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## Review

# A systematic review of help-seeking and mental health service utilization among military service members



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## HIGHLIGHTS

- Military personnel with psychiatric problems underutilize mental health services.
- Stigma and career concerns are commonly reported barriers to care.
- Support from military leadership and peers may facilitate help-seeking.
- Evidence-based interventions to enhance service use are lacking for this population.

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## ABSTRACT

Research has demonstrated that military service members are at elevated risk for a range of psychiatric problems, and mental health services use is a conduit to symptom reduction and remission. Nonetheless, there is a notable underutilization of mental health services in this population. This systematic review aimed to identify and critically examine: (1) rates of service use; (2) barriers and facilitators to care; and (3) programs and interventions designed to enhance willingness to seek care and increase help-seeking behaviors among current military personnel (e.g., active duty, National Guard, Reserve). Overall, 111 peer-reviewed articles were identified for inclusion. Across studies, the rate of past-year service use among service members with mental health problems during the same time frame was 29.3% based on weighted averages. Studies identified common barriers to care (e.g., concerns regarding stigma, career impact) and facilitators to care (e.g., positive attitudes toward treatment, family/friend support, military leadership support) among this population. Although programs (e.g., screening, gatekeeper training) have been developed to reduce these barriers, leverage facilitators, and encourage service use, further research is needed to empirically test the effectiveness of these interventions in increasing rates of service utilization. Critical areas for future research on treatment engagement among this high-risk population are discussed.

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Research has demonstrated that military service members may be at elevated risk for developing a host of mental health problems, including posttraumatic stress disorder (PTSD; Eisen et al., 2012; Hoge et al., 2004; Thomas et al., 2010), major depressive disorder (Kessler et al., 2014; Sareen et al., 2007; Shen, Arkes, & Williams, 2012; Thomas et al., 2010), sleep disturbances (Capaldi, Guerrero, & Killgore, 2011; Peterson, Goodie, Satterfield, & Brim, 2008; Plumb, Peachey, & Zelman, 2014; Seelig et al., 2010), and suicide attempts (Nock et al., 2014; Nock et al., 2015; Ursano et al., 2015). In response, evidence-based military-specific interventions have been developed (e.g., Rudd et al., 2015). Yet, despite numerous calls for action to enhance connection to mental health services among military personnel who may benefit from treatment (Center for Military Health Policy Research, 2008; Department of Defense [DoD], Department of Veterans Affairs, & Department of Health and Human Services, 2013; Kuehn, 2009), studies reveal a marked underutilization of services in this high-risk population (e.g., Fikretoglu, Elhai, Liu, Richardson, & Pedlar, 2009; Hoge et al., 2004; Kim, Thomas, Wilk, Castro, & Hoge, 2010; McKibben et al., 2014).

To better understand how to engage military personnel in mental health treatment, studies have examined rates of service use, barriers and facilitators to care, and interventions to increase help-seeking in this population. To our knowledge, however, this body of literature has yet to be examined and integrated systematically. Thus, this systematic review aims to synthesize and critically evaluate the extant literature on: (1) rates of help-seeking and mental health service use; (2) barriers and facilitators to care; and (3) programs and interventions to increase treatment use rates and willingness to seek help for mental health problems among current military service members (e.g., active duty, National Guard, Reserve). Additionally, this review aims to (4) discuss limitations of the current body of research and provide directions for future studies in this domain. In so doing, we aim to identify gaps

in the literature and leverage points for future work in military behavioral health. Of note, this review focuses on current service members to enhance its relevance to treatment engagement efforts in the military. Though there is utility in examining service utilization among recent veterans (i.e., individuals who served in the active military, naval, or air service and were discharged or released), studies typically do not describe participants based on time since separation; thus, veteran-only studies will not be examined in this review.

## 1. Methods

### 1.1. Search strategy

We conducted a systematic search of PsycINFO, PubMed, MEDLINE, and Sociological Abstracts for relevant studies up to September 18, 2015. Search terms were “service use” OR “help-seeking” OR “treatment seeking” OR “treatment use” OR “service utilization” OR “stigma” AND “military” OR “active duty” OR “service member\*” OR “soldier\*.” Google Scholar results based on these search terms and reference lists from papers identified from the searches were also reviewed. Articles were selected for inclusion based on the following criteria: (1) published in English; (2) peer-reviewed; and (3) empirically tested a component of help-seeking and/or mental health service use (i.e., rates of, correlates of, barriers to, facilitators to, and/or interventions to enhance help-seeking and/or service use) among current military service members, including active duty, National Guard, and Reserve members. Exclusion criteria were: (1) veteran-only sample; and (2) only examined help sought from informal/non-professional support (e.g., friends, family members). Two independent reviewers coded titles, abstracts, and articles, with disagreements resolved either by consensus or a third independent reviewer.

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