

# Why screening does not work but peer support does

Mental health issues amongst seafarers seem to be increasing. While screening for potential vulnerability may seem like an attractive option, it may simply not work.



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## Seafarer mental health

Mental health in the workplace is currently a hot topic. Evidence collected from maritime organisations has highlighted that seafarers may be considered an especially 'at risk' group. For instance, between 1960 and 2009, around 6% of seafarer deaths were due to suicide<sup>1</sup>. This figure excludes those who 'disappeared' at sea, many of whom are likely to have taken their own life.

However, whilst tragic, suicide is likely to be only the tip of the mental health iceberg, with cases of depression, post-traumatic stress disorder (PTSD) and other anxieties disorders (together referred to as common mental health disorders or CMHDs) being likely to both be a cause of sickness absence and poor performance on board.

## The importance of screening

Given the increasing awareness of mental health disorders in seafarers, it is perhaps not surprising that screening personnel for potential vulnerability to develop mental health problems may seem like an attractive option. Selection screening refers to the administration of some combination of questionnaires and/or formal assessments by a mental health professional in order to identify who is, or is not, suited to be at sea.

Valid and reliable pre-screening would allow unsuitable prospective seafarers to avoid risking their mental health, help avoid costly mental health repatriations and reduce the risk of mental health related poor performance, and the consequential risk of accidents.

## The failure of screening

However, evidence<sup>2</sup> from high-quality studies carried out in other occupational groups, most notably the armed forces, has shown that selection screening processes do not work. For instance, a screening trial of British military personnel deployed to the Iraq War in 2003 found that a pre-screening process to prevent troops developing PTSD was wrong four times out of five.

Importantly, screening failed to identify the majority of those who went on to suffer PTSD and was equally ineffective for other CMHDs. The reasons for the failure of a pre-screening process are varied but include personnel not wishing to answer questions about their psychological health honestly because they fear being stigmatised or suffering a career foul.

1. Iversen RTB. The Mental Health of Seafarers. International Maritime Health 2012;63(2):78-89
2. Rona R, Jones M, Hooper R, Hull L, Browne T, Horn O, Murphy D, Hotopf M and Wessely, S. Mental health screening in armed forces before the Iraq war and prevention of subsequent psychological morbidity: follow-up study. BMJ 2006; 333: 991-995

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Also, pre-screening does not take account of the strong evidence that good social support and effective supervision whilst on board a vessel are far more important predictors of mental health status than whether someone had a poor childhood, is poorly educated or has a prior history of a mental health disorder.

There is very good evidence that effective social support provided by colleagues, and more importantly a seafarer's day-to-day supervisor, strongly influences their mental health.

For instance, evidence from British troops deployed to Afghanistan over the last ten years showed that personnel who reported being well led/supervised experienced one-tenth the rate of PTSD when compared with less well-led colleagues.

Structured peer support programmes, and managerial mental health training, have been shown to be effective in numerous challenging occupations such as the emergency services, the media, diplomatic service and the military.

Perhaps now is the time for maritime organisations to invest in similar initiatives and reap the benefits for both shipowners and the crews who man the vessels.

### **Conclusion**

Gone should be the attempts to screen out vulnerable individuals; such efforts are ineffective and highly imprecise. Instead, there should be investment in ensuring that a ship's crew is enabled to properly support each other and to identify those who need professional help, which is a powerful approach to improving team resilience and one backed by strong scientific evidence.

