

Help Seeking

Introduction

RBL has brought together existing evidence to build a comprehensive picture of need in the UK Armed Forces community over recent years, and highlighted important gaps in our understanding of demographics, needs, and outcomes.

In 2025, we commissioned the *King's Centre for Military Health Research (KCMHR)* to analyse data from their large-scale, long-running Health and Wellbeing study to help fill gaps in understanding about gambling, intimate partner violence and abuse (IPVA), and help seeking behaviours.

The KCMHR cohort study has tracked people who served in the UK Armed Forces during the Iraq- and Afghanistan-era, for over twenty years.

This analysis draws on data from more than 3,000 Regular serving and ex-serving personnel (veterans) from phase four of the study (2022/23).



References to serving or ex-serving Regular personnel relate only to those participating in the cohort study. While the findings should not be taken to be representative of all serving personnel or veterans, they provide vital new insight into the needs of an important part of the Armed Forces community. This insight supports RBL's ability to design effective services, influence policy, and advocate for meaningful change – while also informing our 10-year Strategy and the wider sector.

What did we analyse?

KCMHR conducted analysis to understand how many people were affected by these issues and their associated factors, considering:

Demographics: age, sex, relationship status, education level (ethnicity and sexual orientation were considered but samples were too small for meaningful analysis)

Military characteristics: Serving status, Rank, Branch of Service, Deployed to Iraq/Afghanistan, role on deployment

Mental health and psychosocial factors: including Post-Traumatic Stress Disorder (PTSD), CPTSD (complex PTSD), Common Mental Disorders (CMD), and alcohol misuse

The study

In the sample of 3,223 serving and ex-serving Regular personnel:

 **90%**
were male

The average age was
48 years

63%
were deployed to Iraq and/or Afghanistan

61%
served in the Army

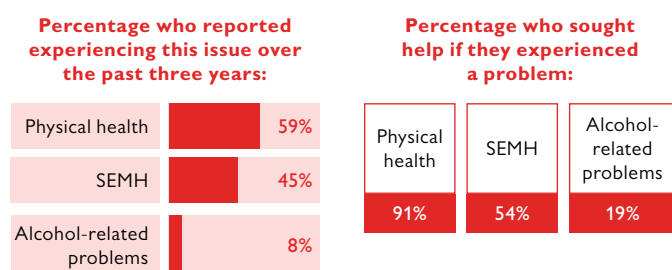

67%
were
Non-Commissioned
Officers

Help seeking behaviour

To best support members of the UK Armed Forces community, it is essential to understand which issues people are more or less likely to seek formal help for¹, and where they seek help from. Wider research suggests that people may not seek help due to a lack of problem recognition, stigma, or self-reliance.

Previous research has suggested people are more likely to seek help for physical health problems, which may be seen as more legitimate than emotional or alcohol-related problems.

Participants were asked whether they had experienced problems over the past three years relating to physical health, stress, emotional or mental health (SEMH), and alcohol-related problems, and whether they had sought formal help for it.

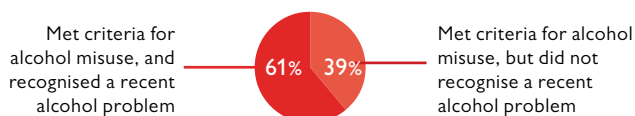


More than half (59%) of the sample reported experiencing a physical health issue over the past three years, and the vast majority (91%) of these sought help for the problem.

Nearly half (45%) of the sample reported experiencing a stress, emotional, or mental health problem, of which more than half (54%) sought help.

Help seeking for alcohol problems was even lower – 1 in 12 (8%) people reported experiencing it, of whom less than 1 in 5 (19%) sought help. Findings also showed about 2 in 5 (39%) people who showed probable alcohol misuse did not recognise this.

Using self-reported alcohol intake data:




1 in 3 people (34%) reported more than one problem


1 in 20 (5%) reported experiencing all three problems

Participants with multiple problems tended to seek help for all of them, but this was not the case for alcohol problems, where participants commonly sought help for their other problems only.

Factors influencing help seeking

Overall, only a few factors were associated with increased formal help seeking:

SEMH help seeking	Physical health help seeking	Alcohol help seeking
Being a woman and probable mental health outcomes (CMD, PTSD and c-PTSD)	Being aged over 50 yrs	No associations

Sources of support and help received



Most who reported seeking help for a stress, emotional or mental health problem reported being offered talking therapies.

Mainstream NHS services were the most commonly accessed source of formal help seeking across all types of problems.



Telephone, online and self-help support were popular supports for stress, emotional and mental health problems.

Key implications

There are still large proportions of people experiencing issues, especially mental health and alcohol misuse, who do not seek help.

We need to understand more about what increases help seeking to ensure services are able to identify, discuss, signpost and support issues beyond the presenting need.

There is a gap between experiencing problems and seeking support, particularly for alcohol use, indicating a need for more proactive identification and engagement.

These findings strengthen the evidence base on the Armed Forces community, helping RBL and the wider sector better understand need and improve how support is designed and delivered.
If you are interested in exploring this research in more depth, please get in contact:
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