**Lack of Outreach to Veterans in Need of Mental Health Services**

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**Abstract**

The student begins by reviewing the history and policy context surrounding the issue of veterans and mental health. The historical impact WWI and WWII had on veterans leading to the discovery of PTSD will be explained in detail. The student then introduces the second type of trauma within the military, which is sexual trauma from abuse. The student will then briefly explain the US Department of Veterans Affairs and their flaws. The overall problem with the VA’s approach to mental health services is the lack of outreach and the waiting list for appointments. The student will explain why this information is important within the social work field. The student will express this topic's importance and relevance to social justice.  It then concludes by expressing the final thoughts and implications for policy change.

*Keywords*: veterans, mental health, PTSD, military, shell shock, post-Vietnam

**Lack of Outreach to Veterans in Need of Mental Health Services**

Mental health treatment is crucial to helping vulnerable populations in need. One population in particular that suffers with mental illness is military veterans. The trauma from war led to mental illnesses, such as PTSD. There is still a need for veterans getting mental health services. There are flaws in the system that make it hard for them to get the treatment they need and deserve. The historical context is a large factor in why the system is how it is today. The policy context is important to understand in order to solve the problem. Sexual violence is another factor that leads to many women veterans in particular having mental traumas. The US Department of Veterans Affairs is responsible for looking after veterans’ wellbeing, but they have flaws within their system. The overall problem with the system is the lack of outreach and information given to veterans to keep them updated on the benefits and services they qualify for. This issue is relevant to the social work community because they can be a part of the change by advocating. U.S. veterans deserve social justice.

**History/Policy Context**

The traumatic impact on mental health after fighting a war is documented as early as Ancient Greece (Erwin,2019). During World War One many soldiers were injured and were sent to hospitals. Some soldiers sent to the hospitals had no identifiable injury, so they conducted a study. The study was done on three soldiers that had no physical injury. Through doing this study medical professionals diagnosed them with what was called shell shock, and they also called it the “100-yard stare”. They began to diagnose any soldier with any non-physical ailment with shell shock throughout WWI. “During the war, shell shock was understood in many different ways: as a psychological reaction to war, as a type of concussion, or as a physiological response to prolonged fear” (Erwin,2019). After WWI, they began to understand that shell shock could lead to mental breakdowns. This started to become more known to the public after veterans came back from the war. Veterans became able to seek mental health treatment and were given pensions, but this was only the case if they could directly link it to the war. Even with this being a known problem veterans still returned to fighting in WWII. One can only imagine the number of soldiers that did not get treatment but still had to serve in WWII (Erwin,2019).

 After the Vietnam War, they began to see an increase in the amount of returning soldiers coming back with shell shock. Many veterans came back in search of treatment and had trouble because medical professionals lacked understanding of the illness (Erwin,2019). Considering the lack of knowledge doctors had, they most likely did not have any developed treatment for PTSD. Vietnam veterans wanted people to acknowledge them and their needs. In 1980 the term post-traumatic stress disorder was established by medical professionals. Soon after, a study concluded that about 30.9 percent of Vietnam Vets suffered from PTSD. The diagnosis has developed and now includes traumatic brain injuries also known as TBI (Erwin,2019).

  According to The U.S. Department of Veterans Affairs about 154,000 veterans are homeless (Jansson, 2018). A large reason for this is veterans that fought in war have Post-Traumatic Stress Disorder. The lack of mental health services leads them to finding other ways to deal with it. Many of them began to develop a dependency on alcohol and drugs. These unhealthy habits became a barrier for them to get jobs to afford housing(Jansson, 2018). Veterans are a valuable part of our population but have become vulnerable due to the lack of outreach and mental health services. As a social worker it is important to care for this community because they are valuable and worthy of quality care.

Many young adults coming out of high school decide to join the armed forces to get a job, education, and financial benefits. Some of them come home with mental health needs because of traumatic events they experienced. Soldiers experience traumatizing things now even without a war currently happening. They still experience seeing people get hurt or killed from improvised explosive device (IED) or suicide bombers. These things leave a mark on them mentally and in most cases, they are not prepared for it. Trying to get mental health services for them can be quite challenging, this can lead to them being suicidal. 1.5 million veterans seen at Veterans Affairs hospitals were diagnosed with a mental health problem in 2016 (Hester, 2017). This number goes to show that mental health among veterans is a real problem.

**Military Sexual Trauma**

 War is not the only traumatizing part of being in the military. Sexual violence is also a big part of what causes them to have Post-Traumatic Stress Disorder and Depression. The depression that stems from the sexual violence leads to some suicide attempts (Andresen, et al, 2019). Though sexual violence happens to both men and women, women are more likely to be victims. Women are more likely to be diagnosed with mental illnesses like PTSD and depression. According to research, the military’s response to sexual assault is a large impact on the survivors’ outcome. Many survivors feel as though the military did not protect them or provide support; this is referred to as institutional betrayal (Andresen, et al, 2019). This is another factor that leads to mental health issues among veterans. This is just a small piece to the larger issue of veterans needing mental health services.

**Health Care Defects**

The Affordable Care Act does not mention having mental health covered by insurance (Hester, 2017). This is a large part of the issue because the cost of mental health services is excessive. Mental health services should be seen as just as important as other health services covered by insurance. 1989 the US Department of Veterans Affairs (VA) was created to help advocate and honor those who serve in the military (U.S. Department of Veterans Affairs, 2020). The US Department of Veterans Affairs has less funding than private medical professionals, so there is little incentive. Since they do not make as much money there is a shortage of US Department of Veterans Affairs medical professionals. This has caused a long waiting list of veterans in need of care. 9 million veterans use VA as their health care insurance annually (Lachmann, 2018). The VA does offer mental health services, but the issue is the wait time for an appointment. According to reports, it is said that wait times are weeks and sometimes months for PTSD mental health treatment (National Academies of Sciences, 2018). This issue has a negative effect on their mental health. Mental health should be a priority, especially for this vulnerable population considering their history.

The Uniform Mental Health Services in VA Medical Center and Clinics outlines the policy. It states that first time clients of mental health care must be seen within a 24-hour period. After the first evaluation, they are to be seen again within 14 days for a treatment evaluation. Any further appointments must be scheduled within 30 days. In 2015 it was reported that many VA officials and leaders did not know they were supposed to meet this 14-day requirement (U.S. Department of Veterans Affairs, 2020). Out of the number of clients that make urgent mental health appointments, only 43 percent got an appointment as soon as they wanted (National Academies of Sciences, 2018).

         This is all important not just for military families to know, but all people should be aware of this issue. It is stated in research people go into the military not only for themselves, but for the country and their families. They have made a commit to their country, but some do not truly realize what they go through. Research shows that many of them go through these things in silence, and it is not always by choice. They put their lives on the line but cannot get treated for the impact that the trauma leaves them with. Some soldiers seek help and get put on a waiting list for weeks or even months. This causes many of them to have to suffer with mental illness for that waiting time. About half of the post- 9/11 veterans that need mental health services do not get treatment through VA or private sectors. Many veterans are not aware of the mental health services provided by and covered by VA. Some do not know how to apply for benefits or know if they are eligible (Clark,2018). This is where the issue of outreach becomes a problem.

The VA should be aware of this problem and find solutions. They could collaborate more with local levels of military systems or programs. Collaboration with different military programs could help spread awareness. They could send mail that informs veterans of the benefits, how to apply, and the qualifications. Another way they could spread the word is through media by making commercials and posting on different social media platforms. Veterans could get VA benefits if they served active duty for 24 consecutive months. If a veteran was discharged because of disability caused or made worse by duty, they may not have to fit the 24-month requirement. If veterans do not get VA benefits, they still have access to mental health services for PTSD. To have access to those services they must have health insurance. VA mental health services include family therapy, psychotherapy, medicine for PTSD, Cognitive processing therapy, and group therapy (U.S. Department of Veterans Affairs, 2020). These are all great for veterans that can get an appointment. This goes back to the issue of veterans having to be put on a waiting list. There is a shortage of service providers because of the lower pay compared to private services.

**Barriers to Services**

  The VA does offer mental health services, but the waiting time is too long. Another big issue is the lack of outreach and information given to veterans. As previously stated, many veterans are unaware of the services they have access to and if they even qualify. These are the two big issues with the mental health field for veterans. If these two problems are fixed using new policy more veterans will get treatment for their mental health needs. This change will benefit not only the veterans, but as well as their families. One can only imagine the stress the veterans and families go through trying to maneuver through a flawed system. If the issue of outreach is fixed the other problem fixes itself. If there is more outreach and information given to veterans, then they will be aware of the different options including private sectors.

**Implications for Social Work Practice**

The issue of veterans needing mental health services is essential for social workers to know. Social workers Code of Ethics mentions the skills and values that could be useful for this community (NASW, 2017). Social workers can be advocates for the population of veterans. Policy change is another way that social workers can help in this case. Make it a policy that VA provides outreach and more information to veterans in need. Another way social workers can help is educating themselves on the VA system and help provide information to veterans. Social workers should care about vulnerable populations like veterans. In the social work code of ethics, it states the importance of seeing everyone as valuable and worthy. Veterans are valuable and worthy of mental health treatments according to the Social Work Code of Ethics (NASW, 2017).

Social justice is the idea that all people are deserving of equal opportunities and rights (NASW, 2017). In the case of veterans, they have not been given their much-needed social justice. Veterans have put their lives on the line to protect us all, provide for their families, and get an education. Everyone is deserving of having treatment for any form of mental illness no matter how minor or severe. Those who serve in the military have to experience and witness many things that leave a marker on them mentally. The invisible scars are just as crucial to treat as the physical scars. These traumatizing events led to mental illnesses. There is a lack of outreach and mental health services for veterans. For this reason, it is important that they have people advocating for them. They have given so much, so giving them access to proper mental health services should be a necessity. In the social work code of ethics, it emphasizes the value of social justice. They mention the importance of advocating for change to help those a part of vulnerable populations. Veterans are vulnerable to becoming drug addicts, alcoholics, or mentality ill (Jansson, 2017). Helping them treat their mental health problems will in turn help them with addictions. As previously stated, in most cases veterans turn to alcohol or drugs as a way to cope with PTSD or other mental illnesses.

**Conclusion**

 This review of history and literature proved that mental health among veterans is a real issue that has been going on for years. They have made many steps in the right direction. The issue is the barrier in communication. The lack of outreach to veterans has left them unaware of these advancements in the mental health field. There are some opportunities for veterans to get mental health treatment, but there are many obstacles for veterans. The lack of outreach explaining the different services veterans have access to is an obstacle. Another obstacle is the waiting time for an appointment and the shortage in staff. As previously stated, the key issue is the lack of outreach and information given to veterans. If they were more informed on the options, then they would be able to get treatment for their mental health needs. Veterans deserve access and information on their benefits and options. If they do not know of the options, they simply cannot use them. There still needs to be research done on the quality of care provided by the VA and the private mental health service options. There is also a lack of research on how the VA does outreach. Both trauma form violence and sexual assault have a negative impact on the mental health of veterans. These negative impacts can lead to addiction and even homelessness. With that being said, it would help veterans to improve the flaws within the system.

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