Addressing mental health in the armed forces to prevent violence and protect human rights

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ISSUES

- 1. Gendered Norms and Reporting;
- 2. Consequences for the institutions' operational effectiveness;
- 3. Role of Ombuds Institutions/avenues for action;



Mental health is closely connected to violence occurring within and outside of the armed forces. In environments where mental health issues are left unattended, violence and human rights violations thrive.





1. Gendered Norms

- Unwritten norms overruling institutional frameworks
- □ Gendered norms: physical toughness, risk taking, emotional control, domination, "masculinities", strong/weak, defender/defended, war/peace, etc.
- ☐ Higher tolerance to violence and abuse
- Reluctance to seek help/trauma taboo





1. Reporting

- Duty of care
- Established and trusted institutional channels
- Confidentiality
- Stigma about admitting mental health issues





2. Consequences on the institution

- ☐ Diminished preparedness to detect all security challenges
- Increased vulnerability
- Decreased operational effectiveness
- ☐ Increased discrimination, violence and alienation



The stigmatization around reporting abuse and violence or about admitting mental health issues can alienate service personnel from the institution they serve and make the institution itself more vulnerable.

Unattended mental health issues can be cause of violence within and outside of the service.





3. Addressing mental health issues: Responses I

- Need to strengthen oversight and complaints mechanisms within the service
- Policy frameworks and accountability mechanisms
- Awareness raising on effects of unattended mental health
- Including perspectives of those who report into institutional culture's response



3. Addressing mental health issues Responses II

- Awareness raising of senior leadership on impact of gender norms in organizational culture;
- Uphold standards of behaviour and zero tolerance policies;
- Mentoring and training for men and women;
- Regularly assessing gender knowledge and competence;
- Make counselling available;
- Build capacity of internal oversight





3. Recommendations for Ombuds institutions

- Collect disaggregated data on complaints
- Integrate a gender perspective into internal oversight
- Pay special attention to:1. complaints involving mental health issues and feed info into reports; 2. retaliation risks and follow up
- Contribute to training for leadership of the AF on gender issues, mental health and violence
- Track to the best possible extent- cases of SGBV
- Link domestic violence in active duty (and post-demobilization) to provision of healthcare and to the establishment of a conducive organizational culture





Thank you for your attention!

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