Characteristics of Deployed Operation Iraqi Freedom Military Personnel Who Seek Mental Health Care


SUMMARY: Service members who presented to the U.S. Military Hospital Kuwait for an initial appointment participated in a study on the feasibility of using validated mental health screening instruments for deployed Operation Iraqi Freedom military personnel. The screening measures corresponded somewhat well to psychiatric diagnoses made by clinicians, except for posttraumatic stress disorder (PTSD) and substance use where the screeners estimated much higher rates of these issues compared to clinicians.

KEY FINDINGS:
- The most common clinician-based diagnoses were adjustment disorder (34%), depressive disorders (32%), anxiety disorders (13%), and PTSD (12%).
- The 4-item PTSD screen had a probable PTSD rate of 51%, and the 17-item measure had a probable PTSD rate of 19%. However, the rate of PTSD as diagnosed by clinicians was 12%.
- The screening measure for the past year reported severe alcohol misuse was 11%; however, clinicians diagnosed only 1% of patients with substance abuse or dependence.

IMPLICATIONS FOR PROGRAMS:
Programs could:
- Provide educational classes for deployed Service members about managing common mental health challenges associated with deployment (e.g., sleep hygiene, loneliness)
- Offer classes for partners of deployed Service members, providing information about common reactions to deployment, ways of supporting the Service member upon homecoming, and red flags indicating potential need for referrals for more intensive services
- Disseminate information to military families about the negative effects of substance abuse or misuse on health and functioning

IMPLICATIONS FOR POLICIES:
Policies could:
- Continue to support programs that screen returning Service members for psychiatric issues and substance use problems post-deployment
- Recommend the development of a range of emotional health treatment services for deployed Service members, including but not limited to mental health professionals, peer support, internet-based options, and clergy
- Recommend education for professionals working with military families about the impact of deployment on children
METHODS

- All Service members voluntarily presenting for initial mental health care between May and June 2005 at the U.S. Military Hospital Kuwait mental health clinic were invited to participate; 96% consented to do so.
- Participants completed a 10 page self-administered questionnaire including demographics, PTSD, depression, alcohol, and general distress measures.
- Clinicians interviewed the patients and made psychiatric diagnoses based on the questionnaires and interview.
- Associations between demographic characteristics and clinical screenings were evaluated using chi-square statistics.

PARTICIPANTS

- Two hundred ninety-six Service members participated (73% male).
- Age range: 42% 18-24 years old, 25% 30-39, 17% 25-29, 16% older than 40.
- Education: 48% high school graduate or less, 39% some college, 13% college graduate.
- Military rank: 59% E1-E4, 32% E5-E6, 6% Officer; 52% Active Duty, 27% National Guard, 21% National Reserves.

LIMITATIONS

- Due to classification concerns, it was not possible to calculate prevalence estimates for these mental disorders.
- The population was those Service members stationed in Kuwait; these findings may not generalize to those serving in other areas.
- These were all treatment seeking Service members who may differ from those with psychiatric concerns who are not treatment seeking.

AVENUES FOR FUTURE RESEARCH

Future research could:
- Explore longitudinal outcomes for those screening positive for these disorders
- Investigate Service members at different bases to compare across deployment locations
- Examine the feasibility of using validated mental health screening instruments with female Service members

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