



Short Commentary Article

Depression in Veterans: Negative Social Stigma as Barrier to Treatment

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Abstract

This commentary explores the impact of negative social stigma and the impact it has on the on the mental health of veteran's reentry into civilian life. Societies idolized, unrealistic, and false perceptions of veterans exacerbate their susceptibility to chronic depression, dysfunctional family relationships, chronic stress, anxiety, and reluctance to seek treatment. Successful adaptation of veterans returning to society after military deployment requires a multisystem approach that entails pre-deployment assessment to detect risk for depression, expanded education on the nature of mental during basic training, critical incident debriefing before reentry into society, continued evaluation of returning veterans including psychiatrist, psychologist, social workers, and mental health awareness programs in community colleges and universities.

Keywords: Depression; Deployment; Family; Heroics; Mental Health; Stigma; Treatment; Veterans; Warrior Culture

Description

In the United States, veterans are thought of as a man's man: upstanding citizens who are glamorized in the media as heroes. Daily, veterans experience comments like "I could never do that" and "It takes a lot of heart." The veteran acknowledges each comment and continues about their day. Society is attracted to the heroism surrounding the military and veterans. Companies and organizations use this idolism to attract veterans such as having sales during Veteran's Day as a way of "thanking" them for their service. The image of military heroics is displayed throughout culture and society with parades, first pitches at baseball games, and videos of family members being surprised by relatives returning from deployment. However, what is frequently overlooked is what happens after the parades end and feel good videos stop. Many veterans experience symptoms of depression when they return to civilian life, which in the beginning, can be identified as changes in the state of mind that underlie the conditions and demands of the family, society, their new life, their new reality and it is assumed that all this is just the answer to a new process of adaptation.

It is very common for veterans to be diagnosed with long-term depression. The factors of long-term depression include a sense of guilt for the acts committed during battle, guilt for the loss

of a comrade, or guilt of leaving a family behind. Whatever the reason, depression is the outcome. Long-term depression requires the involvement of a mental health provider and a psychiatrist to help the veteran understand these new feelings.

However, the start of long-term depression does not begin once military service ends. As a service member experiences multiple deployments, conflicts, and other factors associated with military life, their viewpoints on life may change. They learn quickly to adapt their emotions for each new stressful setting and experience, which in turn becomes their new norm. This makes it difficult to re-adapt to civilian life once their contract has expired. The lack of access to mental health services and medications on a regular basis while on active duty as well as the stigma regarding the negative outlook unit leaders have as it pertains to mental health (a service member requiring help being seen as ineffective or unfit for duty), the potential for long-term depression is great [1].

The idea of adaptation while on active in the service also brings on an inability to use the word depression to the civilian world; the term is often used to describe a feeling when the veteran is not like him or herself and may have feelings of inferiority and craziness [1]. During adaptation to the civilian life, veterans often compare their current life to their time in the service and cannot understand why there is a disconnection between their expectations and their reality. As previously stated, unit leadership looks down

on those who seek help resulting in a falsified ego. A falsified ego leaves the veteran with the mentality that they can push through their feelings, or that they are a fighter [1]. The reality is Soldiers, Marines, airmen, and sailors are most likely young people between the ages of 18-24. They are individuals who, while they are just starting to find their identity and place, also find themselves exposed to unfathomable experiences most of the American population will never understand.

When one considers the average age of the active service member, it should not be a surprise that many veterans have a diagnosis of depression. Again, because veterans are seen as the epitome of manliness, a man's man, it is easy to overlook

the following: veterans have real emotions like the rest of society, the majority of the military is under the age of 25, and most importantly, veterans are humans many of whom have had traumatizing experiences. As a society, it is important to respect and acknowledge the choice to serve, but we must also be ready to admit that veterans are not immortal, but rather people who just want to feel "normal."

References

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