



LIFE FORCE

KIRKLEES

**A PRACTICAL GUIDE FOR
WORKING TOGETHER IN
SUPPORT OF OUR VETERANS**



ACKNOWLEDGEMENTS

COMPILED BY

Kirsty Dickinson
Kirklees Citizens Advice

VETERANS' STORIES PROVIDED BY

Jock, Leah, Andy, Cherrilyn, Ian and The Royal British Legion (A Wife's story)

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EDITORIAL GROUP AND CONTRIBUTORS

Cath McGurk
Kirklees Council

Catherine Gordon
Kirklees Council

Chris Lawton
Lifeline Kirklees

Claire Leamy
The Royal British Legion

Colin Phillips
SAMH

Community Covenant Board
Kirklees Council

Councillor David Sheard
Kirklees Council

Councillor Jean Calvert
Kirklees Council

Councillor Jim Dodds
Kirklees Council

Councillor Phil Scott
Kirklees Council

David Morby
Kirklees Council

Dawn Wood
Kirklees Council

Helen Singleton
Ministry of Defence

Jan Ibbotson
Kirklees Council

Jannine Clarke
Kirklees Council

Karen Coleman
Kirklees Council

Kate Gorse-Brightmore
On TRAK

Kirklees Readers Panel
Kirklees Council

Major John Mayo
Ministry of Defence

Mark Ibberson
Army Reserve / Kirklees Council

Mary Foulds
Job Centre Plus

Phil Longworth
Kirklees Council

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FOREWORD

Thank you for reading this important publication. We hope you find it both interesting and informative. It has been produced to help you support our local veterans. A veteran is someone who has worked in the armed forces or has served in the reserve forces, but for whatever reason is no longer serving.

The work behind the publication has been carried out by Kirklees Citizens Advice and is funded by Kirklees Council.

Men and women of the armed forces, who willingly give up their safety and comforts, which many of us take for granted in order to serve our country, deserve our support. People working in our armed forces can often be seen as “different” and we can easily forget that their roots lie in our communities.

For most people, a military profession is a positive experience, a job for life, but for some the transition back to civilian life presents real challenges. It is

therefore essential that we support our local men and women who have been in the armed forces. We need them to know that we are here for them and their families should they need us and that we can put them in touch with organisations that can help with various issues and concerns.

Members of the armed forces and their families deserve our respect, support and fair treatment. Kirklees has historically had a strong relationship with the armed forces. The signing of the Armed Forces Community Covenant in 2012 was another key moment in that relationship. It raises awareness in the local community about the needs of its armed forces community and is a demonstration of the people’s enduring support.

Councillor (Cllr) Jean Calvert, Kirklees Council, Cabinet Member for Communities, champions this work with support from Cllr David Sheard, Cllr Jim Dodds and Cllr Phil Scott.

The aim of the Community Covenant is to encourage charities, local authorities and the public sector, businesses, communities and individuals to work together with the military to offer support to service personnel and their families as well as reservists and veterans.

Many of us will have had a personal experience of the armed forces, whether we were part of it, or had a family member or friend in one of the services.

A number of Kirklees councillors have served in the armed forces, including Cllr Jim Dodds who joined the army in 1962 at the age of 15. He served a total of 35 years in the Royal Signals, learning valuable lessons in terms of behaviour, punctuality, commitment, loyalty, reliability and respect. Cllr Phill Scott also served, in his case with The Duke of Wellingtons regiment after being in the Territorial Army in Northern Ireland. Cllr David Sheard, the Deputy Leader of the Council was also in the armed forces.

The most important lesson they learnt was that they were part of a much bigger team who worked together and supported one another, often in difficult and dangerous situations.

Ex-servicemen and women are proud people who suddenly find themselves alone and without the comradeship they shared in the forces. Getting used to living and being with other people outside this environment can be difficult. Their life goes from being part of a large family that never failed to help in time of crisis, to being cast into the unknown.

This change in surroundings is further complicated by the unknown mental stress our veterans have had to endure during their service, some of which will not surface for years. It is therefore up

to us who know and understand the system to give all the help we can to those who have served us so faithfully in the past.

For many people the term “veteran” refers to elderly men, who have retired from the armed forces, and tend to be seen on Remembrance Day. In fact the definition of veteran applies to young and old as well as women who may have been exposed to exactly the same experiences as their male colleagues.

Many veterans have families who have supported them over the years and lived around the world in different circumstances with them. They too need our support and understanding.

Our Reservists also deserve a mention; these are the men and

women who may be working alongside us in our everyday jobs, and on another day serving in Afghanistan or another part of the world in conflict.

We hope you find this information useful in supporting veterans using your services now and in the future. It includes information on health, housing, education and benefits.

This publication gives only a snapshot of the support available to veteran. We recognise that there may be many other organisations in Kirklees who can help give veterans the information they need. We hope you find this a useful starting point.

Please note the information in this publication was correct to the best of our knowledge at time of print in March 2014.



Councillor David Sheard
Deputy Leader of
Kirklees Council



Councillor Jean Calvert
Cabinet Member for
Communities and
Community Covenant
Champion for Kirklees
Council



Councillor Jim Dodds
Kirklees Council



Councillor Phil Scott
Kirklees Council

1. GENERAL BACKGROUND AND CONTEXT

Life Force has been written for community based support agencies including the voluntary sector, services provided by the NHS, local authorities, GPs and charities, who will often work with armed forces veterans.

The majority of people fare well after leaving the armed forces, suffering no ill effects, entering full time employment and leading meaningful and fulfilling lives. However, for some veterans it is completely overwhelming and for those stressed by combat it can be traumatic and they will need support adjusting to civilian life.

Many people join the armed forces at a young age. They may never have had to deal with what we often take for granted as everyday things – applying for a job, finding housing or even registering with a GP. These new responsibilities can be challenging for some veterans.

Whilst in the armed forces, veterans have a clear chain of command to deal with problems and comrades who can provide support or advice.

Unfortunately, some of the characteristics we have come to associate with service personnel – pride, stoicism and a ‘can do’ attitude – can get in the way of them seeking help when they return to civilian life. Veterans can see asking for support as a sign of weakness, particularly if they’re suffering from a mental health problem.

This guide provides an insight into military culture and identifies some of the issues which veterans and their families may face when they leave the armed forces, particularly engaging with services. It also provides details of organisations who can provide advice and support both to veterans themselves and the community agencies who come into contact with them.

The content has been adapted from the original Life Force booklet, produced by the Scottish Association for Mental Health. This edition has been written by Kirklees Citizens Advice in consultation with Kirklees Council.

Here in Kirklees, organisations including Kirklees Council, the NHS and Job Centre Plus have pledged to support those who need it by signing an Armed Forces Community Covenant.

The Covenant is a voluntary statement of mutual support between a civilian community and its local Armed Forces community.

2. THE ARMED FORCES: REGULAR, RESERVISTS AND VETERANS

The British Armed Forces, officially Her Majesty's Armed Forces, include the Naval Service (including the Royal Navy and Royal Marines), the British Army and the Royal Air Force. This constitutes one of the largest militaries in Europe. These forces are made up of regular and reservist personnel. You can find out more about each of the forces by visiting their websites:

Royal Navy and Royal Marines
www.royalnavy.mod.uk

British Army
www.army.mod.uk

Royal Air Force
www.raf.mod.uk

REGULAR

Regular forces personnel are employed full time and have usually signed long term contracts committing them to regular service. As of 1 September 2013 the UK regular armed forces comprised 157,280 full time trained personnel. Of these, 30,830 were in the naval service, 92,190 were in the army and 35,820 were in the Royal Air Force.¹

RESERVISTS

The reserve forces are made up of both regular and volunteer reservists.

Reservists make up around 14% of the nation's total defence capacity. Regular reservists are former full time members of the armed forces. They may still be eligible for call up for a number of years after their military

service has ended, depending on their age, length of original service and the skills they have.

Volunteer reservists consist mainly of people who have joined directly from the civilian community and have jobs and careers outside the military. They are called out to supplement the Regular Forces whenever operational demands require it.

Being a member of the volunteer reserve requires training two to three weekends per year. In addition, every year these personnel are required to attend 15 continuous training days and complete tests to ensure that they reach set standards in a number of subjects. They are also liable to be called up for compulsory operational tours when necessary. They therefore need the commitment and support of their employers.

There are currently around 36,000 volunteer reservists in the UK and approximately 23,000 of these are ready for mobilisation. The breakdown between each service is 1,900 in the Royal Navy Reserves and the Royal Marine Reserves, 20,000 in the Territorial Army (TA), and 1,180 in the Royal Auxiliary Air Force.²

Under the Future Reserves 2020 project, the intention is to raise the trained strength of the Royal Navy Reserves and the Royal Marine Reserves to 3,100, the TA to 30,000 and the Royal Auxiliary Air Force to

1,800, so these numbers are likely to increase in the future.

Employers can find out more about how they can support reservists in their organisation by visiting the Supporting Britain's Reservists and Employers (SaBRE) website: www.sabre.mod.uk

VETERANS AND THE VETERAN COMMUNITY

A veteran is someone who has spent a proportion of their life serving their country in the armed forces as a regular or reserve. This includes National Servicemen, former Polish forces under British command and Merchant Mariners who have seen duty in military operations (e.g. the Falklands Conflict and Northern Ireland). More recently, it also includes veterans who have seen service in both Gulf Wars, the Balkans, Afghanistan and Iraq.

The families of those who have served also have their own unique experiences. In recognition of this, the term 'Veterans community' refers to veterans together with their partners, widows/widowers and their dependants.

1 in 12 (8%) Kirklees adults have served in the Armed Forces at some time.³

1. Defence Analytical Services and Advice, Ministry of Defence UK Armed Forces Monthly Personnel Report, 1 Sept 2013

2. These figures are as supplied by the Ministry of Defence and are available on the SaBRE website: www.sabre.mod.uk

3. NHS Kirklees and Kirklees Council. Current Living in Kirklees (CLIK) Survey; 2012 www.kirklees.gov.uk/you-kmc/partners/health/jsna/pdf/KirkleesJSNADatasourcedescriptions.pdf. Profile and Needs of the Ex-service Community 2005-2020 Summary and Conclusions of the Welfare Needs Research Programme, the Royal British Legion, 2006

3. WORKING WITH VETERANS

There are a number of specialist services for veterans; however research shows that non-veteran agencies provide the majority of support for people after their service has ended.

The Royal British Legion identified that 52% of the adult ex-service community had received help or advice in a year from state or charitable agencies, including health professionals, Citizens Advice Bureaux, social workers, housing departments and jobcentres.⁴

These agencies are unlikely to have the same level of understanding of life in the armed forces as specialist services do, and this can sometimes be a barrier in supporting veterans. Having at least a basic understanding of the forces experience will be helpful to any agency and/or worker likely to encounter veterans, allowing them to build better relationships and deliver improved support. Veterans are much more likely to trust workers whom they feel understand, or at least seek to understand, their military service and the effect this may have had on them and their families.

Veterans are different and unique and will have individual accounts, both positive and negative, as to how serving their country has affected their lives and the lives of others. It is important not to generalise or make assumptions about how veterans perceive or engage with support from agencies.

Most veterans respect clear and honest communications and want to be supported by competent individuals. If you don't understand, be honest and say so; it will not stop you providing help or the veteran receiving it.

Later sections in this booklet give more detailed information about the military experience; however, this section is intended as a brief guide to help facilitate positive engagement to improve the outcomes for veterans and their families.

THE LANGUAGE OF THE ARMED FORCES

Those in the armed forces will pick up military abbreviations, slang and jargon during the course of their service. Veterans will often continue to use these terms when they return to civilian life, many of which will be unfamiliar to those without a military background.

Important pieces of information about the individual and their service career may be gathered by breaking down some of the jargon in discussions with the veteran. Demonstrating an interest in finding out more about this language and what it means can also promote positive engagement and help build relationships and trust.

'They have fought our wars, now we must fight their battles'

PRACTICAL QUESTIONS TO ASK VETERANS

By asking specific questions about a veteran's service career, agencies can find out useful information which may help when providing support. This information can be especially useful when considering which specialist agencies, such as veterans' charities, may be able to provide further support to the individual.

The questions below are often a good start:

- What was their service number?
- What dates did they join and leave the service?
- What operations were they deployed on?
- Were they Regular or Reservist?
- Did they attend a Department of Community Mental Health (DCMH)?
- What was their reason for discharge?
- What agencies (veterans and non-veterans) have they engaged with?
- Do they have a copy of their medical documents?
- Have they been injured due to service in the armed forces?

FIND OUT WHAT IS AVAILABLE

Knowledge of what is available both locally and nationally for veterans will help to provide a co-ordinated response. There is a large network of veterans agencies within the UK who provide different types and forms of support, including welfare, social and healthcare.

This booklet is designed to help agencies find out what support is available in Kirklees.

A support directory for Veterans and organisations in Kirklees can be found at:
www.kirklees.gov.uk/leavingtheforces

Correct signposting and effective referral channels are vital in supporting veterans and their families.

4. LIFE IN THE ARMED FORCES

REASONS FOR JOINING

Many people join the armed forces as young adults, especially those from disadvantaged backgrounds who see the forces as a favourable life pathway. Many recruits do not possess high levels of academic qualifications when they join but the military offers them a career and a progressive education not matched by any other employer.

There are many social and economic reasons for joining the armed forces, including personal improvement by learning new skills and job security by gaining full time employment. There are opportunities to see different parts of the world and the chance for people to do something different with their life.

Whilst television advertising and poster campaigns play their part, many new recruits will have a life in the forces recommended to them by a family member or friend who is a serving member or a veteran. It is not uncommon for people to join the forces to escape difficult home environments.

THE REGIME

Military training promotes strict conformity to high standards of behaviour in terms of punctuality, commitment, courage, loyalty, respect orderliness, cleanliness and obedience. These standards are what other people's lives may depend on in times of combat.

Some veterans can find the transition back into society difficult because those around them follow different guidelines and do not exhibit the same behavioural standards which they have learned in the forces. For example, some veterans can find it stressful when they are kept waiting or when things do not run according to plan.

COMRADESHIP

Comradeship is very important for most veterans. It is seen as deeper than an ordinary friendship, because of the shared experiences, shared hardships and the sense of dependency for one's life on others.

The legacy of military service can often be seen in a veteran's strong identification with other veterans, which brings with it a sense of personal identity and value, as well as affording a degree of security or protection.

Surviving combat and shared hardship are at the root of veterans' pride in the service, of having 'taken part' and being 'part of the family'. This can cause mistrust of others who are not part of this 'group'.

For some veterans, adjustment back into society can be problematic because they don't have the support of their comrades and struggle to form similar bonds with those who don't share their military background.

Many have become institutionalised

and less self reliant whereas others remain proud and defiant and do not want to be seen as accepting 'charity'. This can lead to difficulties in resettlement and acceptance of the need for appropriate support.

SALARY & ACCOMMODATION

Those in the armed forces will receive a salary which is based on what they would be paid for carrying out a similar role in civilian life. However, this is often supplemented with additional pay to compensate for the risks associated with operational duties and time away from your family.

The military provides accommodation for all personnel for which they pay a much reduced rate of rent. There are also numerous other bonuses and subsidies on common items such as food and travel, which can mean that their salaries go a lot further than they would if they were earning the same amount in civilian life.

RESERVISTS

Becoming a reservists means you have made a commitment to your unit, including being willing to attend training and to be mobilised if necessary. However, many also have a commitment to their civilian employer and it can sometimes be difficult to balance the two.

All types of people use their spare time to become reservists in the

'The team is more important than the individual'

JOCKS STORY

armed forces. Being a reserve can be as rewarding as it is challenging. They are trained and deployed alongside the regular forces and are seen as a valuable part of the armed forces family.

Reservists are paid for every training session that they attend, travel to their unit and food whilst on duty is subsidised and their kit is free.

Reservists can bring lots of benefits

to their employers but there is often a lack of understanding about the role and the support available to employers. More information can be found at: www.sabre.mod.uk

JOCK'S STORY

Jock joined the infantry in 1970 and saw service in different theatres including Northern Ireland and was later transferred to the Logistics Corp. He saw service again in different theatres including Europe, Africa and NI, in particular in Bomb Disposal. He retired in 1993 as a Regimental Sergeant Major.

"The main difference between military and civilians is that the value sets for both are different. In the military the mindset is structured through training and discipline and depends a lot on being part of and working in a team with the attitude that you will not let your comrades down. The team is more important than the individual.

In civilian life although there is training and team work it is not as disciplined nor structured and the individual, is the most important part and letting the team down doesn't seem to matter as much, the emphasis being more on 'I'm alright Jack'.

Another difference is that in the military you have a common goal which is the objective for all to

achieve and as part of the "family" you want it for yourself and the rest of the family equally. Whereas in civilian life although you have a common objective the over-riding factor is what it brings to you personally.

I feel that because of the values which are bred through being in the military it is extremely difficult to accept that it is not considered being a failure if you cannot cope with every day events. In my own case I was being overwhelmed with work because I refused to say no and allowed the bosses to keep piling work on me and because I didn't want to let anybody down (the team) nor be seen like a failure I just tried to carry on until I eventually realized (through the help I received) that it was okay to admit that I was under pressure not because I couldn't do the job but it was by refusing to say no and allowing others to pile on the pressure my life was being taken over by work which resulted in no time for anything other than work."

'I thought because I was discharged from the army that no one would care and help with my problems. I was totally wrong'

ANDY'S STORY, P19

LEAH'S STORY

Leah, 24, has been in the Territorial Army for almost a year and is undergoing her initial training. In July she applied for a job but took the decision to leave her TA commitments from her CV until she got to the interview stage. At the interview she was able to explain about her TA commitments and although the employer had little knowledge about this they were supportive and she was offered the job.

An employment contract was sent out and it was a condition of the job that the employee could not partake in any other paid work. Leah contacted the employer to question this clause as she had made them aware of her TA commitments during her interview. The employer would not back down and asked her if she would be willing to give up the TA. When her response was no the job offer was retracted.

Fortunately she was able to keep her job with her current employer even though a request for a reference had been sent out before the new contract had been signed. This has caused upset to Leah and had damaged the working relationships she had built up with this employer.

5. DISCHARGE: LEAVING THE FORCES

The number of service leavers from the UK regular forces in 2013 was 23,410.⁵

People leaving the regular armed forces can be grouped into three categories:

- Normal service leavers
- Medically discharged service leavers
- Early service leavers

NORMAL SERVICE LEAVERS

Normal service leavers are discharged on completion of their engagement, having submitted their notice to leave or having been given notice of discharge under redundancy.

For normal service leavers entitlement to resettlement support to assist with their return to civilian life can be sought any time up to two years before the date of discharge. This includes civilian careers guidance, housing advice and more.

MEDICALLY DISCHARGED SERVICE LEAVERS

This group of leavers will have developed physical or mental health problems caused by, or made worse by, their service to the extent that it has affected their future in the services.

All service leavers within this group will have had intervention in service and attended an occupational medical board which makes the decision about them remaining in or leaving the service. Some service leavers will be happy with the decision taken, others will not. Some may feel they have been let down by their unit, the service, medical services or the government. Those who are unhappy with the decision may struggle to trust community support agencies when they return to civilian life and can sometimes avoid or delay seeking their help.

EARLY SERVICE LEAVERS

Early service leavers are either discharged compulsorily (as a result of alcohol/drug misuse, criminal acts, inefficiency, temperamental unsuitability – not 'fitting in') or leave at their own request, having completed less than four years' service. Those who are discharged compulsorily lose their entitlement to resettlement provision.

Early service leavers leaving at their own request have the same discharge procedures as normal service leavers. Personnel being discharged prematurely often leave at extremely short notice without having the opportunity to plan their transition to civilian life.

This is especially true for those being compulsorily discharged and those reservists being demobilised post operations. Consequently this may have an impact on both the individual and their family.

RESERVISTS

Those in the volunteer reserve forces (Territorial Army, Royal Naval Reserves, Royal Auxiliary Air Force and Royal Marine Reserves) will have signed up for a set period of time when they joined the forces. However, they can leave voluntarily at any time unless they have been mobilised and are on full time active service.

6. MEDICAL SERVICES IN THE ARMED FORCES

DEFENCE MEDICAL SERVICES (DMS)

The DMS is responsible for providing healthcare to approximately 258,000 people, including service personnel serving in the UK and overseas, those at sea, and family dependants of service personnel and entitled civilians. The DMS encompasses all of the medical, dental, nursing, allied health professional, paramedical and support personnel, including civilian staff, employed by the Royal Navy, the British Army, the Royal Air Force and supporting units.

MEDICAL BOARDS

Medical boards are groups of military health professionals who conduct formal medical assessments in order to determine whether someone is fit enough, or likely to become so, to continue serving in the Armed Forces. Where a decision is taken to medically discharge or retire a person, the board will provide advice on how to find further treatment after leaving and the support available from ex-service charities. It will also provide forms of consent to assist with this process.

Consent forms are used to record a preference for passing individuals' personal contact details to an ex-service charity of their choice. The information on this form is

used solely to enable the charity to make contact for the purposes of providing help or advice. When an individual is medically discharged, a resettlement officer will have been contacted to plan resettlement actions. All individuals who are medically discharged are entitled to resettlement provision to support their return to civilian life.

MEDICAL DOCUMENTS

Those leaving the armed forces after having a medical examination are encouraged to request a copy of medical documents which can be given to a GP. The GP can then, if necessary, request the full medical records of his or her patient relating to their period of service in the armed forces from the Ministry of Defence.

This system relies on the veteran presenting the GP with the medical documents. This may be problematic as veterans may not present until there is a problem by which time the documents may have gone astray.

GPs seeking advice on how to request medical records can contact the records departments using the numbers below:

Royal Navy and Royal Marines:
02392 768 063

British Army: 08456 009 663

Royal Air Force: 01494 497 410

Medical documents are also automatically forwarded to the Service Personnel and Veterans Agency (SPVA) upon discharge which determines eligibility for the type of pension/compensation that can be claimed (see Page 18).

DEPARTMENTS OF COMMUNITY MENTAL HEALTH (DCMH)

The Defence Medical Service runs 15 military departments of community mental health (DCMHs) located in large military centres across the UK, as well as centres overseas. DCMHs are staffed by psychiatrists, mental health nurses, clinical psychologists and mental health social workers.

The aim is to treat personnel with mental health needs at their unit medical centre and, with the patient's permission, to involve their GP and senior officers in managing their condition. A wide range of psychiatric and psychological treatments are available, including medication, psychological therapies and a change of environment where appropriate.

Inpatient care, when necessary, is provided by the NHS, contracted by the Ministry of Defence. A close relationship is kept between local DCMHs and the NHS to make sure inpatient care is the best it can be.

The nearest department of community mental health is at:

Duchess of Kent Barracks
Horne Road
Catterick Garrison
North Yorkshire
DL9 4DF

Telephone: 01748 873058

DEFENCE MENTAL HEALTH SOCIAL WORK SERVICE (DMHSWS)

Service personnel likely to be medically discharged with a mental health related problem are referred to the Defence Mental Health Social Work Service (DMHSWS). This tri-service provision is accessed through the 15 DCMHs. Mental health social workers support service personnel and their families throughout the medical discharge process and for a period afterwards.

The DMHSWS links with community agencies to secure housing, health and social work services. They also focus on financial support available via military pension provision and benefits entitlement. In addition, they pursue the availability of resettlement training to help prepare the veteran for a civilian career and, in some cases, will seek deferment of this.

TRAUMA RISK MANAGEMENT (TRiM)

Trauma risk management (TRiM) is a military model of peer group mentoring and support. It is not a medical process or therapy and is designed to identify service personnel at risk after traumatic incidents.

Service personnel are often reluctant to talk to strangers when they are in difficulty and often it is their colleagues who they turn to for help. For this reason, TRiM is delivered by trained people already in the individual's unit.

Those who are identified as being at risk after an event are invited to take part in an informal interview which establishes how they are coping and whether they require further support.

TRiM aims to empower non-medical staff to identify people who may have been affected by traumatic events in order that their peers and managers can provide appropriate support or, where required, refer them on for specialist help. TRiM is intended to reduce the stigma associated with mental health problems. The model is now used in all of Her Majesty's Armed Forces.

More information about TRiM can be found on the Army website:

www.army.mod.uk/welfare-support/23245.aspx

RESERVES MENTAL HEALTH PROGRAMME (RMHP)

The RMHP offers assessment and, where appropriate, out-patient treatment by Defence Medical Service (DMS) personnel to eligible Reservists for mental health problems associated with operational deployment.

Referrals into the programme are primarily from the individual's GP and eligibility will be established as part of the referral process. RMHP staff will make arrangements for the patient's UK travel and accommodation.

The contact details for enquiries and referrals are:

RMHP
Reservists Training
and Mobilisation Centre
Chetwynd Barracks
Chilwell
Nottingham
NG9 5HA

Telephone: 0800 0326 258

Website:
www.army.mod.uk/rtmc/rmhp.htm

7. RESETTLEMENT: EMPLOYMENT, FINANCE AND HOUSING

The resettlement process refers to making a successful transition from military to civilian life. Each branch of the armed forces offers resettlement support to serving personnel. It is a phased process including advice, information and training, which usually begins months in advance of a person's scheduled final day. It includes advice to support decisions about post service housing, education, finances and employment.

The armed forces work with a number of agencies who specialise in the various aspects of resettlement to provide advice to those who are scheduled to leave. However, these agencies can also be contacted directly by serving personnel or veterans themselves. In this section, you will find contact details for some of these agencies.

EMPLOYMENT

There are a number of organisations who can provide support to veterans seeking employment. Some examples of these are included below:

The Career Transition Partnership (CTP)

The Career Transition Partnership (CTP) delivers free resettlement services to all ranks of Her Majesty's Armed Forces to make the transition from military to civilian life as smooth and successful as possible. They teach service leavers

the skills they need to produce a CV, learn interview techniques, research the employment market and apply for jobs.

Telephone: 0207 469 6661
Website: www.ctp.org.uk/ctp

The Regular Forces Employment Association (RFEA)

RFEA provides support in assisting servicemen and women of all ranks leaving the armed forces to find employment from the day of discharge onwards. It supports servicemen and women in the career planning process by providing advice and guidance. RFEA works closely with the Career Transition Partnership.

Leeds office: 0113 246 9065
Sheffield office: 01302 770996
Website: www.rfea.org.uk

Jobcentre Plus

Your local Jobcentre Plus office offers a range of services for Jobseekers looking for work including:

- Advice on Job vacancies
- Registration for Universal Jobmatch
- Advice and support on Training Opportunities.
- Signposting to local Work Clubs
- Support with Work Experience and Volunteering Opportunities.

Local Offices:

Huddersfield Jobcentre Plus,
Castle House, Market Street

Dewsbury Jobcentre Plus,
Crown Buildings, Rishworth Road

Batley Jobcentre Plus,
26 Wellington Street

Spenn Valley Jobcentre,
411 Bradford Road, Liversedge

(All offices are open from 9am to 5pm, Monday to Friday with late opening on Wednesday from 10am. They can be contacted direct on 0845 604 3719)

Latest Job vacancies can be viewed on: www.gov.uk/jobsearch

Claims for Welfare Benefits can be made direct on:

Website: www.gov.uk/jobseekers-allowance/how-to-claim
Telephone: 0800 055 6688
Textphone: 0800 023 4888

Lines are available from Monday to Friday 8am to 6pm.

Supporting Britain's Reservists and Employers (SaBRE)

SaBRE is a campaign created by the Ministry of Defence to provide employers and reservists with all the information, help and advice they need regarding the employment of reservists, including reservists' training obligations and employers' legal rights and responsibilities.

Telephone: 0800 389 5459
Website: www.sabre.mod.uk

'I was eager to find somewhere to live and settle into a job back in 'Civvy Street' but I found the whole process difficult and felt very low'

CHERRILYN'S STORY, P22

Local authorities

All local authorities across the region provide a range of employment related support services to individuals seeking work.

The type of support available includes:

- Financial assistance grants
- Nationally accredited information, advice and guidance
- CV, application form and interview technique assistance
- Matching to local vacancies
- Self employment guidance
- Jobs fairs and recruitment events
- Joint working with Jobcentre Plus to maximise opportunities for local people
- Joint working with ex-service charities such as the Royal British Legion, SSAFA, SaBRE and the Career Transition Partnership

For more information about local services please visit:

www.kirklees.gov.uk/leavingtheforces

MANAGING FINANCES

The move to civilian life away from the more structured armed forces community may prove difficult for some veterans who are now managing new finances within different and often complicated structures.

On discharge veterans may face a situation where they need to deal

with issues like accommodation and utility costs and perhaps applying for benefits for the first time in their lives.

The wait for financial support post discharge is a potentially vulnerable time for some veterans and their families. Proud veterans trained not to show weakness may not be assertive in highlighting financial issues, thus lengthening the scale and impact of the problem.

Veterans may encounter significant difficulty with budgeting and money management, which can put them at risk of being seriously affected by debt. If this is the case please refer them to the following:

Kirklees Citizens Advice

Kirklees Citizens Advice provides free, independent, confidential and impartial advice to everyone on their rights and responsibilities on a wide range of issues including benefits, debt, employment, housing, relationships, immigration and much more.

Drop in services are available 9.30am – 3.00pm on Monday, Tuesday, Thursday and Friday at:

Standard House, Half Moon Street, Huddersfield, HD1 2JF

Empire House, Wakefield Old Road, Dewsbury, WF12 8DJ

Telephone Advice Line:
0844 8487970

Website: www.citizensadvice.org.uk/kirkleescab

Adviceguide offers self help information on a range of issues:
www.adviceguide.org.uk

Money Advice Service (MAS)

The Money Advice Service helps people manage their money by offering a free and impartial advice service. They also work in partnership with other organisations to help people make the most of their money. This is an independent service, set up by government.

Telephone: 0300 500 5000

Email: enquiries@moneyadviceservice.org.uk

Website:
www.moneyadviceservice.org.uk

COMPENSATION FOR INJURY/SERVICE PENSION

If an individual has been injured due to their service in the armed forces they may be entitled to compensation. There are two schemes of compensation – the War Disablement Pension (WDP) under the War Pension Scheme (WPS) and the Armed Forces Compensation Scheme.

If you think that an individual may be entitled to compensation, refer them to the Veterans Welfare Service (VWS), which is part of the Service Personnel and Veterans Agency (SPVA).

7. RESETTLEMENT: EMPLOYMENT, FINANCE AND HOUSING CONTINUED

If the individual is in receipt of a WDP and there has been significant deterioration to their injury, they should also be referred to the SPVA/VWS (details below).

The Service Personnel and Veterans Agency (SPVA) / Veterans Welfare Service (VWS)

The Service Personnel and Veterans Agency (SPVA) is aimed at improving pensions, welfare and support to members of the armed forces and veterans.

The responsibility for all service pension and compensation provision falls under the direct control of the SPVA. As part of the resettlement process service leavers will have received a service leaver's pack before they were scheduled to leave. This pack contains information about service pensions, support available from the Veterans Welfare Service (VWS) and supporting charities.

The Veterans Welfare Service (VWS) gives support to veterans and their dependents who are eligible to claim for the SPVA pension and compensation schemes. Help and guidance can be given through either telephone contact or a dedicated visiting service via a national network of welfare managers. Support can include:

- Help with applying for the War Pension Scheme (WPS) and the Armed Forces Compensation Scheme (AFCS)

- Help with applying for the Armed Forces Independence Payment (AFIP)
- Help with applying for any armed forces pension to which they may be entitled
- Information and advice about benefits available through the Department for Work and Pensions (DWP) and help with applications for them
- Referrals to social services, local authorities, ex-service organisations or other voluntary organisations

Both the SPVA and VWS can be contacted using the details below:

Free helpline: 0800 169 2277

Email: veterans.help@spva.gsi.gov.uk

Website: www.veterans-uk.info

For initial service pensions enquiries you should call the Joint Personnel Administration Centre (JPAC) on 0800 085 3600

More information about Pensions for Veterans can be found overleaf.

HOUSING

The military are required to provide suitable accommodation for serving personnel to allow its members to move as and when they are required to do so. The Ministry of Defence provides accommodation to many of its personnel. Service Family Accommodation (SFA) accounts for 47,000 family homes and Single Living Accommodation (SLA)

provides 112,000 single living spaces.⁶ Those leaving the forces may struggle to adjust to finding accommodation for themselves and may need support from the agencies below when they return to civilian life.

Joint Service Housing Advice Office (JSHAO)

The role of the Joint Service Housing Advice Office (JSHAO) is to provide specialist housing information and advice to encourage service personnel (and their families) to consider their civilian housing options and to assist them in their transition to civilian life. They also support ex-service personnel who are still in Service Families Accommodation to find alternative civilian accommodation.

Telephone: 01980 618 925

Website: www.gov.uk/housing-for-service-personnel-and-families

Soldiers, Sailors, Airmen and Families Association (SSAFA) Housing Advice Service

SSAFA offer advice and assistance to a range of veterans, for example disabled ex-service people and their spouses capable of independent living, separated or estranged families looking for temporary supported accommodation, the homeless and many others.

Telephone: 0845 241 7141

Website: www.ssafa.org.uk/how-we-help/housing/

ANDY'S STORY

Andy is 22 years old. He joined the army and successfully completed his initial training.

On completion of training he was involved in ceremonial duties in London with his regiment.

Unfortunately, his next posting was not so happy. An incident led to disciplinary proceedings and he was administratively discharged immediately from the army, without any resettlement support. He had already incurred heavy debts and he moved back to live with his mother.

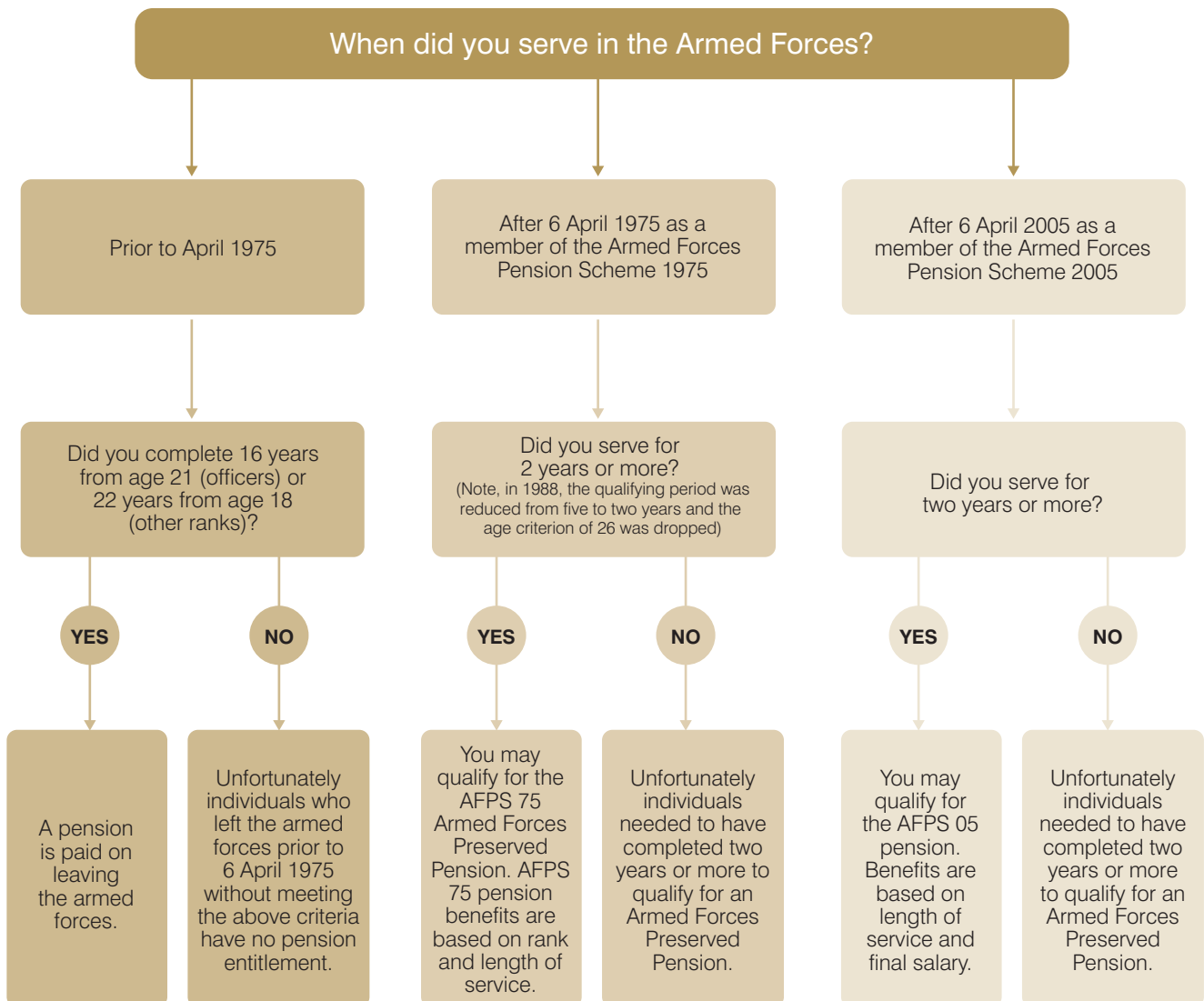
Initially, Andy had no real focus on what type of employment he was seeking and had not registered with Jobcentre Plus. Jobcentre Plus and the Finchale College Early Service Leavers pilot scheme (page 13) helped Andy to address his debt issues and to focus on his strengths and transferrable skills. He already had distribution and warehousing skills and he began to direct his efforts into this, with the addition of a forklift licence that was provided as part of the support programme.

Everything came to fruition when he was offered an apprenticeship with Trackwork at the National Railway Museum, Shildon. His debt has also been re-assigned and he is gradually resolving his problems.

Andy said, "I thought because I was discharged from the army that no one would care and help with my problems. I was totally wrong."

7. RESETTLEMENT: EMPLOYMENT, FINANCE AND HOUSING CONTINUED

Pensions for veterans



Preserved pensions have to be claimed at age 60 or at age 65 if your service began after 5 April 2006.

This flowchart isn't intended to give definitive answers but can be used as a guide. For help and information on your Armed Forces Pension please call the Service Personnel and Veterans Agency (SPVA) on 0800 085 3600 or visit the website: www.gov.uk/pensions-and-compensation-for-veterans#pensions

SPACES (Single Persons Accommodation Centre for Ex-Services)

The SPACES project, based within The Beacon at Catterick Garrison, North Yorkshire, provides accommodation placements across the country for single personnel being discharged from all three services. SPACES works by identifying servicemen and women who are about to leave, for whatever reason, and have no permanent address to go to.

The project can quickly put them in touch with voluntary organisations, local authority housing officers and housing associations in the area they intend to move to.

Telephone: 01748 833797 or 01748 872940 or 01748 830191

Email: spaces@riverside.org.uk

Website: www.spaces.org.uk

Social housing

All veterans can apply for social housing with any local authority. Veterans may receive further priority when seeking housing if they are suffering an injury or disability which is attributable to their service.

Those who have recently ceased or will soon cease to be entitled to reside in Ministry of Defence (MOD) accommodation, following the death of a spouse or civil partner who was serving in the regular forces and whose death was attributable to that service, are also

entitled to apply for social housing.

Veterans no longer need to demonstrate a connection to the local authority area where they wish to live when applying for housing, providing their housing application is made within five years of their service ending. This also applies to reservists injured in the course of duty and those who are leaving MOD accommodation after having lost their spouse.

HOMELESSNESS AND VULNERABILITY

Single servicemen are particularly vulnerable on discharge because they may not have anywhere to go and can become homeless. They might go and stay with relatives or friends but very often this becomes an unsatisfactory arrangement and they can then fall into the cycle of having no job and no house. These difficulties can be compounded if the veteran is returning to an area of high unemployment.

A significant number of formerly homeless ex-service personnel feel that social isolation was one of the main causes of their homelessness. For some, loneliness is a defining feature of everyday life.

In the military population those with mental health problems are more likely to leave the service prematurely and are more at risk of becoming homeless.

Specific vulnerabilities linked to life

in the forces may include:

- Those that were derived from childhood or adolescence and carried into adulthood
- Difficulties that originated during service, such as the onset of substance misuse or mental health problems
- Problems in coping with the transition back into civilian life
- Experiences which occurred later after return to civilian life, including relationship difficulties, financial problems and unemployment

Service personnel experiencing homelessness may consider themselves better equipped to endure and are less fearful of the hardships of street life. They may be less inclined to seek or accept help. These factors, together with their greater propensity to drink heavily, combine to make them more susceptible to sustained or repeat homelessness.

Veterans Aid

Veterans Aid is the leading charity for homeless veterans in the UK. It can provide direct and immediate help to vulnerable veterans with hostel accommodation, financial assistance, meal vouchers and clothing, advice and advocacy.

Telephone: 0800 012 6867 or 0207 828 2468

Website: www.veterans-aid.net

7. RESETTLEMENT: EMPLOYMENT, FINANCE AND HOUSING CONTINUED

CHERRILYN'S STORY

Cherrilyn, 35, was in the Army employed as a Chef for the Royal Logistic Corps from September 1998 until August 2010. She returned to Huddersfield in November 2010 as this was the area in which she grew up and went to stay with her aunt temporarily but things didn't work out.

Cherrilyn was eager to find somewhere to live and settle into a job back in 'Civvy Street' but she found the whole process difficult and felt very low. When she requested help for housing she was told that she had 'made herself homeless' therefore she was not a priority. Cherrilyn ended up renting privately using her savings to help pay the rent of £800/month.

Fortunately during this time Cherrilyn felt strong enough to challenge some of these attitudes and decisions and contacted 2 of her local councillors and her MP for advice.

She was then put in touch with the Housing Solutions Service who were able to help her and in June 2013 she moved into Council accommodation saving £400/month and giving more space for her young daughter.

Cherrilyn eventually got the help she needed although she felt the information given to her during the resettlement process was limited. During her early days back in Civvy Street she also felt the council had no idea how to help her. Cherrilyn is now happily settled in North Kirklees with her partner and daughter but with no savings remaining.

8. VETERANS' HEALTH: ISSUES AND CONCERNS

The majority of veterans leave the forces with good physical and mental health, however, some can experience illnesses linked to their service. It can be months or years after a person has left the armed forces before symptoms appear for certain conditions, particularly in relation to mental health.

In health services, clinicians will not automatically have any way of knowing that their patient has served in the armed forces, let alone that his or her condition may be related to their period of service. This can create issues, as knowing about a service background can not only help with finding the most appropriate care but also ensures that an individual doesn't lose out on their entitlement to priority treatment if a condition is linked to their time in the forces.

Community agencies may be unaware of the relevance of asking whether an individual presenting for support is a veteran and therefore be less likely to consider the related issues that may exist if they are. Knowing an individual is a veteran can also enable the agency to refer them on to appropriate veterans' charities or support schemes. The questions on page 9 can be useful in finding out more about a person's military background.

This section provides information about some of the mental and physical health issues which veterans can face.

Priority health treatment

Veterans in England (including reservists on operational duties) have priority access to treatment in the NHS for conditions which have been sustained or aggravated in service, unless there is a medical emergency which takes priority. Priority is not given for unrelated conditions.

GPs, when referring a patient who is a veteran to secondary or tertiary care for a condition that, in their clinical opinion, may be related to their armed forces service, should make this clear in the referral (as long as the patient is happy that the referral mentions their veteran status). Suggested wording can be found in the leaflet 'Meeting the Healthcare Needs of Veterans – a guide for GPs', which can be downloaded from:

www.rcgp.org.uk/policy/rcgp-policy-areas/~/_media/Files/Policy/Veterans.ashx

There is also an online training package for GPs and primary care staff, Veterans Health in General Practice, which is available in the GP training section at: www.elearning.rcgp.org.uk

MENTAL HEALTH

One in four people can experience mental health problems in their lives and those who have been in the armed forces are no exception to this. Military veterans are not at

increased risk of mental health issues but they may find it more difficult to ask for help in civilian life.

Her Majesty's Armed Forces have been highly trained to solve issues head on when faced with difficulty or danger. An integral part of the success of this problem solving approach is about working in teams to survive, complete a project or face immediate danger.

This level of team ethos and camaraderie means that an individual would have had a number of colleagues around them who could offer peer support, look out for them and help if they were in difficulty. In civilian life some veterans may find it difficult to ask for help from others, such as health professionals, as they would be seeking help from outside of their team. In some cases, they may not even recognise that they are experiencing difficulties.

Service personnel are exposed to events that others are not and so can be at greater risk of experiencing life threatening incidents. During conflict, service personnel are required to respond rapidly in dangerous situations, to make split second decisions which may save or take a life. When the person is out of danger or out of service, individuals may question themselves about difficult decisions and actions they have taken.

8. VETERANS' HEALTH: ISSUES AND CONCERNS CONTINUED

Research shows that the main problems that veterans face are common mental health disorders such as anxiety, low mood and problems around adjustment to civilian life. The research also tells us that veterans, especially if they have served in combat, are more likely to misuse alcohol. The incident rate for post traumatic stress disorder (PTSD) among veterans is around 5%.

Veterans' mental health problems can have a major impact on family members and peers, as well as creating difficulties for the individual.

Those veterans who suffer from mental health problems can often delay seeking help for many years after they have returned home from active service.

They may become socially isolated and therefore harder for services to reach. If they do decide to seek help, they may find navigating civilian health and support services difficult due to the differences between these services and the support available in the military.

Veterans who experience mental health problems may also be facing other issues such as problems with housing and finances.

Common mental health issues

When people think of veterans' mental health, post traumatic stress disorder (PTSD) is often the first thing that comes to mind and what is most reported in the media. However, it is the more common mental health issues like anxiety and low mood that veterans are most likely to experience. Symptoms to look out for include:

- Continuous low mood or sadness
- Feeling irritable
- Having no motivation
- Sleep difficulties
- Loss of appetite
- Feeling anxious or worried
- Having suicidal thoughts
- Distressing memories and/or nightmares

If the symptoms are left untreated, in a small number of cases the consequences can be tragic. Research has shown that the overall suicide risk for veterans is no greater than it is for the general population. However, the suicide risk for veterans under 24 years old is nearly three times that of the general population, with those of lower ranks proving most vulnerable.⁷ It is not possible to say whether this relates to traumatic or other military related events or pre-enlistment vulnerabilities and experiences.

Post traumatic stress disorder (PTSD)

PTSD is an anxiety disorder caused by very stressful, frightening or distressing events. The incident rates of PTSD for those who have served in combat is 5%, however, the numbers of those exposed to combat has increased since 2011, therefore the volume of veterans with PTSD has also increased. Reservists who have served in combat are at slightly greater risk of experiencing PTSD than those in the regular forces.

It is quite normal for some people to experience flashbacks and stress immediately after a traumatic event. If symptoms persist months after the disturbing event, then they may be experiencing PTSD. Veterans with PTSD will often relive traumatic events through nightmares and flashbacks and they may experience feelings of isolation, irritability and guilt. They may also have problems sleeping.

Mental health impact

Those experiencing mental health problems may find that there are problems in other areas of their lives. Symptoms of mental illness may prevent people from functioning properly and can make activities of daily living difficult. It can also interfere with relationships and cause disharmony and breakdown of marriages and friendships.

'These men have left the conflict, but will the conflict ever leave them?'

IAN'S STORY

Ian presented to the Housing Solutions Service as homeless following a relationship breakdown. He was a recovering alcoholic but when his partner (who he had a son with) told him that she wanted to end the relationship, he started drinking again and had to be removed from the property by the Police.

The Police referred Ian to the Crisis Team as he told them he had taken an overdose and he was then referred to the Home Based Care team for support. The Community Psychiatric Nurse confirmed that Ian had a history of suicide attempts and was at risk of further self harm. Ian had also been diagnosed with PTSD following experiences when serving with the Army in Ireland during the 1980's. Ian has been successfully rehoused in a tenancy with support from Connect Housing.

8. VETERANS' HEALTH: ISSUES AND CONCERNS CONTINUED

Encouraging veterans with mental health issues to accept support can be a significant challenge. Many perceive that they will be misunderstood by civilian health professionals and society. They might then withdraw and suffer in silence. Others frequently feel guilt and shame which leads them to feel unworthy or undeserving of help.

Veterans' barriers to seeking help

In the armed forces there are a number of factors that may contribute to a person's resistance to seeking help for mental health problems.

These factors include concerns about how a serving member will be perceived by the chain of command, including peers and subordinates. In the individual's own mind, those with mental health problems may be associated with weakness and failure, rendering them as an undependable liability.

Talking to a military medical officer (military GP) about such problems may not be an option for fear of being medically downgraded, discharged or scorned by comrades.

Concerns about stigma may therefore prevent those most in need of help seeking support during service. This stigma of mental illness may also be the reason why they are reluctant to seek assistance after leaving.

As they are used to being part of a tight knit team, seeking help from "outside" of the team may be difficult for them.

They are also trained to face dangers and difficulties head on, so they may have the attitude to "just get on with things" and not realise they have an issue.

Reservists' mental health

Reservists who are demobilised after operations may find readjustment difficult which may impact on them and their families. They are returning to civilian life and are surrounded by a peer group who have not shared their operational experiences; this can increase feelings of social isolation.

Research has shown that reservists can be most at risk of combat related psychological injury.

HELP AND SUPPORT - MENTAL HEALTH

Veterans and Reserves Mental Health Programme (VRMPH)

The Veterans and Reserves Mental Health Programme (formerly the Medical Assessment Programme / Reservist Mental Health Programme) provides mental health assessments for veterans and reservists who have concerns about their mental health as a result of their service. The programme is based in Chilwell, Nottingham, and has close links with the department of community mental health based there.

The service offers a full mental health assessment by a consultant psychiatrist with accompanying guidance on care and treatment for the veteran's local clinical team. Referrals to the VRMHP are usually made by the individual's GP; however, self referrals are also accepted.

Freephone helpline: 0800 0326258

Website: www.veterans-uk.info/map/faq.html

Improving Access to Psychological Therapies (IAPT)

The Improving Access to Psychological Therapies (IAPT) programme aims to improve access to evidence based talking therapies in the NHS for people suffering from anxiety and depression disorders.

GPs will be able to offer further information and advice about accessing local IAPT services in your area.

To contact IAPT in Kirklees, telephone: 01484 434625

An IAPT special interest group has produced a positive practice guide for working with veterans which can be downloaded from the IAPT website:

www.iapt.nhs.uk/silo/files/veterans-positive-practice-guide.pdf

Big White Wall

Big White Wall is an online early intervention service for people experiencing emotional distress. It offers free anonymous support 24 hours a day, seven days a week, for serving personnel, veterans and their families. The service combines social networking principles with a choice of clinically informed interventions to improve self management of mental wellbeing.

Website: www.bigwhitewall.com

Combat Stress

Combat Stress are a mental health charity who support veterans, their families and reservists with a wide range of mental health issues. They offer a range of services including:

- 24 hour helpline
- Community outreach teams
- Territorial Army and reserve forces liaison
- Short stay treatment programmes
- Six week PTSD treatment programme
- Wellbeing and rehabilitation programme

Combat Stress 24 hr helpline:
0800 138 1619

General enquiries: 01372 587 000

Email:
contactus@combatstress.co.uk

Website:
www.combatstress.org.uk

ALCOHOL AND DRUG MISUSE

Alcohol plays a large part in the social life associated with the military and is often easily available to those in the armed forces. As a result, some armed forces personnel can develop issues with alcohol misuse.

Many are unaware of the levels of drinking that will take them into the harmful/hazardous category of drinkers and, as such, may not consider themselves as having a problem.

Research is consistently showing that the biggest health issue facing members of the armed forces who have been deployed in combat is the misuse of alcohol, as well as common mental health problems.⁸

This may be a method of coping with distressing thoughts and feelings. Also, for those who have been diagnosed with PTSD, around 35% are thought to have an alcohol misuse problem. Alcohol misuse, although often used as a form of self medication, will make symptoms worse and consequently more difficult to address in terms of interventions.

The charity Combat Stress identifies alcohol misuse as more typical than illicit drug misuse amongst veterans, although younger veterans are more likely to have turned to both alcohol and illicit drugs while older veterans predominantly turn to alcohol alone.⁹

HELP AND SUPPORT – ALCOHOL AND DRUG MISUSE

Lifeline Kirklees and On TRAK

Lifeline Kirklees offers a range of creative recovery services to adults with dependency issues from all illicit substances including Mkat and Steroids, as well as prescribed substances such as benzodiazepines.

On TRAK offers support to adults who are assessed as dependent on alcohol or non-dependent but requiring additional support.

Both On Lifeline Kirklees and On TRAK are confidential services which can be accessed via self-referral or via a referral from other agencies. Individuals accessing the service can expect a holistic assessment focussing on their wider recovery needs as well as substance use, appropriate information on the treatment options available and regular appointments with a key worker to discuss their treatment and recovery plan. Amongst a broad range of treatment and recovery options offered by both services, support includes psychosocial interventions delivered in a group setting or on a 1-1 basis and access to clinical prescribing interventions. Lifeline and On TRAK work proactively across Kirklees, on an outreach basis and in partnership with a range of other recovery focussed services.

8. Fear NT et al, Patterns of drinking in the UK Armed Forces, Kings College, London, 2007

9. Hill, D.M. & Busuttill, W., Dual Diagnosis in service Veterans with Post-Traumatic Stress Disorder and Co-Existing Substance Misuse., Advances in Dual Diagnosis, vol. 1, no. 1, pp. 33-36, 2008

8. VETERANS' HEALTH: ISSUES AND CONCERNS CONTINUED

Lifeline Kirklees (Drug Services)

Huddersfield: 01484 353333

Dewsbury: 01924 438383

On-TRAK (Alcohol Services)

Huddersfield: 01484 437907

Dewsbury: 01924 486170

Kirklees Alcohol Advisory Service (KAAS)

KAAS offers peer support to those with alcohol problems.

Telephone: 07966 306334

Alcoholics Anonymous

Alcoholics Anonymous offers daily abstinence based group work for people suffering with drink problems.

Telephone: 0845 769 7555

Website:

www.alcoholics-anonymous.org.uk

FRANK

Friendly, Confidential drugs advice

Telephone: 0300 13 6600

Text: 82111

Website: www.talktofrank.com

PHYSICAL HEALTH

Veterans can experience physical health issues linked to their service, such as combat related injuries and back problems from carrying heavy equipment.

Seriously injured casualties of combat are generally given initial treatment and stabilised by medical personnel in the theatre of war, then returned to the UK when fit to travel for subsequent treatment. Advances in emergency medicine mean that people with life threatening injuries are now surviving wounds which would have proved fatal in the past. There are an increasing number of veterans with life changing injuries, such as those who have lost a limb, who will require care and support for the rest of their lives.

Other health concerns commonly faced by veterans can include ear, nose and throat (ENT) problems, orthopaedic problems (from carrying heavy kit etc), sleep disorders and chronic pain problems. It is important that veterans are encouraged to see their GP for these and that they mention that their physical health problems may be a result of their service within the armed forces.

HELP AND SUPPORT – PHYSICAL HEALTH

British Limbless Ex Service Men's Association (BLESMA)

BLESMA is a national charity that directly supports Service men and women who have lost limbs and the use of limbs or the loss of eyesight as a result of their service. They also support the dependants and widows of the service personnel that have been affected.

Telephone: 020 8590 1124

Email: headquarters@blesma.org

Website: www.blesma.org

Defence Medical Rehabilitation Centre (DMRC) - Headley Court

The DMRC is a rehabilitation centre for members of the British armed forces who are undergoing recovery from injury or illness. Treatment of amputees and polytrauma patients are now a major part of the DMRC contribution to military healthcare.

Telephone: 01372 378271

Website:

www.headleysurrey.org.uk/hc.htm

Royal Centre for Defence Medicine (RCDM)

The Royal Centre for Defence Medicine (RCDM) provides medical support to military operational deployments. It also provides secondary and specialist care for members of the armed forces.

The RCDM is based at the Queen Elizabeth Hospital Birmingham, with defence personnel fully integrated with NHS staff to treat both military and civilian patients.

Website:
www.uhb.nhs.uk/rcdm.htm

Blind Veterans UK

Blind Veterans UK is the national organisation for blind ex-Armed Forces and National Service personnel and their families. The charity offers practical support and tools to help with independent living as well helping veterans deal with sight loss and relearn vital life skills. Established as St Dunstan's in 1915, Blind Veterans UK has since helped more than 35,000 people.

To become part of Blind Veterans UK supportive community, an individual will need to have undertaken National Service or served in the Armed Forces, and have significant sight loss. It doesn't matter why someone's vision is impaired or when they lost their sight.

Many of their beneficiaries lost their sight years after their service, due to age or illness.

Telephone: 0800 389 7979

Email:
information@blindveterans.org.uk

Website:
www.blindveterans.org.uk

HEALTH AND SOCIAL CARE

The Care Navigation works with adults aged over 18 and offers an advice and signposting service for the client and their carer, whether or not they are eligible for support from the council through Fair Access to Care.

If they are eligible for support from the council, they will work with an assessor to; complete their assessment, identify their personal budget and create a support plan highlighting the outcomes they wish to achieve. This support plan will then be shared with the Care Navigation team.

The Care Navigation team will then help the individual and their carer to find the support identified in their support plan to help them maintain and maximise their independence, choice and control regarding their support.

Support they offer:

- have local knowledge of groups, organisations, suppliers and services to give a more personal service
- have knowledge and experience of direct payments, community support and voluntary organisations
- support individuals to develop a personalised package of support to enhance their quality of life
- build support packages which are new and innovative and allow individuals to fulfil their potential whilst still receiving the support they need
- work with people who need support to access health and social care. This includes signposting and information for carers to help people who are eligible for support from the council to decide how they would like their support to be delivered. This could be through a brokered service or a direct payment to fund their tailored package or a combination of both.

For further information contact Gateway to Care:

Telephone: 01484 414933 or

Text "Gateway" and your question to 07781482931

9. VETERANS' FAMILIES AND RELATIONSHIPS

During service, military life encourages personnel to support one another by building a network with those sharing similar experiences. When intense relationships with comrades are broken as a result of service ending, the ex-serviceperson may feel alienated from those who have not shared a similar experience. This can make it difficult for veterans to establish relationships with non-veterans after discharge and may explain why veterans tend not to discuss their experiences with their families.

Family members may have no idea what to expect upon the return of loved ones from active service. For many, fear of the unknown may be uncomfortable and stressful. Military life (and its cessation) can include a number of factors that may lead to marital problems, such as:

- The disruption of the life cycle which military service brings (in terms of family, education, and career)
- Frequent moves
- Long periods of separation
- The psychological impact of combat

Leaving the armed forces requires adjustment not only on the part of the veteran but also on the part of their spouse/partner. They will have built up support networks whilst within the military community and these can be hard to maintain once their spouse/partner has left the service.

Many veterans encounter relationship difficulties and marriage breakdowns on leaving the forces. Relationship breakdowns can create complications due to challenges in finding housing, access to children and the isolation this can create for someone already struggling to adjust to civilian life. Several studies have found that the most common reason for veterans becoming homeless is relationship breakdown.¹⁰ In some cases there may also be a risk of domestic violence in relationships.

In cases in which younger people are deployed parents can be adversely affected by the experience of their children being in military service. Anxiety about their safety, lack of contact for periods of time and readjusting as a family when their offspring return home can all create difficulties for families.

Support for veterans' families

There are a number of organisations that provide support to veteran's families. These include:

Army Families Federation (AFF)

Website: www.aff.org.uk

Naval Families Federation (NFF)

Website: www.nff.org.uk

Royal Air Force Families Federation

Website: www.raf-families-federation.org.uk

Relate

Relate offers advice, relationship counselling, sex therapy, workshops, mediation, consultations and support face-to-face, by phone and through its website.

Telephone: 0300 100 1234

Website: www.relate.org.uk

Find your nearest Relate service at: www.relate.org.uk/find-your-nearest-service/index.html

Domestic Violence Team Kirklees

Telephone: 01924 431491

Email: domesticviolence@kirklees.gov.uk

A WIFE'S STORY

"My husband is a regular soldier and has done 6 x 6 month tours around the world (Northern Ireland, Kosovo, Bosnia) and now for the first time, Afghanistan.

The run up to deployment is extremely stressful and tense as you don't want to argue, but you have to get all your ducks in a row with regard to life insurance, admin, passwords, bank accounts, seeing family. I have a post it note on my fridge that my husband left for me saying "I love you, don't cry" – every time I see that, guess what – it makes me cry, but I won't take it down!

Once they have departed it is a real rollercoaster, some good days, some bad. You can burst into tears (there have been a lot of tears) at the slightest thing, like a memory or seeing happy couples in Tesco!

You try really hard not to sit by the phone, as telephoning home, due to the time delay and the fact that they are working really long hours, means that their opportunity to call is very limited. You hate coming home and finding a voicemail message, and you feel guilty that you went out.

You get to speak to them and try to sound chippy and happy, but when you hang up your world can crumble and you think "is that the last time I am going to hear his voice?" You have to have a routine and something to look forward to achieving yourself, otherwise you can end up sitting in by the phone or getting really anxious.

Support for families is mixed. Some military units provide wonderful wrap around support, I am quite independent, and people think that means "she is coping well" – behind closed doors it is like living on a knife edge. Watching the nightly news can bring really sad news, and other times it's like the civilian population are going about their business oblivious to the fact that soldiers are being blown up and injured every day – injuries aren't seen as newsworthy. The 24 hour news cycle means there is relentless and often graphic film of soldiers in Afghanistan, it's good to hear Afghan mentioned, but a 3 minute piece on the news every now and then is not a fair representation of the work that British soldiers are doing."

Continued over

"With them being away you have to carry on running a household without him, taking the bins out, shopping for one, it's amazing how much tidier the house is!! But at the same time I would give anything to have him come through the door and dump his dirty kit in my clean kitchen and give me a big bear hug.

I get really nervous if someone I don't know knocks on my front door, I have to bury bad thoughts really deep and open the door. Imagine being terrified that in the next 20 seconds your world is going to implode, only to find it's a charity collector or a political campaign door knocker!

Living in an army community – all my neighbours are army – if their husbands are away they can be a great source of comfort, lots of girly nights with wine, but if their husbands are not deployed you hear them talking about what they are going to do on Saturday morning with their family and you have to smile nicely and not be upset that they too have busy lives. Seeing the "welcome home Daddy" banners is really touching. But for some, those banners will never be put up.

The army has posted our family 7 hours drive away from my parents and in laws – that means I don't get the day to day support that I might if I lived down the road from them if I was a civilian or could choose where I live.

I get frustrated that the general population doesn't seem to care, or ask, or show support from local businesses that our soldiers are away at the behest of the government. They should be more involved with their military community and it shouldn't be us that have to dig into our own pockets to put money in charities to support our own injured and bereaved.

6 months is a really long time to be away from your loved one, when he comes home usually the simple things like a beer, a shower and a comfy bed are gratefully received. But, something like going round the supermarket can be extremely overwhelming – a soldier who has been in a hot dusty military environment to be surrounded by bright lights, choice on the shelves and busy people can be too much in the early days. Family want to see the soldier but they often want some time to read just slowly and

they have to pick their way around the fact that the house, and his wife, might look a bit different. New haircuts, weight loss (or gain for those who are pregnant). You try not to change too much so their routine isn't affected, but tasks that I have taken on during the 6 months (car repairs, bank accounts) have to be negotiated and handed back.

Often the soldier will return home really tired, worn out emotionally, exhausted from the journey, dusty and leaner from the extreme fitness that is required to work in the heat and carrying heavy equipment. They have eaten off paper plates with plastic spoons and knives, and aren't used to driving on British roads, or having a choice of television programmes. Their mental readjustment takes a lot longer than simply arriving back in Blighty and going home. The readjustment also takes place for a wife too. Often people have grown up, become more independent, don't want to go through another deployment, their husband returns home and either party can be a different person, and some marriages simply don't survive."

10. OTHER SUPPORT AGENCIES

Confederation of British Service and Ex-Service Organisations (COBSEO)

COBSEO is an organisation that exists to work for the interests of the armed forces community in order to:

- Represent and support the needs and opinions of members to all levels of government and other organisations
- Identify, communicate and act on issues of common interest on behalf of members
- Exchange and coordinate information between members
- Act as a single point of contact for external enquiries

Their website includes a list of support agencies, charities and other organisations who provide information and help to veterans.

Website: www.cobseo.org.uk

Soldiers, Sailors, Airmen and Families Association (SSAFA)

SSAFA help and support those who serve in the armed forces, veterans and their families. Support is offered in various forms including a friendly listening and advisory service. The SSAFA helpline is open from 10.30am – 7.30pm, Monday - Friday, including bank holidays.

Telephone: 0800 731 4880

Website: www.ssafa.org.uk

The National Gulf Veterans and Families Association (NGVFA)

The NGVFA is an independent registered charity supporting those affected by Gulf War 1 and Gulf War 2 (Iraq), the ongoing conflict in Afghanistan and all future desert conflicts. This is a national charity based in Hull.

Telephone: 0845 2574853

Website: www.ngvfa.org.uk

The Royal British Legion

The Royal British Legion is the UK's leading service charity, providing practical care, advice and support to serving members of the armed forces, veterans of all ages and their families. They can offer advice and support about a wide range of topics, including:

- War pensions and compensation claims
- Inquest advice
- Benevolent / welfare help
- Benefits and money advice
- Independent living
- Care homes
- Poppy Breaks, Family Holiday Breaks and Adventure Breaks
- Remembrance travel (pilgrimages, school & group tours)

Telephone Helpline: 0808 802 8080
(Open 8am – 8pm, 7 days a week)

This is free from UK landlines and main mobile networks. The helpline is closed on Christmas Day, Boxing Day and New Year's Day.

For Handy Van services please call: 0800 032 0306

For Civvy Street queries please call: 0800 169 4073

Or access the Website: www.britishlegion.org.uk for their online knowledge base and information about local Pop-in centres.

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Alcoholics Anonymous

See page 28
www.alcoholics-anonymous.org.uk
 Telephone: 0845 769 7555

Army Families Federation (AFF)

See page 30
www.aff.org.uk

Big White Wall

See page 27
www.bigwhitewall.com

Blind Veterans UK

See page 29
www.blindveterans.org.uk
 0800 389 7979

British Limbless Ex Service Men's Association (BLESMA)

See page 28
www.blesma.org
 020 8590 1124

Combat Stress

See page 27
www.combatstress.org.uk
 0800 138 1619 or 01372 587 000

Confederation of British Service and Ex-Service Organisations (COBSEO)

See page 33
www.cobseo.org.uk

Defence Medical Rehabilitation Centre (DMRC) Headley Court

See page 28
www.headleysurrey.org.uk
 01372 378 271

Department of Community Mental Health (DCMH)

See page 14
 01748 873 058

Domestic Violence Team Kirklees

See page 30
 01924 431 491

FRANK

See page 28
www.talktofrank.com
 0300 136 600

Gateway to Care

See page 29
 01484 414 933

Improving Access to Psychological Therapies (IAPT)

See page 26
www.iapt.nhs.uk
 01484 434 625

Jobcentre Plus

See page 16
www.gov.uk
 0845 604 3719

Joint Service Housing Advice Office (JSHAO)

See page 18
www.gov.uk
 01980 618 925

Kirklees Alcohol Advisory Services (KAAS)

See page 28
 07966 306 334

Kirklees Citizens Advice

See page 17
www.citizensadvice.org.uk/kirkleescab
 0844 848 7970

Lifeline Kirklees (Drug Services)

See page 28
 01484 353 333 or 01924 438 383

Medical documents

See page 14
 Royal Navy and Royal Marines
 02392 768 063
 British Army
 08456 009 663
 Royal Air Force
 01494 497 410

Money Advice Service

See page 17

www.moneyadviceservice.org.uk
0300 500 5000**Naval Families Federation (NFF)**

See page 30

www.nff.org.uk**On Trak (Alcohol Services)**

See page 28

01484 437 907 or 01924 486 170

Relate

See page 30

www.relate.org.uk
0300 100 1234**Reserves Mental Health Programme (RMHP)**

See page 15

www.armymod.uk
0800 0326 258**Royal Air Force Families Federation**

See page 30

www.raf-families-federation.org.uk**Royal Centre for Defence Medicine (RCDM)**

See page 29

www.uhb.nhs.uk**Single Persons Accommodation Centre for Ex-services (SPACES)**

See page 21

www.spaces.org.uk
01748 833 797, 01748 872 940 or
01748 830 191**Soldiers, Sailors, Airmen and Families Association (SSAFA)**

See pages 18 and 33

www.ssafa.org.uk
0800 731 4880**Supporting Britain's Reservists and Employers (SaBRE)**

See page 16

www.sabre.mod.uk
0800 389 5459**The Career Transition Partnership (CTP)**

See page 16

www.ctp.org.uk
0207 469 6661**The National Gulf Veterans and Families Association (NGVFA)**

See page 33

www.ngvfa.org.uk
0845 257 4853**The Regular Forces Employment Association (RFEA)**

See page 16

www.rfea.org.uk
0113 246 9065**The Royal British Legion**

See page 33

www.britishlegion.org.uk
0808 802 8080**The Service Personnel and Veterans Agency (SPVA)**

See page 18

www.veterans-uk.info
0800 169 2277**Veterans Aid**

See page 21

www.veterans-aid.net
0800 012 6867 or 0207 828 2468**Veterans and Reserves Mental Health Programme (VRMPH)**

See page 26

www.veterans-uk.info
0800 032 6258



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www.kirkleescitizensadvice.org.uk
www.kirklees.gov.uk/leavingtheforces

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