The Center for Research and Outreach

Putting Research to Work for Military Families



Bringing the War Back Home: Mental Health Disorders Among 103,788 US Veterans Returning From Iraq and Afghanistan Seen at Department of Veterans Affairs Facilities

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SUMMARY: It is important to understand mental health concerns among OEF/OIF Veterans in order for the Veterans Affairs (VA) department to better treat these individuals. Prevalence and care for mental health diagnoses were explored among a national sample of OEF/OIF Veterans receiving VA mental health care. One quarter of Veterans received a mental health diagnosis, most commonly posttraumatic stress disorder (PTSD), and a majority were first diagnosed in non-mental health settings.

KEY FINDINGS:

- Of participating Veterans, 25% had at least one mental health diagnosis, the most common of which was PTSD (13%).
- The majority of Veterans' mental health diagnoses were made in non-mental health settings (60%), with 42% made in primary care settings; Most Veterans diagnosed in a non-mental health setting went on to have a mental health visit (61%).
- Younger Veterans were at increased risk for PTSD and other mental health diagnoses compared to older Veterans.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Disseminate information to Service members and their families about VA and community mental health support groups, especially post-deployment
- Collaborate with mental health organizations to provide mental health screenings for recently returning Service members
- Provide classes for Service members who have received a mental health diagnosis to educate them about symptoms, comorbidity, impacts on functioning, and available resources

IMPLICATIONS FOR POLICIES:

Policies could:

- Continue to support integrated behavioral health programs that incorporate mental health specialists into nonmental health settings
- Recommend increased outreach to younger Service members to promote early intervention of mental health problems
- Encourage professional education for community primary care providers to learn about PTSD and related disorders so they can facilitate early identification and treatment

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METHODS

- National VA databases were reviewed for Veterans who initiated treatment at the VA from 2001 to 2005.
- Mental health diagnostic information associated with outpatient or inpatient clinic visits was obtained from medical records.
- Analyses computed the prevalence and relative risks of mental health diagnoses among OEF/OIF Veterans.

PARTICIPANTS

- Participants included 103,778 OEF/OIF Veterans (87% male, 76% 18-40 years of age) accessing VA treatment from 2001-2005 nationwide.
- Veterans identified as White (69%), Black (18%), Latino (11%), or another race (2%), and they indicated they were 47% never married, 43% married, and 10% seperated, divorced, or widowed.
- Participants were 52% Active Duty and 48% National Guard or Reserves members.

LIMITATIONS

- Several potentially important confounding variables (e.g., military branch, rank, and combat history) were not evaluated.
- Since only 29% of OEF/OIF Veterans had accessed VA care at the time of the study, the results may not generalize to all Veterans.
- Mental health diagnoses were derived from chart review, and several different providers made diagnoses; however, there was no measure of inter-rater reliability of diagnoses, potentially introducing error.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Investigate the prevalence and relative risk of mental health diagnoses in Veterans who are not part of the VA system and may be receiving mental health services elsewhere
- Examine the role of military characteristics (e.g., branch, rank, combat experience) on the prevalence and relative risk of mental health disorders among Service members
- Conduct studies with long-term follow-up to understand how Veterans continue to utilize VA health care over time and whether some Veterans wait long periods of time before seeking treatment

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