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Carolyn Halloway, English 2010

Position Paper

It is 2:30 in the morning and you are being woken up by your captain to go out to the front line to fire at the enemies. This is the fourth night in the row that you have had to leave your comfort of your cot to go out and enter the action. You are in the middle of the daily fire and can say that you have experienced explosions multiple times that have knocked you off your two feet.

If you can imagine this happening to you, then you can imagine what many of our soldiers and veterans have experienced. Now after imagining that, imagine coming back to your home, sweet home and trying to forget all of that, putting it behind, to not let you affect your daily life. It is a huge problem that we're seeing more and more of lately because of the rise of wars and need of soldiers



going out.

With most of the veterans with these mental illnesses, a big majority of them came from the Vietnam War. Back in the day when these veterans returned home they didn't know what PTSD (Posttraumatic Stress Disorder) was. It was more commonly known as "Shell Shock" or "Combat Stress Reaction".

They were simply told to forget everything that happened (Jauregui). That is easier said than done.

Since they didn't have that great of knowledge of the illness not many were treated. Many friends and

family think that it is unfair that after all they have gone through, they continue to suffer. Now in day we are aware that such mental illnesses exist, but still many men and women who return from service do not receive treatment or the proper treatment. This is the question as to how they should seek and receive the treatment. Many issues have arisen with people complaining that the VA (Veteran Affairs) is handling these situations incorrectly.

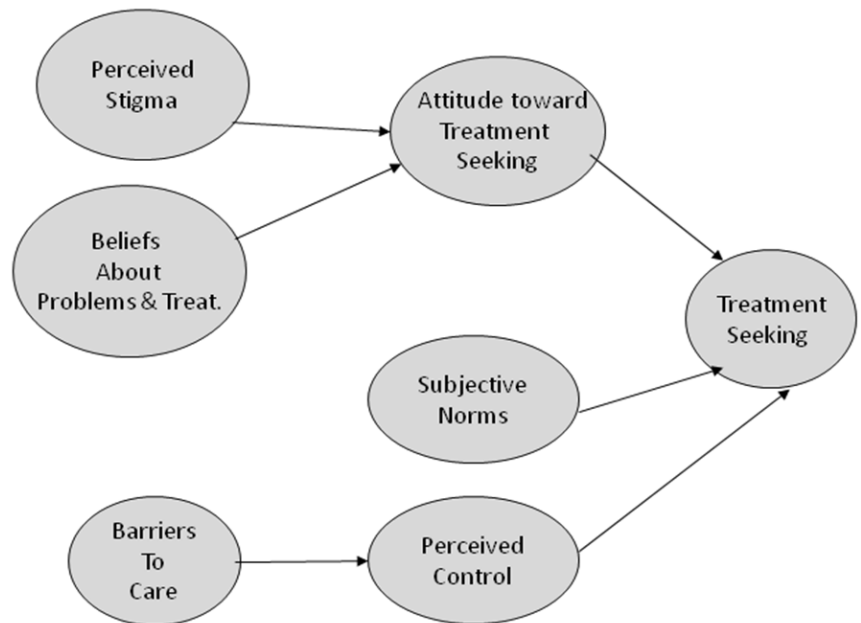
Factors to why proper treatment does not happen

According to one theory, the intention to engage in a behavior, or in other words to seek treatment, is based on three factors: the overall attitude toward the behavior (i.e., the treatment), perceived social norms for engaging in the behavior, and perceived control over the behavior. This makes it a little easier to understand and break it down the reasons the treatment is happening. First off, we see that there some veterans have an attitude that they don't need treatment, and that they can handle it themselves without

professional treatment (Mackenzie et al., 2004). We can also see that social norms, or what others might think of them seeking treatment, make a place as a factor as well.

Also, people may believe that treatment isn't possible if they live far away from a treatment center, or if they don't have the means of

transportation. We can see that many of these factors are negative and show that there is a large number of veterans not getting treatment because they are in difficult situations, negative beliefs about



how the treatment works, no support and or embarrassed at what society would think of them. Those who are proactive and seek after the treatment aren't always successful either though. There are many places where a Mental Health Care Center is not available. This issue is constantly being brought up and is being worked with by the Department of Veteran Affairs

The Department of Veteran Affairs

The Department of Veteran Affairs is trying hard to make everyone happy. One thing that I noticed that is on their website they are doing a lot of promoting to help spread the word about PTSD. In fact today, the 27th of June, is named the PTSD Awareness day, and this month is the awareness month. They are trying to promote a more positive look on seeking treatment for PTSD, that it's not bad and they are trying to clear up any negative thoughts or ideas about the treatment. In recent news the Veteran Affairs' secretary, Erik Shinseki has announced that the care will be getting better. A new regulation will simplify the process for the veteran so that they will not need as much evidence for their claim of PTSD. A lot of this is because of complaints that the VA isn't doing enough or that they do not have enough treatment centers. For those veterans that live in rural areas the distance could be what is stopping them from getting the treatment or for others just another factor that shows that they don't "need" the treatment.



Proposal Paper

The fact that not every veteran that has PTSD is getting treatment is quite sad. We, as a nation and fellow human-beings, would think that out of all people our veterans would be the people on top of the priority list to get help. That means we would have to have enough care centers in every part of the nation making treatment accessible, easy and cheap. A change is needed; and from recent news a type of this change is coming our way. Erik Shinseki announced that the VA Department would be adding 1,600 mental health clinicians as well as almost 300 support staff. VA currently has a staff of around 20,000 mental health clinicians (“Orlando,” par. 2). If each facility had a couple more on the mental health staff, hundreds of veterans that haven’t been getting help would be able to be attended. I think it’s by these small things that the bigger picture will be getting more filled. I believe that if more access is available to our veterans they will not get as depressed as easily to seek help. I think many don’t even try to search for assistance because maybe there isn’t a medical or treatment center close to them or they know that the center is already full. As VA Under Secretary for Health Dr. Robert Petzel says

“Improving access to mental health services will help support the current and future Veterans who depend on VA for these vital services.” I think by planning to build more medical centers and hire more employees we’ll not only be helping our older veterans, but also the future ones, those who may not know that they are



going to be veterans or go to war. Preparing for the future is a key. Secretary Erik Shinseki also announced that they would start a Mental Health Hiring Initiative to improve marketing, recruitment, and hiring efforts for mental health professionals so that the new 1,600 mental health providers can be hired as quickly as possible (“Orlando,” par. 4).

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