



Career Impact Fact Sheet

THE MYTH

According to research, nearly half of service members believe that seeking mental or behavioral health care “definitely would” or “probably would” damage their careers.

THE TRUTH

Service members who avoid or delay seeking necessary help are 13 times more likely to experience negative career impact than those who voluntarily seek help early.

THE BENEFITS OF SEEKING HELP EARLY

Service members who seek mental or behavioral health care on their own initiative are less likely to have their unit leadership contacted, and more likely to receive positive, supportive recommendations that can actually improve job performance and ultimately benefit their career.

Studies suggest that approximately 1 in 10 service members who self-refer for care early, before problems become severe in nature, may have their unit leadership contacted. Of service members who are encouraged by their supervisors to seek help, approximately 1 in 4 have their unit leadership contacted following care. Unit leadership contact is required for service members who wait until the situation is so problematic that a commander-directed mental health evaluation becomes necessary to ensure their well-being.

Self-referred members are also less likely to have career-affecting recommendations made. Studies suggest that more than 95% of all self-referred cases will experience no career impact (change in duty status or discharge recommendations). In contrast, among service members who avoid seeking help until their commander directs them for a mental health evaluation, only 60% will experience little or no career impact.



PERSONAL TESTIMONIALS FROM AF LEADERS

CMSgt David Martin

“No career field is safe, no airman is immune. If you are in a hard place in life, please get help. Please talk to somebody. Allow someone to grab you by the hand and help you walk out of where you are. Know that getting help will NOT negatively impact your career. I am living proof of that. I have used mental health and other services throughout my career. Talking to the right people helps.”

CMSgt Maxwell Grindstaff

It was very easy. When I first walked in, the staff asked if I wanted to use the [distinguished visitor entrance] because I was a chief. I said, ‘Heck no!’ What kind of hypocrite would I be if I used a DV entrance? I’m not ashamed to admit I needed help.”

“There was a stigma back in the ‘80s when I came in, but 20 years of being on the battlefield has driven Airmen to be more pragmatic. Leaders are much more comfortable with getting the help they need and encouraging their Airmen to get help. It’s an issue of integrity. If Airmen see their leaders getting help, they’re more likely to get it themselves.”

References:

1. Lt Col Anderson B. Rowan and Lt Col Rick L. Campise, “A Multisite Study of Air Force Outpatient Behavioral Health Treatment-Seeking Patterns and Career Impact,” *Military Medicine*, November, 2006.
2. MSgt Jason Aucoin, “End the Myth: Seeking mental health treatment will not impact AF career,” <https://www.usafe.af.mil/News/Article-Display/Article/747965/end-the-myth-seeking-mental-health-treatment-will-not-impact-af-career/>.