



The association between discharge status, mental health, and substance misuse among young adult veterans



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ABSTRACT

Although 85% of military service members are discharged honorably, veterans who engage in misconduct during military service may receive other types of administrative or punitive discharges. The discharge type not only affects eligibility for benefits, but is associated with negative downstream consequences (e.g., homelessness, criminal justice involvement). However, limited empirical research has examined the mental health and substance use-related needs of veterans who were not Honorably discharged, and the few that have only focus on veterans who received punitive discharges. This study addressed gaps in the research literature on discharge status by examining differences in mental health, substance use, and attitudes toward psychological treatment among veterans who received Honorable, General Under Honorable Conditions, and Other Than Honorable (OTH) discharges. Young adult veterans ($N = 734$) were recruited online and completed a battery of self-report measures. Results indicated that veterans who received General and OTH discharges endorsed significantly greater rates of mental health conditions and substance misuse. They also reported more negative perceptions of mental health care. Because these veterans may also experience more barriers to accessing mental health services, it is critical to consider ways to connect these veterans with needed services.

1. Introduction

1.1. Differentiation of discharge status

Due to the drawdown of the United States (U.S.) military from formal military operations in Iraq and Afghanistan, the numbers of American veterans reintegrating into the community has been on the rise. Recent census estimates suggest that there are approximately 2.6 million post-2001 era veterans in the U.S. (U.S. Census Bureau, 2016). The majority of veterans are discharged honorably from the military (i.e., Honorable discharge), meaning that they have fulfilled their service to the military and are separating on favorable terms. They are therefore eligible for a full range of benefits, including access to quality physical and mental health care from the Department of Veterans Affairs (VA), VA compensation and pension benefits, educational benefits such as the GI Bill program, and home loan benefits from the VA (U. S. Department of Veterans Affairs, 2015).

However, across services, roughly 16% of service members do not receive an Honorable discharge (Veterans Legal Clinic, 2016). Of these veterans, 15% receive other types of administrative separations. These include veterans whose discharge is characterized as “General Under Honorable Conditions” (10%; henceforth referred to as “General”

discharge), as well as veterans who receive an “Other Than Honorable” discharge (5%; henceforth referred to as “OTH” discharge) (Veterans Legal Clinic, 2016). General discharges are assigned when a service member does not fully meet Honorable discharge standards (e.g., due to conduct problems), but has otherwise demonstrated good quality performance during service (Sandel, 1983; Velez Pollack, 2004). OTH discharges may be assigned when a service member has displayed a pattern of conduct that substantially departed from military standards, or exhibited one or more significant acts of omission or commission that significantly departed from military standards (e.g., endangering the health or welfare of other service members) (Moulta-Ali and Panangala, 2015). The remaining 1% of veterans receive punitive discharges, characterized as “Bad Conduct” or “Dishonorable” for enlisted service members, or “Dismissals” for officers. These discharges are the result of a court-martial (Veterans Legal Clinic, 2016). A court-martial process is initiated when a service member violates the Uniform Code of Military Justice (UCMJ), and the proceedings are analogous to civilian criminal court proceedings in many ways (U.S. Marine Corps, 2016). Under some circumstances, a service member who faces a court-martial may be eligible for an administrative discharge in lieu of trial by court-martial. In these circumstances, the characterization of the administrative discharge is generally OTH, though there are situations in which

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a General characterization is assigned (e.g., depending on the quality of service member's service) (U.S. Department of Defense, 2014).

These distinctions of discharge types are important because they affect veterans' eligibility for benefits. Veterans who received a General discharge are eligible for the majority of VA and other veteran benefits (U.S. Department of Veterans Affairs, 2016), although they are not eligible for certain educational benefits (e.g., the Montgomery GI Bill) (Poche, 2004; U.S. Department of Veterans Affairs, 2016). By contrast, veterans who received a punitive discharge are presumptively ineligible for these services (38C.F.R. § 3.12). For veterans who received an OTH discharge, however, the determination of eligibility is somewhat more complex. The federal statute guiding VA eligibility states that veterans who were "terminated by discharge or release under conditions other than dishonorable" are eligible for VA services (38C.F.R. § 3.12). This statute also outlines a number of conditions under which veterans are barred from VA benefits. For instance, veterans are disqualified from receiving benefits if they were discharged as a deserter or by reason of a general court-martial, or if they were discharged under other than honorable conditions "as a result of an absence without official leave for a continuous period of at least 180 days" (38C.F.R. § 3.12). However, if a veteran received an OTH discharge but is not disqualified as a result of one of these statutory bars to services, he or she may be eligible to receive VA services (U. S. Department of Veterans Affairs, 2014).

For these veterans who received an OTH discharge, the process of determining eligibility can be complex, and both veterans and VA providers may find it difficult to understand what benefits they are eligible for. When these veterans present for services at a VA medical center, the local eligibility staff must submit a request to the local VA Regional Office, which reviews the case to determine health care eligibility (U. S. Department of Veterans Affairs, 2014). According to a recent report, some potentially eligible veterans may not receive an eligibility evaluation, in part because local VAs may be unaware of the review process and unknowingly turn away these veterans (Veterans Legal Clinic, 2016). For those veterans who do receive a review, the average length of review is more than three years (Veterans Legal Clinic, 2016), during which time they are unable to access services.

1.2. Current concerns related to discharge status

Over the past several years, the implications of discharge status have increasingly entered the public discourse. In part, this is because the proportion of current veterans receiving OTH discharges is substantially larger than previous conflicts. According to a report by the Veterans Legal Clinic (2016), only 1.0% of World War II era veterans received OTH discharges; during the Vietnam War era, this proportion had increased to 2.5%. However, among veterans of Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn (OEF/OIF/OND), the proportion of OTH discharges has increased to 5.8% (Veterans Legal Clinic, 2016).

There are also concerns regarding the circumstances under which these veterans have been discharged – and more specifically, whether mental health problems contributed to the behaviors that led to the discharge. A study of Marines serving from 2001 to 2006 found that those service members who had a diagnosis of PTSD or some other psychiatric diagnosis were more likely to have a drug-related discharge or non-drug related punitive discharge than their peers without a psychiatric diagnosis (Highfill-McRoy et al., 2010). This suggests that service members with psychiatric diagnoses are engaging in patterns of behavior that put them at risk of punitive discharge (e.g., self-medication with drugs and alcohol). A study of Marines deployed during OEF/OIF found similar results, with younger age at first combat deployment and post-combat psychiatric diagnoses emerging as some of the strongest predictors of Bad Conduct discharges, defined as being discharged for "disciplinary problems, criminal behavior, or persistent misconduct" (Booth-Kewley et al., 2010). In fact, this study found that individuals with a postcombat diagnosis were nine times more likely to

have received a Bad Conduct discharge. Although these studies have identified service members who had mental health diagnoses documented prior to discharge, there have also been concerns that some service members who receive OTH and punitive discharges had mental health disorders that went undiagnosed during military service (Phillips, 2013). These veterans may face an especially difficult challenge in requesting a benefits-related review through the VA, which is particularly important given they could likely benefit from mental health treatment available at the VA.

In addition, there is an increasing recognition of the negative downstream consequences experienced by veterans who are discharged under OTH or punitive conditions. There is evidence that these veterans have an increased risk of homelessness (Gundlapalli et al., 2015) and suicide (Reger et al., 2015). These veterans are also disproportionately involved in the criminal justice system (Bronson et al., 2015). At the same time, as described above, veterans who have received OTH or punitive discharges have limited access to services due to the character of their discharge.

The psychosocial challenges faced by veterans who receive any discharge besides Honorable may contribute to mental health concerns, substance use, and a sense of self-stigma – potentially above and beyond symptoms that were present prior to discharge. However, there has been very limited empirical research in this area, and what limited research has examined this question has focused largely on veterans with punitive discharges. Therefore, there is a critical need to better understand the post-military needs of veterans who have received General or OTH discharges. The present study begins to address this gap. More specifically, we examined differences in mental health symptoms, substance use, perceived stigma for treatment seeking, and attitudes toward seeking mental health care among a community sample of young adult veterans who had received Honorable, General, and OTH discharges. We hypothesized that veterans who received a General discharge would have greater levels of mental health symptomatology, and would be more likely to screen positive for mental health disorders, substance misuse, and TBI. In addition, we hypothesized that veterans who received OTH discharges would have significantly higher rates of mental health concerns, substance misuse, and TBI than those who received a General discharge. Given the prior work looking at veterans with punitive discharges, combined with the low prevalence of this behavior, we did not include veterans with these discharges.

2. Methods

2.1. Procedure

The present study focused on a sample of young adult veterans, age 18–34, who were recruited as part of a larger research effort to document drinking behaviors among a community sample of young adult veterans (Pedersen et al., 2016). Participants were recruited online to reach veterans outside of traditional VA population recruitment methods, such as through posting flyers in VA waiting rooms or through VA clinician referral. This allowed us to examine behaviors and attitudes among veterans both within and outside the VA, which offered a unique opportunity to collect information on discharge status. The sample was recruited via Facebook advertisements for a study on "veteran behaviors and attitudes," in which targeted advertisements were displayed to Facebook users indicating interest in military/veteran-specific content (e.g., followers of the Iraq and Afghanistan Veterans of America organization). If individuals clicked on ads, they were directed to a study website where they could read about the study and consent to participate. The study involved a one-time online survey, completed via computer or smartphone. Eligibility criteria were (1) U.S. veteran separated from service in the Air Force, Army, Marine Corps, or Navy and (2) between the ages of 18 and 34. More detail about the recruitment strategy and the sample can be found in our other work (Pedersen et al., 2015).

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