# **Barriers to Mental Health Care**

The problem: Approximately 60% of military personnel with mental health symptoms do not seek care.

## Types of Barriers to Care

#### Practical/Logistical

- Scheduling issues
- No time off work
- Financial concerns
- Transportation issues
- Awareness of services and locations



#### Personal

- Personal negative attitudes related to mental health
- Lack of confidence and trust in treatment effectiveness
- Lack of perception of need
- Confidentiality concerns
- Self-stigma



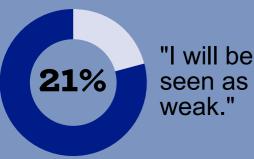
#### **Institutional or Social**

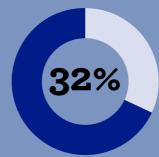
- Institutional barriers related to DoD or servicespecific policies and programs
- Institutional stigma related to military culture, rules, and experiences while in service
- Fear of public disclosure
- Social-stigma



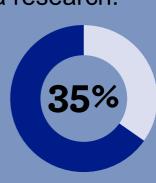
## Stigma is one of the most frequently reported barriers to care.

As reported by service members and veterans in stigma research:





"My unit leadership might have a negative opinion of me."



"It would harm my career."

## Forms of Mental Health Stigma

**Type of Stigma** 

Self-stigma

Public stigma Institutiona I stigma

Internalization of negative attitudes and stereotypes about mental health conditions

Public (mis)perceptions of individuals with mental health conditions

Institutional policies that intentionally or unintentionally restrict opportunities for people with mental health issues I am weak/unreliable

People will perceive me as being weak.

Exclusion from certain roles or specialties.

### **Unique Military Barriers** to Seeking Treatment

Definition

Fear that seeking treatment will harm their career

Fear of losing support from their units

Culture of "toughing it out" can interfere with perception of need

Fear of being separated due to treatment

#### **Barriers to Care Impacts** Service Members

Example

Readiness





Treatment

-seeking

Reintegration



Overall well-being



