Trends in Mental and Physical Health Effects of Veterans based on their Branch of Military

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Abstract

Over the years, the United States military has been involved in significant and prolonged complex combats across the world. The military has played a fundamental role in combating extremist groups in the Middle East, and other parts of the world. Almost all of these military operations are very dangerous and could lead to both physical and mental health problems being developed in soldiers. While serving, the military suffers physical injuries and other conditions that interfere with the normal functioning of the body. However, these effects are not always felt during active combat but can become worse in after the army. Ex-soldiers suffer from many mental health problems; the common ones are post-traumatic stress disorder, depression, and suicidal thoughts. Most of the veterans lack coping mechanisms, and painful memories keep recurring in their mind. Without proper treatment, veterans are at a risk of developing even more severe disease, which could lead to self-harm or harming others.

Keywords: veterans, physical health, mental health, post-traumatic stress disorder.

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Introduction

Veterans refer to the former members of the armed forces or military. These individuals are involved in the battlefield at one point in their lives. Notably, soldiers witness disturbing events such as the death of colleagues, death of enemies, and explosions, which lead to traumatic injuries. However, they are expected to be strong even after such incidences, which deters them from seeking psychological help during their duties (Seal et al., 2017, p.1636). When they return home from war, the veterans often remember the difficulties and life-threatening events that they experienced. Therefore, most veterans develop mental health conditions, which may lead to several other associated conditions. Some of the examples of the conditions that affect the veterans include PTSD, depression, and suicidal thoughts. Also, some veterans lack adequate coping mechanisms which may lead them to drug addiction and alcoholism later in life (Leung et al., 2019, p.1281). However, there are intervention measures and facilities which help the veterans cope with the PTSD conditions after the war. These facilities help them to manage symptoms of PTSD, depression and reduce the incidences of suicidal thoughts. Therefore, this paper will highlight the trends in mental and physical health among veterans based on the branch of the military.

Sleep Disturbances and Insomnia

Lack of adequate sleep is a common issue for veterans who suffer from mental health disorders. A good quality of sleep is essential for a healthy life and overall wellbeing of every person. Sleep disturbances involve a wide range of complaints, which include difficulty of falling asleep, frequent waking up, and poor quality of sleep. Notably, poor quality of sleep is a crucial indicator of mental health disorders. Also, lack of sleep could lead to a wide range of psychological disorders.

In contrast, insomnia is categorized as a mental health disorder that hinders the daily functioning and activities of an individual. However, any sleep complaint which is not

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attributable to insomnia is referred to as a sleep disturbance. Notably, veterans regularly have insomnia and mental health disorders due to the nature of their duties while at the battlefield (Leung et al., 2018, p.39). A study conducted among US military veterans gave exciting results. During the study the veterans were separated into three different groups. The groups included people with insomnia, those with sleep disturbances, and those with PTSD. Soldiers who complained about sleep disturbances were found out to have PTSD disorder. Patients with PTSD were indicated to complain about a chronic lack of sleep. The key findings of this study are that those patients who had PTSD suffered from severe lack of sleep while patients with insomnia had relatively low sleep disorders.

Noteworthy, the veterans who had PTSD were deployed to the battlefield at least once which means that PTSD related to issues of military deployment. Similarly, another study among the US veterans showed that those who had sleep disorders developed the condition as a result of hardship and challenging encounters on the battlefield (Leung et al., 2018, p.41). Another effect of military deployment is inefficient sleeping, where the individual spends most of their time in bed awake. The study highlighted that there is a need to address the sleep issues among the veterans irrespective of the mental and psychological health status.

There is a link between a lack of sleep and the risk of suicide among the veterans. However, there was an inadequate research to authenticate the association between the two variables. A study that aimed at determining the effectiveness of the CBT for insomnia found among 405 US veterans who had insomnia indicated that there was a reduced level of suicidal thoughts after the CBT for insomnia. As the level of insomnia lowers, the levels of depression also decrease among the veterans. However, even after the depressive symptoms decrease, suicidal ideation does not decrease among the veterans who have insomnia (Miller et al., 2017, p.221). Notably, the lack of ample sleep leads to mental and emotional instability, followed by poor judgment and decision-making, which increases the likelihood

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of committing suicide. The researchers suggested that a lack of a control group may have led to weaknesses in findings. For instance, it could mean the veteran had suicidal thoughts due to other factors such as the passage of time rather than the CBT from insomnia.

Studies conducted among US military veterans showed that sleep disturbance is likely to affect significantly veterans who had mental health disorders such as PTSD and depression. Most veterans are likely to experience short sleep durations, nightmares, high waking frequency, and difficulties of falling asleep. In a study to determine the cause of sleep disturbance among the veterans, most cited that they experience excessive rumination while in bed. Rumination is the act of entering into deep thought while an individual goes to sleep. As such, this behavior could be a manifestation of PTSD disorder among veterans. Also, excessive worrying among the veterans is a contributing factor to difficulty in sleeping and hyperarousal. In turn, these issues could result in increased psychological symptoms because sleep contributes to memories and emotional processing.

Sleep Apnea

It is essential to evaluate the relationship between obstructive sleep apnea and mental health among military veterans. There are many cases of sleep apnea among military veterans. Notably, individuals with sleep apnea are likely to suffer from PTSD and depressive disorder. Therefore, apnea could be one of the indications that a person could have mental conditions. A research conducted among the US veterans showed that veterans are at a higher risk of suffering from apnea regardless of risk factors associated with the condition such as smoking, overweight, and being older.

Similarly, studies indicate that sleep apnea is more prevalent among the patients with PTSD (Graziano, & Elbogen, 2017, p.362). Therefore, it proves that there is a relationship between apnea and PTSD, where the former could have a symptom of the latter condition. Sleeping difficulties are universal symptoms among patients of PTSD. Many of the veterans

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who were diagnosed with PTSD reported that they suffered from sleep apnea and insomnia most of the time. There is a significant number of veteran soldiers who lack physical injuries but suffer from sleep apnea. It is worth noting that lack of ample and quality sleep can limit the ability of a veteran to control their stress, which reduces the recovery outcomes from traumatic events.

Veterans and Suicide

Suicide-related aspects include suicidal thoughts, obtaining the methods to harm oneself, attempting to commit suicide, and the actual act of suicide. Between the 1970s and 2000s, the number of suicide deaths significantly increased in the US (Graziano & Elbogen, 2017, p.364). Notably, this coincides with the increase in the number of soldiers in the US army between these periods. The number of army officers and veterans who commit suicide has surpassed the number of the ordinary suicidal citizens in the US. Many studies have been done to determine the cause of increased rates of suicide deaths among the veterans of war. Most studies have focused on the range of aspects and factors that lead to suicide ideation among the veterans and military populations. Some of the highlighted causes of the acts of suicide include regular social exchange, anatomical brain issues, interpersonal conflicts, marital status, and alexithymia. Besides, suicide in veterans varies based on gender. Veterans of the female gender are more likely to commit suicide or to have suicidal ideation, than their male counterparts. Also, studies indicate that an attempt of suicide among military veterans is expected to result in death as compared to the efforts of a civilian or ordinary citizen. Mental health issues are the most significant contributing factors to suicidal deaths among veterans. Between the years 2000 and 2006, nearly 7500 people from the military committed suicide (Miller et al., 2017, p.222). It is worth noting that more than half of this number suffered from mental health problems before they decided to take their lives. Veterans who tested

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positive for mental conditions such as depression and PTSD indicated that most of them had at one time or another developed suicidal thoughts.

Among the military men and veterans who have attempted to commit suicide, most of them have attempted it multiple times. For instance, a hospital that admitted the veteran soldiers recorded that more than 40% of their patients had tried to commit suicide more than two times (Leung et al., 2018, p.42). It follows that suicide is prevalent among the veterans due to traumatic events that they experienced in the course of their duties. Therefore, conclusions could be drawn that the hardship and nature of their duties lead to the proliferation of mental health disorders, which push the veterans towards suicide. Also, lack of coping skills and support could be another contributing factor to the high suicide rates among the veterans. Other factors for attempting to commit suicide include emotional suffering, psychological stress, and escape from blame. These reasons explain why there is a high prevalence rate of suicide among the veterans.

Individual risk factors could contribute to suicide among veterans. Some of these individual factors include the acceptability of suicide based on different scenarios. For instance, veterans are more likely to commit suicide if they feel that they are tired of life and ready to die. Other factors that contribute to the high rates of suicide in veterans as compared to non-veterans are family issues. People who come from non-supportive families are likely to develop suicidal thoughts, which would lead them killing themselves (Leung et al., 2019, p.1284). Also, the acceptability of suicide may vary depending on different populations of war veterans. Specific sub-populations in the veterans include bisexual, gay, lesbian, and transgender. Terminally ill veterans are also another category that could find suicide as more acceptable as compared to others. Notably, there are other pre-military risk factors could lead to suicide among veterans, some of these include child abuse or sexual assault, which happened before recruiting an individual to the military.

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Anger among Veterans

Anger is described as a negative feeling that is associated with perceptual and cognitive distortions. Anger is different from aggression since it does not entail the intention to cause harm to another person. One of the common problems among veterans is anger. Notably, these problems affect more than 57% of veterans in the US (Graziano & Elbogen, 2017, p.364). This vice could lead to making mental and psychological harm to the veteran. For instance, there is a high correlation between anger and cardiovascular disease. People who get irritated quickly are more likely to develop diseases such as stroke, hypertension, and heart disease. However, there are a few studies that link anger with various psychological problems and mental health conditions among the veterans.

There is a strong link between PTSD and anger, especially among the military veteran populations. It is apparent that violence remains a leading problem for people who have PTSD. A particular study conducted among veterans showed that 66% of the veterans of the Vietnam War were receiving cognitive processing therapy (Miller et al., 2017, p.225). The study investigated different aspects among the veterans, which included anger, alcohol use, depression, and anxiety. Out of all these aspects, only violence affects PTSD treatment outcomes. Severe anger reduces or hinders the effectiveness of the therapy for patients with PTSD. In another study involving the US soldier, the participants were required to state which problem they would want to address using an administered therapy. Noteworthy, 43% of the veterans indicated that the main problem that they would want to reduce was anger level (Leung et al., 2018, p.45). Besides, there is a difference between the populations of men and women who have a problem with anger. Men are found to suffer more than women when it comes to the issues to do with anger. Such a study is essential for the determination of the intervention measures when dealing with PTSD among the veterans—as such, reducing anger would increase the treatment outcome of PTSD therapy.

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Veterans who served for long periods in wars, for example, Vietnam war veterans, are likely to suffer from the adverse outcomes of anger. A study involving 90 US soldiers assessed them for having anger, depression, and state anger. Depression accounts for the connection between PTSD and state anger. Findings also indicate that traumatic experiences could lead to depression and anxiety among veterans. Besides, the core symptoms of PTSD may bring about chronic anger, which could proliferate to trait anger in an individual (Porter et al., 2018, p.339). Notably, soldiers usually sustain physical injuries during training or actual encounters on the battlefield. Some physical injuries may occur in the head, which causes traumatic brain injury. People who had experienced traumatic brain injury at one point in life could exhibit behavior change. A veteran who has a traumatic brain injury from blast forces develops mild TBI, which could result in frustrations and anger. However, the veterans who experienced blunt force injuries are reported to show lower levels of anger. The reason why the veterans develop anger after experiencing the blast force is due to emotional and psychosocial changes that follow the injury. With the high number of improvised explosives during a war, the veterans are exposed to traumatic brain injury, which contributes to increased rates of anger in veterans returning from the Middle East war as compared to the earlier wars veterans.

There are several treatments and interventions for controlling anger among veterans. It is worth noting that cognitive-behavioral therapy can be used to treat the veterans who developed the mood changes and anger during the war. Studies show that CTB is effective for reducing the level of stress, depression, and PTSD among veterans. Also, the intervention measure is essential for reducing symptoms such as chronic anger and its effects on PTSD patients (Oster et al., 2017, p.414). There are significant benefits to the provision of relaxation, support intervention, and psychoeducation among veterans who suffer from anger during the post-war period. CBT therapy usually proves to be effective for people with

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aggression, risky driving, and driving-related anger. Most veterans are observed to respond well to CBT therapy, which helps them to reduce or completely solve the anger-related issues.

Cardiovascular Diseases

Several studies are conducted to show high rates of cardiovascular diseases among veterans. However, the commonality between these two variables is PTSD. Patients of PTSD are likely to develop cardiovascular diseases as compared to other populations without the condition. Therefore, it could be concluded that the reasons why veterans develop cardiovascular diseases are due to their exposure to PTSD risk factors (Emdin et al., 2016, p.512). Concerning biological systems, experiencing trauma followed by PTSD could lead to dysfunction of the involved biological systems like the autonomic nervous, immune system, metabolic and vascular systems. Specific behavioral changes and psychosocial factors could be associated with the development of cardiovascular diseases. For instance, veterans may experience mood swings and frustrations, which would lead them to harmful behaviors such as smoking and excessive drinking. A combination of these behavioral and biological risk factors increases the chances of developing cardiovascular diseases among veterans. Psychosocial risk factors associated with increased risks of heart diseases include social isolation, depression, anger, insomnia, and social and economic status. A study conducted in 2013 showed that PTSD is one of the leading risk factors associated with coronary heart diseases, cardiovascular conditions, and high mortality rates. Notably, there is a link between PTSD and coronary heart diseases since studies show that 55% of PTSD patients are observed to be at risk of developing cardiac-specific mortality and morbidity (Emdin et al., 2016, p.515). Apart from PTSD, several other risk factors contribute to cardiovascular diseases among veterans. Some of these risk factors include being overweight and depressed. Obese veterans have a higher risk of developing heart diseases due to various factors such as

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deposition of cholesterol in their vascular system. Also, some veterans could stop engaging in physical activity after returning from the war. This behavior increases the likelihood of cardiac-related mortality in veteran populations. Social isolation could lead to loneliness among veterans (Emdin et al., 2016, p.517). For instance, veterans of the Vietnam War were blamed by the Americans for the mass killings of innocent people in Vietnam. The proponents of the Vietnam War blamed the veterans for the defeat by the Vietnamese. The compounding effect is that the veterans felt unappreciated and isolated themselves from society. As a result, they adopted harmful behaviors such as abuse of drugs and smoking, which increases the risks of cardiovascular disease. Therefore, social isolation is a contributing factor to increased rates of cardiac-related deaths among veterans.

Mental Health Issues among Women Veterans

In particular, women veterans suffer from many physical and mental health effects that impact their lives. Studies have shown a progressive increase of women figures in the military, including taking more leading role in a deadly mission. For example, a significant number of women had been deployed to take part in Operation Iraq Freedom (OIF) and Operation enduring freedom (OEF) that was the first most considerable instance of women joining such a deadly mission. As a result of an increase in the number of females taking part in the army, cases of an upsurge in veteran women seeking care treatment from the division of veteran affairs have been on the rise - those veterans seeking services of mental health-related disorders, physical disorders among other diseases. Various studies of this issue have been conducted, mainly focusing on women's post-deployment health and in specific the impacts on the mental health of the women veterans, as well as post-traumatic disorders. Fundamental research has since been published on the post-traumatic disorder consequence in women veterans.

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A study of the rate of mental illness amongst women veterans who participated in the Vietnam War, 4,104 women veteran soldiers, and a similar number of female veterans who acted as the control group, all took part in a structured interview. The research sought to find out any history of participants having a mental disorder. The study found that 8% of the women veterans in Vietnam and 7% of those who were non-Vietnam veteran women had past cases of a psychological health problem such as stress, anxiety, despair, and dementia (Mattocks et al., 2010, p. 2160). However, a difference of 1% did not hold any statistical significance. This study concluded a lack of increased prevalence among female veterans who took a leading role in the Vietnam War.

In another study conducted on sexual function among women veterans who took part in the Gulf war made a comparison of the women's sexual dysfunction in female veterans of Gulf War, either having or not having chronic fatigue syndrome (Mattocks et al., 2010, p. 2163). In this study, about twenty-six women veterans who had signs of consonant chronic fatigue failure adequately were assessed through filing questionnaires. The research findings were that women veterans with developing chronic fatigue syndrome led to sexual dysfunction and had difficulty in carrying out normal sexual function leading to negative thoughts and possible mental health problems.

According to Cohen et al. (2012), the conception rate among the women veterans who participated in the Vietnam War established a strong correlation between the military in Vietnam War and adverse conception outcomes. In this study, such women had a high incidence of having low birth weight children, experiencing spontaneous abortion and premature delivery. However, this risk varies from moderate to severe. Most of the adverse pregnancy outcomes are congenital disabilities due to anomalies, hereditary defects, metabolic, and shock of women during combat. A veteran undergoing these conditions have a

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high probability of getting mental health difficulties. These incidences are higher among veteran women than other non-Vietnam veterans who acted as a control group.

Consequently, in the study of fertility and pregnancy, more than 1500 participated in the study. The findings did not have any significant difference between conception and fertility rate of the deployed and non-deployed women veterans. However, this study did establish that incidences of ectopic pregnancy, abortions, and premature delivery were prevalent among the women veterans who took an active role in the Persian Gulf War and conceived after the war which increased the rate of developing mental health (Cohen et al. 2012, p. 311). The study established a strong correlation of these consequences to possible mental health problems that even interfered with the reproductive process. In a more adjusted analysis of their findings, the study did also establish that Gulf women veterans in post-war conception had a risk of having anxiety three times higher and eight times higher the risk of developing depression compared to those veterans who never deployed for any deadly mission (Cohen et al. (2012, p. 338). A similar investigation where 20,000 samples took part all sourced from the Defense Manpower Data Center. The subjects similarly distributed between males and females who had either history of placement or non-placement veterans in the 1991 Gulf War. These veterans had couples and were amid the ages of 18 to 33 during their service in the military. The survey questions focused on psychological issues. The study established that 2,200 women veterans and 2,100 male veterans had insignificant differences in the weight outcomes among those who were deployed and non-deployed. However, their findings were contested by another research whose results indicate no difference between used and non-deployed veterans concerning stillbirths. Risk of developing ectopic pregnancy and miscarriages cause even far-reaching mental health problems such as depression.

However, the rationale for differences in these two studies were not established. However, those two studies had a lower rate of response than the desired rate, which is above

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50%. Perhaps, the witnessed discrepancy is a mere reflection of the veteran's experience who decided to give feedback on the survey.

Veterans and Psychological Problems

Penman carried out a study by the use of population registries to investigate psychological problems among males and females in two Guards units on the southeast area of Mississippi deployed for one year. In those two groups, about 54 male veterans compared to the mental problem recorded in the worldwide public health organization through the use of specific mental health surveillance systems. The study found that those male soldiers born to parents who took part in the other war had fewer defects than it previously expected. However, Cowan made a comparison of the general risk of mental health problems among women veterans in the Gulf war and non-deployed but found an insignificant correlation between deployed veterans and non-deployed. However, these studies did not establish a link between mental health women and men ex-soldier in the Gulf War, in particular those conceived post the war. Notably, mental health problems do not only have possible consequences, but other complications could have led to the death of men and women veterans.

Street, Vogt, & Dutra (2009) carried out a study on the physical or emotional health of women veterans who took part in the Gulf war. In this study, a total of five hundred women sampled for investigation following the war. Two years later, soldiers from the air force participants were tested in the categories of active guards and reserves. The study observed the overall physical health based on gender in what famously referred to as Gulf war syndrome and post-traumatic stress disorder. A lot of statistical analyses carried out to designate females' emotional and physical health. The findings indicated that veteran women deployed in the war had increased gender identification and overall health problems than non-deployed veterans. Reports of mental health findings showed abnormal cognitive

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development, increased anxiety among the deployed veterans as compared to non-deployed veterans (Street, Vogt & Dutra, 2009, p 687). Consequently, the investigator conducted another study to determine the impacts of women veterans and the active role of the soldiers in war. An article on MEDLINE and data gathered from veteran affairs and department of defense registries were utilized in the study.

The data collected involved 50, 000 women serving in the Persian Gulf in the Desert Shield and Storm operations. The average age of those deployed were 26.5 for both men and women. According to the literature review and the sourced data from Veteran affairs, most health service carers sought included mental problems, anxiety, depression, and acute stress problems (Street, Vogt & Dutra, 2009, p 688).

Report from these data indicated that a similar number of women and men seeking the mentioned outpatient health care services. Nonetheless, women had increased proportional visits seeking medical care than their counter-part men. Among women's visits, 26% were for mental health problems such as depression, anxiety, and request for counseling, while 3% of the women requested to have referrals to a psychiatrist. In the overall studies analyzed by a group of researchers, it established that overall, 16% of the women veterans of the Gulf war had experienced mental problems (Street, Vogt & Dutra, 2009, p 689). As such, the evidence presented in these studies on reproductive health problems among the women veterans deployed in the war was modest, and in most cases involved single studies for a particular deployment and with specific results. However, in recent times, there have been no published studies on the physical and mental health of army veterans.

Mental and Health Care Requirements and Use

Several studies have been conducted on mental health care needs and utilization. Cohen et al. (2010) indicated that most of the veterans from operation Iraqi freedom were in dire need of depression counseling, partnership issues, anger management, anxiety, and

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another post-traumatic disorder. About 78% of the respondents seeked a need for treatment, and while 42% of the same individuals who felt they need medical treatment sought neither treatment, nor counseling. Some of the reasons they abandoned therapy or counseling were due to long periods of waiting, due to initial experience they had. These were the most significant reasons why they did not seek mental health services. In an analysis of logistic regression analysis gender differences were compared between a sample size of 782,789 veterans. It established that older women were more likely to develop mental health disorders (Cohen et al., 2010, p. 19). The truth was actual for other subgroups of veterans who had a history of substance abuse and could potentially develop anxiety or mood disorders. Among the veterans with post-traumatic disorders, bipolar or psychotic disorder, there was an insignificant gender parity in the likelihood of seeking mental health services within the designated veteran health care.

In another study that involved 49,000 ex-soldiers detected with a post-traumatic disorder, and it had established that only 10% did visit the veteran affairs health session for 15 weeks in their first year of diagnosis. However, those veterans who participated in Afghanistan and Iraq were identified with post-traumatic anxiety problems and recommended seeking mental service treatment from veteran affairs (Baker et al., 2009, p. 737). A study conducted by Cohen and was associated comparing the use of veteran affairs non-psychiatric care across veterans in Iraq and Afghanistan. It established that patients with post-traumatic stress disorder had a high number of patients seeking mental health services from veteran affairs (Cohen et al., 2010, p. 21). Four essential studies had focused on the risk involved in diagnoses of mental health or the development of these mental disorders. Rundell and colleagues conducted the first study with a sample size of 1264 veterans who had just been evacuated from theater operations. When these groups compared to those returned to the mission, the evacuated personnel with mental health problems were mostly female.

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As such, there was a likelihood that the female's returns would be diagnosed with mental disorders. In more than 13 publications that investigated mental health issues post-deployment period, and in particular, in the Operation Iraq Freedom, veterans have higher risks of developing new cases of depression, committing suicide, and even use the firearms to commit suicide (Cohen et al., 2010, p. 23). Also, there a high level of discrepancy between military personnel diagnosed with stress disorder and seeking mental health services from veteran affairs. Most of the veterans perceive going to find mental health services has an even higher risk of developing mental health disorders such as anxiety due to long waiting. It has, therefore, established that veteran records the low level of utilizing the mental health services, which only increase the risk of developing post-traumatic disorder which could have a far-reaching effect to the individual health (Maguen et al., 2012, p.62). The existing body of literature indicates that many of the veteran soldiers use excessive amount of alcohol and drugs as a way of covering up their remorse, resentment, and frustration from the general public. Most of the veterans diagnosed with post-traumatic disorders have either used alcohol or combined alcohol and other drugs, turn into addicts with time. While this is evident and persistently recorded problem, most of the veterans do not record any changes regarding their mental health condition.

Among other reasons why veterans fail to seek health care service is due to report of less satisfaction and reduced perception of care quality. For example, a veteran with a sexual trauma who has increased post-traumatic stress disorder but does not receive the expected care of their respective departments. Among the interviewed veteran, about 1400 women reported having experienced military sexual assault and subsequent trauma (Maguen et al., 2012, p.63). Others are said to have experienced both sexual assault and combat exposure, all of which had a significant impact on their mental health. Several other studies have focused on the review of a post-trauma sequel in different areas of mental health. Examples of such

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post-trauma sequels include traumatic brain injury, spinal cord injury that all lead to mental disorders. For instance, one study established a correlation between spinal cord injury and mental disease that cause serious mental health problems among the veterans (Maguen et al., 2012, p.64). Also, the physical injuries, wounds, and scars left after healing revive the old memories. Some people reported to have experienced nightmares, lack of sleep, increased stress in bed, which eventually lead to depression.

Research shows that veterans are very aware of their real physical health. Meta-analysis research indicates that there is a significant relationship between veterans and their physical health perception described as poor-average excellent and the fused health score. Several studies have hypothesized that in a certain way, the physical health of veterans may influence their level of effects (Eisen et al., 2012, p 67). However, a veteran physical health effect may equally be influenced by other variables. There are other general health concerns for post-deployment veterans. In a study among the veterans who participated in the operation of Iraq's freedom, the finding shows that both men and women have had a history of deployment anguish. The correlation amid prolonged placement and post-placement pain is more prevalent in men. The study also has established that women deployed for combat missions are two times likely than men to get a consumption disorder (Maguen et al., 2012, p.64). The veterans who had a history of return to the deadly mission and using the veteran affairs care, women reported objecting reporting any pain to the health care service department. However, men had a high rate of reporting pain. However, among the veterans with suffering physical pain, female soldiers were three times likely to report moderate pain. However, they would not report a consistent pain as compared to their counter-part men soldier.

Limitations

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The major restriction of this literature evaluation, as the case with other reviews, is the likelihood of ignoring other more significant articles. Most of the articles reviewed were identified as modest studies. It, therefore, means there exists a chance of additional studies that were not used in this review. Nonetheless, the article search procedures employed in this review were extensive, and it included canvassing reputable scholarly studies. However, it was not probable to execute formal tests to determine the journal bias, and even with such a test, it is not probable to determine whether or not biasness during the time of publication.

Additionally, most of the reviewed studies utilized small participants or were sampled from one area, hence, leading to doubtful generalizability. Some of the studies reviewed participants with a low response rate below the 50% standard response rate; besides, another article reviewed depended on the self-reporting of the patient. Whereas, some of the trends on bodily and psychological health amongst ex-soldiers are real, but the need for further research is fundamental to involve large numbers of the participants from diverse groups.

Conclusion

With the continued increase of military mission and increased formation of extremist groups, soldiers will continue to serve in this war. As such, both current and veteran officers experience physical and mental health problems, which, if not treated early, could lead to diverse effects. Today, servicemen and women have better health care institutions; combats have more diverse technology than the traditional use of guns. However, they are still facing physical and mental health problems. Many of the veterans, both men, and women, suffer post-traumatic anxiety problems. Even though most of the studies carried out are high discriminative for giving more emphasis on mental health, it's evident that most of the soldiers serving in Iraq, Afghanistan, and other regions suffer both physical and psychological problems.

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References

Baker, D. G., Heppner, P., Afari, N., Nunnink, S., Kilmer, M., Simmons, A., ... & Bosse, B. (2009). Trauma exposure, branch of service, and physical injury in relation to mental health among US veterans returning from Iraq and Afghanistan. *Military medicine*, *174*(8), 733-778.

Cohen, B. E., Gima, K., Bertenthal, D., Kim, S., Marmar, C. R., & Seal, K. H. (2010). Mental health diagnoses and utilization of VA non-mental health medical services among returning Iraq and Afghanistan veterans. *Journal of general internal medicine*, *25*(1), 18-24.

Cohen, B. E., Maguen, S., Bertenthal, D., Shi, Y., Jacoby, V., & Seal, K. H. (2012). Reproductive and other health outcomes in Iraq and Afghanistan women veterans using VA health care: Association with mental health diagnoses. *Women's Health Issues*, *22*(5), e461-e471.

Eisen, S. V., Schultz, M. R., Vogt, D., Glickman, M. E., Elwy, A. R., Drainoni, M. L., ... & Martin, J. (2012). Mental and physical health status and alcohol and drug use following return from deployment to Iraq or Afghanistan. *American journal of public health*, *102*(S1), S66-S73.

Emdin, C. A., Odutayo, A., Wong, C. X., Tran, J., Hsiao, A. J., & Hunn, B. H. (2016). A meta-analysis of anxiety as a risk factor for cardiovascular disease. The American journal of cardiology, 118(4), 511-519.

Graziano, R., & Elbogen, E. B. (2017). Improving mental health treatment utilization in military veterans: Examining the effects of perceived need for care and social support. Military Psychology, 29(5), 359-369.

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Leung, L. B., Rubenstein, L. V., Yoon, J., Post, E. P., Jaske, E., Wells, K. B., & Trivedi, R. B. (2019). Veterans health administration investments in primary care and mental health integration improved care access. Health Affairs, 38(8), 1281-1288.

Leung, L. B., Yoon, J., Rubenstein, L. V., Post, E. P., Metzger, M. E., Wells, K. B., ... & Escarce, J. J. (2018). Changing patterns of mental health care use: the role of integrated mental health services in veteran affairs primary care. The Journal of the American Board of Family Medicine, 31(1), 38-48.

Maguen, S., Cohen, B., Ren, L., Bosch, J., Kimerling, R., & Seal, K. (2012). Gender differences in military sexual trauma and mental health diagnoses among Iraq and Afghanistan veterans with posttraumatic stress disorder. *Women's Health Issues*, *22*(1), e61-e66.

Mattocks, K. M., Skanderson, M., Goulet, J. L., Brandt, C., Womack, J., Krebs, E., ... & Haskell, S. (2010). Pregnancy and mental health among women veterans returning from Iraq and Afghanistan. *Journal of Women's Health*, *19*(12), 2159-2166.

Miller, M. B., DiBello, A. M., Carey, K. B., Borsari, B., & Pedersen, E. R. (2017). Insomnia severity as a mediator of the association between mental health symptoms and alcohol use in young adult veterans. Drug and alcohol dependence, 177, 221-227.

Oster, C., Morello, A., Venning, A., Redpath, P., & Lawn, S. (2017). The health and wellbeing needs of veterans: a rapid review. BMC psychiatry, 17(1), 414.

Porter, K. E., Sexton, M. B., Smith, E. R., Schroder, H. S., Cochran, H. M., & Rauch, S. A. (2018). Anger Among Veterans Seeking Trauma-Focused Care: Main and Moderating Effects of Combat Exposure Severity and Posttraumatic Cognitions. Military Behavioral Health, 6(4), 338-345.

Seal, K. H., Bertenthal, D., Barnes, D. E., Byers, A. L., Strigo, I., Yaffe, K., & Chronic Effects of Neurotrauma Consortium Study Group. (2017). Association of traumatic

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brain injury with chronic pain in Iraq and Afghanistan veterans: effect of comorbid mental health conditions. Archives of physical medicine and rehabilitation, 98(8), 1636-1645.

Street, A. E., Vogt, D., & Dutra, L. (2009). A new generation of women veterans: Stressors faced by women deployed to Iraq and Afghanistan. *Clinical psychology review*, *29*(8), 685-694.

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