

# **Help for Zeros?**

### **The Armed Forces Covenant**

According to the MOD, 'the Armed Forces Covenant sets out the relationship between the Nation, the State and the Armed Forces. It recognises that the whole nation has a moral obligation to members of the Armed Forces and their families, and it establishes how they should expect to be treated.

It exists to redress the disadvantages that the Armed Forces community faces in comparison to other citizens, and to recognise sacrifices made. In some cases this will require special consideration, especially for those who have given the most such as the injured and the bereaved.

The principle behind the Covenant is that the Armed Forces Community should not face disadvantage because of its military experience. In some cases, such as the sick, injured or bereaved, this means giving special consideration to enable access to public or commercial services that civilians wouldn't receive. The Covenant covers issues from housing and education to support after Service. It is crucial to the Government that it, and the nation, recognises the unique and immense sacrifices military personnel / veterans have made for their country.

The Prime Minister emphasised this himself during his Christmas visit to Afghanistan when he announced a new Ministerial Committee to make sure that, at the highest level across Government, departments are sticking to the promises made in the Covenant.'

The Revolving Doors Agency 2012:

"....People facing multiple needs and exclusions are in every community in Britain. They suffer several problems at the same time, have ineffective contact with services, and are living chaotic lives. Each problem exacerbates the other and people easily end up in a downward spiral of mental ill health, drug and alcohol abuse, crime and homelessness. One estimate suggests that there are approximately **60,000 adults** in this situation in England at any one time."

Sadly, these include increasing numbers of military veterans.

**Question:** Is the Nation embracing the Armed Forces Covenant and providing the necessary support for former servicemen and women who experience social exclusion, have multiple 'unmet' complex needs and are involved with the Criminal Justice System?

The majority of veterans go on to forge impressive second careers. Those veterans with physical injuries undoubtedly receive very high levels of medical provision and rehabilitation support. Yet, many others suffering mental illness and other psychological issues struggle to cope, become excluded and end up in prison.

At a time when members of the military are being upheld as an example of professionalism and national pride and the family promoted as a vital ingredient of a harmonious society, this situation is surely wrong. The impact is profound resulting in massive human and financial costs.

- An estimated 12% of our homeless population are veterans (Shelter).
- The number of veterans committing suicide is increasing.
- Examples of family breakdown, domestic violence and divorce are increasing.
- Approximately 8% of the prison population are veterans (7,000+), with many others on Probation and Community Supervision Orders (6,000+).
  - o Disturbingly, many veterans in prison are held in Vulnerable Prisoner Units.
  - Annual Prison costs £45,000 per person, per annum, plus: -
    - Cost to Victims, Police, Courts, Health, Social Services, Impact upon Families and Children, Education, Benefit Payments and lack of earned taxable income and NI.
  - Total cost of offending approximately £170,000+ per person, per annum –
  - Total cost to the state Many hundreds of £M's, plus family / social breakdown.

#### Causes of Crime.

In discussing this issue, it is essential to recognise why people become involved in crime, all of which is well researched –

75% of prison population experience mental health illness.

- A lack of confidence, self-worth, self-esteem, basic and key skills, employment and income.
- Family breakdown.
- Feelings of fear, shame and guilt, particularly relevant to former military personnel.
- Lack of appropriate role models and support.
- Alcohol and drug misuse, primarily as a result of the above.

Those who, after leaving the service become involved in crime, experience most if not all of these problems. Many also suffer experiential flash backs to incidents associated with combat related trauma. Importantly, only those who have experienced service life and trauma can understand the impact that this can all have.

"As far as I am concerned I left the military 15 years ago and I am deep undercover in the civilian community: I dress like them...I act like them but I don't trust them and have nothing in common with them"

Former SNCO Royal Marine Commando 2011: (Following discharge he reported he was sectioned under the Mental Health Act and also convicted of a violent offence.)

"I returned home to live in a North East 'pit village' in the late 70's and have never spoken to anyone, other than you, today, about what I experienced in Northern Ireland. I've been married over 40 years and my wife has no idea what's going on in my head.....i didn't think you could be lonely when you were married ....but trust me you can!......she thinks I just 'go on the occasional bender' for no reason and she hasn't made the connection with the news or documentaries on the 'troubles'. Some days I am still there.... if I had only pulled the trigger things might have been so different"

Former member of the Parachute Regiment SNCO 2010

The Armed Forces Benevolent Organisations work hard to 'mop up' the social and economic fall-out and wider needs of what is becoming a significant disenfranchised group of society. The Royal British Legion proudly promotes the fact that it gives out one million pounds worth of financial and welfare support every month. The fact that it has to do this is a sad indictment of the levels of deprivation and need that exists. Add to this the money paid out by Help for Heroes, Combat Stress, SSAFA and the other 3000 veteran specific charitable organisations and the true cost of looking after our former service personnel totals billions of Pounds.

From 'Hero to Zero' is a much hackneyed term, used by the media on both sides of the Atlantic to describe former servicemen and women that have lost their 'media' imposed status as a 'HERO'. When suffering with mental illness, becoming drug and alcohol dependant, homeless or involved with the Criminal Justice System, the tendency is to conveniently forget the sacrifices made and resort to labels such as failure, waster and criminal. Yet, the Military Covenant says 'it is crucial that it (the Government) and the nation recognise the unique and immense sacrifices military personnel / veterans have made for their country." Surely this should also include the general well-being of families and those suffering with mental illness. Veterans who fall upon hard times should not be dependent on a mix of 'means tested' state and charitable hand outs or subjected to further exclusion.

During my 29 year Social Work career; working in numerous frontline and senior management settings, I have noticed increasing numbers of veterans presenting as homeless or in need of Mental Health Support Services, often suffering from diagnosed and undiagnosed mental health problems (anxiety, depression, stress and combat related Post Traumatic Stress Disorder). Many others are presenting at Accident and Emergency Departments or GP surgeries, Drug and Alcohol substitute prescribing services, recovery centres, Alcohol Anonymous, Narcotics Anonymous or Cocaine Anonymous meetings and, sadly, in growing numbers, within the Criminal Justice System.

In 2009 I founded About Turn CIC in the NE of England. My aim was to establish a 'needs led' service for veterans, designed specifically to establish support for what was a 'disparate' and 'hidden population' within the Criminal Justice System and other social welfare services. Over the last 3 years the numbers have increased significantly.

Of note, most of the associated intervention services commissioned by the 12 regional Local Authorities to provide interventions with veterans failed to ask individuals accessing their services if they had served within the Armed Forces. This fundamental omission at first point of contact, the assessment stage or during the writing of a Pre-sentence report leads

to a missed opportunity to understand the 'root cause' of the multiple complex issues that may exist. A mandatory inclusion in an assessment process would allow all civilian based welfare organisations to assess the level of need and 'flag up' the possibility that the presenting behavioural manifestations may be directly related to military service or the transition from it.

Sadly, in too many cases, those that do ask don't know what to do with veterans after the initial identification. Rather organisations attempt to 'shoe horn' veterans into existing provision that is neither appropriate nor relevant to the veteran's individual needs. Similarly, Veterans are notoriously bad at asking for help and may view survival 'on the streets' or when experiencing acute adversity as a continuation of the field exercises or combat missions that they took part in whilst on active service. Couple this with a highly developed sense of pride and a stubborn independence not to become viewed as a burden on society; it's not surprising that civilian orientated support services find it difficult to maintain a meaningful relationship with former military personnel. Many veterans continue to feel a deep sense of dislocation within the civilian community long after discharge, and their ability or indeed inability to re-invent themselves or assimilate back into society is very much dependent upon how they exited the armed forces.

In our experience, the reintegration process to civilian life is exacerbated on many different levels dependent upon how an individual left the military. Many are discharged following successful and lengthy periods of service but struggle to find sustainable employment; others are medically or dishonourably discharged following their involvement in unacceptable behaviour or criminal activity. The latter find it extremely difficult to reestablish themselves in the civilian job market or reconnect with family or friends.

## Multiple Complex Needs and the former service Community: -

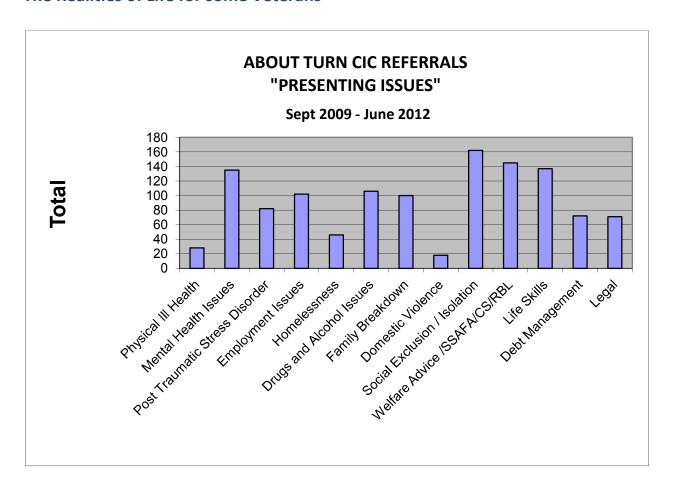
The presenting issues and needs of 177 veterans based in the North East of England were analysed in June 2012. Since that time About Turn have had over 190 referrals and facilitated over 350 'peer led' support groups in five different geographical areas (Newcastle upon Tyne, Northumberland, Gateshead, Durham and Sunderland). We have also facilitated

groups and consultation sessions for Veterans in HMP Durham, HMP Kirkham and HMP Northumberland. The following data shows how the issues facing former service personnel are both multiple and complex and in many cases exacerbated as they make the transition from Military to Civilian and then Custody to the Community.

"We need to rehabilitate veterans not incarcerate them"

Judge Russell: Buffalo Veterans Court: New York 2011

#### The Realities of Life for some Veterans -



The referrals to About Turn have ranged in age from 20 years to 92 years. Their length of service has ranged from 1 year to 24 years. Many veterans were in receipt of state benefits with a large percentage claiming Disability Living Allowance as a result of physical injuries that they described were the result of the 'wear and tear' during service life.

A large number reported suffering from multiple mental health conditions with over 80 having been diagnosed with Post Traumatic Stress Disorder (PTSD). Over 100 reported

having problems maintaining paid employment positions and only 2 said they felt they had a better job with more status than the one they held whilst serving in the military.

Over 40 had direct experience of homelessness at the point of referral, but a larger percentage reported being technically homeless on discharge from the military.

Over 100 veterans had alcohol and drug related dependency issues and most described alcohol as 'Army Medicine' - they celebrated with it and commiserated with it during times of stress or bereavement. Many had been convicted of drink driving offences.

"...a full English breakfast....a 6 hour period since your last drink... a shit, shower and a shave and we were ready to fly!"

Former Royal Navy Helicopter Pilot 2012

Almost all the veterans had had multiple relationships after leaving the services and several had been married three times or more. Divorce was a shared experience and many described themselves as absent parents. The vast majority lived alone or with partners that owned their own homes.

A small number that were subject to Community based Court Orders admitted having committed domestic violence. The damaging impact upon children and its associated costs is likely to become apparent in time.

Over 160 reported experiencing chronic social exclusion and associated isolation. In many cases it was self imposed following a relationship breakdown and/or the result of negative experiences of trying to engage with civilian based support services that did not understand them.

Over 140 reported that they had no idea what services were available from the Royal British Legion, Combat Stress, and SSAFA. Anecdotal evidence from one individual (Falklands veteran) who had approached Help for Heroes for support and was told: -

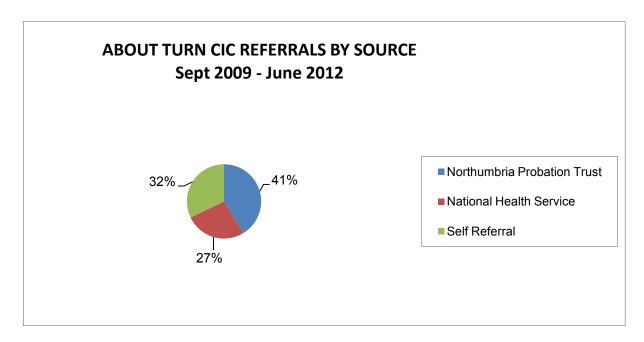
"Sorry mate....you were in the wrong war....you haven't got a physical injury...nothing we can do for you".

Over 135 reported that they felt that they did not have transferable skills and many reported that they had no idea how to write a CV, send an email or set up a direct debit. A large number admitted having poor literacy and numeracy skills and others admitted that they could not cook and had no understanding of Government recommended guidelines in relation to calorific intake, nutrition or the negative effects of excessive alcohol misuse, and the dual use of prescribed/illicit street drugs.

"Since leaving the mob two years ago I have lived on 'pot noodle sandwiches' and take-away food"

Iraq /Afghanistan: Veteran: 32 year old 2012

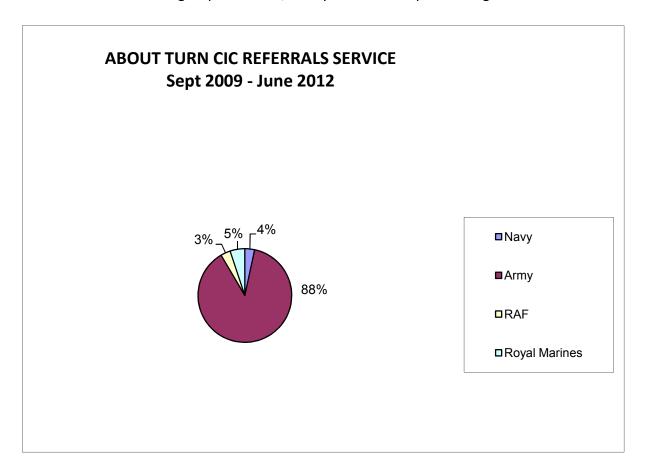
Over 70 veterans reported that they had financial difficulties and unpaid debt. A similar number reported needing advice information and guidance in relation to Military pensions, Criminal law, and Family law, Prison law, Housing law and Mental Health law.



Despite over 41% of About Turn referrals coming from Northumbria Probation Trust, no funding has been received from either the Probation Service or the National Offender Management Service. On average, About Turn provides over 900 hours of diversionary activities and support per offender over any 12 month period.

Referrals from GP's CPN's and other mental health support workers including Combat Stress account for 27% of the case load. Again, despite the evidence of the effectiveness of our interventions, none of these organisations currently contribute financially to the services offered.

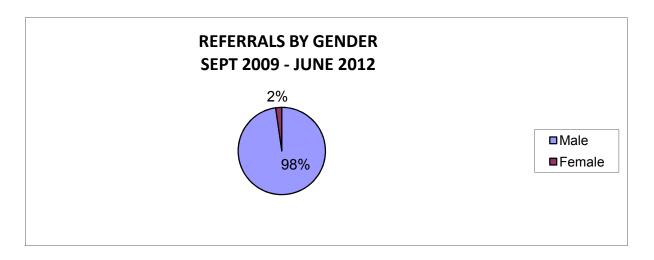
Nearly a third of all referrals are 'self referrals' and result from 'word of mouth' recommendations from group members, family members or partner organisations.



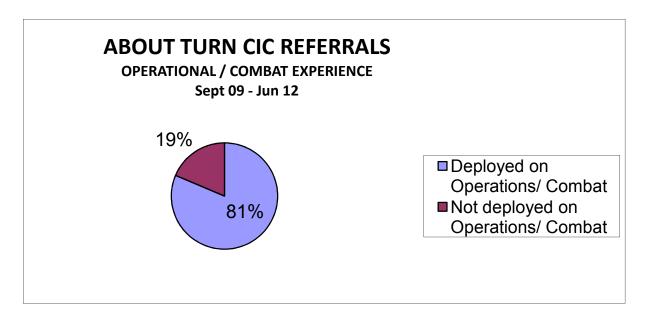
88% of About Turn referrals come from Infantry/Artillery battalions within the Army, with a disproportionate number from the Parachute Regiment. The North East is allegedly the largest recruitment area for HM Armed Forces. The low numbers for the RAF, Royal Navy and Royal Marines can be attributed to the national geographical spread of the respective operational and strategic headquarters. Nonetheless, it is worrying to note how many former Army personnel end up with 'unmet' multiple and complex needs.

"When I left the Army after 18 years service.... it was pack your kit..... I'm escorting you to the gate......have a nice life"

36 year old Infantry Soldier diagnosed with PTSD: Discharged as 'Services No Longer required' after failing Mandatory Drugs Test X2



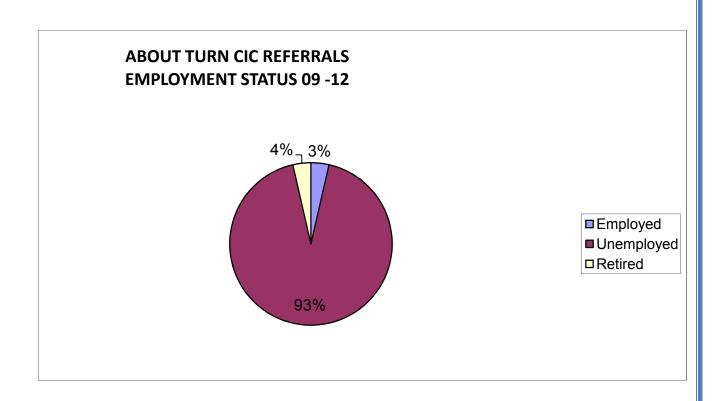
Only 2% of About Turn's referrals are female. Given that 9% of the current British Armed Forces are female this is a hidden population within the former service community and more research needs to be carried out as to the needs of this under-represented group.



In contrast to the recent publicity that those 'most at risk' of a poor transition from the military to civilian community are former soldiers classed as 'early service leavers' (those

with less than 4 years service and limited resettlement support), 81% of referrals to About Turn had served in Combat /Operational Theatres. Whilst we accept that more research needs to be carried out to establish a direct link with combat operational experience and poor social outcomes, it is clear that there is a correlation between self reported problems that are associated with transition, assimilation, adjustment and identity following service life.

The following 'pie chart' shows that 93% of the veterans that access our service are unemployed at point of referral. Given the transferable skills former servicemen and women acquire during the time they serve in the military, this percentage is neither productive for the individuals involved or society as a whole. We have found that those referred to our service need additional assistance to be 'made ready' for the employment market. Schemes that are 'paid by results' to refer veterans to employment opportunities do not offer the necessary 'wrap around' support or acknowledge the wider social context of a life interspersed by poor mental health, confusion and general disarray.



Unresolved issues relating to bereavement, guilt, shame, addiction and anxiety when coupled with episodic bouts of insomnia and loneliness all impact negatively upon the ability

of many veterans to remain in a permanent employment position or comply with community based Court Orders. This is particularly relevant if the issues are socioeconomic/psychological or physical in nature and ignored. Multiple and complex needs require wide-ranging and far-reaching sustained interventions. These difficulties can be unique to an individual and may need to be 'unpacked' separately or collectively in unison with an empathetic mentor or caseworker. Short sighted and 'top down' solutions that look for 'quick fix' results via brief therapeutic interventions or adopt a 'refer on' approach to problem solving will invariably result in failure and continuing long term damage to psychological wellbeing.

Similarly, it is unrealistic to expect a small number of incongruent and financially competing Public and Private Sector organisations and Armed Forces Charities to be able to understand or meet the needs of those hero's reclassified as 'zeros'. In all walks of life prejudice and discrimination exist and it is a sad fact that those former service men and women that end up in the Criminal Justice System and/or who live chaotic lives, continue to be viewed as 'unworthy' by those tasked with the responsibility of supporting them.

### **Summary**

The introduction and implementation of the Armed Forces Covenant and the locally driven Armed Forces Forums will hopefully help to ensure organisations 'sit at the same table' and look at how the needs of veterans can be collectively met. That said, currently there appears to be a reluctance to share good working practices, information or planned initiatives. In practice the referral of veterans to other organisations within the network is limited. This reticence is often driven by individual egos, institutionalised and organisational cultures and/or perceived competiveness in regard to funding and reputation.

**Partnerships** - It is essential that any process of localised 'grass roots' qualitative and quantitative statistical data be collected, shared and acted upon. This requires meaningful and respectful partnerships where organisations work closely with one another, acting selflessly in the interest of the 'greater good' and individual veterans. Specially designed service delivery models with integrated pathways, specialised support and targeted funding

would significantly improve the engagement of marginalised veterans and their families,

thus reducing the social isolation, the risk of offending and the massive associated costs. **The Process of Change** - For veteran offenders to experience the necessary change in their

lives, many organisations working with them need also to reflect upon their own behaviour

and responses to the requirement.

veterans in the UK.

Tony Wright is an ex Probation Officer and registered qualified Social Worker. He is the Founder and Managing Director of About Turn CIC a 'not for profit', veteran—centric social enterprise working with disenfranchised former armed forces personnel, specialising in those involved with the Criminal Justice System. In 2011 he was awarded a Winston Churchill Memorial Trust Fellowship and travelled to the USA to research, compare and contrast the services available to marginalised and socially excluded veterans making the transition from active military service back into mainstream society. He is now campaigning for Veteran specific Courts, collaborative working practices, and life-long co-ordinated care for all

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