About Forces in Mind Trust

The Forces in Mind Trust was founded in 2012, through an endowment of £35 million from the Big Lottery Fund, to promote the successful transition of Armed Forces personnel, and their families, into civilian life.

By using our funds wisely, we work to gain an understanding of an issue through commissioning evidence generation and then exploiting the output to effect real change. We work widely across the whole voluntary and statutory sectors, ultimately delivering more efficient and more effective support to the community of ex-Service personnel and their families.

The Forces in Mind Trust also awards grants to innovative pilot programmes, along with an independent evaluation, that provide direct support to ex-Service personnel and their families.

Full details of the grants we have awarded, our published research, and our application process can be found on our website www.fi m-trust.org

About Compass Partnership

Compass Partnership is a management and research consultancy specialising in the governance and management of independent non-profit-seeking organisations. Founded in 1982, we have worked with over 800 not-for-profit clients and have built up a body of knowledge on management and governance in this field and a tried and tested range of approaches to consultancy and research.

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About The Royal British Legion

The Royal British Legion was created as a unifying force for the military charity sector at the end of WWI, and still remains one of the UK’s largest membership organisations. We are the largest welfare provider in the Armed Forces charity sector, providing financial, social and emotional support, information, advice, advocacy and comradeship to hundreds of thousands of Service personnel, veterans and their dependants every year. In 2013, we provided services and grants to over 200,000 Service personnel, veterans and dependants – more than ever before – and spent £10k per hour on welfare support.

The Legion offers services to assist Service personnel (including Reservists), veterans and their dependants with claiming disability benefits, managing their finances, accessing military compensation, adapting their homes, and finding jobs through our online training and employment resource, Civvy Street. We offer support for carers, including seaside respite breaks; run six care homes, provide dementia care and offer immediate needs grants and other forms of help for those in crisis. In conjunction with the MOD and other Service charities, we pledged £50m over ten years to the development and operation of Personnel Recovery Centres and the Battle Back Centre (Lilleshall), as part of the Defence Recovery Capability programme, and we fund pioneering research into the devastating impact of blast injuries.

The Legion works with politicians across the political spectrum to improve the lives of the Armed Forces community. We have been campaigning to further the cause of serving personnel, ex-Service men and women and their families since 1921. The Legion also plays a leading role in holding the Government to account on its Armed Forces Covenant commitments. We have produced two best practice guides to Community Covenants – voluntary statements of mutual support between civilian and Armed Forces communities – and have been instrumental in encouraging every local authority in England and Wales to sign a Community Covenant.
## CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreword</td>
<td>6</td>
</tr>
<tr>
<td>Myth Busting</td>
<td>8</td>
</tr>
<tr>
<td>Key Findings</td>
<td>10</td>
</tr>
<tr>
<td>Research Methods</td>
<td>19</td>
</tr>
</tbody>
</table>
This is an extract from a longer report on The Royal British Legion’s 2014 household survey of the ex-Service community. The full report is available at www.britishlegion.org.uk

FOREWORD

Introduction

This report summarises the size, profile and needs of the ex-Service community in 2014, and provides forecasts on the future size of this significant group. It is an update of similar research carried out in 2005, which remains a hugely influential piece of work and is still drawn upon regularly by a wide range of individuals, from academics and Service charity workers to local government officials. We hope and expect that this extended update will prove just as valuable.

Over the following pages, we lay out the key findings of the research that we have commissioned. We also use this opportunity to dispel some common myths propagated about the ex-Service community on a wide range of topics, from homelessness to mental health (see page 8).

Much has changed since 2005. The Armed Forces Covenant is now written into statute, British Forces have withdrawn from Iraq, and the majority have returned from Afghanistan. Hundreds of thousands of personnel have left the Armed Forces, and their families with them.
The last remaining veteran of WWI, Harry Patch, passed away in 2009, and June 2014 saw the 70th anniversary of the D-Day landings, which is likely to be the last major commemoration of this event that a large number of D-Day veterans will be able to attend.

Looking away from the past and into the future, we all have major challenges to face in ensuring that no member of the Armed Forces community is forgotten. While continuing to ensure that the memory of the fallen live on, we also need to make sure that those still living are supported to lead happy, healthy and independent lives.

Why have we commissioned this research?

In 2005, the Legion commissioned extensive research to feed into a strategic review of its welfare service delivery. This research, conducted by Compass Partnership, measured the size, profile and welfare needs of the Legions’ main beneficiary group (veterans and their dependants, who together make up the ex-Service community). The purpose of this work was to map the needs of the community in detail and to identify those in greatest need, so that the Legion, other Service charities and statutory providers could tailor their welfare provision accordingly. It led to the biggest change programme in the Legion’s history, designed to enable the charity to respond to the needs expressed by our beneficiaries.

Nine years on, we wanted to refresh this research, in order to update our understanding of the size and needs of the ex-Service community. This will inform the Legion’s future strategic planning, welfare, marketing and campaigning work, as well as acting as a resource for anyone interested in the welfare needs of this group. Importantly, it also provides vital information on the key differences between the ex-Service community and the UK population as a whole.

A changing profile

The Royal British Legion emerged in 1921, as part of a growing recognition that the veterans of WWI had returned with needs that were not being met by mainstream services. Unemployment, disability, disfigurement and mental illness (including trauma) had created major unmet welfare needs, which newly created and established Service charities stepped in to address.

Today, the picture for our Armed Forces community is very different. This survey reveals that the vast majority are healthy, happy and, amongst those of working age, gainfully employed. It is an ageing population due to the large numbers of people who undertook National Service, but war veteran veterans and their dependants are, on average, less likely to have a long-term illness than the general population. Their income is relatively low but, for the most part, they do not feel that they are ‘going without’. The majority of working age veterans are in paid work, and only a small minority report that they are suffering from depression or other mental health problems.

So are there still unmet needs amongst the ex-Service community? According to our survey results, substantial needs across all age groups do remain. As outlined below, for the older age group, these are largely the same problems experienced by a large proportion of the UK’s ageing population – loneliness, mobility problems and ill health, for example.

Among the working age ex-Service community, there are a number of specific issues which appear to affect them disproportionately. Compared with the UK working age population, the ex-Service community of the same age is more likely to report being out of work, having a long-term illness, being depressed and having caring responsibilities. Money problems are also more of a problem for this age group than for older members of the community. And many identify a charitable service that they feel could help them – from benefits and money advice to support with bereavement and caring for family members.

The Legion and other Service charities will continue to work hard to meet these needs. We are committed to ensuring that every member of the ex-Service community is able to live happily and independently, with a sustainable future. These survey findings will help us to direct our support – and help other organisations and agencies direct theirs – at those most in need of our help.

Chris Simpkins DMA, Hon.DUniv, FIoD, DL
Director General
MYTH BUSTING

There is a pervading myth that serving and ex-Service personnel are ‘mad, bad and sad’ i.e. that most suffer mental health problems, that many veterans end up in prison or sleeping rough on the streets, and that many are suicidal. ‘Zombie’ statistics, such as the claim that more Falklands veterans have committed suicide than died in action in 1982 or that veterans of Iraq and Afghanistan face a ‘Tsunami’ of mental health problems have been comprehensively debunked, and yet persist in media headlines. These myths are pernicious because they may harm the employment prospects of military personnel when they seek work in the civilian world, and they may divert resources away from addressing genuine problems.
Myth: veterans are more likely to take their own lives
For many years, a particular statistic was repeatedly wheeled out by journalists and other public commentators: that the number of Falklands veterans who had killed themselves since the war had exceeded the number who died in the campaign itself. Many doubted the authenticity of this statistic, but it was officially debunked in 2013. A Ministry of Defence analysis revealed that 95 suicides have been recorded among Falklands veterans. As of 1 May 2014, that figure had risen to 101. In contrast, 237 Service personnel died during the conflict.3

One problem with media reports on suicide is that they frequently overlook the importance of comparing suicide rates among veterans with those of the UK population as a whole. Unfortunately, within any occupational group, we are likely to find that some individuals have taken their own lives. The question we should be asking is: is there a link between that occupation and an increased risk of suicide?

Among the majority of veterans, the answer appears to be ‘no’. Research by Manchester University found that suicide was less common amongst veterans than within the general population, except for one group: young early Service leavers.4

Myth: most Service personnel and veterans suffer from mental health problems
Media reports on military mental health frequently report on an impending ‘tidal wave’ of mental illness due to emerge as a result of UK Forces’ deployment to Iraq and Afghanistan.5 Given the stigma associated with mental illness, this may have a significant impact on veterans’ employment prospects.

In fact, rates of mental health problems amongst Service personnel and recent veterans appear to be broadly similar to the UK population as a whole.

Overall, rates of PTSD are around 4%, although some groups are at a greater risk (e.g. Reservists and combat troops). Around one in five suffer from depression, anxiety and other common disorders (also broadly comparable to the UK average). The only problem which appears significantly elevated among Service personnel and recent Service leavers – and linked to deployment in Iraq and Afghanistan – is heavy drinking.6 Our survey also found that some age groups of the ex-Service community report higher levels of depression than the UK population. Nevertheless, the majority of Service personnel and veterans appear to enjoy good mental health.

Myth: many veterans are in prison
Many news headlines have been devoted to misleading statistics on veterans in prison. The real picture is far more complex. Service personnel and veterans appear to be less likely than the general population to have a criminal conviction. Statistics on veterans in prison vary, but the most reliable ones have found that ex-Service personnel make up between 3.5% and 7% of the prison population in England and Wales. This is broadly similar to the percentage of veterans in the UK population as a whole.7

Myth: many veterans sleep rough
Worrying statistics emerged in the 1990s, indicating that around 20% of the London homeless population was ex-Service. In contrast, a 2008 study estimated that the proportion of London’s rough sleeping population who had served in the Armed Forces was 6%.8 A more recent estimate is that 127 individuals who slept rough in London at least once in 2013/14 had ever served in the UK military – 3% of the total.9 A 2007 National Audit Office survey of those undergoing the resettlement programme found that just less than 5% of respondents, mainly young and of junior rank, reported that they had been homeless at some point in the past two years. This survey didn’t specify the type of homelessness experienced, so may include those staying with friends temporarily, as well as those sleeping rough.10

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1 237 UK Service personnel died during the campaign to recapture the Falklands. As of 2014, 101 veterans have committed suicide, fewer than would have been expected when compared to the general population. See Ministry of Defence, A study of deaths among UK Armed Forces personnel deployed to the 1982 Falklands Campaign: 1982 to 2012, 1 May 2014 and Holmes et al., Suicide among Falkland war veterans, British Medical Journal 2013.
2 As discussed by MacManus et al. The mental health of the UK Armed Forces in the 21st century: resilience in the face of adversity-Journal of the Royal Army Medical Corps, 2014
3 Holmes et al. Suicide among Falkland war veterans, British Medical Journal 2013
4 Kapur et al. Suicide after Leaving the UK Armed Forces – A Cohort Study. Plus Med 6(3) 2009
5 For example: www.dailymail.co.uk/news/article-2568869/One-fifth-veterans-served-Iraq-Afghanistan-turned-drink-block-horrors-war.html
6 King’s Centre for Military Health Research
7 The Royal British Legion (2014) Review of veterans within the criminal justice system: Submission from The Royal British Legion
8 Johnsen et al., The experiences of Homeless Ex-Service Personnel in London, Centre for Housing Policy, University of York, 2008
9 St Mungo’s Broadway, CHAIN Annual Report, From Street to Home, 2012/13
10 National Audit Office, Leaving the Services, 2007
KEY FINDINGS
The UK’s ex-Service population is elderly and declining in size.

The UK’s ex-Service community is largely elderly: almost half are over 75 and 64% are over the age of 65. This reflects the large numbers of men and women who served during the Second World War, or who undertook post-War National Service.

In total, Compass Partnership estimates that there are between 6.1 million and 6.2 million members of the ex-Service community living in the UK. Of these, around 2.8 million are veterans, 2.1 million are dependent adults (including spouses and widows) and 1 million are dependent children. The remaining 190,000-290,000 represents the estimated size of the ‘hidden’ ex-Service community e.g. those residing in communal establishments such as care homes.

This represents a large reduction in the size of the community since their last estimate of 10.5 million in 2005. The figure below illustrates how the profile of the adult ex-Service community (i.e. excluding dependent children) has changed since 2005, and how it compares with the UK general population. Actuarial consultants from Punter Southall have estimated that the size of the ex-Service community will reduce further to 5.45m in 2020, 4.7m in 2025 and 3.94m in 2030.

Punter Southall additionally estimates that there are 469,773 members of the serving community (Service personnel and their dependants). This breaks down to 198,810 Service personnel (including Reservists), 101,393 dependent adults and 169,570 dependent children. Around 11% of Service personnel are currently stationed overseas, some with their families, which may amount to around 43,000 members of the serving community.

In total, we therefore estimate that there are currently between 6.5 and 6.7 million members of the Armed Forces community living in the UK.
The key differences between the working age ex-Service community and the general population are that they are more likely to be out of work, to have unpaid caring responsibilities, to report health conditions that limit their daily activity – particularly difficulty hearing and musculoskeletal problems – and they are more likely to report being depressed.

Younger members of the ex-Service community differ significantly from the UK general population in three main ways:

**One:**
Those of working age (between 16 and 64) are less likely to be employed than the general population aged 16-64 (60% vs 72%), more likely to be unemployed (8% vs 5%) and more likely to be economically inactive (32% vs 22%). Altogether, around 700,000 members of the working age ex-Service community are not in work, consisting of:

- Around 120,000 veterans and 20,000 dependants who are unemployed
- Around 130,000 veterans and 110,000 dependants who are not looking for work, and
- Around 160,000 veterans and 160,000 dependants who are retired or in education.

**Two:**
Veterans aged 16-64 are more likely than the general population of the same age to report a long-term illness that limits their activities (24% vs 13%). This includes:

- Depression – 10% vs 6%\(^{11}\)
- Back problems – 14% vs 7%
- Problems with legs and feet – 15% vs 7%
- Problems with arms – 9% vs 5%
- Heart problems – 12% vs 7%
- Diabetes – 6% vs 3%
- Difficulty hearing – 6% vs 2%, and
- Difficulty seeing – 5% vs 1%

**Three:**
One in four working age members of the ex-Service community have unpaid caring responsibilities (23%), which is considerably higher than the rate found in the general population (12%).

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\(^{11}\) The proportion of respondents who selected ‘depression’ from a list of possible long-term health conditions, which is not a validated screening tool for depression.
Veterans under the age of 75 are around three and a half times more likely than the general population to report hearing problems (7% vs 2%) – equivalent to around 110,000 veterans of this age, and rising to 310,000 veterans across all age groups.
Many of the problems faced by the increasingly elderly ex-Service population are similar to those faced by the UK’s elderly as a whole: isolation, physical health problems and difficulties with mobility and care. Widowed members of this community and those aged 75 or over face particular problems.

Perhaps unsurprisingly, given the age profile of the ex-Service community, many of the most common difficulties experienced are those faced by many elderly people more generally: problems getting around, and feeling exhausted and socially isolated.

Around 630,000 members of the ex-Service community of all ages are likely to be experiencing problems getting around outside the home. Large numbers (around 720,000) experience problems with self-care, including exhaustion and pain, bladder control and difficulty looking after themselves. All of these problems peak for those aged 75 or over. Depression affects around 480,000 members of the ex-Service community, around 370,000 report feeling lonely, and around 350,000 are recently bereaved.

Physical health problems, such as musculoskeletal, cardiovascular, respiratory and sensory problems, are more common among the elderly than those of working age, leading to problems with mobility and care. However, those aged 65 or over are less likely to report ill health than the UK population of the same age, suggesting they enjoy slightly better health than the average UK pensioner.

Other problems reported by the elderly centre around income and financial problems, although these are much less likely to be reported by older people than by those of working age. While the ex-Service community as a whole reports a household income of £21,000 after tax, those aged 65 or over report an average post tax income of £15,900. This represents an above inflation increase from 2005, but is below the national average for this age group. When asked whether they had turned the heating off to save money even though it was too cold, 14% of those aged 65 or over had done this – equivalent to around 440,000 people. Around 310,000 people of pension age are ‘going without’ through lack of money – for example, they are unable to replace their cooker if it breaks, cannot keep their home in a good state of repair or cannot keep their home free of damp. It is striking, however, that even more (around 420,000) are ‘going without’ through health problems and lack of support.
16-34 year olds, particularly veterans and those who live alone, report a number of issues around debt, employment and transition, and a significant proportion have caring responsibilities.

The younger age group make up only 6% of the ex-Service community, but their problems differ subtly from other members of the Armed Forces community. They are also more likely to have experienced difficulties – such as school expulsion or having parents with drug or alcohol problems – before entering the military. Three quarters of 16-24 year olds and half of 25-34 year olds report six or more adverse experiences.

This age group is more likely than the UK general population (of the same age) to have a caring responsibility. There are also indications that a substantial proportion is grieving the loss of a friend or relative, with almost one in five reporting that they would find bereavement support useful.

Finance and employment also appear to pose problems for this group. One in four is in arrears. One in 20 has taken out a payday loan, which is equivalent to around 20,000 people. Over half of working veterans aged 16-34 say that they make little or no use of their skills and experience in their current job, which is higher than the UK population.

Moving slightly beyond this age group to 16-44 year olds, one in ten reports difficulty integrating into society, rising to 16% of those discharged from the military in the past five years. Almost one in four (23%) of this age group reports an employment difficulty, such as fear of unemployment or being forced to take a job for which they are underpaid or overqualified. This amounts to around 140,000 individuals.
Working-age households report a number of distinct difficulties, particularly related to illness and disability, isolation, employment and material deprivation. Some of these issues seem to have a particular impact on ex-Service families.

As outlined above, employment rates for working age veterans and dependants are significantly lower than those found in the UK working age population. This may be linked to poor health within the ex-Service community, as working age households are over twice as likely as the UK population to be receiving sickness or disability benefits, and working age adults are more likely than the general population to report having a limiting illness. Of veterans aged 25-44 with a long-term illness, over half attribute it to their Service.

The ‘middle-aged’ ex-Service community appears particularly vulnerable to a range of problems. Out of all age groups, along with 85-94 year olds, those aged 35-44 are most likely to report some sort of difficulty. Two in ten are in arrears – over 60,000 people in this age group – and half have cut back on their fuel use to save money (about 160,000 people). Problems with depression peak at 35-64, at 14%, and exhaustion and pain peaks at 45-54 (13%). Those aged 35-64 are more likely to report a range of long-term health problems compared with UK adults of the same age, particularly musculoskeletal and sensory problems, and depression. Problems with isolation and relationships peak at age 35-54.

Some problems appear to peak amongst families (including lone parents). Almost one in five of those with dependent children report employment difficulties and half report material deprivation of some kind. One in four of all dependent spouses has a caring responsibility (excluding caring for their own children) and 45% of those with children said that they would like help from a Legion service, including welfare (43%), practical advice (24%) and employment (16%).
Research methods

The research was carried out by Compass Partnership using the same approach as that used in 2005 to enable the examination of trends over time.

A module of questions was placed on a nationally representative Omnibus Survey of UK adults. All interviews were conducted face-to-face in respondents’ own homes during January/February 2014.

A series of screening questions were asked to identify members of the Armed Forces community. In total, 20,700 UK adults were screened and, of those, 2,203 were eligible. Serving personnel and their dependants were removed for reporting purposes, leaving a final survey sample of 2,121 in the ex-Service community (veterans and their adult dependants). This provides a reliable platform on which to base future planning and decision-making.

A wealth of data was collected about these respondents, and the rest of this report highlights the key emerging findings from the vast research dataset.

In addition to the survey, Compass Partnership also completed a small piece of desk research to estimate the size of the additional ‘hidden populations’ living in communal establishments, such as hospital, prison and temporary accommodation.

Funding

This project was funded by The Royal British Legion and Forces in Mind Trust. The Royal British Legion is grateful to the Forces in Mind Trust, who provided additional funding to enable the sample size to be doubled.