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## Tables and figures

Table 1: Stigma types and definitions

<b>Stigma type</b>	<b>Definition</b>
Public stigma	Members of the general population endorse prejudice and discrimination against individuals with mental health difficulties (Wright et al, 2009)
Internalised-stigma	May occur on its own or when Individuals who experience mental health difficulties internalize the negative stereotypes and prejudices held by the general public (Vogt, 2011)
Structural discrimination	Rules, regulations or supports with a society either intentionally or unintentionally disadvantage individuals with mental illness (Rusch & Thornicroft, 2014)

Table 2: Characteristics of the studies

Study	Year	Quality rating	Sample	Mental health diagnosis	Country	Method of data collection	Analysis method
<b>Gibbs et al</b>	2011	Fair/poor	N=270 (Army soldiers)	In treatment – Mental health/alcohol misuse	USA	Focus groups	Content Analysis (CA)
<b>Langston et al</b>	2010	Good	N=374 (Naval personnel)	Probable mental health	UK	Interviews	Thematic analysis (TA)
<b>Mittal et al</b>	2013	Good	N=16 (veterans)	In treatment, diagnosis of PTSD	USA	Focus groups	Thematic analysis (TA)
<b>Murphy et al</b>	2014	Good	N=8 (individual interviews)	In treatment, diagnosis of PTSD	UK	Individual interviews	Interpretative phenomenological analysis (IPA)
<b>Sayer et al</b>	2009	Fair	N=44 (veterans)	In treatment for PTSD	USA	Individual interviews	Thematic analysis
<b>Stecker et al</b>	2007	Fair/poor	N=20 (national guard veterans)	Probable mental health	USA	Semi-structured Interviews	Thematic analysis (CA)
<b>Visco et al</b>	2009	Fair	N= 170 (post-deployment Air Force Personnel)	Probable mental health	USA	Individual telephone interviews	Content analysis (CA)
<b>Zinzow et al</b>	2013	Good	N=110 (78 soldiers in focus 12 groups and 32 individual interviews)	Focus groups: in treatment and not in treatment mix. Interviews: In treatment	USA	Focus groups and Interviews	Content analysis (CA)

Table 3: Characteristics of study methodologies and quality assessed with the CASP quality tool (CASP, 2014)

	Semi-structured interviews				Focus groups			
	Langston et al (2010)+	Murphy et al (2014)	Sayer et al (2009)	Stecker et al (2007)	Visco et al (2009)+	Zinzo et al (2013)*	Gibbs et al (2011)*	Mittal et al (2013)
Was there a clear statement of aims of the research?	X	X	X	X	X	X	X	X
Is a qualitative methodology appropriate?	X	X	X	X	X	X	X	X
Was the research design appropriate to address the aims of the research?	X	X	X	-	X	X	-	X
Was the recruitment strategy appropriate to the aims of the research?	X	X	X	X	X	X	-	X
Was the data collected in a way that addressed the research issue?	X	X	-	X	X	X	-	X
Has the relationship between the researcher and participants been adequately considered?	-	-	-	-	-	-	-	-
Have ethical issues been taken into consideration?	X	X	-	X	X	X	X	X
Was the data analysis sufficiently rigorous?	X	X	X	-	-	X	-	X
Is there a clear statement of findings?	X	X	X	-	-	X	X	X
How valuable is the research?	X	X	X	X	X	X	X	X

*\*This study used both semi-structured interviews and focus group methods*

*+Mixed methods study*

*Full details of the criteria to meet each item on the CASP can be viewed in appendix.*

Table 4. Themes across research studies

	Semi-structured interviews					Focus Groups		
	Murphy et al (2014)	Langston et al (2010)+	Stecker et al (2007)	Visco et al (2009)+	Sayer et al (2009)	Zinzo et al (2013)*	Gibbs et al (2011)*	Mittal et al (2013)
Sample size n=	8	374	20	170	44	110	270	16
<b>Non-Disclosure</b>								
Reaching a crisis point	x			x		x	x	
Culture of 'carrying on' or 'sucking it up'	x	x	x	x	x	x	x	x
Avoidance of diagnosis	x		x	x		x	x	x
Recognising I have a difficulty	x				x		x	x
Somatic difficulties	x							x
Lack of trust in leadership		x	x	x		x	x	
Lack on honesty on mental health assessments		x	x	x		x		
<b>Individual beliefs about mental health</b>								
Underlying weakness		x		x	x	x	x	x
Are a danger to others		x	x	x	x	x	x	x
Are malingering		x		x		x	x	
You are crazy	x		x	x		x		x
You are not fit for this job		x	x	x	x	x	x	x
<b>Anticipated and personal experiences of Stigma</b>								
Judgement from professionals	x	x	x	x	x	x		x
Labelling				x		x		x
Perceived risk	x			x		x	x	
Lack of understanding	x	x					x	
Shame/blame/fault		x		x		x	x	

Lack of confidentiality	X	X		X		X	
Losing respect from peers		X		X		X	X
<b>Career concerns</b>							
Leadership unsupportive		X		X		X	X
Disruption of career progression		X	X	X		X	X
Time for treatment will interfere with my job duties		X	X	X		X	X
Medication may interfere with my job duties				X		X	X
<b>Factors Influencing stigma</b>							
Importance of leadership	X			X	X	X	X
Value in shared experiences (peers)	X			X	X	X	X
Overcoming self-stigma through treatment	X			X	X	X	X
Framing problems in a similar manner to physical illness	X		X	X		X	X
Spousal support	X		X	X	X	X	
Appropriately timing assessments post-deployment				X	X	X	
Contacts for mental health embedded in the team	X		X	X	X	X	
Professionals offering treatment familiar with military culture			X	X	X	X	
Education	X			X	X	X	