The problem of Veterans struggling with the stigma of PTSD is that the military culture promotes inner strength, self-reliance, and the ability to "shake off" injury (American Public Health Association, 2014/2020). This stigma makes active duty soldiers and veterans who so desperately need PTSD treatment less likely to seek help with their mental states. This stigma can also lead to an increase in soldiers more likely to commit suicide and/or lead to drug and alcohol abuse. With proper treatment and eliminating the stigma it is possible to have a healthier military. “Nearly one in four veterans who have screened positive for mental illness state that they did not seek care because their leaders discouraged the use of mental health services” (American Public Health Association, 2014/2020). This is a major part of the problem. Veterans and active duty military are taught in basic training to shake off all injuries. To be tough and push through the pain. As said by my father, who served in Vietnam, if you ask for help then you are weak and are not a man. The fear of stigmatization deters individuals from acknowledging their illness, seeking help, and remaining in treatment, thus creating unnecessary suffering (American Public Health Association, 2014/2020).

The article “Mental Health Beliefs and Their Relationship with Treatment Seeking Among U.S. OEF/OIF Veterans,” hopes to call attention to and potentially find out the reason behind the stigma of Veterans suffering from PTSD. The authors conducted a mail in survey to veterans of OEF (Operation Enduring Freedom) and veterans of OIF (Operation Iraqi Freedom). The surveys were to determine the thoughts behind why they or other veterans did not seek mental health treatment and possibly point out where the stigmatization comes from. After the data was collected, they found that veterans had significant more fear about what the world would think about them if they were to seek treatment for mental health. "Between a quarter and a third of participants, however, agreed that friends and family would feel uncomfortable around

them, would think less of them, and would view them as weak if they had a mental health problem" (Vogt et al., 2014/2020). The data pointed out that there is a significant fear of what others think if they were to seek treatment, this portrays why some of the stigmatization exists. The theory in this article addresses the possible reason behind the stigma. Findings will reveal that Veterans believe that others (including loved ones and coworkers in the workplace) will think poorly of them if they were to seek mental health treatment (Vogt et al., 2014/2020).

Using credible evidence to support my claim is vital to my action plan. If I do not have facts my theory is simply just a theory and has no standing without the evidence to support it. The first source "Mental Health Beliefs and Their Relationship with Treatment Seeking Among U.S. OEF/OIF Veterans" is credible because of the background of the authors. All 3 authors work in the Boston VA Hospital and have significant experience with Veterans. This source is relevant because their study tried to figure out why nearly half of those screened positive for PTSD and/or major depression did not seek mental help after returning from active duty. This article discusses the many factors, of why Veterans of OEF/OIF were hesitant on getting mental help because of the stigma.

The first source, “Mental Health Beliefs and Their Relationship with Treatment Seeking Among U.S. OEF/OIF Veterans,” conforms to ethical guidelines by keeping the participants identities confidential in the research study. We do not know which participants were what age, branch or rank in the study. We only know that the participants were veterans of OEF/OIF. By doing this we can look at the research with an open mind without conflicts of interest. There was also a signed paper to be returned stating informed consent. This also follows ethical guidelines. The article specifically describes that a number all ranks, and branches of the military were asked to participate in the mail in survey. The article states "Army (50.7%), Air Force (23.2%), Navy

(17.3%), and Marines (8.8%), and the majority was deployed from Active Duty (78.5%)" (Vogt et al., 2014/2020). This states that all branches were considered and the numbers above were the ones that responded. The confidentiality was not spelled out in the article but, the data provided had no names, rank, exact age, or branches on which participant answered which question.

In the article “Help-Seeking Stigma and Mental Health Treatment Seeking Among Young Adult Veterans,” discusses more of the barriers that exist about why veterans don't seek mental help, and what can be done to overcome those obstacles so that our veterans can feel more at ease about receiving mental health treatment. A social media survey was conducted focused on young adults between the ages of 18 to 34, reached via Facebook. The qualified participants were asked a series of questions to determine if perceived stigma (what you think others think of you) or public stigma (what you think of others) was the likely cause of the stigmatization of seeking mental health treatment. The reason for this research is to figure out why this stigma exists. Once the reason is determined then doctors and leaders can move forward in directing the military to not be afraid to receive mental health treatment. The conclusion of this article is that perceived stigma is significantly higher than public stigma when it comes to why veterans do not seek mental help. In other words, Veterans in the survey thought that others would think they were "weird" or weak" if they had a mental health problem. But the veterans would not think less or badly about another veteran if they sought help with their mental issues. The article focusing young adult veterans theorizes the same as the first article. They suspect "perceptions of public stigma hamper mental health service use in veterans with health care needs" (Kulesza et al., 2015/2020).

The article, “Help-Seeking Stigma and Mental Health Treatment Seeking Among Young Adult Veterans" is credible because again, looking into the backgrounds of the authors all four of

these authors have doctorates in this field. These authors are highly respected, credible and offer data to support the article. This second source gave some interesting and factual data for me to read. Such as "Between 19 and 44% of veterans returning from the conflicts in Iraq and Afghanistan meet criteria for mental health disorders, such as post-traumatic stress disorder (PTSD), anxiety disorders, or depressive disorders" (Kulesza et al., 2015/2020). After further reading I found that more Young Adult Veterans feel that their theories on how they will be perceived is “harsher” than how they would perceive a fellow veteran seeking mental help. The second source "Help-Seeking Stigma and Mental Health Treatment Seeking Among Young Adult Veterans" conforms to ethical guidelines because again no confidentiality was broken. There was indeed an incentive of a $20 amazon gift card upon completion, but the amount was not a substantial amount. Before veterans could access the survey though Facebook, they needed to give informed consent in order to access the survey. The article specifically states, "Following online consent, participants were directed to an online survey" (Kulesza et al., 2015/2020). This shows that there was informed consent. The article also states that they conducted other questions to be sure people were not misrepresenting themselves in order to receive the incentive of the $20 Amazon gift card. The confidentiality was implied throughout this article because again, no names, exact ages, branch, or rank, was given.

The social cultural perspective applies to the problem because it is what has been explained repeatedly in the articles. All the articles address or mention the same problem, many soldiers do not seek mental health treatment because they are mostly concerned of what others will think of them if they do.

The reciprocal determinism concept was there but was combated in one article, it was said "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" (Nauert, 2014/2020). So, creating an environment that promotes mental health

treatment as normal or as a sign of strength could decrease the stigma of asking for help is a sign of "weakness" which then could change the attitudes of soldiers who need the help.

Another concept I saw frequently was prejudice. Veterans were not prejudice on others for seeking mental health treatment, but they were prejudice on themselves. They thought others (coworkers and loved ones) would think negatively of them if they were to seek treatment or be labeled as a mental health patient.

The ethical standards I would take into consideration would be the entirety of Section 4 Privacy and Confidentiality. I imagine this would be a great deal of concern to most veterans as they do not want what they share to ever be shared. Especially if they are active or reserve duty. Explaining the ethics to them may make them feel more at ease or more nervous. I also think that 3.10 informed consent would most certainly come up and would be vital to the treatment of veterans with PTSD. They should know what to expect and what would be expected of them if they were to pursue treatment.

References

Nauert, R. (2020). U.S. military lessens stigma of mental illness, promotes treatment. In *Psychology* (5th ed.). Soomo Learning. https://www.webtexts.com (Reprinted from "U.S. military lessens stigma of mental illness, promotes treatment," October 1, 2014, Psych Central)