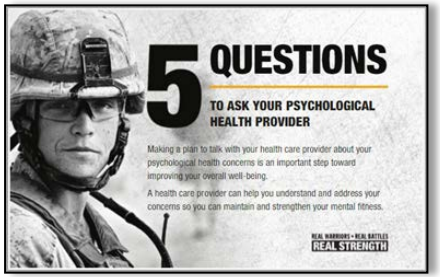
Real Warriors Campaign – seek help features



www.realwarriors.net

Real Warriors Campaign – print materials





www.realwarriors.net/materials

Real Warriors Campaign – mobile app

www.realwarriors.net

Real Warriors Campaign – social media channels

Real Warriors Campaign – video profiles

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https://www.youtube.com/user/realwarriorscampaign

Facilitating help-seeking at the individual level

- Primary care settings
- Behavioral health settings
- Line settings

Facilitating help-seeking in primary care settings

- **Integrated primary care settings**
  - Establish relationships
  - Learn and utilize effective screening tools
  - Understand the context of your patient's visit
    - Deployment cycle
    - Symptoms
  - Learn to pick up signs of psychological distress
    - Sleep, energy, stress, and others
  - Learn to communicate with your patients about integrated care
    - Patient-centered listening
  - **Normalize symptoms**

Facilitating help-seeking in primary care settings

- **Traditional primary care setting**
  - Establish relationships with specialty mental health care providers
  - Learn service availability, structure of clinic
  - Lean to utilize effective screening measures
  - Provide effective patient education materials
    - Use Real Warriors Campaign resources
  - Communicate that help is available
  - Establish concern over symptoms and confidence in system to help
  - Normalize symptoms
  - Provide examples of success

Facilitating help-seeking by behavioral health care providers

- **Behavioral health providers**
  - Establish relationships with primary care
  - Consult with providers on screening and referral process
  - Develop and communicate appropriate crisis management plans
  - Use Real Warriors Campaign resources
  - **Provide high quality, evidence-based assessment and treatment**

Facilitating help-seeking by line personnel

- Foster unit cohesion
  - Attend to those on the periphery
- Attend and utilize available trainings
- Listen to your unit
- Dispel stigma when you see it
- Pay attention to changes in behavior, attitude, rumors
- Use Real Warriors Campaign resources

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Clinician's Guide to Cognitive Rehabilitation in mTBI: Applications in Military Service Members and Veterans

June 9, 2016; 1-2:30 p.m. (ET)

Next DCoE Psychological Health Webinar Theme:

Obesity, Eating Behaviors, and Stigma among Service Members and Dependents

June 23, 2016; 1-2:30 p.m. (ET)

Save the Date

2016 Summit State of the Science: Advantages in Diagnostics and Treatments of Psychological Health and Traumatic Brian Injury in Military Health Care

September 13 – 15, 2016

DCoE Contact Info

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