

## Leadership Connection 2018 (15-18 September)

### The Military as a Culture

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Veterans in all branches of the military have a shared value system (Convoy, 2013). Veterans are leaving the military after many years of service experience culture shock that includes changes in status, disorientation, and a search for identity (Convoy, 2013). This paper will discuss the impact of military culture and health care access and disparities in the veteran population.

Frequently, veterans return to civilian life with mental health issues beyond culture shock. Army documentation shows active duty military suicide is the highest on record (Convoy, 2013). The Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) veterans are suffering from the results of injuries from improvised explosive devices (IED) and obtaining traumatic brain injury (TBI). The most severe mental health condition is Post Traumatic Stress Disorder (PTSD) and has a devastating impact on veterans (Convoy, 2013). In an attempt to alleviate PTSD symptoms, veterans will self-medicate with alcohol or drugs (Convoy, ).

According to the Medical Department of the Army (2208), the data reflects the present suicide rate among active veterans is the highest it has been in the twenty-six years of record-keeping (Coll, 2011). Currently, 15 to 30 percent of veterans will meet the Diagnostic and Statistical Manual Disorders (DSM-IV) for severe mental health disorder involving Post-Traumatic Stress Disorder (PTSD), mood disturbances, anxieties, and co-morbid substance abuse (U. S. Army). The most common complication in veterans is PTSD.

PTSD involves the decrease of functioning after having witnessed, experienced or being confronted with events that involve threatened or actual serious injury or death (Coll, 2011). Frequently, veterans are devastated they will self-medicate with alcohol or drugs to alleviate the PTSD symptoms (APNA, 2000). Also, research reflects 64-84 percent of veterans with PTSD will experience life-long alcohol abuse disorder (Coll, 2011). Veterans diagnosed with PTSD have increased rates of family and marital issues than those individuals without PTSD (Jourdan, ).

The soldiers return from the Operation Enduring Freedom (OEF), and Operation Iraqi Freedom (OIF) are suffering from the effects of severe blast injuries from improvised explosive devices (IED), and obtaining traumatic brain injuries (TBI) (APNA, 2000). In addition, interpersonal violence in veterans and active duty populations are approximately three times greater than those of civilian populations (Houppert, 2005). However, this data is inaccurate because many returnees will go undetected until they experience a significant disruption in their places of employment, families, or in their communities (Coll, 2011).

The members of the armed forces are governed by military culture comprised of traditions, values, norms, and perceptions (Coll, 2011). Although the core values are unique for each branch of the military, there are fundamental characteristics across the various military divisions including courage, honor, integrity, loyalty, and commitment (Walter Reed, 2009). These rules impact their lives on a consistent basis daily. These standards of conduct are critical because the armed forces, need to be prepared at all times to be deployed into combat (coll, ).

Nurses need to understand, recognize, and assess for military culture in the identification of veterans with mental illness. Identifying military lifestyle can be challenging for nurses because there is no standard ethnicity, language, or race (Convoy, 2013).

Veterans, at high risk, do not verbalize behavior health issues, making identification challenging for nurses. Asking a simple question, "Are you currently or have you been in the military?" provides an opportunity to discover significant insights (Convoy, 2013).

Nurses understanding of military culture has the potential to recognize mental illness and disability. Active duty personnel is apprehensive to seek mental health assistance due to the associated stigma (Convoy, 2013). Nurses provide a critical bridge between veterans obtaining appropriate mental health care. Nurse education should include training about military culture and behaviors associated with military personnel that may indicate mental health issues.

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**Title:**

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**References:**

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**Abstract Summary:**

Nurses understanding of military culture has the potential to recognize mental illness and disability. Active duty personnel are apprehensive to seek mental health assistance due to the associated stigma (Convoy, 2013). Nurses provide a critical bridge in veterans obtaining appropriate mental health care. Nurse education should include training about veterans.

**Content Outline:**

I. Introduction

A. Example: Veterans in all branches of the military have a shared value system

B. Example: Many veterans experience culture shock after many years of service

II. Body A. Main Point #1: Health care access and disparities in the veteran population

1. Supporting point #1a: Military personnel return to civilian life with mental health issues beyond culture shock.

b: The most severe mental health condition is Post Traumatic Stress

Disorder (PTSD).

2. Supporting point #2 a: PTSD has a devastating impact on veterans.

b: Veterans will self-medicate with alcohol and drugs.

B. Main Point #2: Nurses need to recognize veterans with mental illness.

1. Supporting point #1 a: Identifying military culture can be challenging for nurses.

b: Nurses must be sensitive to particular manners.

2. Supporting point #2 a: Veterans at high risk, do not verbalize health issues.

b: Active duty personnel are apprehensive to seek mental health assistance.

C. Main Point #3: The Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) are suffering from injuries from improvised explosive devices (IED) and obtaining brain injury (TBI).

1. Supporting point #1 a: The present suicide rate among veterans is the highest it has been in the twenty-six years of record-keeping.

b: Research reflects 64-84 percent of veterans with PTSD will experience life-long alcohol abuse disorder.

2. Supporting point #2 a: Veterans diagnosed with PTSD have increased rates of family and marital issues than those individuals without PTSD (Coll et al., 2001)

b: Many returnees will go undetected until they experience a significant disruption in their places of employment, families, or in their communities.

III. Conclusion A: The potential to recognize mental illness and disability by health professionals will increase with the appreciation of military culture.

B: Nurse education should include training about military culture and behaviors associated with military personnel that may indicate psychiatric concerns.

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**Author Summary:** Linda Casale is from Atlantis, FL and is a Board Certified Psychiatric Mental-Health Registered Nurse with a passion to create mental health awareness for young adults. Linda's vision to educate college students regarding the signs and symptoms related to the disease process of mental health will result in early identification and intervention having a positive impact in minimizing the tragic violence across the nation.