

A SUMMARY OF THE HEALTH NEEDS
ASSESSMENT OF MILITARY VETERANS / EX-
ARMED FORCES, JANUARY 2023

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Executive summary

A military veteran is defined as anyone who has served in the British Armed Forces for at least a day. This includes reservists. The British Armed Forces are made up of the Royal Navy, the Royal Marines, the British Army and the Royal Air Force. There are estimated to be 18,000 people across the country who transition back to civilian life each year.

Veterans are a culturally specific group, many (especially females) of whom do not identify as veterans but as ex-Armed Forces (Burdett, et al., 2012).

Many service leavers make the transition into civilian life without issue and report good health and wellbeing. A very small number of service leavers struggle to reintegrate back into civilian life usually due to compounding factors including adverse childhood experiences, experience in the armed forces and circumstances in which they left the armed forces. As a result, a minority find themselves unemployed, homeless and potentially part of the criminal justice system.

“Service leavers as a whole begin new careers, enjoy good health and are no more likely to suffer PTSD, become homeless, commit suicide or go to prison than the rest of the population”.

(Lord Ashcroft, 2014)

The estimated population of the ex-armed forces population in County Durham, according to the 2021 Census is 22,615, 5.2% of the population of County Durham. This is slightly above the North-East average of 5.0% and above the England average of 3.8%. More detailed information obtained by the census is not yet available and is due to be published in Spring 2023.

Most other available data on the ex-armed forces community is only available at North-East regional level. Very little data is collected in relation to ex-armed forces at a County Durham geography. Where data is collected it is often not analysed to identify common issues or utilised to direct any service improvements.

Veterans can experience a variety of physical health, mental health and social issues which affect their overall sense of wellbeing. Some physical and mental health issues are apparent at discharge and are documented in Ministry of Defence records, however, many issues are not apparent and can take years to manifest or are as a result of poor transition out of the armed forces. Health issues which appear after discharge may be perceived as military related by those who are ex-services but diagnosis and causation by health care professionals can be more difficult to determine.

The mapping of support available for ex-armed forces shows extensive support, mainly through military based charities and community interest companies, is available, however, many people are unaware of any support. Many people only look for and access support when they are in crisis. People do not access universal services citing the lack of understanding of the armed forces way of life as a barrier and some do not feel they are for them.

Some veterans in County Durham do have unmet need, and this is for several reasons:

Poor data: veterans are not routinely identified by most organisations. Where data is collected it is not analysed for common themes or service improvements.

Health issues: it can be difficult to link physical and mental health issues to military service. Perception of either a physical or mental health issue being military related but determination of diagnosis and causation to be military related can be more difficult, this leads to unmet expectation. Access to health care: veterans experience the same difficulties as the general population in accessing health care, however, expectations raised through the Armed Forces Covenant mean that there is unmet expectation.

Support for individuals: there is a lot of support available for veterans which can lead to duplication and disjointed support. Female veterans, however, are less likely to access the support already available. Information on support is not readily available in one easy to access place which can make it difficult to find. There is a lack of visible and appropriately marketed information for veterans about help and support available, including through universal services.

Support for the armed forces community: the armed forces community in County Durham is largely hidden and there is an over-reliance on charitable funding to properly support veterans and people leaving the armed forces. The implementation of the Armed Forces Covenant is mainly based on relationships rather than policy, meaning inconsistencies in the way people receive services.

Emerging themes: Specific professional support for veterans with dementia and their carers is not available.

Recommendations

Data: identification, capture and extraction

Recommendation 1: All services provided or commissioned by the public sector related to health and wellbeing, especially public health, general practice and other NHS services, should ask whether people have ever served in the UK Armed Forces and this information should be accurately recorded and able to be extracted from recording systems for future analysis of needs. This information should be back dated to support identification of need in the future.

Recommendation 2: Data Protection Impact Assessments (DPIAs) should be updated to cover the sharing of data for analysis purposes including Health Needs Assessments.

Recommendation 3: A Health Needs Assessment of family and dependents of military veterans should be considered.

Recommendation 4: Partnerships for veterans should be data informed and should work together to improve data sharing and analysis of data to inform action.

Recommendation 5: Develop a mechanism for veteran support charities/agencies and other organisations to effectively share information on individuals they are working with to reduce the duplication of resource.

Health issues

Recommendation 6: Health and social care professionals, including commissioners, should undertake training on the health and wellbeing needs of people who have served in the armed forces.

Recommendation 7: The Now You're Talking Campaign should be extended to include a veteran/service leaver focus.

Recommendation 8: Public health commissioned services such as drug and alcohol recovery, should have veteran specific forums.

Access to healthcare

Recommendation 9: Health professionals should undertake training on the culture of the armed forces and the health and wellbeing needs of people who have served in the armed forces.

Recommendation 10: Produce communication tools to support veterans to better understand and manage expectations about what the "priority" access to NHS services means to them.

Recommendation 11: Display material in GP surgeries and on digital platforms which encourages veterans to self-identify.

Access to support for individuals

Recommendation 12: Work should be undertaken with the Ministry of Defence (MOD) to ensure a consistent process for identification of people being discharged to County Durham, irrespective of length of service, and share the information with a single point of contact to ensure that they are seamlessly transferred to support in the area.

Recommendation 13: A single point of access to holistic support for veterans within the County should be established for people who are in the process of leaving the armed forces to make transition into the area easier. This could also serve as an access point for support for veterans who have left the military more historically. This access point to support should be widely advertised and promoted.

Recommendation 14: Develop a network of face-to-face drop-in centres where people can have their individual needs assessed and tailored support packages developed.

Recommendation 15: Develop and market “social” groups/networks for people who are ex-armed forces where their support need is around social isolation and loneliness.

Recommendation 16: Link with the developments of the County Durham Together “Community Book” to develop a veteran specific section on available socials and support for ex-armed forces and ensure it is widely promoted/marketed, including through the MOD, to ensure veterans transitioning to County Durham are able to access up to date information and support where needed.

Recommendation 17: Use a peer support model to market “others like me” who have accessed support to encourage veterans to seek support before they reach crisis point as well as those who have successfully transitioned back to County Durham.

Recommendation 18: Consider an annual or bi-annual event where all armed forces charities and other support for veterans could market what is available to people who are in the process of being discharged or who have been recently discharged.

Support for ex-armed forces population

Recommendation 19: Increase knowledge, through training and education, of public sector staff and people who are or have been discharged from the armed forces to better understand the responsibilities and better manage expectations of the armed forces covenant. Including working with the MOD for people prior to discharge.

Recommendation 20: Consider how the County Durham Armed Forces Forum can take a stronger role in both funding and coordination of central celebratory events for the armed forces.

Recommendation 21: Use Durham County News to promote positive stories about veterans who have successfully reintegrated as well as to highlight support available for people who are ex-armed forces.

Emerging Issues

Recommendation 22: Specific needs of the veteran population should be considered within any future developments in dementia care across the County.