

Factors affecting mental health service utilization among deployed military personnel

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This study contrasts the characteristics of clients using military mental health services in deployed and nondeployed settings, the communications between their mental health providers and commanders, and the impact of mental health services on their military duties. The study explored the rates of command communication and duty restrictions across settings and referral sources. Diagnoses and prior mental health service utilization were also tested to determine if they predicted significant mental health problems resulting in duty restrictions for clients in deployed settings.

The study used secondary data from two predominantly Air Force sources: (1) deployed data collected in 2005 at Al Udeid Air Base, Qatar; and (2) nondeployed data collected in 2001 at various nondeployed settings. Chi-square analyses were used to compare the demographic variables, command communication and duty restrictions. Among self-referrals, there were higher rates of command communication and duty restrictions in the deployed setting. Further analysis found that the rate of self-referral to mental health services did not vary significantly across settings despite the barriers of increased command communications and duty restrictions in the deployed setting. Finally, binomial logistic regression analyses did not find that either prior mental health service utilization or diagnosis predicted significant mental health problems that resulted in duty restrictions while deployed. This study extends the findings of Rowan and Campise's 2006 initial nondeployed study into the deployed environment. The findings also contribute to the literature regarding deployed military mental health clients, predeployment screenings and provider training while offering future recommendations to expand research to other locations and military services.