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Nota di contenuto	Introduction Defining Stigma in the Military Context Prevalence of Mental Health Stigma in the Military Societal Costs of Mental Health Stigma in the Military Promising Programmatic and Policy Approaches to Reducing Stigma U.S. Department of Defense Programs to Reduce Mental Health Stigma U.S. Department of Defense Policies Related to Stigma Key Findings and Priorities for Improving the U.S. Department of Defense's Approach to Stigma Reduction Appendix A: Methods for Literature Review Appendix B: Definitions of Mental Health Stigma Appendix C: Prevalence of Stigma in the General U.S. Population Appendix D: Detailed Methods for the Modeling Approach Appendix E: Program Descriptions and Analysis Appendix F: Policy-Analysis Methods Appendix G: Policies with Implications for Stigma Appendix H: Policies That Contain Negative Terminology with Implications for Stigma Appendix I: Methods Used to Conduct the Expert Panel to Refine and Vet Priorities for Mental Health Stigma Reduction in the U.S. Department of Defense

Despite the efforts of both the U.S. Department of Defense and the Veterans Health Administration to enhance mental health services, many service members are not regularly seeking needed care when they have mental health problems. Without appropriate treatment, these mental health problems can have wide-ranging and negative impacts on the quality of life and the social, emotional, and cognitive functioning of affected service members. The services have been actively engaged in developing policies, programs, and campaigns designed to reduce stigma and increase service members' help-seeking behavior. However, there has been no comprehensive assessment of these efforts' effectiveness and the extent to which they align with service members' needs or evidence-based practices. The goal of this research was to assess DoD's approach to stigma reduction, how well it is working and how it might be improved. To address these questions, RAND researchers used five complementary methods: (1) literature review, (2) a microsimulation modeling of costs, (3) interviews with program staff, (4) prospective policy analysis, and (5) an expert panel. The priorities outlined in this report identify ways in which program and policy development and research and evaluation can improve understanding of how best to efficiently and effectively provide needed treatment to service members with mental illness.
