

Gendered Realities: Insights into Mental Health Risk and Help-Seeking Among Australian Military Veterans

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Acknowledgment of Country

I acknowledge and pay my respects to the Kaurna people, the traditional owners and custodians of the Adelaide Plains in which I live and work. I acknowledge the deep feelings of attachment and relationship the Kaurna people have to Country, and I respect and value their past, present and ongoing connection to the land and cultural beliefs.

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- 17-year career as a South Australian Police Officer
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Introduction

- **Mental Health** is an essential aspect of overall well-being, encompassing emotional, psychological, and social aspects of a person's life.
- **Risk Factors** contribute to the possible development of mental health issues.
- **Help-seeking** refers to the process of actively seeking support and treatment, which plays a crucial role in recovery and well-being.
- **Australian Military Veterans** are those individuals who no longer serve in the ADF.
- **Gender** is restricted to males and females due to limitations in the dataset.

Understanding the Gendered Landscape

- In 2020–21, it was estimated that there is a total of 704,500 Australian military veterans (AIHW, 2023). Of these 579,400 (82%) are males and 125,200 (18%) are females.
- 1 in 5 currently serving ADF members met the criteria for a mental health disorder (Van Hooff et al., 2014). While almost 3 in 4 transitioned members met this criteria during their lifetime (Van Hooff et al., 2018).
- Male veterans are shown to have higher 12-month prevalence rates for certain mental health conditions, such as generalised anxiety disorder, bipolar affective disorder, and alcohol dependence compared to female veterans (Van Hooff et al., 2018).
- Between 1997 and 2020, 1,600 veterans took their lives, of which 83% had transitioned out of service and 1,471 or 91% were males (AIHW, 2022).



The Research Study

CONTEXT	FOCUS	DESIGN	SAMPLE	ANALYSIS
Veterans entering an advocacy support service in 2021.	The effect of gender and service characteristics on mental health risk and length of delay in seeking help.	Quantitative	150 injured military veterans in South Australia	Correlation and multivariate analysis techniques.

Gender and Mental Health Risk Factors

Males

Females

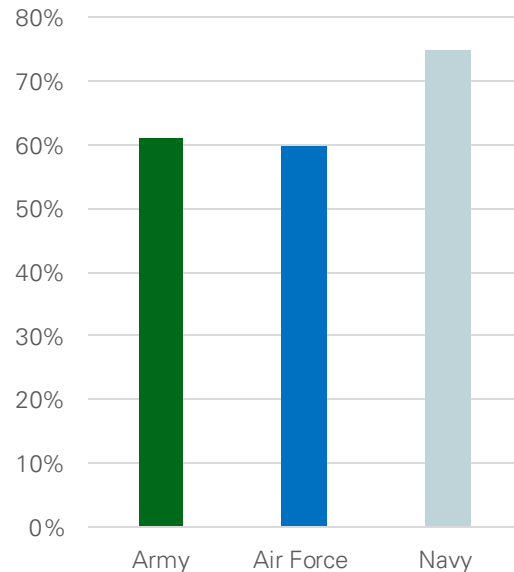
- Navy Service
- Junior rank
- Short service length
- Voluntary discharge



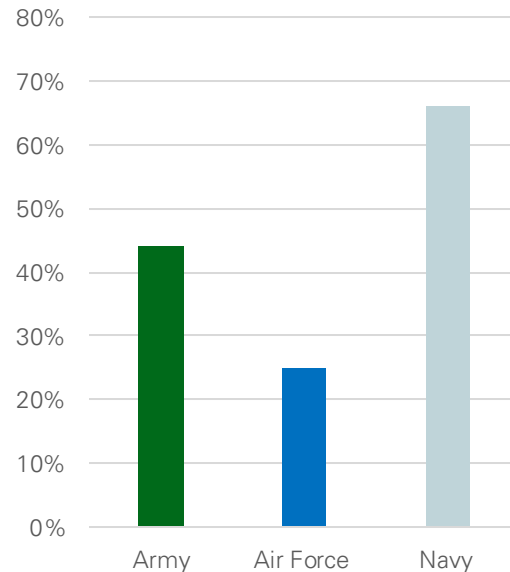
- Navy Service
- Junior rank
- Short service length
- Medical discharge

Service Branch

Male Veterans



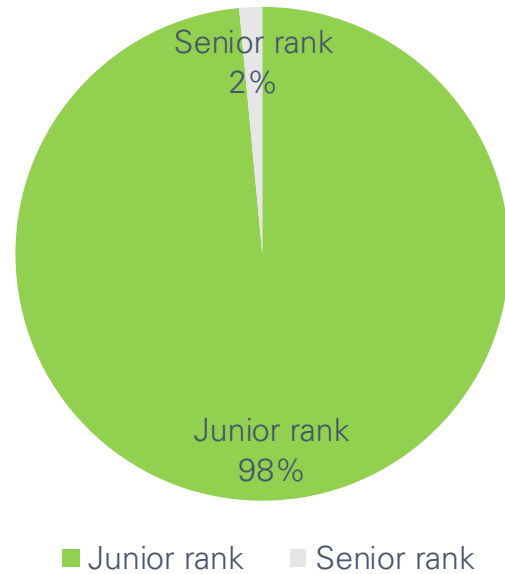
Female Veterans



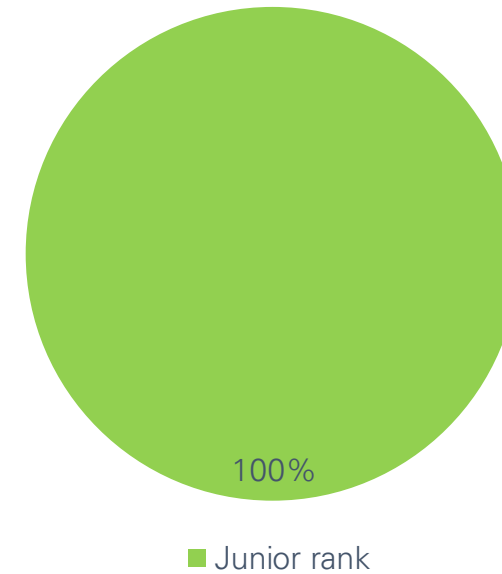
- **Navy personnel have a higher likelihood of being diagnosed with a mental health disorder** compared to individuals in the other branches of the military (McFarlane et al., 2011).
- Navy veterans tended to have the highest rates of alcohol use disorder, depressive episodes, panic disorders and specific phobias (Van Hooff et al., 2018).
- The **Navy is significantly overrepresented in complaints of abuse**; 39 per cent of all cases, even though there are currently half as many Navy personnel as Army personnel and approximately the same number of Navy and Air Force personnel (Defence Abuse Response Taskforce, 2014).
- Between 1997-2020, **male Navy veterans were found to be most at risk from suicide**, with 35.5 per 100,000 taking their own lives (AIHW, 2022).

Rank

Male Veterans

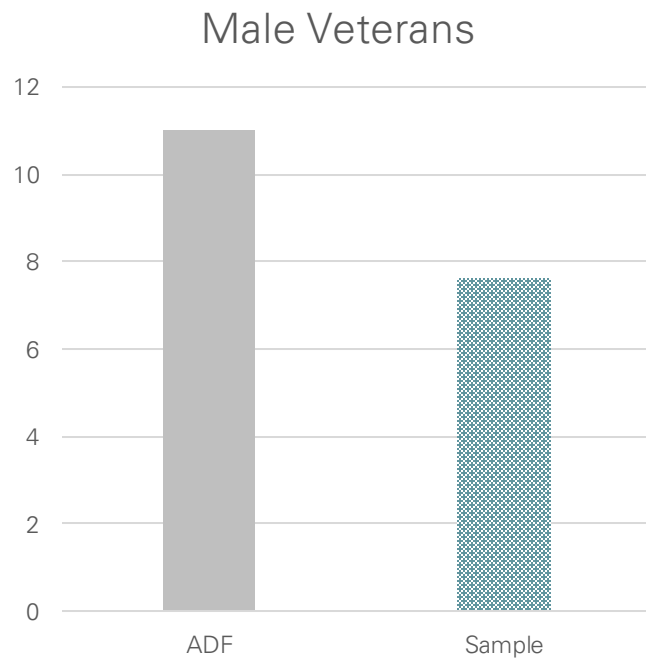


Female Veterans

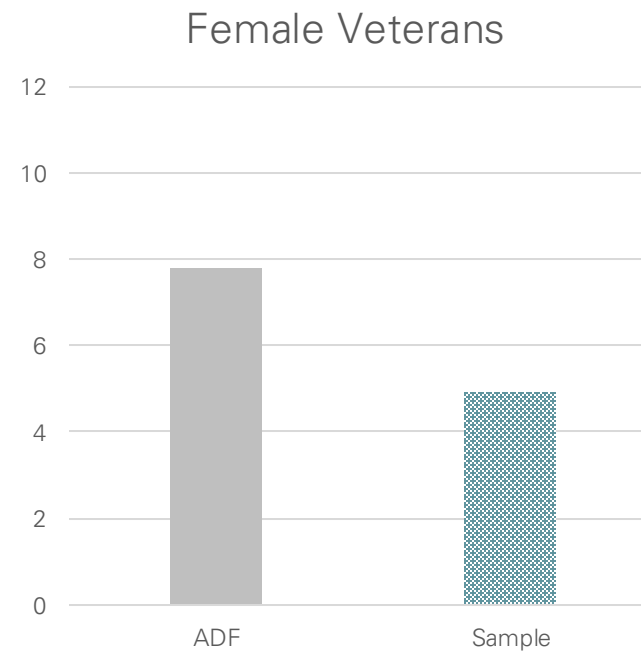


- The prevalence of any **mental health disorder was highest for those of junior ranks** (Corporal equivalent or below) at 29.5%, compared to 19.7% for non-commissioned officers, and 16.6% for officers (McFarlane et al., 2011).
- Those of **junior ranks have been shown to be at the heightened risk of suicide**, with 36.4 per 100,000 males taking their own lives and 15.8 per 100,000 of female veterans (AIHW, 2022).

Service Length



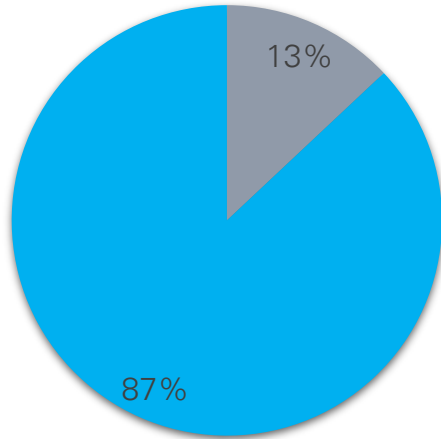
(AIHW, 2021)



- It has been shown that **as service length increases the rates of mental health issues decrease.** Rates are highest in those with less than four years of service and lowest in those with 8-20 years (Van Hoof et al., 2018)
- **The suicide rates for both male and female veterans consistently decrease after each year of service,** at a peak of 47.1 per 100,000 for males and 29.1 for females with less than 1 year of service, and then steadily declining to 17.9 for males and 9.8 for females at 20-years of service (AIHW, 2022).

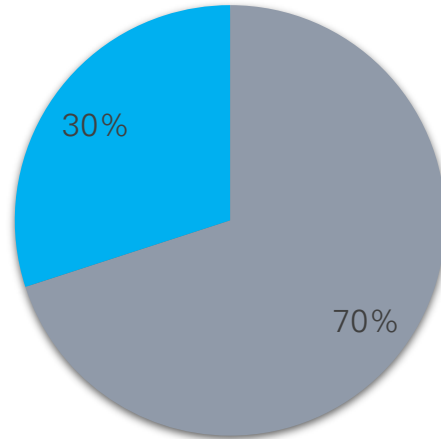
Discharge Type

Male Veterans



■ Medical discharge ■ Voluntary discharge

Female Veterans



■ Medical discharge ■ Voluntary discharge

- **The most common type of reason for separation from the ADF was voluntary discharge**, with similar proportions for males at 44.8% and females at 44.4% (AIHW, 2022).
- **Male veterans medically discharged at low rates** 14.6% than female veterans 17.9% (AIHW, 2022).
- **The suicide rates for both males and females were highest for medical discharge** at 69.8 per 100,000 and 25.8 per 100,000 respectively (AIHW, 2022)

Military Culture and Stigma

Military culture values physical and mental competence, self-sacrifice, and an undivided commitment to the institution (Prevett, 2022). This culture exerts pressure on individuals to adhere to strict standards and accept the high demands expected of them (NCDVSP, 2021; Segal, 1986).

Those unable to meet these demands due to injury often face stigmatisation (Denning et al., 2014; Frank et al., 2018; NCDVSP, 2021).

To avoid such treatment, many service members conceal their injuries and hesitate to seek help (Bale, 2014; Jones et al., 2015).

Even after discharge, these military experiences can never be erased, and veterans may carry their military identity and behaviours with them for many years after service (Jones et al., 2016; Wadham & Morris, 2019), including avoiding being identified as injured by delaying help-seeking.

Help-seeking and Gender

Compared to men, women tend to have more favourable attitudes toward professional help-seeking and a greater awareness of their own need for it (Judd et al., 2008).

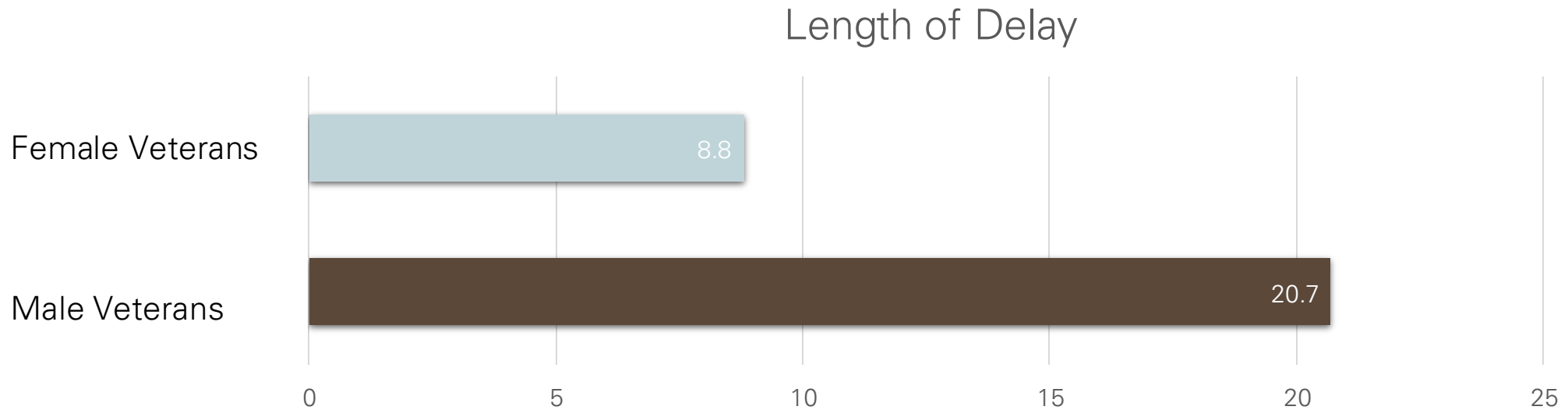
Femininity plays a role in shaping attitudes towards seeking help and tolerance of stigma, showing that gender and sex role orientation influence these aspects (Nam et al., 2010).

Women are more accepting of the stigma surrounding professional help-seeking, more inclined to recognise their need for assistance, and more open to sharing their problems with others (Ang et al., 2004).

Female veterans exhibit a 1.5 times greater inclination than their male counterparts to actively engage in their health and healthcare (Etingen et al., 2020).

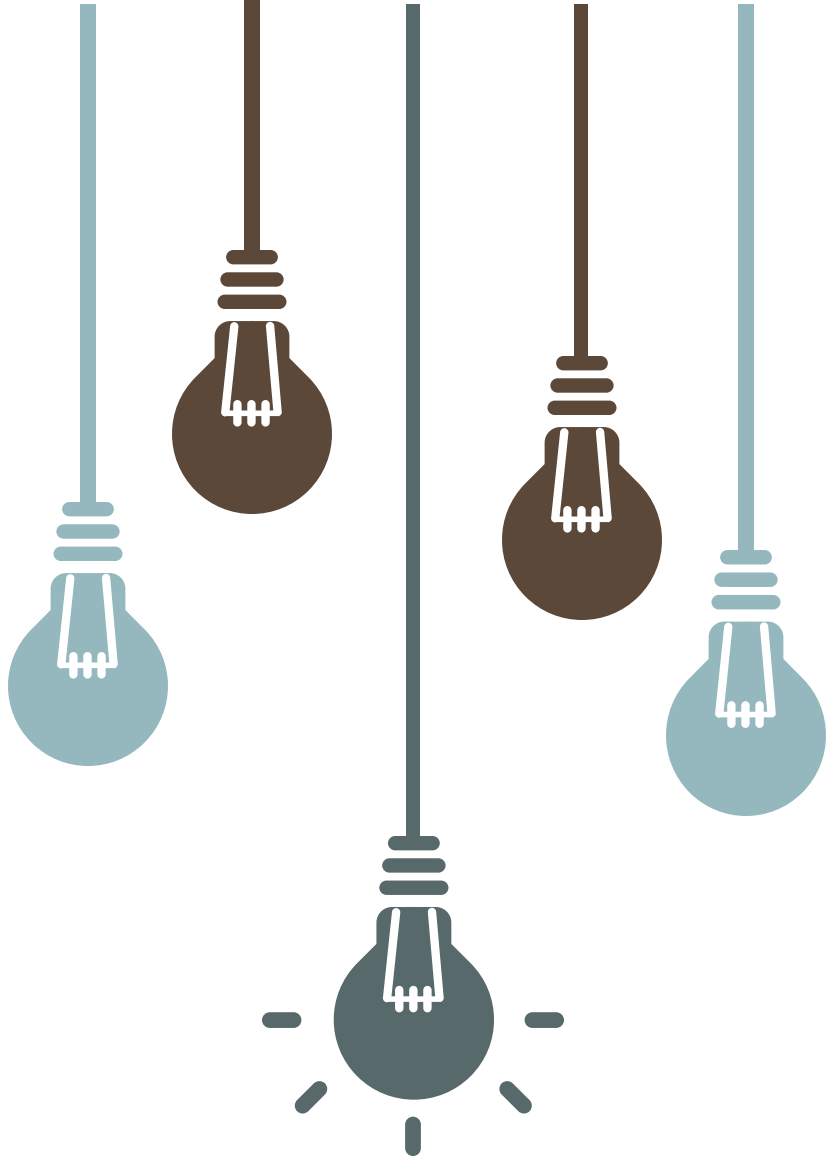
Men who conform to traditional masculine norms, often prevalent in military settings, are less likely to seek help and may view help-seeking behaviour as a sign of weakness (Vogel et al., 2011).

Help-seeking and Gender



- Between 1997 and 2020, 50% of male suicides occur 20 or more years after discharge (AIHW, 2022)

Why is this relevant?



These findings are particularly significant for healthcare practitioners responsible for promptly identifying at-risk veterans to prevent crisis situations.



The study's discovery of delayed help-seeking among male veterans emphasizes the need for gender-sensitive interventions addressing barriers like stigma and military culture.



Understanding how gender intersects with military service characteristics informs tailored interventions for male and female veterans. Collaboration among practitioners, researchers, stakeholders, and policymakers can ensure timely access to healthcare and support, promoting long-term well-being and reducing suicide risk.

Case Study

In 2000, Tony, a male sailor, made the decision to transition out of the military after a relatively brief period of six years as a seaman. During his service, Tony experienced persistent verbal abuse and bullying, which took a toll on his emotional well-being. The continuous exposure to a hostile and stressful work environment resulted in the emergence of anxiety-related symptoms. Wanting to escape the toxic situation and fearing the perception of weakness by others, he made the choice to voluntarily discharge. After years of struggling with his mental health after service, and using alcohol as a coping mechanism, he decided to seek help following the breakdown of his marriage.

Summary

- Gendered Risk Factors: Explored research findings highlighting elevated risks for developing service-related mental health disorders, particularly among male ex-serving Navy veterans of junior rank with short service length and voluntary discharge.
- Vulnerable Group: Identified male veterans with mental health disorders as a particularly vulnerable subgroup, characterised by the longest delay before seeking help.
- Influence of Military Culture: Theorised and supported with evidence that military culture and stigma influences veteran behavioural patterns, affecting discharge choice and the length of delay before seeking help.
- Intervention Strategies: Emphasised the importance of understanding these dynamics for developing targeted interventions and support strategies for at-risk individuals within the veteran community.

Thank you

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