



## **Veterans Strategy: Background to Government Policy Debate on 15 November 2018**

### **Summary**

This Library Briefing has been prepared in advance of the debate due to take place on 15 November 2018 in the House of Lords on the motion moved by Earl Attlee (Conservative) “that this House takes note of Her Majesty’s Government’s veterans strategy”.

In 2016, around 2.5 million UK armed forces veterans were estimated to be living in households in Great Britain. The Ministry of Defence (MOD) reported that the employment rates, health status and housing status of veterans was largely in line with the rest of the UK population. However, charities such as the Royal British Legion believe actual employment rates were lower, and the House of Commons Defence Committee has reported concerns about the extent of mental health conditions among current and former armed forces personnel. In addition, there have been varying press estimates as to the number of veterans that might be homeless, ranging from 7,000 to 13,000. Despite this, there is widespread agreement that the public overestimates the issues veterans face, particularly in relation to the number of veterans with mental health issues, resulting in a perception military service is harmful. The Government has specifically identified the need to tackle this misperception.

At the time of publication of this briefing, the veterans strategy was still to be published. It was expected to be available in November 2018. Previous government statements have indicated the strategy will cover issues such as:

- the public perception of veterans;
- housing and homelessness;
- health and wellbeing; and
- finances.

In advance of the publication of the strategy, this briefing provides statistics and summary information on the current support available to veterans in these areas, along with background information on the operation of the armed forces covenant alongside each issue. In addition, the briefing highlights a number of support services available to veterans in relation to many of the issues discussed, such as the MOD’s Joint Services Housing Advice Office and the Career Transition Partnership. This briefing focuses on the situation in England or the UK as a whole, and does not cover specific issues or arrangements in the devolved administrations.

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## **I. Armed Forces Covenant and the Veterans Strategy**

### **I.1 Armed Forces Covenant**

The armed forces covenant, which was first enshrined in the Armed Forces Act 2011,<sup>1</sup> outlines two core principles in respect of the nation's moral obligation to current and former armed forces personnel: that they should suffer no disadvantage (compared to other citizens) in the provision of public or commercial services; and that special considerations may apply, particularly in regards to those injured or bereaved. In full, the published explanation of the covenant states:

The first duty of Government is the defence of the realm. Our armed forces fulfil that responsibility on behalf of the Government, sacrificing some civilian freedoms, facing danger and, sometimes, suffering serious injury or death as a result of their duty. Families also play a vital role in supporting the operational effectiveness of our armed forces. In return, the whole nation has a moral obligation to the members of the naval service, the army and the royal air force, together with their families. They deserve our respect and support, and fair treatment.

Those who serve in the armed forces, whether regular or reserve, those who have served in the past, and their families, should face no disadvantage compared to other citizens in the provision of public and commercial services. Special consideration is appropriate in some cases, especially for those who have given most such as the injured and the bereaved.

This obligation involves the whole of society: it includes voluntary and charitable bodies, private organisations, and the actions of individuals in supporting the armed forces. Recognising those who have performed military duty unites the country and demonstrates the value of their contribution. This has no greater expression than in upholding this covenant.<sup>2</sup>

As part of the Armed Forces Act 2011, the Government is required to publish an annual report regarding progress made under the covenant, particularly in the areas of healthcare, education and housing, and on the operation of inquests.<sup>3</sup> The Government has stated that the covenant is a "national responsibility involving government, businesses, local authorities, charities and the public".<sup>4</sup> It encourages organisations to sign up to the covenant, which can include pledges as to how they will support current and former armed forces personnel. The latest annual report, covering 2017,

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<sup>1</sup> Ministry of Defence, '[Armed Forces Covenant Recognised in Law for First Time](#)', 3 November 2011.

<sup>2</sup> Ministry of Defence, '[Armed Forces Covenant](#)', December 2016.

<sup>3</sup> Armed Forces Act 2011, s 2.

<sup>4</sup> Ministry of Defence, '[Armed Forces Covenant: Annual Reports](#)', 18 December 2017.

reported that the covenant had received its 2000th signatory in December 2017.<sup>5</sup>

The covenant is also supported by a ministerial covenant and veterans board, established in 2017. In a press release announcing the creation of the board, the Ministry of Defence (MOD) outlined its structure and purpose as follows:

Co-chaired by Defence Secretary Sir Michael Fallon and First Secretary of State Damian Green, and reporting to the Prime Minister, the board underlines the Government's enduring commitment to the armed forces community.

Meeting biannually, the board will drive forward the existing armed forces covenant commitments community across all government departments responsible for delivery, with a specific focus on the priority areas of healthcare, including mental health. Housing, education, and employment opportunities are also other areas which will be covered. In addition, the Defence Secretary and the First Secretary of State will meet separately with leading service charities and the single service family federations to discuss the covenant on an annual basis. This will ensure the views of the wider armed forces community are represented in government decisions.<sup>6</sup>

Further information on the operation of the armed forces covenant can be found on the covenant's [official website](#) and on the Ministry of Defence webpage, '[Armed Forces Covenant: Guidance and Support](#)'. The latter contains information on services for veterans, as well as material on the impact of the covenant and material aimed at business and communities.<sup>7</sup>

## 1.2 Veterans Strategy

In April 2018, the Secretary of State for Defence, Gavin Williamson, announced that the Government was commissioning a new veterans strategy, due to be published by the end of the year.<sup>8</sup> The Ministry of Defence define a veteran as anyone who has "served for at least one day in Her Majesty's armed forces (regular or reserve) or merchant mariners who

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<sup>5</sup> Armed Forces Covenant, [Armed Forces Covenant Annual Report 2017](#), p 61. A full list of the annual reports can be found on the Ministry of Defence webpage: '[Armed Forces Covenant: Annual Reports](#)', 18 December 2017.

<sup>6</sup> Ministry of Defence, '[Defence Secretary Announces Armed Forces Covenant and Veterans Board](#)', 3 October 2017.

<sup>7</sup> Ministry of Defence, '[Armed Forces Covenant: Guidance and Support](#)', 17 August 2018.

<sup>8</sup> Ministry of Defence, '[Defence Secretary Launches First Ever Veterans Strategy and New Cross-Government Veterans Unit](#)', 26 April 2018.

have seen duty on legally defined military operations”.<sup>9</sup> Announcing the strategy, Gavin Williamson stated:

We have a golden opportunity to ensure our veterans get a fair deal for their service and sacrifice to our country.

The vast majority of those leaving the armed forces go on to lead fulfilling and rewarding lives, which is a testament to their professionalism and resilience. However, for those who need help it is right that we step forward, create new opportunities, and remind them that they are not alone.

Everybody across our society has a responsibility to make sure we protect those who protected us.<sup>10</sup>

The Defence Secretary also referred to “key pinch-points”, which he said affected a “small but significant” number of veterans, that he wanted the ministerial board and the unit behind the strategy to address. These were:

- **Debt:** How we can best help veterans meet the financial demands of civilian life. This issue represents the highest percentage of calls to the Veterans Gateway.<sup>11</sup>
- **Housing:** How to offer the best advice for those leaving the armed forces. Whilst the covenant already puts an obligation on local authorities to ensure they provide fair access to housing for veterans there are still a small number of individuals that require further support.
- **Social Isolation:** Supporting community integration for those who feel a loss of camaraderie upon leaving the armed forces. Younger veterans can struggle with a disassociation from civilian life so the new strategy will focus on connecting with the Loneliness Strategy to help address this.
- **Mental and Physical Wellbeing:** Ensuring this is maximised, especially for those with lasting physical or mental health issues as a result of their service.
- **Public Perception:** Improving how veterans are viewed, perceptions are often inaccurate, outdated or clichéd and do not recognise that most veterans are proud members of our society with a huge amount to offer.<sup>12</sup>

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<sup>9</sup> Ministry of Defence, [Veterans: Key Facts](#), 2017, p 2.

<sup>10</sup> Ministry of Defence, [‘Defence Secretary Launches First Ever Veterans Strategy and New Cross-Government Veterans Unit’](#), 26 April 2018.

<sup>11</sup> The Veterans Gateway is a single point of contact for a network of organisations supporting veterans. It is funded through the armed forces covenant. See: [Veterans’ Gateway website](#), accessed 6 November 2018.

<sup>12</sup> Ministry of Defence, [‘Defence Secretary Launches First Ever Veterans Strategy and New Cross-Government Veterans Unit’](#), 26 April 2018.

Statistics and resources relating to each of these are set out in sections 3–6 of this briefing.

Speaking in a House of Commons debate on armed forces veterans on 28 June 2018, the Minister for Defence People and Veterans, Tobias Ellwood, said that the strategy would be out in November 2018 and it would focus on four themes:

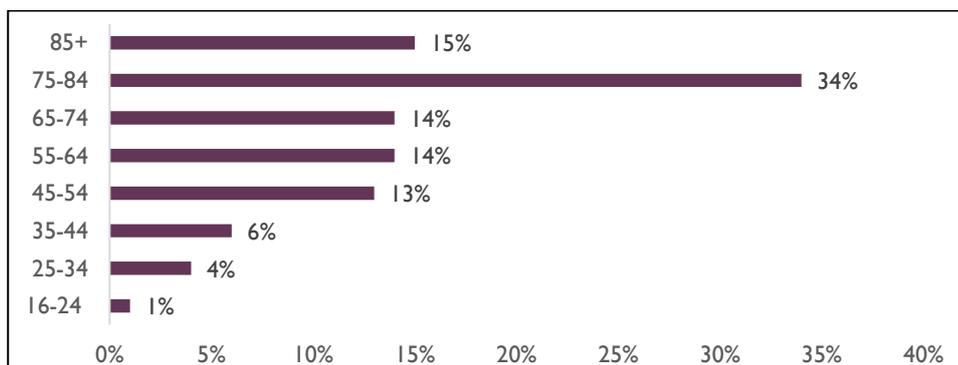
First, looking at perceptions and trying to remove the myths surrounding the challenges that we face; secondly, improving co-ordination between the support that is out there; thirdly, offering a cultural shift in our attitudes towards veterans; and finally, there will be studies on specific areas, including mental health and homelessness, which we know are bigger issues that we need to pay more attention to.<sup>13</sup>

A debate in the House of Commons on the veterans strategy has also been scheduled for 15 November 2018, the same date as the debate in the House of Lords. However, at the time of writing, the strategy was unpublished.

## 2. Demographic Data on Veterans in the UK

In 2016, there were estimated to be around 2.5 million UK armed forces veterans residing in households in Great Britain.<sup>14</sup> Taken as a proportion of the overall population of Great Britain (based on mid-year estimates in 2016 of 63.8 million),<sup>15</sup> this would amount to around 4% of the population. Of these, 90% were male, and 98% were white. In addition, the following two graphs show the percentage age breakdown of veterans in 2016 and a breakdown of their areas of residence:

**Graph 1: Age Ranges of Veterans (%)<sup>16</sup>**

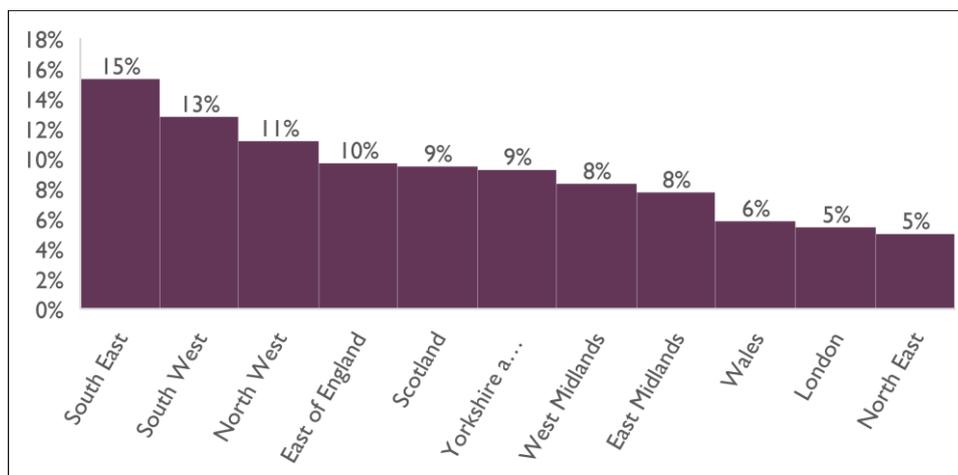


<sup>13</sup> [Debate on 'Armed Forces Veterans'](#), HC Hansard, 28 June 2018, col 1152.

<sup>14</sup> Ministry of Defence, [Annual Population Survey: UK Armed Forces Veterans Residing in Great Britain, 2016](#), 26 October 2017, p 3.

<sup>15</sup> Office for National Statistics, [Time Series: Great Britain Population Mid-year Estimate](#), 28 June 2018.

<sup>16</sup> Ministry of Defence, [Annual Population Survey: UK Armed Forces Veterans Residing in Great Britain 2016](#), 26 October 2017, section 1.

**Graph 2: Areas of Residence of Veterans in Great Britain (%)**<sup>17</sup>

The first graph shows that the largest proportion of veterans (34%) were aged between 75 and 84, whereas, cumulatively, only 11% were aged between 16 and 44. In addition, the second graph shows that the largest proportion of veterans lived in the south east of England (15%), but that only 5% of the number lived in London.

However, of its demographic data on veterans, the MOD highlighted the impact of the Second World War and of national service (which ended in 1960 and saw the last service personnel leave the armed forces in 1963) on the breakdowns.<sup>18</sup>

### 3. Veterans' Concerns and Public Perception

In July 2016, the armed forces charity SSAFA (Soldiers', Sailors' and Airmen's Families Association) published a report looking at the concerns raised by veterans in need.<sup>19</sup> The charity aims to ensure the "needs of the armed forces, veterans and their families are met in an appropriate and timely way".<sup>20</sup> The report was based on a survey of 967 working-age veterans who were receiving support from the SSAFA, which the charity described as "amongst the most vulnerable in the veteran community".<sup>21</sup> The survey found that the biggest challenges reported by these working-age veterans were:<sup>22</sup>

- Not enough savings to buy or replace essential items (54%)
- Not enough money for daily living (44%)

<sup>17</sup> Ministry of Defence, [Annual Population Survey: UK Armed Forces Veterans Residing in Great Britain 2016](#), 26 October 2017, section 2.

<sup>18</sup> Ministry of Defence, [Annual Population Survey: UK Armed Forces Veterans Residing in Great Britain, 2016](#), 26 October 2017, p 3.

<sup>19</sup> SSAFA, [The New Frontline: Voices of Veterans in Need](#), July 2016.

<sup>20</sup> SSAFA, [About Us](#), accessed 5 November 2018.

<sup>21</sup> SSAFA, [The New Frontline: Voices of Veterans in Need](#), July 2016, p 6.

<sup>22</sup> *ibid*, p 9.

- Depression (40%)
- Difficulty dealing with personal affairs eg bills, forms etc (39%)
- Lack of hope or purpose (36%)
- Debt (35%)
- Low confidence/self-esteem (35%)
- Mental health issues (30%)
- Difficulty obtaining or finding out about benefits/services (28%)
- Exhaustion or pain (28%)

In addition, the survey found the six highest welfare needs amongst these individuals were: finances (86%); mental well-being (61%); housing (47%); social life (41%); physical health (41%); and activities (35%).<sup>23</sup>

The report included further qualitative information on these issues from the survey participants, alongside a number of case studies. It also stressed that these issues did not affect all veterans and that the majority coped well with the transition to civilian life and “do not need support and will never have to call on a charity for help”. However:

[...] for some the transition is a lot harder, and it is amongst this section of the community that SSAFA, the Armed Forces charity, does much of its work.<sup>24</sup>

The overall perception of veterans is regularly highlighted in the series of papers published as part of Lord Ashcroft’s veterans’ transition review.<sup>25</sup> In the most recent report, published in 2017, Lord Ashcroft reported that, while the overall view of the work of the armed forces was positive, the public over-estimated the issues faced by veterans and service leavers:

People wildly overestimate the problems suffered by service leavers and veterans, especially when it comes to physical and mental health. Despite their high regard for the forces, too many believe that military service is harmful. The contrast between the numbers of service personnel who are suffering mental problems and the overwhelming majority of the public who believe such conditions are among the most common problems affecting service leavers is staggering. By no means all of the problems encountered by our personnel and veterans are caused by their service in the forces.<sup>26</sup>

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<sup>23</sup> SSAFA, [The New Frontline: Voices of Veterans in Need](#), July 2016.

<sup>24</sup> *ibid*, p 8.

<sup>25</sup> [Veterans’ Transition Review website](#), accessed 5 November 2018. Further information on the Veterans’ Transition Review can be found in section 6.3 of this briefing. Lord Ashcroft retired from the House of Lords in April 2015.

<sup>26</sup> Veterans’ Transition Review, [Third Follow-up Report](#), October 2017, p 8.

For example, the report found that one in four people interviewed believed that the proportion of veterans with a physical, emotional or mental health problem stood at over 70 percent, with mental health the most likely to be mentioned.<sup>27</sup>

Identifying the media portrayal of veterans as one of the key drivers of the public's perception, the report called for a more proactive approach from government media departments and from ministers:

Television documentaries and news are the most important basis for people's impressions about service leavers and veterans, but the MOD seems disinclined to put up authoritative individuals to challenge the negative picture presented [...]

On a day-to-day basis, government media departments should be more proactive when it comes to, for example, countering a misleading story or documentary about the health of those who have served. At the same time, the Government has to take up the task of changing public perceptions. This must be an active, ongoing effort. I suggest that it may not be appropriate for the MOD to take on full responsibility for this task. Instead it needs to be led at Cabinet Office level by a minister.<sup>28</sup>

The report stressed the importance of tackling the issue with reference to the reputation of the armed forces, and also veterans' career prospects.<sup>29</sup>

The need to deal with these misperceptions was reiterated in a recent House of Commons debate on armed forces veterans by Tobias Ellwood, the Minister for Defence People and Veterans, who stated:

One of those myths is that people who serve somehow come out damaged. I am afraid that people have the perception that if someone is wearing a uniform or did wear the uniform, they will somehow be damaged. Lord Ashcroft's helpful report confirmed that that is absolutely not the case, as everyone who is close to the armed forces knows. If these myths perpetuate and we do not put the challenges in perspective, it can affect the reputation of the whole of the armed forces, it can affect employers who might think of recruiting somebody who was in the armed forces and it gives false perceptions of the experience. Veterans are no more likely to commit suicide, to have post-traumatic stress disorder or to have mental health issues than people in the general population.<sup>30</sup>

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<sup>27</sup> Veterans' Transition Review, [Third Follow-up Report](#), October 2017, pp 5–6.

<sup>28</sup> *ibid*, p 8.

<sup>29</sup> *ibid*, p 5.

<sup>30</sup> [Debate on 'Armed Forces Veterans'](#), HC Hansard, 28 June 2018, col 1151.

However, despite this, the minister did stress that the Government was not complacent on the issues that some veterans may or do face, and that it would continue working to provide adequate help and assistance.

## 4. Veterans' Health and Wellbeing

### 4.1 Statement in Armed Forces Covenant

In the full version of the armed forces covenant, published in 2011, it stressed that veterans' health was the responsibility of the NHS, but that individuals should receive "priority treatment where it relates to a condition which results from their service in the armed forces, subject to clinical need".<sup>31</sup> It also stated that those with mental health concerns should be able to be treated by medical professionals who have an understanding of armed forces culture.

### 4.2 Statistics

The Ministry of Defence (MOD) has reported little difference between the health of veterans and non-veterans, stating:

Overall, there were no differences between veterans' and non-veterans' self-reported general health, and health conditions, for example 35% of veterans and 36% of non-veterans aged 16–64, and 18% of veterans and 19% of non-veterans aged 65+ reported their general health as very good.<sup>32</sup>

It also reported no significant difference in the proportions of veterans and non-veterans who reported that health issues limited their activities or affected their working life.<sup>33</sup> Similarly, no significant differences were found among the specific conditions reported by veterans or non-veterans, with veterans actually being less likely to experience chest and breathing problems (however, the MOD suggested this difference may be as a result of some of the health tests necessary to first enter the armed forces).<sup>34</sup> For example, looking at mental health, the MOD found that: depression/bad nerves was reported by 23% of veterans, compared to 20% of non-veterans; and mental health/phobia/panic issues was reported by 11% of veterans compared to 9% of non-veterans.<sup>35</sup>

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<sup>31</sup> Ministry of Defence, [Armed Forces Covenant](#), 2011, p 6.

<sup>32</sup> Ministry of Defence, [Annual Population Survey: UK Armed Forces Veterans Residing in Great Britain, 2016](#), 26 October 2017, p 1.

<sup>33</sup> *ibid*, p 5.

<sup>34</sup> *ibid*, p 6.

<sup>35</sup> Ministry of Defence, [Annual Population Survey: UK Armed Forces Veterans Residing in Great Britain 2016](#), 26 October 2017, section 3. These differences were not considered to be statistically significant.

Similar findings were highlighted in documents accompanying the armed forces covenant, which stated that mental health conditions, such as post-traumatic stress disorder, were not at high levels among British veterans:

Whilst there has been an emphasis on post-traumatic stress disorder (PTSD), studies conducted by the King's Centre for Military Health Research noted that PTSD rates were low amongst British forces, with prevalence rates of around 4% in personnel who have been deployed, rising to 6% in combat troops.

This is broadly equivalent to the rate amongst civilians. Research continues on common mental health issues amongst veterans, including anxiety, depression and alcohol-related problems. The causality of mental health issues is complex and related to a number of contributing factors. However, it is important to note that the vast majority of the UK armed forces and veterans do not experience mental health difficulties.<sup>36</sup>

However, in 2014, the Royal British Legion ran a survey of 2,121 veterans in the UK, asking a number of questions about their daily experiences. As part of this survey, it found higher rates of reported conditions than those set out in the MOD statistics. For example, it found:

The survey results highlighted a number of specific issues which appear to affect the working age ex-Service community disproportionately, compared with the general population:

- 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%).
- Working age veterans report living with a number of conditions, including depression (10% vs 6%), back problems (14% vs 7%), problems with their arms (9% vs 5%), legs or feet (15% vs 7%), difficulty hearing (6% vs 2%) and difficulty seeing (5% vs 1%), at a higher rate than the general population of the same age.<sup>37</sup>

### 4.3 Defence Committee Report on Mental Health and the Armed Forces

On 25 July 2018, the House of Commons Defence Committee published the first report of its inquiry on mental health and the armed forces.<sup>38</sup> It also expressed concerns about the public perception of mental health issues among serving and ex-service personnel. It stated that the armed forces may

<sup>36</sup> Ministry of Defence, [Veterans: Key Facts](#), 2017, p 4.

<sup>37</sup> Royal British Legion, ['UK Ex-Service Community: A Household Survey'](#), 2014.

<sup>38</sup> House of Commons Defence Committee, [Mental Health and the Armed Forces, Part One: The Scale of Mental Health Issues](#), 25 July 2018, HC 813 of session 2017–19.

actually benefit some individuals' mental health, and believed that the public perception may be increasing the stigma surrounding veterans' mental health:

The support and sense of community offered by the military environment might have improved the mental health in some or at least delayed the onset of pre-existing conditions. Indeed, this distorted public perception may be amplifying the stigma surrounding veterans' mental health, discouraging them from seeking help, and overly focussing attention on PTSD, when conditions such as depression are much more common.<sup>39</sup>

However, despite this, the committee expressed concerns that the estimates on the number of current and former armed forces personnel with mental health issues could be "significantly" underestimated. It spoke of limitations in the Government's data, including difficulties accurately recording veterans' access to mental health services, and noted that it would not include those who had not sought help (eg due to stigma, concerns over effective care provision, etc). On the latter point, the committee highlighted external estimates indicating potentially higher rates of those suffering mental health issues:

Current research suggests that about half to two-thirds of serving personnel and veterans with mental health issues may not be seeking help:

- A KCMHR [King's Centre for Military Health Research] study in 2015<sup>40</sup> found that approximately 60% of military personnel do not seek help. We calculate that this would suggest that the true rate of mental health conditions in serving personnel may be as high as 8%, based on the Ministry of Defence's reported 2017–18 rate of 3.1%; and
- Another report in 2015,<sup>41</sup> a joint Help for Heroes and KCMHR study, suggested that at least 10% of veterans who served over the last 20 years may present mental health conditions that need treatment. It estimated that at least 61,300 out of 601,000 veterans who served as regulars in the UK armed forces between 1991 and 2014 might suffer from mental health problems and require professional intervention.<sup>42</sup>

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<sup>39</sup> House of Commons Defence Committee, [Mental Health and the Armed Forces, Part One: The Scale of Mental Health Issues](#), 25 July 2018, HC 813 of session 2017–19, p 3.

<sup>40</sup> King's Centre for Military Health Research, King's College London, '[Stigma as a Barrier to Seeking Health Care Among Military Personnel With Mental Health Problems](#)', *Epidemiologic Reviews*, January 2015, Vol 37.

<sup>41</sup> Help for Heroes and King's Centre for Military Health Research, King's College London, [Counting the Costs](#), November 2015.

<sup>42</sup> *ibid*, p 21.

In addition, the committee noted difficulties comparing the rates of mental health issues among current and former personnel with the rates reported among the rest of the UK population. It argued that differences in approaches had led to large variations in the rates reported by the Ministry of Defence and charities, and recommended an agreed, shared methodology:

The Ministry of Defence, academic studies and armed forces charities all take different approaches to assessing and recording the number of serving personnel and veterans with mental health conditions. This has led to a wide range of estimates with at one end, the Ministry of Defence suggesting it is lower than the UK general population and at the other armed forces charities—which mainly see those veterans who need help the most—reporting much higher levels.

We recommend that the Ministry of Defence and the health departments of the four nations work with Contact [a collaboration of military charities working with the NHS and the Ministry of Defence] and the charity sector to agree and implement a shared set of methodologies for collecting and analysing data. This will enable a common understanding of what the demand for care services might be from serving personnel and veterans and for both government and the armed forces charity sector to provision care accordingly.<sup>43</sup>

The report also discussed evidence suggesting there were groups of current and former personnel who may be more at risk of mental health issues, such as:<sup>44</sup>

- those that served in Iraq and Afghanistan;
- early service leavers;
- younger recruits;
- those that suffered physical injury; and
- female personnel.

It called for further reliable data on these groups, recommending research be undertaken by the Ministry of Defence, with the Government then considering more monitoring or support for them if applicable.<sup>45</sup>

Looking at veterans' experiences when accessing mental health services, the committee noted the lack of understanding among medical professionals in regards to their experiences in the armed forces.<sup>46</sup> It also called on the veterans strategy to address disparities across the NHS in the provision of priority treatment to veterans when the condition is service-related, as set

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<sup>43</sup> House of Commons Defence Committee, [Mental Health and the Armed Forces, Part One: The Scale of Mental Health Issues](#), 25 July 2018, HC 813 of session 2017–19, p 30.

<sup>44</sup> *ibid*, pp 23–7.

<sup>45</sup> *ibid*, p 27.

<sup>46</sup> *ibid*, p 19.

out in the covenant. It stated that the current situation was confusing to both veterans and clinicians due to the reference to clinical need:

We are particularly concerned that the armed forces covenant principle of priority treatment when a condition is service-related is not being consistently applied across the UK. The Department of Health and Social Care considers that the NHS founding principles on equality and clinical need constrain how it can provide priority treatment to veterans. This difference in interpretation is confusing not just to veterans but also to clinicians; this may add to veterans' perception that the health service is failing them [...]

We recommend that in its forthcoming veterans strategy, the Government should set out clearly whether veterans may expect to receive priority treatment, subject to clinical need, and what that means in practice. The Government should ensure that this clarification is then cascaded down to both NHS staff and veterans and their families across the UK.<sup>47</sup>

The Government response was published on 16 October 2018.<sup>48</sup> It set out some of the work already being done on many of the issues raised, and highlighted programmes already in operation. For example, regarding clinicians' knowledge of veterans' needs, it stated:

Increasing clinical awareness of the needs of the armed forces community is an important objective for the NHS and we welcome the Royal College of General Practitioners and NHS England's joint Veterans' Awareness General Practitioner Accreditation Programme. To date, the programme has been successful, with over 90 GP practices in the West Midlands area joining the pilot scheme.

The Veterans Covenant Hospital Alliance provides a forum to share knowledge and best practice, connect hospitals to other related services and generally improve awareness of veterans' needs. It also allows hospitals in the alliance to share education and training resources, to achieve recognition and accreditation and, in doing so, will increase awareness of the needs of veterans for its members.<sup>49</sup>

However, regarding the committee's belief that the number of veterans with mental health conditions had been underestimated, the Government

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<sup>47</sup> House of Commons Defence Committee, [Mental Health and the Armed Forces, Part One: The Scale of Mental Health Issues](#), 25 July 2018, HC 813 of session 2017–19, p 22.

<sup>48</sup> House of Commons Defence Committee, [Mental Health and the Armed Forces, Part One: The Scale of Mental Health Issues: Government Response to the Committee's Eleventh Report](#), 16 October 2018, HC 1635 of session 2017–19.

<sup>49</sup> *ibid*, p 7.

reemphasised its view that there was not necessarily a correlation between service and a veteran's mental health condition.<sup>50</sup>

#### 4.4 Overview of Support Available

As mentioned in the covenant, the principal source of support for the health of veterans is the NHS. The NHS Constitution, as updated in 2015, states that “the NHS will ensure that in line with the armed forces covenant, those in the armed forces, reservists, their families and veterans are not disadvantaged in accessing health services in the area they reside”.<sup>51</sup>

The NHS has specific services aimed at the mental health of veterans, including the Veterans' Mental Health Transition, Intervention and Liaison Service and the NHS Veterans' Mental Health Complex Treatment Service.<sup>52</sup> The Ministry of Defence also administers the veterans and reserves mental health programme (VRMHP). This provides:

Assessment and treatment advice for veterans (who have deployed since 1982) and reserves who have been deployed overseas since 1 January 2003 as a reservist, and believe that their deployment may have affected their mental health. All veterans referred to the VRMHP will receive a full psychiatric assessment completed by a consultant psychiatrist; this assessment report is then sent on completion to the veteran's GP and if involved, the local mental health service, with advice on further treatment and care.<sup>53</sup>

The Government has also committed extra funding to mental health services for current and former service personnel.<sup>54</sup> For example, it recently stated that, cumulatively, £220 million had been earmarked to the provision of such services over the next decade.

Additional support and advice is available from charities such as the [SSAFA](#) and [Combat Stress](#).

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<sup>50</sup> House of Commons Defence Committee, [Mental Health and the Armed Forces, Part One: The Scale of Mental Health Issues: Government Response to the Committee's Eleventh Report](#), 16 October 2018, HC 1635 of session 2017–19, p 6.

<sup>51</sup> NHS England, [NHS Constitution](#), 27 July 2015, pp 3–4.

<sup>52</sup> NHS, [Veterans: NHS Mental Health Services](#), 31 July 2017.

<sup>53</sup> Ministry of Defence, [Support for War Veterans](#), 20 September 2018.

<sup>54</sup> Ministry of Defence, [Defence Minister Outlines Expanded Mental Health Provision for Armed Forces and Veterans](#), 16 March 2018.

## 5. Veterans' Housing, Employment and Finances

### 5.1 Statements in Armed Forces Covenant

The full version of the armed forces covenant states that former (and current) service personnel should be supported with their housing needs.<sup>55</sup> In certain circumstances, it specifies that they should have “priority” access to housing provision:

In addressing the accommodation requirements of service personnel, the MOD seeks to promote choice, recognising the benefits of stability and home ownership amongst members of the armed forces where this is practicable and compatible with service requirements, and also that their needs alter as they progress through service and ultimately return to civilian life. [...] They should have priority status in applying for government-sponsored affordable housing schemes, and service leavers should retain this status for a period after discharge. Personnel may have access to tailored armed forces housing schemes or financial arrangements, depending on their circumstances, to help them in purchasing their own property. Those injured in service should also have preferential access to appropriate housing schemes [...]<sup>56</sup>

It also states that current and former armed forces personnel should have the same access to benefits as all UK citizens, except where tailored alternatives are available to them.

Regarding employment, businesses are encouraged to sign up to the covenant and make pledges as to how they would seek to support armed forces employees.<sup>57</sup> A full list of those who have signed up to the covenant is available on the [armed forces covenant website](#).

### 5.2 Statistics

The annual Ministry of Defence statistics on veterans residing in Great Britain includes information on employment, education and housing.<sup>58</sup> The statistics for 2016 showed there was no difference in employment, unemployment and economically inactive rates between veterans and non-veterans.

However, it found that veterans were more likely than non-veterans to work in public administration and the defence industry, with 12% of veterans working in this sector compared to 6% of non-veterans. The report explained that this industry area included the prison service, the NHS, the

<sup>55</sup> Ministry of Defence, [Armed Forces Covenant](#), 2011, p 7.

<sup>56</sup> *ibid.*

<sup>57</sup> Armed Forces Covenant, '[Sign the Covenant](#)', accessed 6 November 2018.

<sup>58</sup> Ministry of Defence, [Annual Population Survey: UK Armed Forces Veterans Residing in Great Britain, 2016](#), 26 October 2017.

fire service, and the MOD. It also found some differences between the industries of veterans and non-veterans when broken down by age or ethnicity. For example, the MOD reported that veterans aged 16–34 were:

- More likely to work as process, plant and machine operatives (19%) than non-veterans (8%)
- More likely to work within the transport and storage industry (13%) than non-veterans (6%)
- Less likely to work in professional occupations (9%) than non-veterans (20%).<sup>59</sup>

Regarding education levels, the statistics highlighted that although there was no significant difference in the number of veterans with a qualification compared to the general population, they were less likely to have a degree as their highest qualification (20% compared to 30%) and were more likely to have achieved their qualification through work (63% compared to 45%).<sup>60</sup> However, the MOD noted that these results were to be expected, as a large proportion of armed forces personnel join directly after compulsory education (eg in the 16–19 age bracket).

In terms of house ownership, the statistics showed there was no difference among veterans and non-veterans residing in Great Britain, with 77% of veterans owning their own home and 22% renting (the remaining 1% were in the ‘Other’ category).<sup>61</sup>

### 5.3 Employment Information and Support

#### *Career Transition Partnership*

For those leaving the armed forces, employment support is available through the career transition partnership (CTP). The CTP is an agreement between the Ministry of Defence and the contractor Right Management Ltd, to aid transition from military to civilian life/employment.<sup>62</sup> Differing support is available depending on time served and the reason for leaving, and includes:

- The core resettlement programme (CRP) for those serving six or more years or who were medically discharged (the latter are also entitled to additional CTP assist support).
- The employment support programme (ESP) for those serving between four and five years.

<sup>59</sup> Ministry of Defence, [Annual Population Survey: UK Armed Forces Veterans Residing in Great Britain, 2016](#), 26 October 2017, p 10.

<sup>60</sup> *ibid*, p 11.

<sup>61</sup> *ibid*, p 12

<sup>62</sup> Ministry of Defence, [Career Transition Partnership Annual statistics: UK Regular Service Personnel Employment—1 April 2012 to 31 March 2017](#), 25 January 2018, p 2.

- The CTP future horizons (FH) for those leaving with less than four years service.

The Ministry of Defence has explained what support is available under these schemes, as follows:

Within each programme service leavers are offered a range of ‘billable’ services (where Right Management will invoice the MOD for payment).

The types of benefits available to service leavers under both the CRP and ESP include: training grants, allowances, travel warrants, resettlement leave, transition workshops, one-to-one career guidance support, subsidised vocational training support, housing advice, financial briefs and job finding support. Service leavers can access this resettlement support two years either side of their discharge date. In addition travel warrants, resettlement leave and allowances are also available to those receiving support under the CRP.

Under the FH, the MOD is billed for all personnel who opt-in and receive either a 1:1 interview or are initially contacted by the CTP by telephone and receive a response. Resettlement support is provisioned through the FH, offering bespoke interventions which includes a needs assessment with appropriate referral to tackle barriers to employment, and a post discharge tracking service to ensure ESLs and those discharged for disciplinary reasons gain a route into sustainable employment, education or further training. FH support is available to eligible personnel for up to two years post discharge.

Service personnel medically discharged from service are additionally offered career support via the CTP Assist team which helps individuals pinpoint a rewarding and realistic change of career. For many, this support plays a fundamental part in the individual’s future planning—it is about identifying who they are, and what they want to do, and working with them to find the future outcome that works for them—whatever their injury or illness.<sup>63</sup>

The MOD has reported that, in 2016/17, 82% of those that left the armed forces and used one of the CTP services were employed within six months after leaving service.<sup>64</sup> However, it also reported some differences in employment levels among certain groups, for example:

- Army leavers were more likely to be unemployed (10%) than RAF or naval service leavers (7% each)

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<sup>63</sup> Ministry of Defence, [Career Transition Partnership Annual statistics: UK Regular Service Personnel Employment—1 April 2012 to 31 March 2017](#), 25 January 2018, pp 2–3.

<sup>64</sup> *ibid*, p 1.

- Black, Asian and minority ethnic (BAME) leavers were more likely to be unemployed (21%) than white service leavers (8%)
- Service leavers who were medically discharged were less likely to be employed (73%) than those who were not medically discharged (84%). However, regarding this point, the MOD did note that the CTP assistance they received may not have had the goal of ensuring this group were in employment within six months.

The Government has argued that the programme is also of benefit to employers, stating:

The CTP contract provides employers with unique access to the service leaver talent pool. Employers can upload job opportunities to RightJob via the CTP website which receives over 50,000 unique hits per month, and promotes employment opportunities through regular e-bulletins sent to over 20,000 active clients. Through the resettlement contract, the CTP can link employers with the best service leaver candidates for their vacancies. The CTP offers a high quality, no cost recruitment service for organisations looking to recruit highly motivated, skilled and experienced Service leavers.<sup>65</sup>

### ***Royal British Legion Report on the Veteran Employment Gap***

In the 2016 follow-up report to its 2014 household survey of veterans, the Royal British Legion argued there was a veteran employment gap.<sup>66</sup> It estimated lower employment rates than those set out in the MOD statistics, and claimed there were “stark statistical differences” in the employment rates compared to the rest of the population.<sup>67</sup> Although recognising the MOD’s assistance provided through the CTP, it stated:

Despite the success story for the majority, there are a significant number who either end up without full or part time work, or are in employment but not able to fully utilise the skills and education they acquired whilst serving.<sup>68</sup>

It also highlighted the need to address issues apparent in certain groups, namely: BAME veterans; female veterans; disabled veterans; and early leavers.<sup>69</sup> In addition, it emphasised the apparent barriers veterans may face finding employment, listing these as: lower levels of education and

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<sup>65</sup> [Written Question: ‘Employment: Veterans’](#), 6 February 2017, HL4889.

<sup>66</sup> Royal British Legion, [Deployment to Employment](#), 2016.

<sup>67</sup> *ibid*, p 7.

<sup>68</sup> *ibid*.

<sup>69</sup> *ibid*, p 9.

qualifications in many cases; inexperience with the job market; and employers' negative perceptions and stereotyping.<sup>70</sup>

The Royal British Legion argued that reducing the gap would benefit both the economy and veterans. For veterans, it stressed the links made between employment and better health, and that it would provide stability and confidence for those leaving service.<sup>71</sup> As such, it made a number of recommendations to improve the situation, broadly:

- More accurate data is needed on the long-term sustainability of jobs, underemployment in the jobs market and analysis of some smaller subsets of the veterans population;
- More can be done to bolster existing initiatives such as the corporate pledges to the armed forces covenant;
- More can be put in place to ensure that the education, training, skills and qualifications gained in service are translated into the civilian world.<sup>72</sup>

#### 5.4 Support with Housing and Avoiding Homelessness

In response to a written question on 17 September 2018, Earl Howe, Minister of State for Defence, set out how the Government was seeking to help service leavers find suitable accommodation and to avoid rough sleeping:

All service leavers are provided with information on sources of housing help in their leaving information packs which are issued before discharge. The Joint Services Housing Advice Office (JSHAO) provides a dedicated focal point within the Ministry of Defence (MOD) for housing information and advice for those about to return to civilian life. The JSHAO gives regular nationwide briefings advising service personnel of their housing options.

In 2012, the Government changed the law so that serving personnel suffering from a serious injury, illness or disability attributable to their service, and former service personnel with urgent housing needs, are always given high priority for social housing. The Government has [issued guidance](#) strongly encouraging councils to prioritise all members of the Armed Forces and their families for social housing. This is statutory guidance to which councils must pay regard [...]

The MOD is developing a new tri-service policy to provide more comprehensive support to service personnel and their families as they transition out of the armed forces to civilian life. This will include

<sup>70</sup> Royal British Legion, [Deployment to Employment](#), 2016, pp 12–19.

<sup>71</sup> *ibid*, pp 20–21.

<sup>72</sup> *ibid*, p 25.

advice and support on housing matters. The MOD will also be covered by the new Ministry of Housing, Communities and Local Government (MHCLG) led statutory requirement scheduled to come into effect this autumn to refer those service personnel at risk of homelessness when they leave the armed forces to the relevant local authority. The MHCLG has also extended the period within which veterans are given priority for government funded shared ownership schemes, from 12 to 24 months after service. Support is also available from Veterans UK [...] and the Veterans Welfare Service. The veterans gateway can also signpost individuals to the organisation best placed to support, making it easier for veterans to access advice on a range of issues, including housing.<sup>73</sup>

There are varying estimates of the number of veterans sleeping rough in the UK, with press reports varying from around 7,000 to around 13,000.<sup>74</sup> In addition, these reports often refer to mental health problems which affect these veterans, suggesting that these conditions often appear a long time after the individual has left the service.

The Ministry of Housing, Communities and Local Government has published specific guidance for local authorities on providing homelessness services to veterans.<sup>75</sup> In particular, the guidance includes information on how local authorities should assess whether veterans should receive priority need due to circumstances and vulnerabilities linked to their time in the military. The Government also stated that it was working with the Ministry of Defence as part of its cross-government rough sleeping and homelessness reduction taskforce, with the aim of halving rough sleeping by 2022 and eliminating it all together by 2027.<sup>76</sup>

In addition, the following material sets out further specific housing and homelessness advice and resources available to veterans:

- Ministry of Defence, [Organisations Providing Accommodation Support and Advice to Armed Forces Personnel and Veterans](#), 1 April 2018
- SSAFA, [‘Support for Homeless Veterans’](#), accessed 6 November 2018
- Shelter, [‘Help If You’re Homeless: Veterans’](#), accessed 6 November 2018

<sup>73</sup> House of Lords, [Written Question: ‘Veterans: Housing’](#), 17 September 2018, HL 10152.

<sup>74</sup> See, for example: *Big Issue*, [‘Former Services Personnel Face “Homelessness Ticking Time Bomb”](#)’, 7 November 2017; and *Mirror*, [‘At Least 13,000 Hero Soldiers Left Homeless After Leaving the Military—and Almost All Have PTSD’](#), 16 January 2018.

<sup>75</sup> Ministry of Housing, Communities and Local Government, [‘Chapter 24: Former Members of the Armed Forces’](#), 1 November 2018.

<sup>76</sup> House of Commons, [Written Question: ‘Homelessness: Veterans’](#), 17 May 2018, 142829.

## 5.5 Financial Support

Members of the armed forces are automatically enrolled in the armed forces pension scheme, which is managed by Veterans UK (part of the Ministry of Defence). The Government state that:

Unlike almost all other schemes, members pay 0 percent in contributions each month. The scheme is also protected by legislation and distributed from the public purse, so it can be depended upon.<sup>77</sup>

In addition, those who suffered an illness or injury resulting from service on or after 6 April 2005 may benefit from the armed forces compensation scheme (those who suffered injury or illness before this date may instead benefit from the war pensions scheme (WPS) or the criminal injuries compensation (overseas) scheme).<sup>78</sup> The armed forces compensation scheme (AFCS):

Provides compensation for any injury, illness or death which is caused by service on or after 6 April 2005. The WPS compensates for any injury, illness or death which occurs up to this date. The AFCS is a no-fault scheme which means payment is made without admitting fault. It is entirely separate from any other personal accident cover, such as personal accident or life insurance. Therefore, any accident cover that you may already hold is not taken into account when determining an AFCS award.<sup>79</sup>

Recipients may receive a lump sum payment (up to £650,000), or a guaranteed income payment (GIP) in the case of the most serious injuries or illnesses. The GIP is a “tax free, index linked monthly payment which is paid from the day after service ends (where a claim is made whilst still in service) or from the date of claim (if you claim after discharge)”.<sup>80</sup>

In addition, former armed forces personnel who were seriously injured as a result of service can apply for the armed forces independence payment to aid with extra costs resulting from the injury.<sup>81</sup> This applies in a similar manner to personal independence payments. Veterans can also benefit from certain moderations to the normal benefit rules, including in relation to jobseeker’s allowance for those returning from overseas and exemption

<sup>77</sup> UK Government website, ‘[Armed Forces Pensions](#)’, 1 August 2018.

<sup>78</sup> For further details, see: Ministry of Defence, ‘[Armed Forces Compensation: What You Need to Know](#)’, 2 August 2018.

<sup>79</sup> Ministry of Defence, ‘[Armed Forces Compensation: What You Need to Know](#)’, 2 August 2018.

<sup>80</sup> *ibid.*

<sup>81</sup> Ministry of Defence, ‘[Frequently Asked Questions on the Armed Forces Independence Payment](#)’, 9 April 2018.

from certain benefit caps if in receipt of a GIP or of war pensions scheme payments.<sup>82</sup>

For those veterans in financial hardship, the Royal British Legion offers advice and support services covering debt advice, compensation applications and help with accessing benefits.<sup>83</sup>

## 6. Transition to Civilian Life and Social Isolation

### 6.1 Overview

Another issue often raised in relation to the difficulties faced by veterans is that of the transition to civilian life upon leaving the armed forces. Research from the SSAFA found that:

More than three in ten of the veterans polled admitted (31%) they have just one or no close friends and would be unlikely to discuss any feelings of loneliness with a family member or close friend (53%), suggesting a limited support network for these veterans.

The most common reasons veterans gave for feeling lonely and isolated included: losing touch with friends in the Armed Forces (41%), physical or mental health issues (33%), and struggling to relate to anyone in civilian life (23%).<sup>84</sup>

Based on these factors, 27% of veterans admitted to having had suicidal thoughts, and 34% spoke of being “overwhelmed” by negative feelings.

In addition, the army has listed a range of emotions often felt by personnel around the time they leave service, including loss of purpose and identity, feelings of loss for their military career and military family, and fears regarding civilian life and their future prospects.<sup>85</sup>

### 6.2 Statement in Armed Forces Covenant

The full version of the armed forces covenant specifically addresses the transition to civilian life, stating that a range of services and support should be provided (many of which, such as employment and housing support, have been referred to earlier in this briefing):

Support should be available for all service personnel in order to assist their transition from service to civilian life. Provision should include

<sup>82</sup> House of Commons Library, [Support for UK Veterans](#), 31 October 2018, p 50.

<sup>83</sup> Royal British Legion, [‘Finances’](#), accessed 6 November 2018.

<sup>84</sup> SSAFA, [‘41 Percent of Veterans Have Felt Isolated, Research Reveals’](#), 23 October 2017.

<sup>85</sup> Army, [Transition to Civilian Life: Information Sheet 2: ‘The Emotional Pathway’](#), accessed 6 November 2017.

training, education, appropriate healthcare referral and job-finding preparation and assistance. It should also include information, advice and guidance on such matters as housing and financial management, and the availability of support from government departments and the voluntary and community sector. The level of support will be dependent upon individual circumstances.<sup>86</sup>

### 6.3 Transition Review Led by Lord Ashcroft

As a result of the concerns raised over armed forces personnel's transition to civilian life, in September 2012 Lord Ashcroft was appointed by the Government as the Special Representative on Veterans' Transition.<sup>87</sup> Subsequently, Lord Ashcroft published a number of reports as part of a veterans' transition review, with the first published in 2014 and the most recent (the third annual follow-up report) published in 2017. In the latter report, Lord Ashcroft generally praised the work done to improve transition since the publication of the first report but noted two areas which still needed improvement, namely the: "lack of support for transition at unit level, and the need for greater exposure to civilian workplaces for service personnel and those in transition".<sup>88</sup>

On 15 May 2018, Lord Ashcroft sent Prime Minister Theresa May a letter announcing he was stepping down from the position, as he felt his work on the subject was complete.<sup>89</sup> Regarding the progress made on aiding the transition of service personnel to civilian life, he listed several positive achievements:

An enormous amount has been achieved, not only by central government departments but in the devolved administrations, local authorities, the NHS, the charity sector and indeed the armed forces themselves. To highlight just a few of the many examples: the importance of a good transition is more widely recognised at senior levels in the forces and in government; personnel will be encouraged to begin preparing for transition much earlier in their careers; the handover between the defence and civilian health services is much smoother; more work is done to ensure military qualifications and experience can be recognised by civilian employers; the particular needs of veterans and service leavers and better understood by providers of public services; and different part of the charity sector work more effectively together, with initiatives like veterans' gateway, the new single contact centre, to ensure that those who need help can find it quickly.<sup>90</sup>

<sup>86</sup> Ministry of Defence, [Armed Forces Covenant](#), 2011, p 8.

<sup>87</sup> [Veterans' Transition Review website](#), accessed 6 November 2018.

<sup>88</sup> [Veterans' Transition Review: Third Follow-up Report](#), October 2017, p 9.

<sup>89</sup> [Letter from Lord Ashcroft to the Prime Minister, Theresa May, on Veterans' Transition](#), 15 May 2018.

<sup>90</sup> *ibid*, p 1.

He believed that when all the changes had time to take full effect, the experience of service leavers will have improved significantly from when the review began. However, he did highlight two remaining issues. First, that many initiatives operated in “silos” (eg NHS and local authority initiatives) and that best practice should be shared more effectively. And second, the issue of the negative public perception of service leavers.

#### 6.4 Further Resources on Transition Support

In addition to the services highlighted above to aid service personnel’s transition to civilian life (such as the MOD’s Joint Services Housing Advice Office and the career transition partnership), the Government has recently announced a new defence transition service to help those most likely to face difficulties, and has provided further information on the introduction of veteran ID cards:

Providing an extra layer of care for those preparing to leave the military, the new defence transition service will deliver specialist support for serving personnel who are most likely to face challenges as they adjust to civilian life. These individuals will be offered unique solutions to the challenges they face, including help with housing or employment.

To further support the transition to civilian life, the Defence Secretary also announced that new ID cards will be available to military service leavers shortly. The ID cards will initially be given to everyone leaving the armed forces, and will give them instant recognition for their service to the country. Those who have already made the transition to civilian life will be able to apply for an ID card in 2019. The cards will allow easy access to the range of support available from the public and charitable sectors, including registering with their local authority for priority healthcare and housing.<sup>91</sup>

In addition, the Ministry of Defence and the army have produced guides aimed at service leaders. The Ministry of Defence guidance, entitled the *Service Leavers’ Guide*, sets out information on:<sup>92</sup>

- the discharge process;
- resettlement jobs and housing;
- pay, pensions and other benefits; and
- relevant state and service charities (eg veterans gateway, SSAFA, Royal British Legion, etc).

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<sup>91</sup> Ministry of Defence, [‘Defence Secretary Bolsters Support for Armed Forces’](#), 30 September 2018.

<sup>92</sup> Ministry of Defence, [‘Service Leavers’ Guide](#), July 2018.

The information provided by the army is a range of factsheets. These cover subjects such as pensions and personal finances, accommodation guidance, and health and wellbeing.<sup>93</sup> The army also runs a programme entitled 'transition individual planning and personal development' to help those serving prepare for civilian life. Regarding this programme, the army states it is a:

[P]ersonal responsibility that should be undertaken continuously and progressively throughout service life. Transition information and the opportunities that a military career offers, provides a firm foundation for personal planning and development. This will assist you to become more independent, resilient and confident to successfully meet the challenges that you will face in service and subsequently as a civilian.<sup>94</sup>

The army stresses that personnel should commence it as early as possible in their careers, as personnel can never be sure of when they may need to leave service prematurely.

## 7. Additional Links to Support and Information

In addition to the sources referred to above, further information for veterans and service leavers can be found through the following resources:

- [Veterans UK website](#), accessed 6 November 2018 (Government website aimed at veterans).
- [Veterans Gateway website](#), accessed 6 November 2018 (network of organisations supporting the armed forces community, and which is funded by the armed forces covenant).
- Ministry of Defence, [Support for War Veterans](#), 20 September 2018; and [Useful Links for the Service Community](#), 25 July 2018 (links to a number of resources and bodies aimed at supporting current and former armed forces personnel).

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<sup>93</sup> Army, '[Transition to Civilian Life](#)', accessed 6 November 2018.

<sup>94</sup> *ibid.*