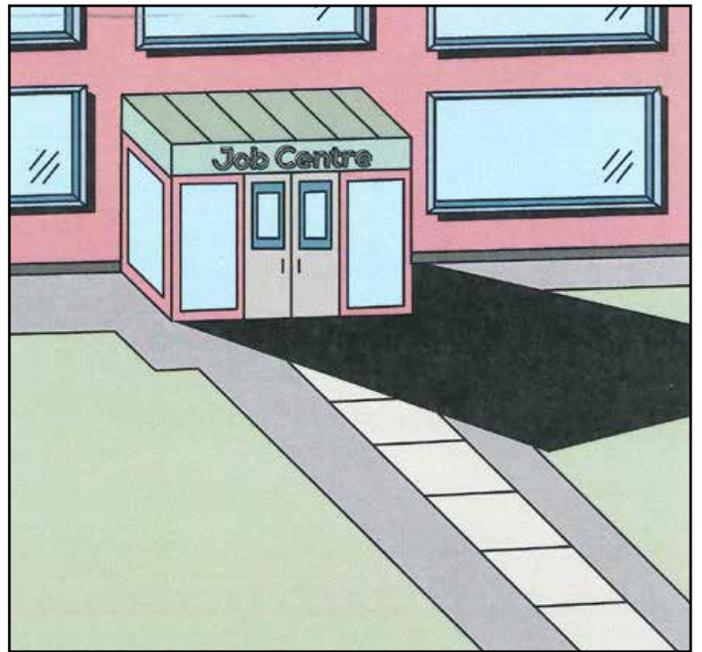


# Sanctions, Support & Service Leavers



## Social Security benefits, welfare conditionality and transitions from military to civilian life

### First-wave findings

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## Illustrations

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This report is based on research undertaken by the study team, and the analysis and comment thereafter do not necessarily reflect the views and opinions of the Forces in Mind Trust (FiMT) or any participating stakeholders and agencies. The authors take responsibility for any inaccuracies or omissions in the report.

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# Foreword

Each year the problem of successful transition from military to civilian life eases. This report, for example, quotes a 2016 study which refers to '17,000' Service leavers annually; the most recent official figure is closer to 14,000, reflecting the shrinking size of the United Kingdom's Armed Forces. That the overall challenge has reduced is also testament to the hard and collaborative work of public and voluntary bodies, such as the Ministry of Defence, the four National Health Services, the Department for Work and Pensions and military charities. However, some families, for a variety of reasons, do have to access the mainstream social security benefits system. Quite rightly as a charity ourselves, the Forces in Mind Trust focuses on those most in need and hence our interest in funding this innovative research, which forms part of a wider ESRC project.

I recognise that these are sensitive areas, and we are certainly not interested in promoting political or doctrinal perspectives. Our key tenet is that recommendations should be based upon credible evidence – indeed I can articulate our approach no better than the authors' themselves, who set out the aim of the study: 'to establish an original evidence base to inform future policy and practice'. Having been closely involved with this project from its inception, we are satisfied that it has achieved this aim.

It follows therefore, that the recommendations contained within this report do indeed warrant the closest consideration by those same policy makers and practitioners. There are after all only 9, and at the heart of each is a desire to improve the outcomes for military families in their transition to civilian life. Civil society benefits from successful transitions, economically and socially, so there is a sound rationale for applying these recommendations, even before we consider the morality of supporting the nation's Armed Forces, and their families, or the pledges associated with the United Kingdom's Armed Forces Covenant.

Taken individually, each recommendation has its own merit, and each seems, to this lay person, eminently sensible and entirely achievable. At Forces in Mind Trust we continually work with the Ministry of Defence, to inform, to support and to challenge how they prepare their people, including their families, to transition successfully, and I hope the single recommendation for the Ministry is implemented.

The bulk of the recommendation are for the Department for Work and Pensions to consider, and I would strongly urge the Department, which has a long and distinguished record of supporting the United Kingdom's Armed Forces, to look carefully at each. We are not seeking advantageous treatment for those in transition, rather the reinforcement of existing work, such as improving the effectiveness of the champions network, where the report offers some clear advice on how that could be achieved. In the more specialist areas of functional assessments, again the report offers evidence-based apolitical recommendations on how to improve outcomes for certain cohorts within the Armed Forces Community.

This is a serious report on an important but complex area. We have not tried to cost our proposals, but they seem at least superficially to represent good value. Our call to action is simple: read this report, and act upon its recommendations, for the good of those who have served their country, and indeed for the good of the country itself.

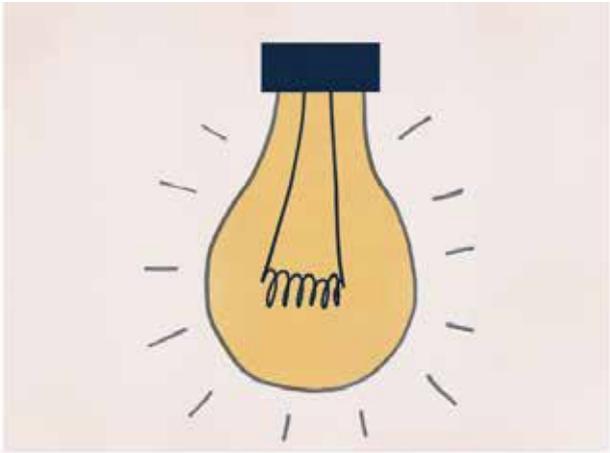
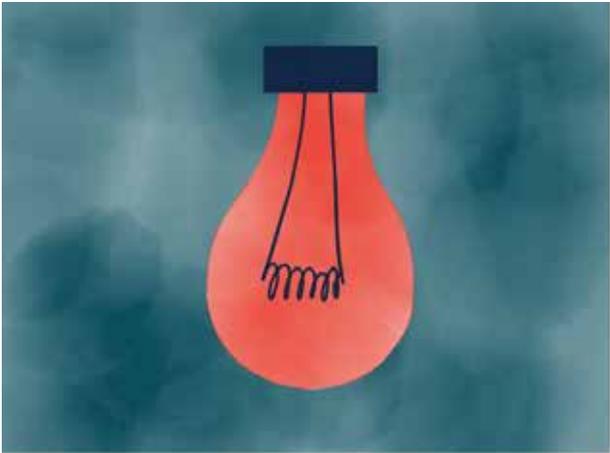


Air Vice-Marshal Ray Lock CBE  
Chief Executive, Forces in Mind Trust

# Glossary

<b>Armed Forces Covenant</b>	Published in 2011, the Armed Forces Covenant is a 'statement of the moral obligation which exists between the nation, the Government and the Armed Forces in return for the sacrifices they make'. The Covenant states that members of the Armed Forces Community should have the same access to benefits as any UK citizen.
<b>Career Transition Partnership (CTP)</b>	The CTP is the resettlement support service that assists the transition of those leaving the Armed Forces into the civilian labour market, with support including advice and guidance, vocational training and a range of employer brokerage activities.
<b>Claimant Commitment</b>	The Claimant Commitment is a document that is required to be accepted as a condition of entitlement. People's obligations are recorded in one place, clarifying both what they are expected to do in return for benefits and support, and exactly what happens if they fail to comply (i.e. the possibility of being sanctioned). Any work-related requirements detailed in the Claimant Commitment should be tailored to an individual's needs, capabilities, experience and circumstances, making them realistic and achievable.
<b>Department for Work and Pensions (DWP)</b>	The DWP is the government department responsible for welfare and pension policy.
<b>Early Service leavers (ESLs)</b>	ESLs are those who have completed less than four years' Service.
<b>Employment and Support Allowance (ESA)</b>	Introduced in 2008, ESA replaced Incapacity Benefit and Income Support for those who were ill or disabled. Following the application of a Work Capability Assessment (WCA: see below), those determined as 'fit for work' are not entitled to claim ESA but can claim JSA or UC if they live in a UC area and will be subject to conditionality appropriate to those benefits. Those assessed as having 'limited capability for work', but deemed likely to become capable of work, are placed in the Work Related Activity Group (WRAG) and must undertake mandatory steps to prepare for paid work in the future. Failure to undertake personalised work-related activity as specified in the claimant's action plan may result in the application of benefit sanctions. Individuals assessed as having 'limited capability for work and limited capability for work-related activity' due to their levels of impairment are placed in the Support Group (SG) and exempted from any work search and preparation requirements. Income-based ESA is currently being phased out and replaced by Universal Credit (UC: see below).

<b>Jobseeker's Allowance (JSA)</b>	Jobseeker's Allowance (JSA) can be paid to claimants who are unemployed and looking for full-time work. It is available for men and women aged 18 or older but below State Pension Age. There are some exceptions for individuals aged 16 and 17. Recipients must have entered into a Jobseeker's Agreement and must be capable of, and available for work as an employee or as self-employed. Recipients must also be actively seeking work (i.e. take such steps as they can reasonably be expected to take in order to have the best prospects of securing employment). There are two types of JSA: (1) JSA (contribution-based) (JSA(C)). This is a personal benefit paid at a flat rate to those who have paid or been credited with sufficient National Insurance contributions in the last two full tax years before the benefit year in which they make their claim. It is payable regardless of the amount of any savings or investments held, but the amount payable can be reduced by part-time earnings and occupational or private pensions. (2) JSA (income-based) (JSA(IB)). This is paid to those whose income and capital (including those of any partner) is below a certain amount. Where appropriate, entitlement to JSA(IB) can arise irrespective of how much (if anything) the claimant has paid by way of NI contributions, so a claimant who is entitled to JSA(C) may be entitled to JSA(IB) at the same time. To be entitled to JSA, a person must not be engaged in remunerative work i.e. working for more than 16 hours a week, on average.
<b>Personal Independence Payment (PIP)</b>	PIP is replacing Disability Living Allowance for people with a disability who are aged 16 to 64. PIP is designed to cover some of the extra costs associated with living with a long-term health condition or disability.
<b>Universal Credit (UC)</b>	Initially introduced in 2013, UC replaces four of the existing social security benefits and the two tax credits for working-age people (Income Support, income-based JSA, income-related ESA, Housing Benefit, Child Tax Credit and Working Tax Credit). The rollout of UC is currently ongoing and new claims for these benefits or credits will end nationally from February 2019. The remaining claimants still receiving these benefits or credits will be moved over to UC in a process wholly managed by the DWP. This managed migration of claimants will take place between July 2019 and March 2022. Claimants on UC with a health condition or disability will have their requirements tailored to meet their capabilities. Claimants on UC with health conditions or disabilities will also be subject to the WCA (see below) to determine their required level of support and engagement.
<b>Universal Jobmatch</b>	Universal Jobmatch is the website that benefit claimants can use to find job vacancies. It enables the DWP to monitor a person's job search activities if the individual claimant grants their Work Coach/advisor access to their personal Universal Jobmatch account.
<b>Work Capability Assessment (WCA)</b>	The WCA is the test used to determine eligibility for ESA and UC. The WCA assesses how a person's health condition or disability affects their ability to complete a range of functional activities and has three potential outcomes. Claimants are classified as either 'fit for work', having 'limited capability for work' but deemed likely to become capable of work, or having 'limited capability for work and limited capability for work-related activity'. These classifications determine both the amount of benefits received and the conditions attached to them (see above for more details).
<b>Work Programme</b>	The Work Programme was a payment-by-results welfare-to-work programme launched in 2011. It was delivered by a range of private, public and voluntary sector organisations. At the time of writing, the Work Programme has been replaced by the new Work and Health Programme.



# 1. INTRODUCTION

Each year approximately 17,000 men and women leave the British Armed Forces and enter civilian life<sup>1</sup>. For the vast majority, the transition to civilian life is relatively unproblematic. However, 'those who do encounter difficulties often experience multiple and complex problems'<sup>2</sup>. There is a growing body of research that recognises the issues that can occur in the transition from military life, highlighting the particular problems relating to mental health and/or physical impairment following active Service<sup>3</sup>, homelessness<sup>4</sup>, drug and alcohol use<sup>5</sup> and interactions with the criminal justice system<sup>6</sup>. However, no research to date has focused specifically on veterans within the benefits system and whether or not it provides adequate and appropriate support to veterans and their families.

## 1.1 Project summary

This report presents the first-wave findings of an ongoing project funded by the Forces in Mind Trust (FiMT) called *Sanctions, Support and Service Leavers: Welfare conditionality and transitions from military to civilian life*<sup>7</sup>. The overall aim of our project is to provide the first substantive qualitative research that focuses specifically on how veterans and their families experience the mainstream social security benefits system as part of their transition to civilian life.

In order to address this aim, our project has the following linked objectives:

- 1** To understand veterans' diverse pathways into, and out of, the mainstream social security benefits system;
- 2** To assess the extent to which the conditionality inherent within the benefits system may enhance or inhibit successful transitions to civilian life;
- 3** To consider the effectiveness of the exemptions and easements made through the Armed Forces Covenant in relation to social security benefits in meeting the needs of veterans and their families; and
- 4** To explore wider debates about the appropriateness of the application of a principle of welfare conditionality for Services leavers/veterans and their families.

Central to our work is a desire to establish an original evidence base to inform future policy and practice in relation to veterans and their families and the benefits system. This will be achieved through two rounds of qualitative longitudinal interviews with veterans and their families, together with consultation with key national, regional and local stakeholders.

This project is a parallel stream of work linked to the ESRC-funded *Welfare Conditionality: Sanctions Support and Behaviour Change* project<sup>8</sup>.

1 Søndergaard, S., Robertson, K., Silfversten, E., Anderson, B., Meads, C., Schaefer, A. and Larkin, J. (2016) *Families Support to Transition: A Systematic Review of the Evidence*, Santa Monica and Cambridge: RAND Europe.

2 Warren, J., Garthwaite, K. and Bamba, C. (2015) 'Help for heroes? Evaluating a case management programme for ex-service personnel in the United Kingdom', *Perspectives in Public Health*, 135(1): 37–42, 38.

3 See: Browne, T., Hull, L., Horn, O., Jones, M., Murphy, D., Fear, N. T., Greenberg, N., French, C., Rona, R. J., Wessely, S. and Hotopf, M. (2007) 'Explanations for the increase in mental health problems in UK reserve forces who have served in Iraq', *British Journal of Psychiatry*, 190(6): 484–489; Buckman, J. E. J., Forbes, H. J., Clayton, T., Jones, M., Jones, N., Greenberg, N., Sundin, J., Hull, L., Wessely, S. and Fear, N. T. (2012) 'Early Service leavers: a study of the factors associated with premature separation from the UK Armed Forces and the mental health of those that leave early', *European Journal of Public Health*, 23(3): 410–415; Carolan, S. (2016) *Employment in Mind – The Poppy Factory employability service and veterans with mental health conditions*, UK: Centre for Mental Health, King's College London; Hynes, C. and Thomas, M. (2016) 'What does the literature say about the needs of veterans in the areas of health?', *Nurse Education Today*, 47: 81–88.

4 See: Gunner, G. and Knott, H. (1997) *Homeless on Civvy Street: Survey of Homelessness Amongst Ex-Servicemen*, London: Ex-Service Action Group; Johnsen, S., Jones, A. and Rugg, J. (2008) *The Experience of Homeless Ex-Service Personnel in London*, York: Centre for Housing Policy.

5 See: The Centre for Social Justice (2014) *Doing our Duty? Improving transitions for military leavers*, London: The Centre for Social Justice.

6 See: Fossey, M., Cooper, L., Godier, L. and Cooper, A. (2017) *A Pilot Study to Support Veterans in the Criminal Justice System: Final Report*, Cambridge: Anglia Ruskin University, online at: <http://www.fim-trust.org/wp-content/uploads/2017/04/Project-Nova-Report.pdf>

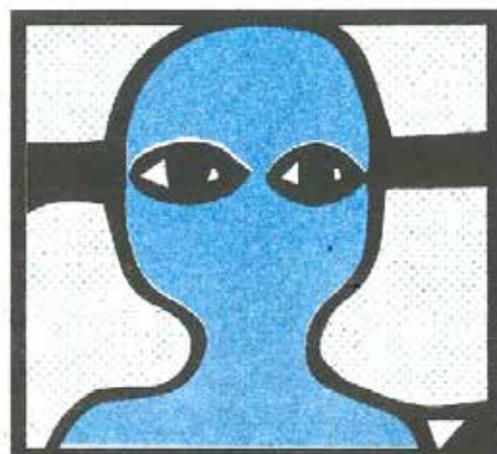
7 See: <http://www.welfareconditionality.ac.uk/about-our-research/service-leavers/>

8 See: <http://www.welfareconditionality.ac.uk>

## 1.2 Structure of this report

This report is structured as follows:

- **Chapter 2** outlines the rationale for undertaking this research, providing a brief overview of the literature and policy backdrop to the project.
- **Chapter 3** provides a brief overview of the methods used in the research.
- **Chapter 4** presents an overview of the backgrounds of our research participants, including length of Service and reasons for leaving the Armed Forces; education; employment experiences post-Forces; health; and relationship/family situation.
- **Chapter 5** presents a discussion of veterans' overall interactions with the benefits system, exploring initial experiences of applying for social security benefits, transitions between different types of benefits, and perceptions of navigating the system.
- **Chapter 6** presents a discussion of the experiences of veterans who have experienced a Work Capability Assessment (WCA) or other functional assessment as part of their interaction with the benefits system, focusing on their views on both the process and the outcome of the assessments.
- **Chapter 7** presents a discussion of the conditions that veterans have to meet in order to receive social security benefits, focusing on whether or not they felt such conditions were reasonable and any barriers they had experienced to being able to meet the conditions of their claim.
- **Chapter 8** presents a discussion of veterans' experiences of both sanctions and/or support within the social security benefits system. With regard to sanctions, it explores the reasons why people had received sanctions and the subsequent impact of this temporary removal of their income. With regard to support, it discusses people's perceptions of the efficacy of mandatory support provided by advisors/Work Coaches, and also whether veterans experienced any differences in support following disclosure of their ex-Forces status.
- **Chapter 9** presents a discussion of the supplementary information provided by interviews with policy-makers and practitioners, exploring their views on transition issues more broadly and experiences within the benefits system more specifically, as well as reflections on DWP commitments to the Armed Forces Covenant.
- **Chapter 10** provides some concluding comments and outlines the next steps for the project.



I HAVE NIGHTMARES EVERY NIGHT, THAT'S WHEN I SLEEP...

# 2. KNOWLEDGE GAP

## Social security and military veterans: addressing a knowledge gap

This chapter outlines the rationale for undertaking this project, presenting the literature and policy backdrop to the research. It provides a definition of the term 'welfare conditionality' and a brief overview of related literature before discussing the current context of UK welfare provision in relation to Armed Forces Service leavers.

### 2.1 Social security: rights and responsibilities

The extent to which an individual's rights to social welfare should be linked to personal responsibility is an enduring theme of public and policy debates. Following the sacrifices of many citizens, post-World War II a welfare state was established that emphasised entitlement to an extensive set of social rights, with individuals meeting their responsibilities through a shared sense of duty<sup>9</sup>. However, in recent decades UK welfare reforms have rebalanced the relationship between social rights and responsibilities and a more *conditional* welfare state has emerged<sup>10</sup>. Conditionality embodies the principle that aspects of state support, usually financial or practical, are dependent on citizens meeting certain conditions which are invariably behavioural<sup>11</sup>, and today within the UK social security system the application of a principle of welfare conditionality links eligibility to continued receipt of work-related benefits to claimants' engagement with mandatory work-focused interviews, training and support schemes and/or job search

requirements, with failure to undertake such specified activities leading to benefit sanctions<sup>12</sup>. Those who fail to comply with such requirements can face benefit sanctions (i.e. loss of up to 100% of their benefit) for between four weeks and three years, depending on the level and repetition of the infringements<sup>13</sup>.

Successive UK governments have extended welfare conditionality so that benefit sanctions can now be applied to non-compliant recipients of Jobseeker's Allowance (JSA), Employment and Support Allowance (ESA) and, moving forward, Universal Credit (UC)<sup>14</sup>. This includes the majority of disabled people, lone parents and, where applicable, the partners of claimants. Significantly, for the first time, UC rules also extend conditionality to include those who are in low-paid or part-time employment. As such, those whose wages fall below a specified 'conditionality threshold' can be instructed to seek better-paid work or additional hours of employment up to a 35-hour-per-week combined work/work search threshold, again under the threat of sanctions<sup>15</sup>.

The sanctions regime has come under particular scrutiny, with concerns around impacts on mental health, people having to resort to 'survival crime' (e.g. shoplifting)<sup>16</sup>, and increased use of food banks<sup>17</sup>, as well as impacts on claimants' families/children<sup>18</sup>. Evidence suggests that the current approach can also have counterproductive impacts in relation to labour market participation, providing limited success in moving people

9 Dwyer, P. (2004) 'Creeping conditionality in the UK: from welfare rights to conditional entitlements', *Canadian Journal of Sociology*, 29(2), 265–287.

10 Dwyer, P. (2016) 'Citizenship, conduct and conditionality: sanction and support in the 21st-century UK welfare state', in: M. Fenger, J. Hudson and C. Needham (eds) (2016) *Social Policy Review* 28, Bristol: SPA/The Policy Press, pp. 41–62.

11 DWP (2008) *No One Written Off: Reforming Welfare to Reward Responsibility*, London: DWP, p. 1.

12 Dwyer, P. (2016), *op. cit.*

13 DWP (2012) *Changes to Jobseeker's Allowance sanctions from 22 October 2012*, London: DWP, online at: <http://webarchive.nationalarchives.gov.uk/20130627060116/http://www.dwp.gov.uk/adviser/updates/jsa-sanction-changes/>

14 Initially introduced in 2013, Universal Credit replaces six existing social security benefits for working-age people (Income Support, income-based JSA, income-related ESA, Housing Benefit, Child Tax Credit and Working Tax Credit). The rollout of UC is currently ongoing and, after a series of delays, completion of the national rollout is now planned for 2022.

15 Dwyer, P. and Wright, S. (2014) 'Universal credit, ubiquitous conditionality and its implications for social citizenship', *Journal of Poverty and Social Justice*, 22(1): 27–35.

16 Dwyer, P. and Bright, J. (2016) *First Wave Findings: Overview*, online at: <http://www.welfareconditionality.ac.uk/wp-content/uploads/2016/05/WelCond-findings-Overview-May16.pdf>

17 Garthwaite, K. (2016) *Hunger Pains: Life inside Foodbank Britain*, Bristol: Policy Press.

18 Dwyer, P. and Bright, J. (2016), *op. cit.*

into sustainable employment<sup>19</sup>. Furthermore, there are serious concerns that the current system does not take into consideration people's individual needs, capabilities and responsibilities outside the paid labour market<sup>20</sup>. For people with impairments and health problems, there are particular issues around the suitability of the Work Capability Assessment (WCA) process, and also concerns that mental health problems are not sufficiently understood or taken into consideration<sup>21</sup>.

Furthermore, conditional welfare systems are supposed to incorporate two strands: the restriction of access to welfare for those who do not meet the conditions that have been set (through the use of sanctions, as above) but also the provision of mandatory support (for example, through assistance in finding paid work and the identification of training opportunities). At present, questions remain about the balance between these two strands and about the quality and effectiveness of some of the available support.

## 2.2 The Armed Forces Covenant and welfare provisions for Armed Forces veterans

In 2011, the UK Government published The Armed Forces Covenant<sup>22</sup> (hereafter referred to as the Covenant), a 'statement of the moral obligation which exists between the nation, the Government and the Armed Forces in return for the sacrifices they make'<sup>23</sup>. The Covenant asserts that no member of 'The Armed Forces Community' (defined as current and former Service personnel and reservists and their families, including families of deceased Service men and women) should face disadvantages when accessing public or commercial services, with 'special consideration' deemed appropriate in some cases. Accompanying guidance reflects the importance of veterans' families, identifying them as deserving of both 'recognition and gratitude' and 'positive measures to prevent disadvantage'. The core principles of the Covenant are enshrined in law in the Armed Forces Act 2011; nonetheless, it does not create legally enforceable rights, with the most support reserved for those who are injured or bereaved<sup>24</sup>. Broadly, the Covenant states that former Service personnel should have *the same* access to social housing and benefits, as

well as *priority treatment* in the NHS if their condition relates to their Service. It further specifies that training, education and job search support should be available for veterans.

In relation to social security benefits specifically, the Covenant states that 'Members of the Armed Forces Community should have the same access to benefits as any UK citizen, except where tailored alternative schemes are in place'<sup>25</sup>. The Department for Work and Pensions (DWP) has made a series of adjustments to Jobcentre Plus (JCP) services to support current and former Service personnel and their families. This includes locating an Armed Forces Champion (AFCs) in every JCP district, whose role is to facilitate 'joint working' between JCP and the Armed Forces community in their district; informing JCP staff about specific Armed Forces initiatives; providing an understanding of the issues faced by the Armed Forces community that can present barriers to employment, and identifying ways to overcome these; and promoting the skills, knowledge and experience of the Armed Forces community<sup>26</sup>. AFCs are not 'customer'-facing; rather, they provide advice and guidance to JCP advisors on issues of relevance when working with the Armed Forces community.

Additionally, a number of specific 'employment and benefits initiatives' form part of the DWP commitment to the Covenant, including certain exemptions and easements. For example, those receiving Armed Forces Compensation Scheme (Guaranteed Income payments) or War Pension Scheme payments (this includes war widow's/widower's pension and war disablement pension) are exempt from the Benefit Cap (a limit on the total amount of benefits that people aged 16–64 can claim, which was introduced in 2013), and those looking to claim income-based JSA who have served overseas are exempt from the three-month residency requirement of the Habitual Residency Test (exemption extended to cover spouses/partners and children in 2015). Also, specific easement rules on voluntary unemployment conditionality apply, which allow veterans' spouses/partners to claim JSA if voluntary unemployment has arisen as a result of them moving to follow their serving partner<sup>27</sup>. Furthermore, Armed Forces Service leavers and their families appear in the DWP *Vulnerability Guidance* on a designated list of 'life events or personal

19 Wright, S., Dwyer, P., McNeill, J. and Stewart, A. B. (2016) *First Wave Findings: Universal Credit*, online at: <http://www.welfareconditionality.ac.uk/wp-content/uploads/2016/05/WelCond-findings-Universal-Credit-May16.pdf>

20 Dwyer, P., Jones, K., McNeill, J., Scullion, L. and Stewart, A. (2016) *First Wave Findings: Disability and Conditionality*, online at: <http://www.welfareconditionality.ac.uk/wp-content/uploads/2016/05/WelCond-findings-disability-May16.pdf>

21 Ibid.

22 Ministry of Defence (MoD) (2011) *The Armed Forces Covenant*, UK: HM Government.

23 Murphy, C., Brooke-Holland, L., Thurley, D., Wilson, W., Kennedy, S. and Bellis, A. (2016) *Support for UK Veterans*, House of Commons Library Briefing Number 7693, 2 September 2016, online at: <http://researchbriefings.parliament.uk/ResearchBriefing/Summary/CBP-7693#fullreport>

24 Ibid.

25 MoD (2013) *The Armed Forces Covenant: Today and Tomorrow*, online at: [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/49470/the\\_armed\\_forces\\_covenant\\_today\\_and\\_tomorrow.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/49470/the_armed_forces_covenant_today_and_tomorrow.pdf)

26 DWP and MoD (2016) *Guidance: Armed Forces access to Jobcentre Plus services and armed forces champions*, online at: <https://www.gov.uk/government/publications/jobcentre-plus-services-for-the-armed-forces-and-their-families/armed-forces-enhanced-access-to-jobcentre-plus-services-and-armed-forces-champions>

27 Ibid.

circumstances' that may 'indicate that an individual requires additional support'<sup>28</sup>. However, the provision of additional support requires a claimant to *disclose* their circumstances to JCP. For those injured in Service resulting in severe disablement, it is suggested that evidence from the Service Medical Board should be used to determine their eligibility for ESA and Universal Credit, instead of requiring them to undergo a WCA<sup>29</sup> as required for other claimants<sup>30</sup>. The recent *Work, Health and Disability Green Paper* suggests that such evidence could be used more widely in the assessment of *all* veterans' claims<sup>31</sup>.

Although there are no specific welfare-to-work programmes for Armed Forces veterans who enter the mainstream benefits system, those who have served in the Armed Forces at any point (and for however long) within the past three years are also entitled to early access to the Work Programme, a payment-by-results programme launched in 2011, which is delivered by a range of private, public and voluntary sector organisations. However, evidence from the DWP suggests that 'only a very small proportion of Work Programme providers offered specialised support for veterans'<sup>32</sup>. At the time of writing, the Work Programme has been replaced by the new Work and Health Programme, where 'former members of the Armed Forces' and 'Armed Forces Reservists' are listed as eligible for early referral to the Programme<sup>33</sup>.

Since the publication of the initial Covenant, more detailed commitments around welfare have been developed by a range of government departments. The Government issues annual reports assessing the progress made against the original pledges in the Covenant. In a recent report, it was stated that the DWP has worked with the Royal British Legion, Atos and Capita (who undertake Personal Independence Payment (PIP) assessments) and other stakeholders 'to enhance the service provided to injured Service veterans, particularly those with Post Traumatic Stress Disorder (PTSD)', and

that tailored advice was in production for those veterans claiming (or wanting to claim) PIP or ESA<sup>34</sup>.

As highlighted in Chapter 1, for the majority of Service leavers the transition to civilian life is relatively unproblematic, with many drawing on the available resettlement services to support their transition. However, research recognises the significant issues that can occur in the transition process, with concerns raised around the financial hardship faced by some veterans, which is further exacerbated by difficulties in accessing employment and benefits<sup>35</sup>. Although these issues often apply to the general UK population, it is suggested that they can be amplified by the distinctive characteristics of active Service and Service family life (e.g. the impact of injuries and trauma, issues relating to continuity of employment, and pressures on relationships). The *UK Household Survey of the Ex-Service Community* identifies a number of subgroups of veterans who are potentially vulnerable to unemployment and, as such, perhaps more likely to need to access social security benefits. These include those aged 45–64 without IT skills; 16–34-year-olds, particularly if recently discharged; and female veterans. The most striking statistic relates to the 16–24 age group, where 65% of the ex-Service community are identified as economically inactive<sup>36</sup>. Early Service leavers (ESLs) (i.e. those with less than four years' Service) are also identified as experiencing the greatest difficulties in transition and are more likely to experience unemployment<sup>37</sup>, with recent figures suggesting a 16% unemployment rate amongst this group<sup>38</sup>. This is partly because they receive a more basic transition support service, but can also be compounded by pre-existing issues<sup>39</sup>. Indeed, it is acknowledged that a proportion of Service personnel come from 'vulnerable backgrounds', and although life in the Armed Forces suspends these vulnerabilities, they can often resurface once people are discharged<sup>40</sup> and responsibility for the welfare of individuals transfers from the Armed Forces to mainstream welfare services.

28 DWP (not dated) *Vulnerability Guidance: Additional Support for Individuals*, London: DWP, online at: <https://www.whatdotheyknow.com/request/259586/response/635763/attach/4/Vulnerability%20guidance.pdf>

29 MoD (2013), *op. cit.*

30 The DWP stated that for the most severely disabled military personnel there is currently a process in place whereby DWP uses evidence from the Service Medical Board.

31 DWP and DoH (2016) *Improving Lives: The Work, Health and Disability Green Paper*, online at: [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/564038/work-and-health-green-paper-improving-lives.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/564038/work-and-health-green-paper-improving-lives.pdf)

32 Murphy, C. et al. (2016), *op. cit.*

33 Powell, A. (2018) *Work and Health Programme*, Briefing Paper Number 7845, 8 January 2018, online at: <http://researchbriefings.parliament.uk/ResearchBriefing/Summary/CBP-7845#fullreport>

34 MoD (2016) *Proudly Supporting those who Serve: The Armed Forces Covenant Annual Report 2016*, online at: [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/588140/30012016\\_AFC\\_Report\\_FINAL\\_WEB.PDF](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/588140/30012016_AFC_Report_FINAL_WEB.PDF), p. 66.

35 Herritty, H., Hudson, M. and Letts, M. (2011) *Health, welfare and social needs of the Armed Forces community: a qualitative study*, London: The Royal British Legion, online at: <https://www.britishlegion.org.uk/media/2285/welfare2010qualitativestudy.pdf>

36 Ashworth, J., Hudson, M. and Malam, S. (2014) *A UK Household Survey of the Ex-Service Community*, London: The Royal British Legion, online at: <http://www.britishlegion.org.uk/media/2275/2014householdsurveyreport.pdf>

37 Ashcroft, M. (2014) *The Veterans' Transition Review*, Lord Ashcroft KCMG PC, online at: <http://www.veteranstransition.co.uk/vtrreport.pdf>

38 MoD (2017) *Career Transition Partnership annual statistics: UK Regular Service Personnel Employment*, online at: <https://www.gov.uk/government/statistics/career-transition-partnership-ex-service-personnel-employment-outcomes-financial-year-201516>

39 Ashcroft, M. (2014), *op. cit.*

40 Herritty, H., Hudson, M. and Letts, M. (2011), *op. cit.*

'[A]n important feature of civil-military relations is the way in which states recognize the sacrifices that the men and women of the Armed Forces give to their country and provide care and support for them and their families once they leave the military'<sup>41</sup>. Indeed, the recognition that owing to their prior contribution Armed Forces veterans may have a claim to a particular set of social rights above and beyond those of civilians informs The Armed Forces Covenant, as highlighted above. However, a review of the literature has shown that no research to date has explored the experiences of veterans and their families within the UK's mainstream benefits system and how this system affects their transition to civilian life.

With the introduction of UC and the development of the new Work and Health Programme, it is vital to ensure not only that the experiences of veterans and their families are acknowledged and understood, but that their needs are met as the UK benefits system continues to develop. To address this significant policy and knowledge gap, our research focuses on veterans' pathways into, and subsequent experiences of, the benefits system, providing an understanding of the impact and ethicality of conditional welfare in relation to veterans and also considering the impact of some of the exemptions and easements relating to the Armed Forces Covenant.



41 Dandeker, C., Wessely, S., Iversen, A. and Ross, J. (2006) 'What's in a name? Defining and caring for "Veterans": The United Kingdom in international perspective', *Armed Forces & Society*, 32: 161–177, p. 161.

# 3. METHODS

As highlighted in Chapter 1, our project aims to provide the first substantive qualitative research that focuses specifically on how veterans and their families experience the mainstream social security benefits system. The research involves two main methods: (1) qualitative longitudinal research (QLR) with veterans and their families; and (2) interviews with policy-makers and practitioners. A brief overview of these methods is provided below.

## 3.1 Qualitative longitudinal research with veterans and their families

QLR is a valuable approach that moves away from providing a 'snapshot' of experiences to explore people's 'varied and changing fortunes' over a period of time<sup>42</sup>. Our research is being undertaken over two years (February 2017–February 2019) to enable us to complete two waves of interviews with veterans and their families. The analysis and discussion in this report are based on the first wave of interviews to be completed with our research participants. A total of 68 veterans were interviewed between June and November 2017. Of this 68, six were interviewed with their spouses in a 'family' interview in order to explore how spouses and other family members were affected by interactions with the benefits system. The first wave of interviews acted as a baseline in order for us to establish a comprehensive picture of people's experiences of the benefits system to date and also to explore other aspects of participants' lives that feature as part of their transition experience (e.g. education and employment experiences, financial situation, health, housing and relationships).

The interviews were carried out primarily in the North West and North East of England and London; however, a small number of interviews were carried out in other areas where people came forward to the research team in response to our calls for participants. Purposive non-random sampling techniques<sup>43</sup> were used to recruit our participants through a range of organisations. These organisations were primarily, but not exclusively, providing support to Armed Forces veterans and included Armed Forces charities and other third-sector organisations, Armed Forces and Veterans' Breakfast Clubs, local authorities, churches and housing/accommodation providers. The inclusion criteria for the research was those who identified themselves as Armed Forces Service leavers/veterans<sup>44</sup> who were living within our specified geographical fieldwork areas and were currently claiming one of the following social security benefits: Employment and Support Allowance (ESA), Jobseeker's Allowance (JSA) or Universal Credit (UC).

The interviews lasted approximately one hour, and the majority took place face-to-face; however, a small number were undertaken via telephone (three interviews) or Skype (one interview), where people had come forward to take part but were outside the main geographical areas of the fieldwork<sup>45</sup>. In line with good practice for research, each participant received a £20 shopping voucher as a thank you for their time (£40 for 'family' interviews).

42 Neale, B. and Flowerdew, J. (2003) 'Time, texture and childhood: the contours of longitudinal qualitative research', *International Journal of Social Research Methodology*, 6(3): 189–199.

43 Mason, J. (2002) *Qualitative researching*. London: Sage.

44 We used the definition of a 'veteran' as 'anyone who has served for at least one day in Her Majesty's Armed Forces (Regular or Reserve) or Merchant Mariners who have seen duty on legally defined military operations' (MoD, 2017, *Veterans: Key Facts*, online at: <https://www.armedforcescovenant.gov.uk/wp-content/uploads/2016/02/Veterans-Key-Facts.pdf>). We have primarily used the term 'veteran' within this report when referring to our participants, although we recognise that not all ex-Service personnel associate with this term (see, for example, Burdett, H., Woodhead, C., Iversen, A. C., Wessely, S., Dandeker, C., and Fear, N. T. (2012) "'Are You a Veteran?'" Understanding of the Term "Veteran" among UK Ex-Service Personnel: A Research Note', *Armed Forces & Society*, 39(4): 751-759.

45 We chose to include these participants within the research given that these individuals/families had come forward to the research team to provide their experiences.

### 3.2 Interviews with policy-makers and practitioners

In addition to our QLR interviews with veterans and their families, we also undertook 19 interviews with policy and practice stakeholders representing a mix of national organisations and those providing frontline services in our fieldwork areas. These interviews provided useful supplementary information for the interviews with veterans, exploring policy-makers' and practitioners' views on transition issues more broadly and experiences with the benefits system more specifically. The interviews ranged between 30 minutes and one hour and included a mix of face-to-face and telephone interviews.

The interviews (both veterans and policy/practice stakeholders) were audio recorded, with permission from the participants, and transcribed verbatim (please note that in some of the chapters that follow a small number of the quotes may include explicit language). All interviews were analysed using thematic coding and retrieval methods, assisted by a qualitative data analysis software package (QSR NVivo). Three feedback

workshops were carried out in January 2018 with the support of participating stakeholder organisations, including a mix of veterans and frontline service providers. These workshops were used to consider, elucidate and validate the findings presented in this report.

The research has ethical approval from the University of Salford Research Ethics Panel and complies with the ethical governance procedures at both the University of Salford and the University of York.

### 3.3 Note on the images used in this report

As part of the dissemination strategy for the project, we have been working with Graphic Design students in the School of Arts and Media at the University of Salford to produce a graphic novel from the research. The images included in this report are some of the initial illustrations produced by the students for this output and are based on anonymised excerpts from some of the interviews.



# 4. BACKGROUND

## Research participants

To enable us to understand the complexity of people's lives and experiences, this chapter presents background information about the 68 veterans who were interviewed, providing an overview of reasons for leaving Service; family and relationships; housing situations; health; education and training; and experiences of the labour market post-Service. The majority of respondents were male (66), with two female veterans included in the interviews. The age range of the participants was as follows: 20–29 (six participants); 30–39 (18); 40–49 (17); 50–59 (15); and 60–69 (7)<sup>46</sup>.

Of the 68 veterans interviewed, 58 had served in the Army; five in the RAF; two in the Navy (Royal Marines); and one in both the Army and the Navy. There were also two who had been Army reservists. With regard to length of time in the Armed Forces, 13 had served less than four years (i.e. ESLs); 33 respondents had served between four and 10 years; and 22 had served over 10 years. The majority of respondents (51) had left the Armed Forces over 10 years previously, with seven people leaving between five and 10 years previously, four leaving between two and five years previously, and six people indicating that they had left within the last two years.

### 4.1 Reasons for leaving the Armed Forces

There were a range of reasons given by participants as to why they had left the Armed Forces, including redundancy; medical discharge; 'bullying'; 'boredom'; being 'kicked out'/dishonourable discharge; time served; and leaving owing to a change in their military role. A number also indicated that they had left for personal reasons related to their spouses and children. On occasions, people had left to try to make their relationships work; however, many of these relationships had subsequently broken down:

*I got out just due to personal circumstances really. My marriage was suffering because of service, because of my actual service, so I got out to try and resolve matters, but it didn't seem to work. I also had an alcohol issue as well towards the end of my service (Employment and Support Allowance, ESA, claimant, in initial assessment phase).*

*My partner asked me to come out. She fell pregnant with my boy... I was like, 'I don't know. I don't think I'm ready go get out'. Then I went to Afghan. I got shot, and when I pulled myself round I thought, do you know what, what am I doing here? You've had a lucky escape... By that point, she was pregnant with my daughter, but I think we only lasted maybe nine months when I got out... looking back at things now, I must have been a nightmare to live with. I must have been horrendous because I was constantly moody and taking everything out on her. Not physical, but just arguments. I was creating arguments for no reason whatsoever (Universal Credit, UC, claimant).*

One participant stated that he had been discharged owing to unpaid court fines from before their time in Service; however, he indicated that he was now going to reapply and go back into the Armed Forces. A small number of participants expressed regret at their decision to leave Service:

*I left because I got offered a very good job. Now I regret it so much because the Army was – it should've been my life, but there was actually pound signs, you know? Yes, I made a mistake, yes... they [the Army] didn't want me to go. I was doing well, I'd just been promoted, I was very popular and it made it really difficult for me. They just didn't want me to go and I think they didn't want me to go because they also knew I was making a terrible mistake. I wish I'd have listened to them because they were right (UC claimant).*

<sup>46</sup> Five respondents did not provide their age.



## 4.2 Family and relationships

The interviews revealed some complex family and relationship situations. A significant number (32 respondents) had experienced a relationship breakdown. This was often attributed to difficulties in adjusting to civilian life as a couple when previously much time had been spent apart, but also to the impact of veterans' often undiagnosed mental health issues. The majority of veterans had children; however, it was clear that a routine consequence of relationship breakdown was also estrangement from children. As such, some talked about having little or no contact with their children. Some attributed this to animosity: *I don't see my children because she [ex-partner] won't let me* (Universal Credit claimant), while others referred to geographical separation from family, and their current financial circumstances sometimes made it difficult for them to be able to visit their family. Additionally, there were people who revealed that estrangement from children had been a continuous feature since leaving Service and was related to their own 'vulnerabilities':

*My daughter, because I've been in and out of her life with prison and what not, she suffers with separation anxiety and sees a counsellor, so I don't want to mess her head up any more than it already is (ESA SG claimant).*

Interactions with the criminal justice system featured within a number of accounts, with 18 respondents indicating that they had served a custodial sentence.

As noted in Chapter 2, previous research has suggested that a proportion of Service personnel come from 'vulnerable backgrounds' and that these vulnerabilities can resurface when people leave Service<sup>47</sup>. It was evident from the interviews that this was the case for a number of our participants. The majority had joined the Armed Forces straight from school, with many not undertaking formal qualifications before entry (see section below on education and training) and some referring to experiencing bullying at school as a reason for joining the Armed Forces in the first place. Furthermore, there were a small number who referred to having parents/carers who were drug/alcohol-dependent or having grown up within the care system:

*I grew up in care. I started getting in with the wrong crowd in school when I was about 14 so started not going to school, and then because of that I ended up in a... naughty boys' home. Once you left there they just threw you in a flat at 16... Then I ended up on the dole for a couple of years and then after that I joined the Army (ESA SG claimant).*

*I grew up with a, pardon the expression, 'smackhead' for a mother... Raised basically by my grandmother, who was an alcoholic. School was when I could be bothered to go. Then I had a choice really, it was either jail, start selling drugs and do something stupid, or join the Forces. I wanted to join the Forces, my great-granddad was in, I wanted to follow his footsteps. That was it, I joined. Best move I ever made, otherwise I'd be in jail or I'd be dead by now (ESA SG claimant).*

Among those veterans still in contact with children and family, some had caring responsibilities; for example, supporting family members who had health problems (e.g. spouses, parents or children) and providing financial support to children.

Our first-wave interviews also included six 'family interviews' in which both the veteran and their spouse (all of whom were female) were interviewed. In the majority of these interviews the wife was the main interviewee, and it was evident that they were undertaking the role of primary carer for their veteran husband. These interviews often highlighted significant mental and/or physical health issues among veterans. As one spouse revealed: *He was sectioned a couple of weeks ago for about a week and so his mental health is not the best* (ESA SG claimant). The section on health below provides an in-depth discussion of respondents' current health problems; however, it is worth noting here the key role of spouses in supporting the day-to-day management of their partner's ongoing (and sometimes undiagnosed) conditions and pushing them to seek the professional help they required. For example:

*[He] would drive off for hours on end, days on end, and I would hunt him down and find him in a hotel... I even made a hotel manager go up to his room and check he was okay and not suicidal at one point. It was quite, quite bad and I knew we needed professional help. You [speaking to her husband] didn't really want to, so there was a couple of cycles, until it went to 'that's it, you get the help or you don't, we're over', and that was when you made the change, wasn't it? And you got the help (UC claimant).*

This couple had dependent children, and the wife revealed that part of her role was ensuring that the children were not aware of what was going on:

*The children, they're still young enough that they're not seeing any effects, apart from I do say [speaking to her husband] 'do not be in bed when they come home'. They tend not to see you constantly in bed asleep. You've just got to be up and doing something (UC claimant).*

47 Herritty, H., Hudson, M. and Letts, M. (2011), *op. cit.*

### 4.3 Housing and homelessness

The respondents were living in a range of accommodation types, including some who were owner-occupiers and people who were renting from social or private landlords. Although housing and homelessness was not a central focus of our research, it was evident that a significant proportion of the people we interviewed (30 respondents) were living in veteran-specific supported accommodation across the different geographical areas, with homelessness featuring at some point during their transitions to civilian life. Indeed, for some of those in supported accommodation, their experience of homelessness was very recent: *that was a week ago... last week I was on the street and just wandering aimlessly* (UC claimant). It was clear that homelessness was often a consequence of a 'crisis' in other areas of people's lives: *Well, I've got PTSD, and I lost my job. I had a relationship breakdown. I ended up losing my house, so it was either here [supported accommodation] or the street* (UC claimant).

A number of people had been assisted into their current accommodation by their local authority or by Armed Forces charities, on account of their 'veteran status'. As one interviewee stated:

*I were living in a graveyard, and it were the vicar who came out and said to me, he said, 'Oh, he said, 'I don't mind you sleeping on here'; he said, 'I'd let you sleep in the church but insurance won't let me... But as long as you don't make a mess I'm not bothered'; and he went, 'Have you never tried going to the Council?' I said, 'Yes, but the waiting list is years and years and years'. You know what I mean? He went, 'Go into the Council and tell them that you've been in the Army'... So I did that and then I got a phone call on my phone. I think it were [Armed Forces charity]. They phoned me up and they went, 'Oh, I believe that you're homeless and you're ex-Forces' (UC claimant).*

For this person, it was evident that their particular local authority was working collaboratively with Armed Forces charities to support those who disclosed their ex-Forces status. At the time of the interview, this respondent had been moved to veteran-specific supported accommodation in another area of the UK.

### 4.4 Health

The majority of participants described currently experiencing some form of physical or mental health impairment, with some people experiencing both. Mental health difficulties were highlighted more frequently than physical health issues (59 people indicated that they had a mental health impairment and 37 people indicated that they had a physical health impairment), with PTSD, anxiety and depression commonplace<sup>48</sup>. Additionally, a

number of participants talked about having difficulty sleeping. Fifty-one of the 68 veterans attributed their current health issues to their time in Service.

It was common for people to discuss having multiple health issues<sup>49</sup>. For example, one veteran indicated that he had been diagnosed with PTSD, hypervigilance, anxiety, stress insomnia and sleep apnoea:

*I'm usually quite lethargic day-to-day because obviously I don't sleep very well, and then when I do take sleeping tablets from my prescription, I end up feeling lethargic for days on end because of the after-effects of the tablets. I'm on antidepressants, so I'm not too bothered about the fact that I'm tired, but obviously it can be quite a haul getting me going and motivated... There's a lot of times where I really can't be bothered to do things and [my wife] really needs to stick a hot prodder up my backside to get me going (UC claimant).*

This participant was interviewed alongside his wife, and they stated that they had recently transitioned from Working Tax Credit to UC. At the time of the interview, they were still awaiting their first payment, which had added a significant financial strain on the family.

The diagnosis of specific health issues regularly occurred a number of years after individuals had left the Armed Forces. This was the case for both common 'wear and tear' issues (e.g. back, neck and knee issues) and mental ill health that were related to experiences in Service:

*I suffer from PTSD... that's what led to my breakdown... that's definitely as a result of my time in Service... About eight years after I left... it started last year. I started getting bad. For eight years I was coping with it on my own, sort of ignoring it. One day I started crying in front of my little boy, the next minute I'm jumping behind the couch... by that time it was too late, there was no stopping it, it was just every day. I'm still having nightmares now, I still wake up screaming in the night... it's never going to go, it's always going to be there (ESA Support Group, SG, claimant).*

This participant and a small number of others had been sectioned or had spent time in a mental health institution since leaving the Armed Forces. One respondent described how part of their health care had been paid for by the Armed Forces, until they were subsequently transferred to the NHS:

*I was hospitalised quite a long time with my bipolar... the military sent me to [a private institution], and then when the military funding ran out I was transferred to the NHS. It took me a longer time to recover in the NHS because things are a lot better in the private sector (ESA SG claimant).*

<sup>48</sup> The proportion of people in our sample who were experiencing mental health issues reflects the complex needs of our participants and also the significant proportion of people who were claiming ESA.

<sup>49</sup> Research focusing on the mental health of veterans suggests that comorbidity is frequent amongst veterans seeking mental health support (see: Murphy, D., Ashwick, R., Palmer, E. and Busuttill, W. (2017) 'Describing the profile of a population of UK veterans seeking support for mental health difficulties', *Journal of Mental Health*, DOI: 10.1080/09638237.2017.1385739).

The symptoms and negative effects of mental ill health were simultaneously described as having long-term debilitating impacts and being episodic in their severity. As such, respondents regularly spoke of having 'good days' and 'bad days' in terms of managing their illnesses:

*My PTSD stems from my service in the first Gulf War...My physical problems, although my orthopaedic specialist says it is attributable to my military service, the military have turned round and said, 'No'... I think that the main thing with, I mean my physical health, I can deal with it on a day-to-day basis. I've got pain all the time in my right knee, but it's just something that I have filed away as part of what's going on. With the mental health... I have good days, and I go to the gym. I do my art. I socialise with friends, but on my bad days, which is mainly two or three days a week, I don't leave the house (ESA SG claimant).*

*So yesterday I was all like, 'Oh my God! What's this? Can't wait for today [to] end', do you know what I mean? Just from the moment I opened my eyes I just wanted to go back to bed. But some days, like today, I woke up this morning feeling fresh and, you know, like good day (ESA SG claimant).*

A small number of participants felt that they had been mistreated or misdiagnosed whilst in Service and that this had led to issues during discharge and beyond. However, the majority of these participants had left the Armed Forces a number of years previously and reflected on how things were perhaps different in previous years:

*When I was in the Air Force, I flipped, if you like, went ballistic, and did a lot of damage – people and property. I got put into a straitjacket, taken to a... mental hospital; I was in there for six months and they did a load of assessments and everything, basically just so they could say I was sane to court martial – which they did, and then I got six months in jail, went all round the RAF jails... I was seen by a psychiatrist... they told me then that I had PTSD – I didn't know what it was, but he told me that, but then when they fill in all the forms, the discharge forms and everything, they say you're perfectly all right. I was deaf and mental when I came out [laughs] and an alcoholic (ESA Work Related Activity Group, WRAG, claimant).*

While many participants were clear about the role of their experiences in the Armed Forces in directly triggering their current health problems, a number acknowledged longer-term trauma, unrelated to their time in Service, as a significant factor in their ongoing struggles with mental health issues:

*I have anxiety and I have issues regarding my past, which is where the PTSD comes from. It doesn't come from my Army career (UC claimant).*

*I suffer two forms of PTSD, childhood and adult. From the age of four till nearly 14 I was brought up in kid's homes, even though my brother and sister lived at home (ESA SG claimant).*

*PTSD can happen from any trauma, and I've had trauma all my life (UC claimant).*

Almost half of the veterans interviewed (33 out of 68) described experiencing (in some cases ongoing) periods of alcohol dependency (22 respondents) or drug dependency (11 respondents). This sometimes related to a 'culture of drinking', which they perceived to be part of Service life or a response to experiencing trauma while in Service. However, for others, alcohol or drug use also developed as a result of relationship breakdowns and other adverse experiences:

*I suffered a breakdown, it just all – everything just, you know? I don't know, it was splitting up with my partner and my girls, my ex-partner meeting somebody else. I lost my job; too much drink, feeling a bit of a failure, going from that I went into freefall. Yes, I think I just had a breakdown; it sent me a bit mental, you know? (UC claimant).*

It was evident that there was often a complex mix of pre-existing issues, experiences during Service and wider post-Service events that negatively affected veterans' ongoing mental health:

*There's a lot of problems that have been caused by my Service, but a lot of problems have also been caused by my personal life, my childhood and other dreadful things that have happened since I've been an adult! (ESA SG claimant)*

## 4.5 Education and training

To build up a picture in relation to the background of our participants, we asked our interviewees about their experiences of school and further education prior to entering the Armed Forces, the training they had received whilst serving, and any further education or training they had been involved in since returning to civilian life. The majority of veterans reported having limited experience of paid work prior to joining the Armed Forces. Some had brief spells of employment after leaving school, usually in manual work within the service or construction sectors; however, the majority joined the Armed Forces immediately or shortly after leaving school.

On the whole, respondents described their schooldays in a relatively negative light. Most had exited compulsory education as soon as they could (around the age of 16) with few or no basic qualifications:

*School, well, I couldn't wait to get out quick enough, could I? – which, looking back, it was a mistake, but when you're young, you think you know it all, don't you? (ESA SG claimant).*

A small number of veterans made reference to taking up trade apprenticeships (for example, in joinery or plumbing) or starting further education, although this was not always completed. Typically, one respondent outlined how a lack of fulfilment in joinery combined with the influence of his stepfather had led him to join the Army:

*I was an apprentice joiner, but one – I wasn't too happy about it because I wasn't doing much joinery, but I also – my stepfather kept saying, 'You should join the Army, join the Army'; so I thought, well, to shut him up I will do, and I signed up for three years thinking that's all I'll do, but ended up doing 15 years (ESA SG claimant).*

Respondents also commonly reported being 'bored' at school, with some knowing that they wanted to join the Army when they left education. A number of those who had decided from a young age that they wanted to join the Armed Forces did not see the relevance of school for their chosen career:

*Just didn't enjoy it. Bored. Ever since I was 11, I knew I wanted to join the Army, so I just couldn't be bothered with school. I wasn't interested in it (ESA SG claimant).*

Such respondents sometimes described their aptitude for physical education rather than more classroom-based, 'academic' activities:

*I was very good at sports, played for the football team in school and I represented my country at table tennis, but at educational stuff, intellectual stuff I was very, very slow in the classroom, and I was in the bottom class for quite a few subjects... through the skin of my teeth, I think I got an O level in geography, arithmetic and maths (ESA WRAG claimant).*

Although it was evident that levels of formal qualifications were relatively low upon entry into the Armed Forces, respondents described undertaking various training courses, ranging from basic skills qualifications (e.g. Maths, English and IT) through to weapons training, first aid and driving qualifications (including HGV and forklift) whilst in Service. However, only a small number of respondents felt that the qualifications and skills they gained in the Armed Forces had been useful in terms of finding work when returning to civilian life. This was often limited to work in specific sectors of the labour market such as the security industry:

*I literally walked in with those certificates and my Army discharge book, and I did bounce from security company to security company... I barely had a job interview, you just got the job (ESA SG claimant).*

This was particularly the case for those who had left the Army a number of years previously at a time when there was less transition support available:

*I did loads of training in the Army, but none of it was transferable into Civvy Street. It is today, I think, but when I was in it was just military qualifications, and when I come out, to put them on my CV, on Civvy Street, they said, 'Well, where's the paperwork to back it up?' I said, well, I showed them my military certificates; they said, 'Well, what does that mean? Is that a City & Guilds? Is it a BTEC?' (ESA SG claimant).*

A small number of respondents indicated that they had undertaken training courses near to the point of leaving the Armed Forces in order to increase their future job prospects. However, these were viewed as largely generic in their content, and there were also mixed views on their use in securing specific jobs within the civilian labour market:

*It was quite minimal really. It was just the basic interview techniques, filling out CVs, stuff like that... They had a tendency to put the courses in front of you, and if you don't really attend, I don't think they were really that bothered, because you're getting out anyway... They give you a grant, and you also get offered what's called external learning credits, ELCs... you get £1,000 to go away when you leave the Army, to engage in various courses, which have to [be] work-related, obviously. You can have three of them up to a maximum of ten years after you get out, but they don't really tell you much about it. They just tell you you've got it and then just leave it to you really (ESA claimant, in initial assessment phase).*

Since leaving the Armed Forces, a number of interviewees had engaged in further training/education. For most, this was closely associated with the jobs they had moved into (or were hoping to move into). For example, a number had worked towards their Security Industry Authority (SIA) licence, while others had looked at reskilling.

A small number of respondents were undertaking counselling training in order to work and volunteer with ex-Service personnel and/or those dealing with mental health issues or drug/alcohol dependency:

*I want to work with veterans with PTSD, so the course that I'm doing, the Health and Social is like a footway in the door. I'm doing my Level 2 a week after this course has finished (ESA SG claimant).*

*I'm hoping to have passed my Level 2... and I'm hoping to be volunteering... and getting into this kind of work, support work. Helping other people, not just veterans (ESA, appealing assessment outcome/suspension of benefit).*

These were primarily people who had themselves received support from specialist organisations and were motivated to retrain by a desire to 'give something back' for the support they had received.

Only a small number of our respondents (five) indicated that they had engaged with the Career Transition Partnership (CTP); however, this perhaps reflects the number of people within our sample who had left the Armed Forces over ten years previously. One respondent reflected that, although the focus on employability was important, there was very little emphasis on preparing people for the day-to-day aspects of civilian life:

*That is fine, giving people all these learning courses and things, but it doesn't mean that when they leave the Army that they're going to land on their feet... we had the careers workshop and things like that, but it doesn't, what does it help you do? Build your CV and gain some qualifications, okay, so I could do that as a civilian anyway... What they don't teach you is how to pay bills, how to go and apply for houses... how to be a human being, basically, that's not institutionalised by the Armed Forces (UC claimant).*

## 4.6 Employment experiences post-Service

With regard to experiences of the labour market after leaving Service, a small number of respondents indicated that they had not worked since leaving the Armed Forces. However, on the whole, most people had been able to find paid work immediately or very shortly after leaving Service, with some reporting that they had gone on to have successful careers. For example, one veteran had started as a porter in a hospital but worked his way up to a higher-level position in the NHS. Similarly, another respondent indicated that they had successfully established their own business. Others, making use of the specific skills and training they had acquired in Service, found work in security/close protection, often through informal networks or on the recommendation of others who had previously left the Armed Forces.

Veterans also spoke of making use of the more generic skills and trades they had acquired whilst in Service to successfully apply for a range of jobs in the transport (for example, HGV driver, driving instructor), construction (joiner, labourer) and manufacturing industries (factory worker). Frequently, people described their post-Forces labour market experiences in terms of intermittent work, with many appearing to struggle to sustain the same employment for any significant length of time: *There was little bits and bobs that I did, working for friends and stuff like that but nothing concrete* (UC claimant). In some cases, interviewees attributed their job insecurity to the character of the contemporary labour market, describing a lack of job opportunities in their local areas and the increasing prevalence of agency work and short-term contracts:

*It's hard work to try and find a permanent job now, everything's temporary nowadays (UC claimant).*

*Most of the warehouse work is done by agencies. An agency cannot guarantee you three/four months' work. I can go work for an agency, I might work four days, and then I'll have a two-week span where I don't work. You're working four days, but then you're going to have to go back into the Jobcentre and claim again (Recently moved from JSA to pension).*

Beyond the structural constraints of the paid labour market, the majority highlighted more personal factors that affected their ability to enter and sustain work; more specifically, this related to ongoing physical and mental health impairments, many of which resulted from their

time in Service. A number of respondents explained how PTSD in particular and the resultant problems in controlling the anger it triggered had made sustaining work a challenge:

*It all started off with, I had to take time off to have my first bout of surgery in my right knee, but also as well, whilst I was on sick leave with this... How can I best explain this? I was struggling before I went off sick with mental health issues. On quite a few occasions I was being pulled up in front of management for my attitude, my anger issues, problems with being late and that sort of stuff. This was all tied up with my PTSD (ESA SG claimant).*

*I've been in and out of jobs throughout the last ten-odd years or so, and that, apparently, is quite common with my condition of, you know, starting a job, cracking on with it and then two to three months later, bang... It's part of the whole PTSD because things become overwhelming... You sort of try to remove yourself away from it because it's quite embarrassing and I'm quite ashamed and think what other people are thinking about me, and I found it very difficult and become more anxious about it, about returning to work, because of negative impressions that co-employees or employers would have about me (UC claimant).*

For many respondents, a complex interplay of issues affected their ability to sustain work, with drug or alcohol dependency featuring in a number of accounts. One veteran gave up employment to become his father's full-time carer. However, following the death of both his mother and his father, he struggled to manage the transition back into work, which exacerbated his alcohol dependency, moving him further from the labour market:

*I'd say my last main job was probably 2004. Then, obviously, I was my dad's full-time carer. That was like 12 months, 14 months, something like that, and then he went into a nursing home. He had to be, because they saw I was struggling on my own, so they put him in a nursing home where he was getting 24-hour care. So I felt as though I'd failed him. Then my dad passed away. Mum passed away ... I've had agency work, like in [name of company]; I worked there for a few weeks, and they laid me off, and that made me drink more again. I'd just give up. I'd basically give up (ESA claimant, appealing assessment outcome/suspension of benefit).*

Another veteran, homeless at the time of the interview and with a history of drug abuse whilst in the Armed Forces, related the bleakness of his current life with alcohol and drug addiction. Following a dishonourable discharge, a subsequent head injury, the loss of a close relative and estrangement from his daughter, his life had spiralled out of control:

*At the court-martial I cried my eyes out in court. I said, 'Just give me any punishment, just don't chuck me out', and then they said, 'We have to'; but, yes, [the Armed Forces] was like my family... I'm just taking drugs and drinking just to get by... then when the drink wears off, then it's just even ten times worse, and then, obviously, with all the problems that are hanging over me... Cocaine is probably the thing that's ruined my life from day one, that's all the way through... I'm taking it because I want to f\*\*\*\*\* die. I don't care... I can just snap at any point and just f\*\*\*\*\* boil over, and, like, kettle's boiled and it's tipping, and when I'm getting to that I'm, like, calm and collected to a certain point, and it's getting there, and then bomb, explode... Can't even see my daughter. I was thinking about just f\*\*\*\*\* topping myself really, to be honest, I'm that f\*\*\*\*\* low, at the moment (Jobseeker's Allowance, JSA, claimant)<sup>50</sup>.*

Although this was not a common occurrence, a small number of interviewees indicated a lack of understanding from some employers in relation to the transferability of skills acquired in the Armed Forces to civilian life. In one extreme example, a respondent who had been a nurse in the Armed Forces reported an employer expressing negative views in relation to her Army qualifications and the military more generally:

*The interviewer was very sarcastic about the fact that I'd been in the Army, and she thought that I wouldn't have learnt anything. Well, she said, more or less, that nobody's ill in the Army. When I explained, actually they are ill, you know, the families are ill. You can get poorly children, and it's exactly the same as you'd get in Civvy Street, but she was very anti-Army really. Thinking that the training was no good (ESA SG claimant).*

People varied in terms of their career aspirations. Security work continued to be a key area for many. When explaining why this particular occupation appealed to them, one respondent stated that the skill set required matched that acquired in the Armed Forces and also the fact that some security jobs could be performed alone

or with a handful of others, which meant that they were able to manage ongoing anxieties about being in large crowds of people (which had resulted from their time in Service):

*It's just what I'm used to [referring to security work]. It's what you do in the Army, but for me, if I'm working on sites or something like that or working with dogs, it's only one or two people you're around, so it's not being in a full-on place all the time with loads of people, just like your own company (ESA WRAG claimant).*

Three respondents were in work at the time of our interviews, having recently moved off benefits. They were all feeling confident about sustaining these jobs. However, some respondents were nervous about being able to cope with the demands of working life and about not having the right skills and attributes for certain roles. Overall, veterans varied in terms of how confident they were about finding and maintaining work in the future, with ongoing health issues acting as the most common and significant barrier to sustained employment. For some, mental and/or physical health impairments meant that work was unlikely to be a part of their lives in the short term, while a small number felt that they would never work again owing to their enduring health issues:

*I'd like to do something, I really want to do something, but it's finding something that I'm physically able to do – anything that's got to be done to a deadline is going to be a nightmare. I'm not great with paperwork; I'm trying to learn how to use a computer, but unfortunately my language is terrible, I've always worked outside, and if somebody's aggressive to me... then I'm really volatile, you know? (ESA WRAG claimant).*

The remaining chapters of this report focus on respondents' experiences and interactions with specific aspects of the social security benefits system.

<sup>50</sup> Please note that this respondent was being supported by an NGO at the time of the interview.

# 5. BENEFITS

## Accessing social security benefits

This chapter provides a discussion of veterans' interactions with the benefits system, exploring initial experiences of applying for social security benefits, transitions between different types of benefits, and overall perceptions of navigating the benefits system.

At the time of the first wave interview, our participants were claiming the benefits shown in Table 1 below.

Previous experience of claiming social security varied across the sample of veterans. Many with long Service careers who had only recently made the transition to civilian life were interacting with the benefits system for the first time. Lack of prior engagement often led to misunderstandings about how to apply for and access the different benefits available and the expectations in respect of the mandatory job search and training requirements placed on individuals as a condition of continued receipt of benefits:

*I don't understand the whole system. I do not understand it, and this is where I think the biggest [problem] is. You'll sit there and [Jobcentre Plus] – and I love this statement – they'll say, 'Right, yes, I'd like to claim unemployment, please.' 'Why?' 'Well, because I'm unemployed.' 'Yes, and?' And I'll say, 'I've worked all my life. I was in the Army.' 'Yes, what are you going to claim for then?' 'Well, I don't know. I've never claimed it.' 'Well, you've got to tell me one or the other.' 'What about this one? I don't know the names of them.' One's income-based or something and another one's something else, and I'll say, 'Well, I don't know...' 'Well, you've got to tell me one or I'll have to put the phone down and we can't have this interview' (ESA claimant, respondent unsure whether SG or WRAG).*

The comments of one couple awaiting their first UC payment, describing the complexity of navigating the benefits system, were typical of the confusion reported more generally by veterans. The need for clearer advice on individuals' rights and responsibilities in relation to specific social security benefits was apparent:

**Table 1 - Benefit types**

Benefit Type	No.
<b>Employment and Support Allowance (ESA)</b>	<b>40</b>
ESA (Support Group, SG)	26
ESA (Work Related Activity Group, WRAG)	6
ESA (respondent unsure whether SG or WRAG)	3
ESA (initial assessment phase)	3
ESA (appealing assessment outcome/suspension of benefit)	2
<b>Universal Credit (UC)</b>	<b>20</b>
UC (required to look for work)	9
UC (limited capability for work)	9
UC (in initial claim period)	2
<b>Jobseeker's Allowance (JSA)</b>	<b>3</b>
<b>Other</b>	<b>5</b>
Recently moved from benefits into paid work	2
Recently moved from JSA to pension	1
<b>TOTAL</b>	<b>68</b>

**Veteran:** *It's like they put the needle in the haystack of needles and said, 'Off you go, here's your metal detector', which is just picking up the stack of needles!*

**Veteran's wife:** *You're given no advice on what you're entitled to either, like a benefits advisor would be a really, really good thing to have.*

**Veteran:** *Yes, it's like it's all hidden. Like we've got this secret pot of money that you may or may not be entitled to, and we're not going to tell you. You have to figure it out yourself, and after all the years I have put into taxes and income taxes... it's almost like this is my money that I should be able to access, and you're making me beg (Couple claiming UC)*

Furthermore, for those accessing benefits for the first time, perceptions of the level and type of personalised job search and application support available through JCP often did not match the reality of the support that is commonly on offer:

*I was getting treated like just a piece of crap. I went in, I'll never forget it, I went in, the first day I went in to see about signing on, I says, 'Right, I've just come out of the Army, I want to work, what can you do for us?' 'Fill this in'. I was like, 'Oh right, aye, I've got this, I've got this, I've got this'. 'Well, you can't use that.' My driving, my HGV driving, 'You can't use that'... Apparently I had no experience... I've transported ammunition across war zones and now I haven't got experience [for] transporting chicken! (UC claimant).*

Many of those with prior experience of 'signing on' in previous decades spoke of selecting advertised job cards on 'the boards' with the expectation that Jobcentre staff would then help arrange an interview with the chosen prospective employer. They were unprepared for the contemporary online system of essentially self-directed job search that is used today. Indeed, for some, the 'digital by default' approach inherent in UC and the wider delivery of contemporary social security acted as a further barrier in terms of accessing both their benefits and opportunities to secure work:

*I don't understand any of it, to be honest. I don't know how it works. None of it's been explained to me ... Jobseekers [Allowance] were a lot easier because you could just write down what jobs you'd been looking for...every job had a reference number so they could check whether you'd actually [applied]... on this one [Universal Credit] it's like - I don't - I can't use computers anyway, do you know what I mean?...I don't even know why Jobcentres are even there anymore. If I have to do everything online myself, I don't even know why they're there (UC claimant)*

*You go in there now, and it's not a Jobcentre, it's just a claim processing centre (ESA WRAG claimant)*

It was also clear that some had experienced movement between different benefits, which reflected the complexity of people's health problems and personal circumstance as highlighted previously. For example, one respondent talked about first experiencing the benefits system when they claimed Employment and Support Allowance (ESA). However, they described how they had been assessed as 'fit for work' (see discussion on Work Capability Assessments in Chapter 6) and moved to Jobseekers Allowance (JSA) with its stricter regime of conditionality, which they had struggled to meet. They had experienced a period of street homelessness, before being placed, following a successful appeal, in the Support Group of ESA. Another respondent talked about an initial joint JSA claim and how they had encountered difficulties when they were both street homeless and then he had gone to prison; however, prior to release from prison, support was available to him to ensure that there were no delays to his benefit claim upon his release:



**Veteran:** *Our argument was: we were on the streets, how are we living together? We've got nowhere to live, but they did eventually make us go onto a joint claim.*

**Veteran's wife:** *Yes, but then you went to jail [talking to husband]... And then I had a little bit of issues, because he went to jail and he wasn't there to fill out a form... So they messed me around a little bit, but eventually I just ended up just saying, 'Well, look, at the end of the day, you've still got to give me my part of the benefit', so they did eventually sign you [speaking to husband] off of the claim and let me claim on my own, but when he was released from jail, because we were obviously, even though we're still a couple, we're not living together, we've had to claim separately.*

**Veteran:** *And then, two weeks before I was released from prison, they have a Jobcentre in the prison and the guy sets your claim up... So you can pretty much, you get paid the week after you get out... [it's] really helpful... because you haven't got to go through all the phone calls and interviews. Because he actually works for the Jobcentre... It's just one less thing to worry about. (Couple claiming ESA, both SG)*

It was evident that some movement between different types of benefits had happened on the advice of JCP, where individual advisors had noticed that the respondent had particular health or personal problems. One respondent, for example, referred to the Jobcentre advising him to go to the doctor to get a 'sick note' relating to his alcohol issues, which he subsequently did. However, the support of NGOs (Armed Forces charities, other third-sector organisations, housing providers, etc.) played a vital role more widely in enabling respondents to access their benefit entitlements and/or successfully challenge decisions on an individual's 'fitness to work':

*I didn't get better, I ended up with epilepsy and other medical problems. We basically got told that we'd lost everything, we were no longer being paid; they wanted me at work, they wanted me to go through all these interviews, go to the Jobcentre, and as horrible as it sounds, I couldn't do it... [Veterans charity] I owe that woman everything (ESA SG claimant).*

A number of veterans had also been moved from 'legacy' benefits (i.e. JSA and ESA) to UC. However, transitions were regularly difficult owing to the five-week waiting period for the initial payment, with some having to wait much longer as a result of administrative errors and misunderstandings, and one respondent reported a nine-week wait before receipt of their first payment. This often negatively affected people's ability to meet their basic needs and increased levels of debt and rent arrears. For example, a couple awaiting their first UC payment at the time of the interview were becoming increasingly concerned about their worsening financial situation:

*We're at that crossroads now where it's starting to become completely unmanageable... It's worrying. [I'm] really tired through worrying... We try to hide it from [the children] as much as we can. We don't really argue about money, do we? [talking to her husband] (UC claimant).*

When such delays occurred, veterans were widely reliant on charitable bodies and broader networks of family and friends to make ends meet:

*It's the first time in my life I've had nothing, and I hate it. I absolutely hate it... My mam's got nothing, but she'll give us a tenner here and there, whenever she can. It's not just that, obviously you've got to pay a service charge to be here [referring to supported accommodation]. They understand that I've got to wait this period of time [for Universal Credit], but as soon as I get that money it will all go on my rent that I owe here. I'm not going to see any of that money myself (UC claimant).*

Indeed, only a small number of respondents indicated that they were currently 'comfortable' financially. The majority stated that they were struggling to manage on their current income, with many referring to debts (e.g. credit cards and loans), arrears (e.g. rent, Council Tax and utility arrears), Debt Relief Orders and court fines. Some interviewees had also used emergency food provision (e.g. food banks):

*I get food parcels, f\*\*\*\*\* 59 years old and I get f\*\*\*\*\* food parcels... Nobody should be getting food parcels. Do you know how demeaning it is to go into the... community hub and, 'please can I have some food?' I mean that is so demeaning. It is so belittling (ESA SG claimant).*

Finally, there were reflections on the perceived stigma associated with claiming benefits, which prevented some from initially claiming what they were entitled to, and feelings of shame at having to go to the Jobcentre. Existing research shows that such feelings are common amongst benefit claimants<sup>51</sup>; however, this was perhaps amplified for those who had served in the Armed Forces:

*I survived for two years without a penny... I didn't claim anything, I was totally against it. I was too proud to go and do anything like that, and then, at the other end of it, my anxiety was too bad for me to walk into [the Jobcentre]... I remember my first appointment, going to the Jobcentre, and it was horrific. The woman was sat there speaking to me like I was some sort of little child that didn't want to get out of bed in the morning to go to work, and that wasn't the case... I don't think the Armed Forces personnel should have to go to the Jobcentre once leaving the Army, because it's degrading, and it is massively degrading, when you do something as proud as serving in the Army (UC claimant).*

51 See, for example: Shildrick, T., MacDonald, R., Webster, C. and Garthwaite, K. (2012) *Poverty and insecurity: Life in low-pay, no-pay Britain*, Bristol: Policy Press; Garthwaite, K. (2015) 'Keeping meself to meself' – How social networks can influence narratives of stigma and identity for long-term sickness benefits recipients', *Social Policy & Administration*, 49(2): 199–212; Patrick, R. (2017) *For whose benefit? The everyday realities of welfare reform*, Bristol: Policy Press.

# 6. BEING ASSESSED

## Experiences of the Work Capability Assessment

As highlighted previously, a large proportion of our respondents had health conditions that affected their ability to look for, undertake and/or maintain paid employment. As such, many had at some point undergone a functional assessment as part of a benefit claim. Most commonly, this was a WCA for ESA or, more recently, to establish their capability to work with regard to UC. This chapter provides a summary of veterans' experiences of undertaking such assessments, suggesting predominantly negative perceptions of the process.

In a similar way to existing research that has critiqued the WCA<sup>52</sup>, the respondents raised concerns about both the skills and the appropriateness of the staff undertaking the assessments and also the perceived focus on physical functional capabilities within these assessments and the limited attention paid to mental health issues:

*I felt like a robot. I felt nervous. She [the assessor] never looked at me. She just sat there typing on the computer... 'Can you do this?' Yes/no. 'Can you do this?' Yes/no. 'Can you do this?' Yes/no... It was like a chicken pen; like a chicken line. It's processed (ESA claimant appealing assessment outcome/suspension of benefit).*

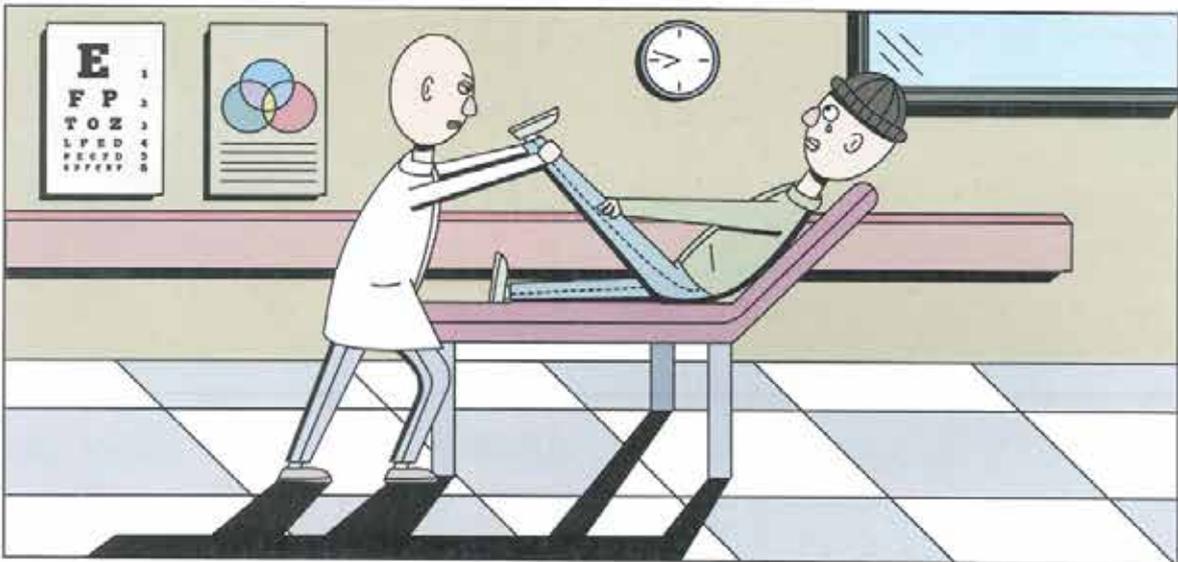
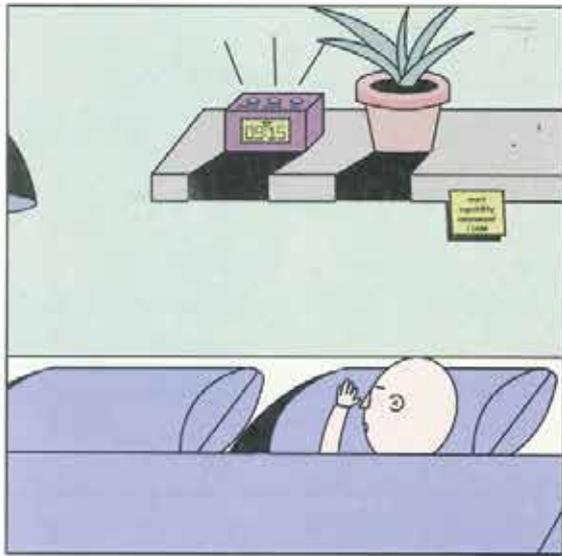
*It's a bit daunting... when you go there they ask you irrelevant questions. 'Can you lift your right hand? Can you lift your left hand? Can you sit down, can you stand up? Can you stand here?' That's irrelevant to me. It's not your physical, it's what's in your mind (Recently moved from JSA to pension).*

In addition to experiences of the WCA, people also referred to experiences of assessments for PIP. In a similar way to the WCA, concerns were raised about the expertise of those undertaking the assessments and the perceived lack of understanding in relation to mental health issues:

*I got a letter back from PIP saying I got no points... So I rang them up, I said, 'Look, I'm not being funny'; I said, 'but I've got no points, I'm not getting my PIP'; and I said, 'my ESA's been reduced to the standard rate'. I sent all the information regards my medical condition, and they said, 'What evidence have you sent in?' So I said, 'Well, it's about ten pages long, from Combat Stress, signed and all the rest of it... I said to them, 'Do you understand the mental health condition I've got?' They said, 'Yes, we looked at it, but we can't understand how that's affecting your daily life', and I thought, but surely, if you're assessing me on a medical, on mental health issues, you should understand the different mental health conditions. 'So, for example', I said, 'on my bad days I do need prompting to have a wash. I do need prompting to feed myself, because sometimes I just sit there and fester and do absolutely nothing'; I said, 'and sometimes, if I'm cooking something and I've got the cooker on', I said, 'if I have a flashback, that flashback could last ten minutes, 15 minutes, and when I come round it could be on fire'. 'Yes, but we don't understand how your mental [health] affects you' (ESA SG claimant).*

This respondent was subsequently awarded PIP but had been required to go through the process of providing evidence a number of times.

<sup>52</sup> See, for example: Barr, B., Taylor-Robinson, D., Stuckler, D., Loopstra, R., Reeves, A. and Whitehead, M. (2016) 'First, do no harm': are disability assessments associated with adverse trends in mental health? A longitudinal ecological study', *Journal of Epidemiology & Community Health*, 70(4): 339–345; Dwyer, P., Jones, K., McNeill, J., Scullion, L. and Stewart, A. (2016), *op. cit.*



More specifically, concerns were raised with regard to how the assessments approached mental health issues relating to Service in the Armed Forces:

*I went for an assessment... [the nurse] asked me, 'what's wrong with you then? I want to know what happened in Iraq'. I said, 'I don't feel comfortable to tell you that', and he gave me zero on everything. He said, 'Can you walk to the shop?' (ESA, appealing assessment outcome/suspension of benefit).*

There were some cases where people referred to assessors having an understanding of the issues facing veterans:

*The young girl that did it, she was really nice because she did inform me, she said, over the last couple of months she had had a lot of ex-service personnel going in and stuff, so she was really nice, but I know in the past, they're just blunt (ESA SG claimant).*

However, such examples were rare, and many respondents subsequently launched appeals to challenge the initial outcome of their assessment and the attendant decision about fitness to work<sup>53</sup>. Several respondents were in the process of appealing at the time of the interview, often with the support of their doctors and other agencies. One respondent talked about a particularly unpleasant experience during an assessment, which had resulted in him making a formal complaint to the DWP:

**Veteran:** *I remember I had one particular incident when I went along, and I said to the guy, 'Look, if I start to feel unwell or if we need to stop, can we stop the interview and can I walk out for five minutes?' The guy says, 'No'. He says, 'I've got 40 minutes. It's got to be done in 40 minutes'. He said, 'To be honest, all you veterans that say you've got PTSD and everything, it's just a crock of s\*\*\*'.*

**Interviewer:** *Those were his actual words?*

**Veteran:** *Yes, and I turned round and said, 'Well, are you medically trained? Are you trained enough to evaluate, to tell me that what I'm telling you about my PTSD is not true?' He said, 'Well, no'. I said, 'Well, how can you say that then?'... I complained to the manager before I left... Then, obviously, a week later the DWP called me and said, 'Well, what's this about a complaint?' I blankly told them on the phone. They said, 'If we send you a form, can you fill it in?' I filled it in and I said, 'Look, this is what he said. This is the way I felt I was treated'... but then when I spoke to them, I think it was about a month afterwards, they said that the assessor had been pulled into the office and basically given a verbal warning. That's all that happened. (ESA SG claimant)*

This respondent was placed in the Work Related Activity Group (WRAG) of ESA, where he was expected to undertake work related activity to move closer to the labour market. He spent 18 months in the WRAG before seeking reassessment. This second assessment was undertaken by a doctor, and he was subsequently placed in the Support Group:

*I got reassessed by a doctor this time, not an assessor. The doctor basically turned round and said, 'You shouldn't be in the Work Related Activity Group. You need to be in the Support Group. You're in no fit state to take part in what they ask you to do'... She [the doctor] came to see me. She asked me a load of questions. She took one look at my evidence, and she said to me, 'Within one week, you'll be out of the Work Related Activity Group, and you'll be in the Support Group'. She said to me, 'Looking at your War Pension assessment', which she had in front of her, and she's looking at the assessment which was initially done after 13 weeks. She's looking at this information, she says, 'There's no way you should have been put into the Work Related Activity Group with your physical and mental health problems' (ESA SG claimant).*

It was clear that where evidence from Service medical information was available and taken into consideration (as in the case of the reassessment noted above) respondents were more likely to have the impact of impairments on their ability to undertake paid work and/or undertake work-related activity appropriately recorded and acknowledged. For example, one respondent indicated that they had not had to go through a WCA because all their existing Service medical information had been sent over to the DWP. However, only a small number of respondents explicitly mentioned that Service medical information had been used to support benefit claims.

Furthermore, the assessment process itself was also seen to affect people's mental health, exacerbating existing conditions. For example, one respondent talked about how difficulties with the assessments related to their claim for both ESA and PIP caused them to go back onto medication:

*I had stopped [taking medication], but when PIP got involved and all the rest of it, and we had interviews with the ESA and interviews with PIP and everything else, my stress level went straight through the roof... Now I'm on fluoxetine and trazodone (ESA SG claimant).*

Another respondent, who had an assessment imminent at the time of the interview, described feeling nervous about the prospect: *I must stress that just talking about it I can feel my palms getting sweaty now, I can feel my head going a little bit just talking about that* (ESA claimant, respondent unsure whether SG or WRAG).

Finally, many respondents talked about taking people with them to their assessments as a form of support, whether that was family members or organisations that were supporting them with their claims. Having this support during an assessment was vital for many people and, indeed, some of the respondents who had gone to their assessments alone perceived that this was sometimes detrimental to the outcome: *and because I went on my own... that went against me* (ESA, initial assessment phase).

<sup>53</sup> Data suggest that over 40% of people who have appealed their initial WCA assessment decision have had it overturned (see Barr et al., 2016, *op. cit.*).

# 7. MEETING CONDITIONS

## Meeting the conditions of the benefit claim

This chapter looks in greater detail at the conditions that veterans had to meet in order to receive social security benefits, focusing on two particular issues: firstly, whether or not they believed that the conditions attached to continued receipt of their benefits were reasonable, and secondly, any barriers that inhibited respondents' ability to meet the conditions of their claim. At the time of the interview, approximately one-third of our respondents were required to be 'actively seeking work' or undertake work related activity to move closer to the labour market; this included a mix of people on ESA in the WRAG and others on JSA or UC (see Table 1 in Chapter 5). For some veterans on UC, it was evident that there had been reductions in the number of hours that people were expected to spend searching for work (i.e. some referred to 10 or 20 hours rather than 35 hours), which were related to their health conditions. However, overall, veterans did not feel that the conditions of their claims were reasonable or achievable. This chapter also includes insights from those who were now in the Support Group of ESA but had previous experience of mandatory work-related activities.

Although people were keen to actively look for work – and many, in principle, agreed with attaching conditions to the receipt of benefits – people questioned the efficacy of some of the requirements, such as the 35-hour-per-week job search under UC, the use of Universal Jobmatch<sup>54</sup> and attendance at mandatory training courses<sup>55</sup>. In some cases, people were honest about resisting the conditions that were set when they did not feel they were appropriate:

*I think it's fair enough, but they ask you to do a bit too much... I think people don't actually do [35] hours looking a week, because I don't think I've ever met anyone on Universal Credit that actually looked for [35] hours a week!... I handed a couple of CVs in in the shops personally, because obviously when I do my shopping I might as well just take my CV... and I've just told them I've put my CV online... and if you have proof of a few [applications], so if you just do a few and print it off and say [I]did this, then they [Jobcentre Plus] leave you alone... I struggled to sit down and focus on a computer, so they're expecting me to sit there for [35] hours, and that's not going to happen (UC claimant, living in supported accommodation).*

A respondent who was planning to return to the Armed Forces and was currently claiming UC was resisting being pressured into taking 'any job', as is routinely required within the UK's 'work first' system of social security:

**Veteran:** *I would say 20 hours a week would be reasonable, but not [35], no.*

**Interviewer:** *Do you do [35] hours?*

**Veteran:** *No, of course I don't.*

**Interviewer:** *Do you tell them you do [35] hours?*

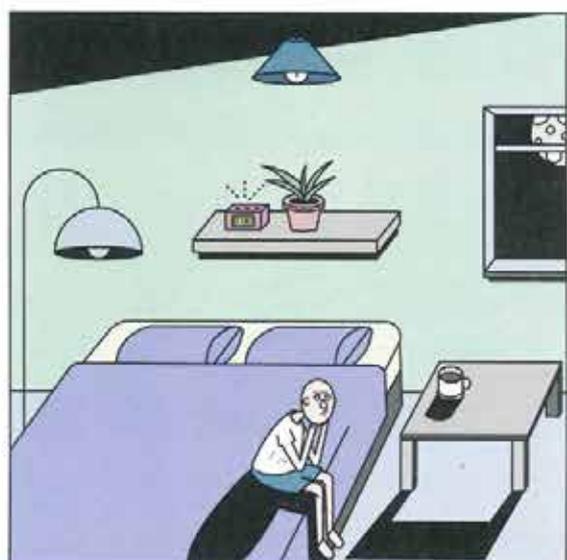
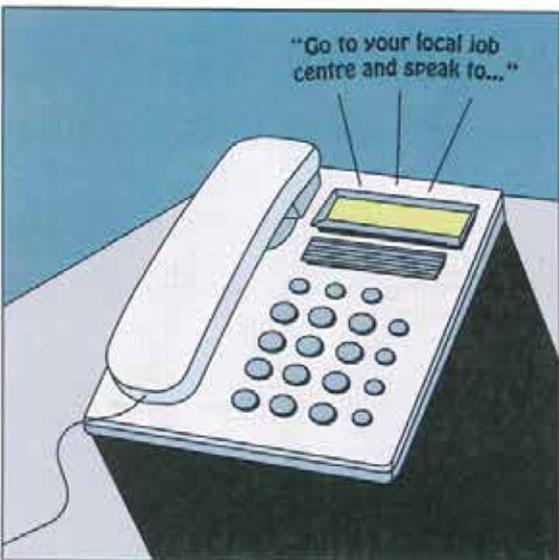
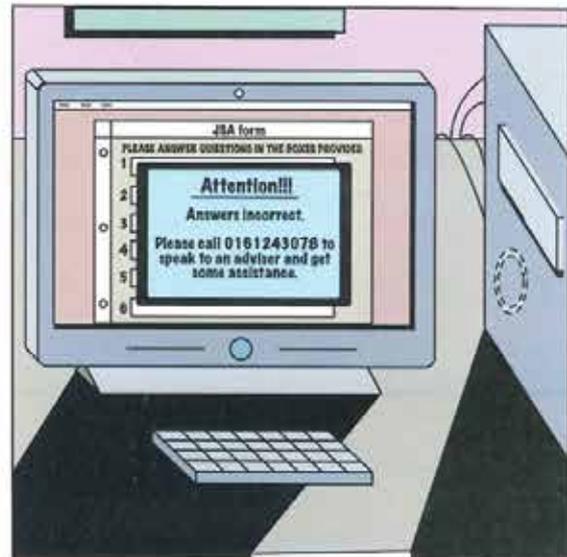
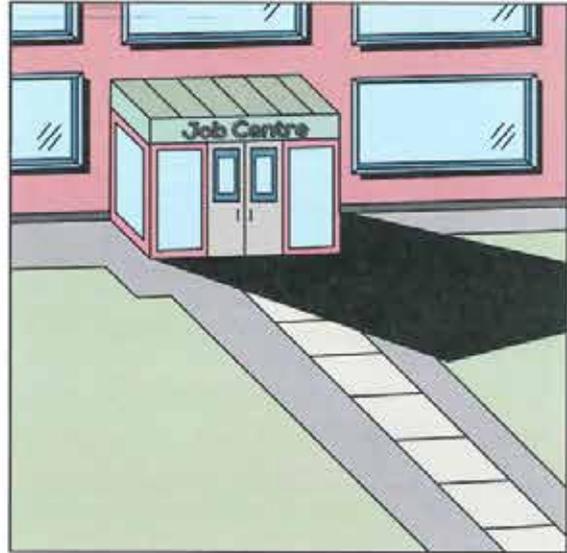
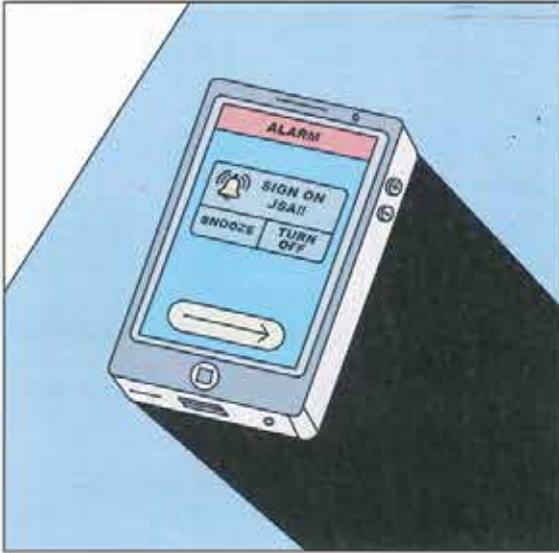
**Veteran:** *Well, yes...*

**Interviewer:** *Why isn't [35] hours reasonable?*

**Veteran:** *Because, you know, it's a lot of, it's applying for a lot of work, doing that. You can't just apply for the same job over and over and over again. Do you know what I mean?... you've got to choose what you specifically think you could get, and then you work your way to try and get that job. Not just applying for any work... if there's certain jobs that you do want to do, you'll work to try and get that job. Like me, I've got to do assessments to get back in the Armed Forces. That's a process. If you're just applying for any work, it's just pretty pointless. (UC claimant)*

<sup>54</sup> Universal Jobmatch is the website that benefit claimants can use to find job vacancies. It enables the DWP to monitor a person's job search activities if the individual claimant grants their Work Coach access to their personal Universal Jobmatch account.

<sup>55</sup> The DWP stated that, in circumstances where a claimant is required to look for work, if a Work Coach sets any work preparation activity, such as attending a training course, it will be offset against the time a claimant is expected to spend looking for work.



Another respondent had paid for a course himself to enable him to enter the career that he wanted, with guaranteed employment once he had received his qualification; however, he indicated that 'this wasn't enough' for JCP, who expected him to find interim employment while he was awaiting his qualification. He was concerned about how taking up unrelated work would have an impact professionally when employers looked at his CV:

*I've just been and done a 34-day course, that was nothing to do with the Jobcentre... They're not paying for it, I paid for it myself... I need to wait roughly four weeks for my badge to come through, and then I can go away and start working. I know that's my goal, and that's what I'm doing, but that's not good enough for Universal Credit. They're telling me that, 'That's not good enough. I need to go and find a job now until I start working'; but it's like if I do that then I'm making my CV a lot worse than if I didn't, because I'm joining a job and I've left it within a couple of weeks. It's not showing consistency (UC claimant).*

Furthermore, people described how the emphasis on taking 'any job' gave no consideration to their previous work experience, preferences or skill set. The pressure to take any job was reinforced by the threat of sanctions:

*They [Jobcentre Plus] just said I couldn't choose, I couldn't turn down jobs, so I'd have to go with anything that was offered, if I did turn down jobs I'd get sanctions... it's not as easy as that. I've got to do certain types [of work], security jobs are perfect for me because it suits my skill set from the Army, from being a Guardsman... But you put me in a factory and I'm no good... [I'm] going to end up back on the dole in three months' time, if not earlier (UC claimant).*

In line with existing research focusing on welfare conditionality<sup>56</sup> (i.e. the regular application of compulsory full-time work search/training requirements under the threat of benefit sanctions), there was sometimes a counterproductive 'culture of compliance' that got in the way of more meaningful and effective attempts to secure employment. For example, one respondent was required to make daily visits to the Jobcentre to undertake mandatory job search activities. He clearly resented this requirement, because it reduced the likelihood of him actually finding work to support his family:

*How the hell do you prove that you've searched three hours for a job?... it's a vicious circle, and it's making it harder to actually do something that shouldn't be as hard. They make the idea of getting a job harder... [I] was angry, but I still went every day... because I knew I've got two kids... there's still bills that need to be paid. If I get angry or if I don't turn up, it won't happen (ESA SG claimant).*

Some respondents also questioned the usefulness of the Universal Jobmatch website, which people were routinely expected to use to demonstrate that they were searching and applying for work. One person referred

to applying for around 300 jobs without success, while another stated that the jobs that were listed on that site were often not available or not appropriate for their skills/qualifications:

*There's more jobs on the likes of Indeed than there is on the Universal Credit one, but they wouldn't have it. 'No, no, you have to job search on ours so we know you're job searching'... but most of the jobs that are advertised are either – I wasn't qualified for or they were taken (UC claimant).*

Other respondents indicated that they only used Universal Jobmatch to comply with the conditions attached to continued receipt of their benefits and that they then used other sites that were more likely to help them find an appropriate job. For example:

*Every day logging on to Universal Jobmatch, which to me isn't appropriate for me because there's a lot of recruitment companies out there that do ex-Forces, which is better for me. So Universal Jobmatch is a bit of a pain in the backside, because sometimes you log on to apply for a job just so it covers you to show them in the Jobcentre you've been looking for work... You have to log on to Universal Jobmatch even though it's no good to you (JSA claimant).*

For some veterans – running counter to the purpose of conditionality – the removal of conditionality was perceived to have a more positive impact on the ability to prepare for employment. For example, a veteran with a respiratory impairment caused by employment after leaving the Armed Forces had initially been placed in the WRAG of ESA. His ex-wife had helped to challenge this decision with reference to his deteriorating health:

*She challenged it because I was getting worse. I was having at least two attacks a month, and they were hospitalised, every one of the... Then you get the phone call [from Jobcentre Plus], and it's, 'Why aren't you coming in to do your job search'. 'Well, I'm in hospital' (ESA SG claimant).*

Following the provision of additional medical evidence, he was subsequently reassigned to the Support Group. In addition to his physical health condition, he stated that he also had PTSD as a result of his time in Service. The removal of the expectation of having to go to the Jobcentre had enabled him to focus on his health but also take steps towards returning to the labour market: ***It gives me time to retrain for going back to work*** (ESA SG claimant). Another veteran, who had previously made a claim for JSA, opted to disengage from the benefits system for a period as he could not cope with the demands of his claim, during which time he relied on informal familial support:

56 Wright, S., Dwyer, P., McNeill, J. and Stewart, A. B. (2016), *op. cit.*

*'Right, we've got to do this for you, we've got to do a CV for you, we've got to do this for you, we've got to do that... you can't get this unless you've done that'... I thought I've had enough of that. I mean, my mind was going totally, and I thought, I've had enough of this crap, and I just didn't sign on again. I went for nearly six months without a penny... because of all the hassle and the crap, I came off it and I was living off my sister, my daughters... I wouldn't take a penny off them [DWP] because I couldn't handle all the aggravation I was getting (ESA claimant, respondent unsure whether SG or WRAG).*

He had since re-engaged with the benefits system and was now on ESA, although he was unsure whether he was in the WRAG or the Support Group. He was also currently living in veteran-specific supported accommodation.

There were a number of respondents who had transitioned from ESA to UC, and, although they remained 'off sick', for some this transition had brought not only a new requirement to attend regular appointments at the Jobcentre but also a new online system to navigate. One respondent was expected to attend fortnightly appointments and, although he did not overtly object to this requirement, at the same time he questioned both its appropriateness and its value when it had previously been accepted that that he was unable to work owing to long-term illness:

**Veteran:** *Well, my sick note runs out middle of November, but when I was on ESA I didn't have to go in, I just had to give them proof that I was signed off sick by the doctor... But with Universal Credit I've basically got to go to these appointments every two weeks, and I'm literally just turning up to the appointment, they're saying, 'Oh, you're still signed off sick'... 'Right, we'll book your next appointment'... They basically say, 'Oh, it's down to the assessor's decision whether you go to your appointments every two weeks, and if you miss an appointment it's the same as anyone else who's given the job searches' [implying the possibility of a sanction]... They basically just said, 'Well, it's in our interest to see you every two weeks just because, to check your welfare basically'; that's the way they make it sound.*

**Interviewer:** *Do you get a sense that they're checking your welfare?*

**Veteran:** *Well, no, because isn't that the doctor's remit? Do you know what I mean? If the doctor's signed me off sick, the doctor's signed me off sick... I don't mind going in and signing on, I just think it's a bit of a, it's a non-event really... you're just going in, showing your face and then walking out basically, getting another appointment, 'see you in two weeks'; that's pretty much it. (UC claimant)*

Very few respondents felt that they had much influence over what went into their Claimant Commitment for UC, although it was clear that some had had their Claimant Commitment changed to reduce or remove job search expectations as a result of health conditions, and there was some evidence of Jobcentre advisors exercising their discretionary powers positively in relation to people's individual impairments:

*She went, 'do you know something', she says, 'I'm not even going to ask you to the Jobcentre any more'. She says, 'you've had too many strokes and you've got a heart problem'. She said, 'we'll just leave that' [referring to the Claimant Commitment]. Basically, she just ripped it up, just put it in my folder (UC claimant).*

In other cases, however, such allowances for people's circumstances were absent. One respondent indicated that he had had a 'disagreement' with his advisor over the Claimant Commitment, which related to the advisor's lack of understanding of the impact of his mental health problems:

*We had a bit of a disagreement over it [Claimant Commitment]... I was sat there with the support worker [from NGO] because they [Jobcentre advisor] were telling me that I had to job search in order to receive the benefits. I had to turn up to their appointments every two weeks in order to receive the benefits and some other things. I didn't agree with any of them because [of] the mental state that I was going through, I already told her that I'd struggled going there, so why was I going to go there and sit on day courses and stuff like that, when I'm trying to sort myself out. But then, why would I be looking for work, when I know for a fact that I've got severe anxiety issues, severe PTSD (UC claimant).*

For those on ESA in the Support Group, there were no conditions attached beyond attending (if required) periodic functional assessments. However, for some in the Support Group who had previous experiences of 'conditions' (e.g. when claiming JSA), there was a lingering fear that they would be required to engage in future work-related activities when they were not ready. One respondent, for example, had been reassessed and placed in the WRAG. When asked how he felt about that decision, he stated:

*I think, in some degrees, yes, it's all right because it helps us to try and get my SIA, but then I think, maybe if I just had another couple of years just to get myself sorted, my mental health sorted a bit more. They [Jobcentre Plus] say not, you've got to get this now or you're going to go back on the JSA... as soon as I go on JSA that's it, I'm done for... I won't be able to afford my house and I'll be homeless again, and I can't afford that when I've got my girl (ESA WRAG claimant).*

It was evident that ill health and impairments had routine and significant negative impacts on people's ability both to meet the conditions attached to their benefit claim and to enter and sustain paid work. A number of respondents – like the man mentioned above – described how they needed time to address their mental health issues. Some questioned whether or not they would be able to find employment owing to their ongoing treatment for mental health issues.

*[The Jobcentre] say, 'Oh, we'll set you up for a job. If you refuse to do this we'll sanction you'. Okay, brilliant. Give me the telephone, 'This employer wants to talk to you'. 'Hello?' 'Hello. Blah, blah, blah. Your CV is fantastic. Come and work for us. Blah, blah, blah. Are you okay to drive?' 'Well, no, because I'm on lithium.' 'Bye', and put the phone down (UC claimant).*

*I am looking for work, but realistically I'm not going to be able to do eight hours a day, 40 hours a week... I sleep very badly, but sometimes during the day I can't keep my eyes open, I'm doped up too... I could possibly [work] if, you know, in the early hours of the morning I'm suddenly wide awake or haven't gone to bed, I could do stuff... if it's something that I could do sort of anytime, but trying to find a job in a work environment that's going to allow me to do that... I think is impossible (ESA WRAG claimant).*

Such concerns extended to those with physical and sensory impairments as well. For example, a respondent with a visual impairment had taken employment at a nursing home because of the requirement, as a JSA claimant at that time, to take 'any job'. After experiencing difficulties in that job due to her impairment, she had experienced a panic attack. The intervention of her doctor and a charity enabled her to make an application for ESA:

*I tried working at a nursing home round the corner... I got really stressed out, I had a few near misses, tripping over things, struggling to find things... I mean all the things that you would expect with a visual impairment... I think it must have been a panic attack that I had one morning, I said I wanted to go home and I just broke down... I went to visit a GP and I was in a bit of a state. I did actually then get a note to say that I was anxious and depressed, and my sight impairment officer came round and she said, 'Enough's enough', she took me back to see the disability advisor [at the Jobcentre], and then he said, 'Right, make a claim for ESA, and I recommend that [she] takes some time out' (ESA SG claimant).*

This respondent's mental and physical impairments were not a result of her time in Service, and she had not previously experienced any mental health issues (beyond describing herself as being 'on the anxious side'). However, her interaction with the benefits system had exacerbated her anxiety to the level that it now required treatment:

*My mistake was going into the Jobcentre in 2015, and they were supposed to be helping me and they actually, it was more of a hindrance... I've always been on the anxious side, but since, and it was absolutely to the day that I walked into the Jobcentre that this anxiety's becoming a real problem and I'm currently seeing a counsellor (ESA SG claimant).*

# 8. SANCTIONS & SUPPORT

This chapter provides an overview of respondents' experiences of both sanctions and/or support within the social security system. With regard to sanctions, it explores the reasons why people had received sanctions and the subsequent impact of this temporary removal of their income. With regard to support, it discusses people's perceptions of the efficacy of mandatory support provided by advisors/Work Coaches and also whether veterans experienced any differences in support following disclosure of their ex-Forces status.

## 8.1 Experiences of benefit sanctions

A total of 21 respondents said that they had experienced a benefit sanction at some point during their interaction with the benefits system. For the majority of these respondents (14), this experience had been more than 12 months previously. Seven people had been sanctioned within the last 12 months, with five of these being sanctioned within the last six months. The respondents' perceived reasons for being sanctioned ranged from being late for or missing a prearranged appointment; incorrectly completing their online job search journal; failure to undertake their specified required number of hours of job search; and, on occasions, administrative errors on the part of DWP staff.

Unsurprisingly, and in accordance with existing research<sup>57</sup>, the majority of respondents talked negatively about their experiences and the wider impacts of being sanctioned. A respondent described how he had been sanctioned for doing 27 rather than the mandated 35 hours' job search specified in his Claimant Commitment and also for missing an appointment. While he accepted that he had not done what was required, he explained the reasons behind this and suggested that it was also partly because his usual Work Coach, who he felt understood his particular circumstances, had been away:

*I'm a little bit better now, but I've always struggled with computers, and I couldn't always get access to a computer, so I was doing it [job search] off my phone, and I was explaining this to the Jobcentre, and there's a couple of times I had to see another person because my Work Coach was, like, out on holiday or whatever. I got sanctioned once or twice because I'd done, like, 27 hours, not [35]... I do admit that, fair enough, I couldn't do my full [35] hours sometimes because I couldn't always get to a computer, and there is once or twice when my mum had one of her turns where we've had to ring an ambulance and stuff, and I've missed an appointment... I did ring the Jobcentre once and say, 'Listen, I'm waiting for an ambulance, I've got an appointment at such-and-such, I'm waiting for an ambulance.' 'Well, can you not get someone else to go with her?' (UC claimant).*

Across the sample, evidence that compulsory job search activities under threat of sanctions were effective in helping people to move into work was rare. However, one respondent did suggest that being sanctioned had given him more of a 'push' to find work. He had been sanctioned for not completing his job search properly over a Christmas period, as he was looking after his son. The sanction had made him more 'determined' to find work, but had also made him more likely to be dishonest about his job search activities:

*I was just more determined to get into work as soon as possible, because I don't want to experience that [sanction] ever again... If I was totally honest, and I was having my son – no, I wouldn't do a job search on Boxing Day, but I'd fill something in on the book and put it down as the 26th December. I wouldn't make the mistake of being honest and saying, 'Look, I've been looking for work apart from Boxing Day, because I had my son' – I wouldn't make that mistake again... it wasn't long after that I found work, so, if anything, it gave me the push (Recently moved from JSA into paid work).*

For others, limited IT skills and an inability to use the online systems were perceived to have resulted in a benefit sanction being applied. This issue was more

<sup>57</sup> Dwyer, P. and Bright, J. (2016), *op. cit.*

prevalent among, but not limited to, older veterans. A number of people also spoke of not being able to afford to access the internet whilst reliant on social security benefits:

*What happened was, because I was on the ESA and I went over to Universal Credit, everything was online... I'm 54 years old, I wasn't sure what to do, and things weren't made very clear. I forgot to go online, onto my account, apparently, and tick a box or put an X in the box or press the space bar in the box, so I was sanctioned... but the problem is I can't afford internet (UC claimant).*

This man explained that as a result of his sanction he had resorted to desperate measures in order to feed himself: ***I was in food banks, I was in skips, I was behind Greggs in the bins.*** He went on to describe a feeling of being 'let down' by his 'country' at a time when he needed support:

*I can see why they do it [sanction], I just think that there's no room for error... F\*\*\* this country... These are the most vulnerable people in the country, what is the point? What is the point of installing a regime, when people who are struggling in the first place?... I've played by the rules all my life, thinking that this was the country, this is what it's all about... I've come in now, into the system after all these years, if I've just been very unlucky with this Universal Credit or what, I haven't got a clue what it was like before, I've got no idea. All I can do is judge it by what it is now. I am shocked and absolutely so let down and so deflated, if this is what they're doing... After 39 years working, paying National Insurance contributions, first time in my life, aged 54, need some help, no money, no food, no nothing. Is this country for me, is this country for you? (UC claimant).*

He was clear about both the ineffectiveness of sanctions in enabling people to take up work and also their role in promoting poverty and homelessness.

In addition to those who had experienced a sanction, a number of people described living in fear of the application of a benefit sanction for non-compliance with the conditions attached to their claim:

*I'm waiting for them [Jobcentre Plus] at any minute just to say, 'No, you've not done enough, right, we're sanctioning you. That's it, you're getting nothing'... they're not pushing people into work, they're sanctioning people and they're pushing people on the streets, which is different, do you know what I mean? (UC claimant).*

## 8.2 Experiences of mandatory Jobcentre Plus support

As highlighted in Chapter 2, conditional benefits systems combine **sanctions** (as discussed above) with a requirement for claimants to compulsorily engage with **support** to search for, prepare for and enter paid work. The interviews provided some examples of positive experiences of interactions with, and mandatory support being provided by, advisors/Work Coaches. This was

very much dependent on the particular advisor/Work Coach assigned to an individual, whether or not they fully understood a person's needs and circumstances, and how they subsequently exercised the discretionary powers and easements of conditionality available to them:

*[My] work coach in [area] was actually really, really good. He did take things into consideration, say I was late for an appointment, etcetera, he didn't go straight screaming upstairs [i.e. referring him for a sanction]. He knew that on paper it was one thing, but on a personal basis, he had more of a relaxed attitude towards me (ESA claimant, in initial assessment phase).*

*He's fletted over it [referring to the Claimant Commitment]. He said, 'If you don't attend certain meetings or you don't do... If you're not seen to be active on the thing, then they could stop your Universal Credit and all that stuff'. But he said, 'You haven't got to worry about that yet because I want you to get better before you start doing these things' (UC claimant).*

Several respondents reported that they had encountered no issues in their face-to-face interactions with advisors/Work Coaches but that they had experienced significant problems when using DWP telephone advice lines. These related to the length of time it took to get through to speak to someone, as well as being given advice that was contradictory to that previously offered by their advisor/Work Coach.

As highlighted elsewhere<sup>58</sup>, ironically, among some of those assigned to the Support Group within ESA there was a sense of abandonment because of the unavailability of employment support for this group of ESA claimants. Although this suited some respondents who, owing to the severity of their impairments, believed they were unable to work for the foreseeable future, others who believed they would be capable of work in the future bemoaned the lack of support they received:

*From last September I was told I was in the Support Group for three years, but they didn't actually offer anything, you know, you're just left alone, and anybody wanting to work, they're just not getting the support (ESA SG claimant).*

*Because I'm on the sick, so they can't really do much with me, but there doesn't seem much structure when I go in to my appointments, like I just feel like I'm turning up, signing on and getting my next appointments, that's pretty much it. Like there's no follow-on or, 'What's your next plans? What's your next steps? How are you getting on with your help?'... Even if you're not looking for jobs at the moment, even if they could say, 'Right, well, we know you're off sick at the moment but there's this course that could help you...' (UC claimant).*

58 Dwyer, P., Jones, K., McNeill, J., Scullion, L. and Stewart, A. (2016), *op. cit.*

### 8.3 Evidence of veteran-specific support

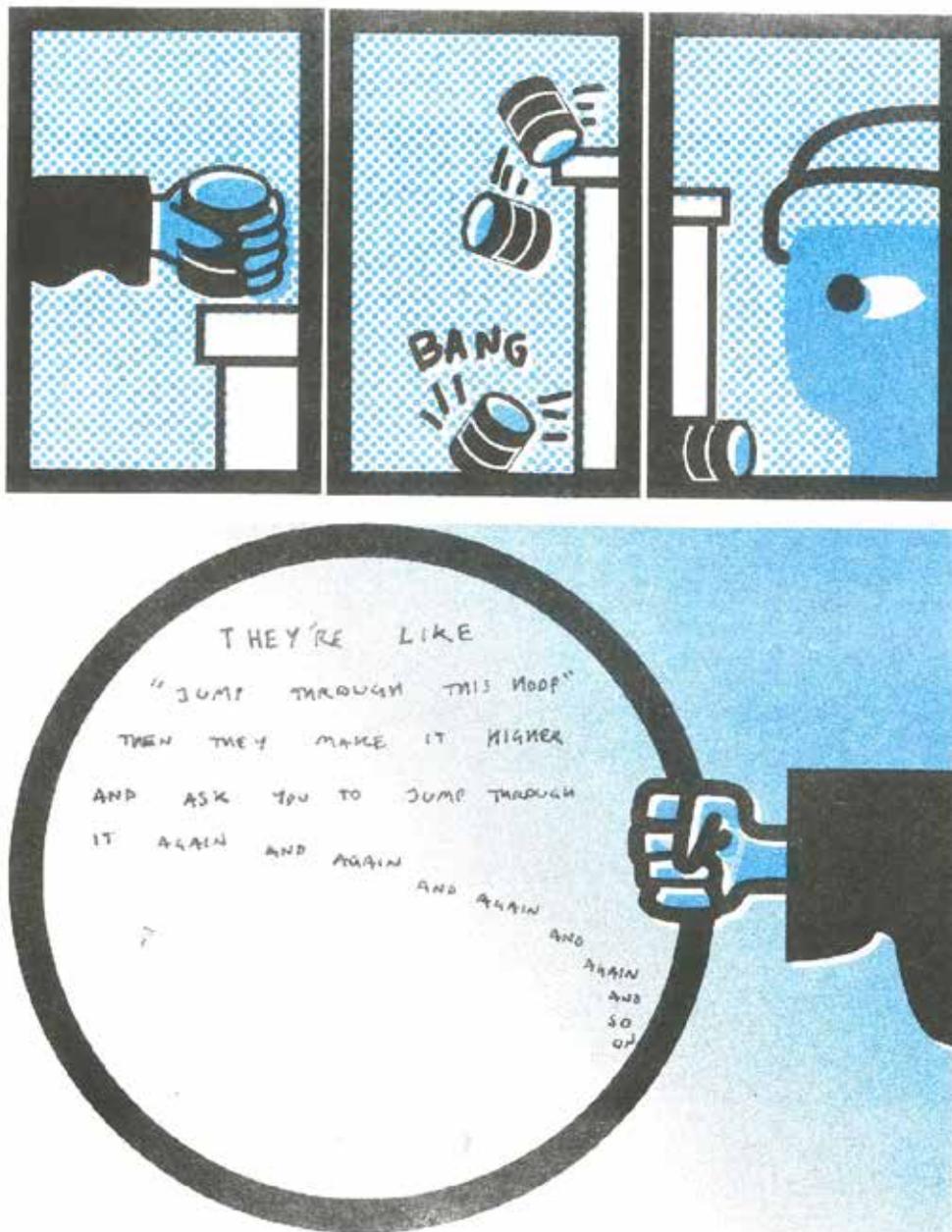
Most respondents had disclosed their ex-Forces status to the Jobcentre, and in most cases this was discussed informally as part of a conversation about work history. A couple of people stated that they had been signposted to some Armed Forces charities, with one respondent saying that this had happened when his 'fit note' had disclosed that he had PTSD, and another stating he had been directed to people who deal with ex-Service personnel in the Jobcentre. However, there appeared to be significant variations in the response to disclosure, with some areas appearing to have dedicated staff within their Jobcentre who worked with veterans, while others did not.

There were some examples of advisors/Work Coaches understanding the issues facing those who have left the Armed Forces. For example, a small number of

people referred to being allowed to have telephone appointments, rather than having to go into the Jobcentre:

*She used to ring us and say, '...you've got an appointment today, would you prefer to come into the office or would you prefer to do a telephone appointment?' She was good like that... I spoke to her about everything, I really trusted her (UC claimant).*

In these cases, it was evident that the Jobcentre was located in an area where veterans were accommodated or where there was a Garrison. Hence, the advisors/Work Coaches were perhaps more likely to interact with veterans as part of their caseload and to have developed a more nuanced understanding of the particular issues faced by many Service leavers, particularly in relation to mental health impairments:



*She [Work Coach] [is] actually very sympathetic to military causes and stuff, and she gets a lot of the guys with PTSD, and I think that's a step forward. That's what I think a lot of the Jobcentres should do... Once she started getting people from the Army hostel, she actually gives – as I say, she empathises. She'll go the extra mile to explain stuff, and she'll say, 'Look, I know you're under stress and all that, but I've got to tell you you've got to do this (UC claimant).*

On the whole, people felt that disclosure had made little difference to the nature of the support they had received, and in some cases advisors/Work Coaches were perceived to have responded inappropriately, showing a lack of understanding of mental health issues:

*With him [advisor] I didn't [feel comfortable], because of certain things he was saying. I says, 'Look, I'm not willing to say what I've got PTSD for', and I was in the process of getting transferred over, or applying for ESA, and he said, 'Well, can I ask when it was?' and I said '1988', and he turned round and he says, 'Well, I think you should be over it by now'... no one's got a right to make a comment like that on it, and people like that shouldn't be working for the likes of Jobcentre Plus (Recently moved from JSA into paid work).*

A small number of people had asked about veteran-specific support. For example, a couple of veterans had specifically asked about AFCs at their local JCP. One person had been accompanied to the Jobcentre by a representative of an Armed Forces charity, who had asked to contact the AFC but had not been successful in making contact:

*I went in [to the Jobcentre] with somebody from [Armed Forces Charity] to see the employment advisor... the one that I was seeing all along, the disability advisor, and he was mentioning about the Armed Forces Champion and he wanted to get in touch with him, obviously business-wise, but he never heard anything from him. This person didn't get back to him. So that seems to me uncooperative (ESA SG claimant).*

Another respondent had asked their advisor if they could meet the AFC, but had been told that they were unable to and that the advisor would liaise with the AFC. As highlighted in Chapter 2, the AFC role is not 'customer-facing'; rather, they liaise with JCP advisors/Work Coaches with regard to Armed Forces issues<sup>59</sup>. It was therefore apparent that this respondent misunderstood the role of the AFC. However, his description also highlighted a lack of understanding on the part of his advisor in relation to his mental health problems:

*Never got to see one [AFC]... 'We don't have one here' [advisor's response], and I said, 'I've been told you've got to have one at this Jobcentre', and that was from the DWP. That's from going to an Armed Forces event... and the lady there, and she said, 'every Jobcentre has got an Armed Forces Champion'... this year, what happened was, I went for another interview with the DWP... I asked this lady [at the Jobcentre], 'Do you have an Armed Forces Champion?'; and she said, 'Yes, he's just there on the next table'; so I said, 'Can I arrange an interview?'; and she said, 'No, whatever you tell me, I'll pass on to him'; and I said, 'Well, you're not an Armed Forces Champion. You won't understand'. 'Yes, I will.' I said, 'No, you won't'; and I was trying to have an argument with her, and I said, 'Right, okay then'. So I went away. She sent me [an] email and she said to me, 'Have you ever thought about Combat Stress?' So I sent an email back to her and I says, 'Well, was you not there when I had my interview?' I said, 'I told you I'd done six weeks' therapy in Combat Stress'; then she said, 'Oh, I think, I thought it was a condition', so I said, 'No, PTSD is a condition. Combat Stress is a charity that helps you get your mental health'; so I said to her, 'I think you need to go on awareness training, because when you get a veteran coming in and you say that, I'm not that bad with my PTSD, but some are, and I think he would have probably hit you'. So she said, 'Yes, I will do'; and I said, 'Is there any chance I can get an interview with your Armed Forces [Champion]?' She said, 'No' (recently moved from JSA into paid work).*

There were mixed – and sometimes contradictory – views on whether there should be different treatment for veterans who come into contact with the benefits system. The interviewees were divided between those who felt strongly that ex-Service personnel should receive 'preferential treatment' within the social security system and those who felt that they were 'no different to anybody else'. For those supportive of 'preferential treatment', this was often discussed in relation to the need to recognise the sacrifices they had made to serve their country and the specific issues faced by those transitioning from military to civilian life:

*They should be treated completely differently. I mean it's a completely different set of rules, the circumstances. People coming out the army are having to face a completely different adjustment process than somebody coming out of long-term work, say if they're working at Tesco's and they've fallen on hard times. I think coming out of the Army or the Armed Forces in general is a completely different story (ESA SG claimant).*

*We have taken time out of our own lives to defend our country. Our employer was the Government, so the Government should do more for us. It's not a case of, 'Oh, okay. Thank you very much. You've done your seven, ten, 12, 15 years. Thank you very much and goodbye'. They should show a little bit more consideration towards veterans (ESA SG claimant).*

<sup>59</sup> See DWP and MoD (2016), *op. cit.*

However, some differentiated between those with and those without experience of combat or trauma during their time in Service, and length of Service was also mentioned as a factor in the level of additional support that should be provided:

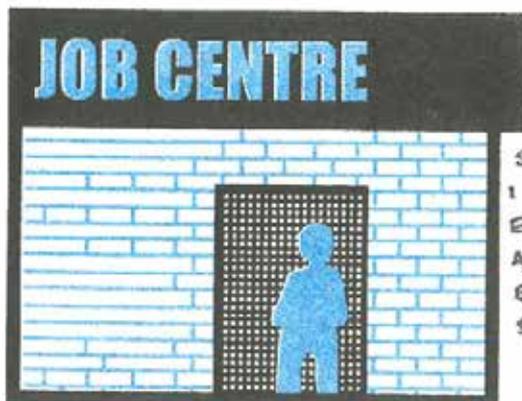
*I think, like, with me it's different, I haven't been in any conflicts... servicemen that have been in conflicts, yes, they should be a bit more lenient... Break them in, give them a bit more longer, you know what I mean, and a bit more support (ESA SG claimant).*

*Maybe it should just depend on what people have done in the military, because you get people that have come in here [supported accommodation] that have only done four weeks, but then you get people that come in here that have done 22 years. I reckon it depends on Service and time spent, like, 24 years in the military serving the country they should get more rights, but then for four weeks and they call themselves veterans and stuff like that, it's not acceptable, is it? (UC claimant).*

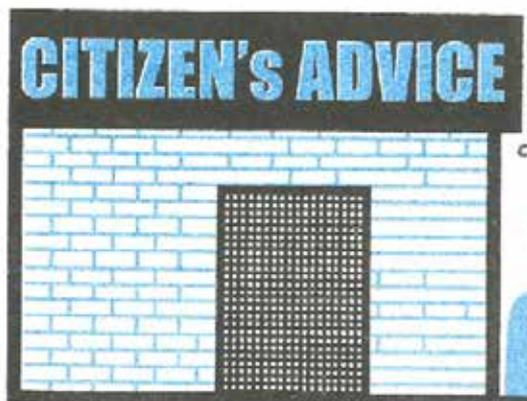
Despite the divided views on differential treatment, it was evident that many people felt that extra support and signposting could be provided to help veterans navigate the system. Indeed, one respondent reiterated the complexity of the benefits system:

*There's no extra service to say, 'Okay, right, yes. You're applying for the benefit, maybe you should liaise with the Royal British Legion's benefits advice team'. I've spoken to quite a few guys that come to my Support Group, and we're just treated like anybody else that's applying for benefit... the DWP need to recognise that as a veteran we should be provided with help with navigating benefits because applying for benefits is not simple. I've looked at the DWP's website on numerous occasions. I'm thinking, my God, look at this... they need to make the benefit system a lot clearer to veterans, and also they need to say to the veterans, 'Okay, right, yes. You are applying for these benefits. We know of people that can give you assistance' (ESA SG claimant).*

Overall, the quality of the support being provided by advisors/Work Coaches appeared to be highly variable. It was evident that the majority of people were receiving support from organisations outside the DWP (e.g. Armed Forces charities, other third-sector agencies and housing providers). This support was not just employment-related but also focused on wider issues ranging from health to housing. In many cases, these organisations had also been supporting them with their benefits claims or when they had experienced difficulties within the benefits system. It was this external support that was described as being the most beneficial to them, as it was often tailored to their individual needs.

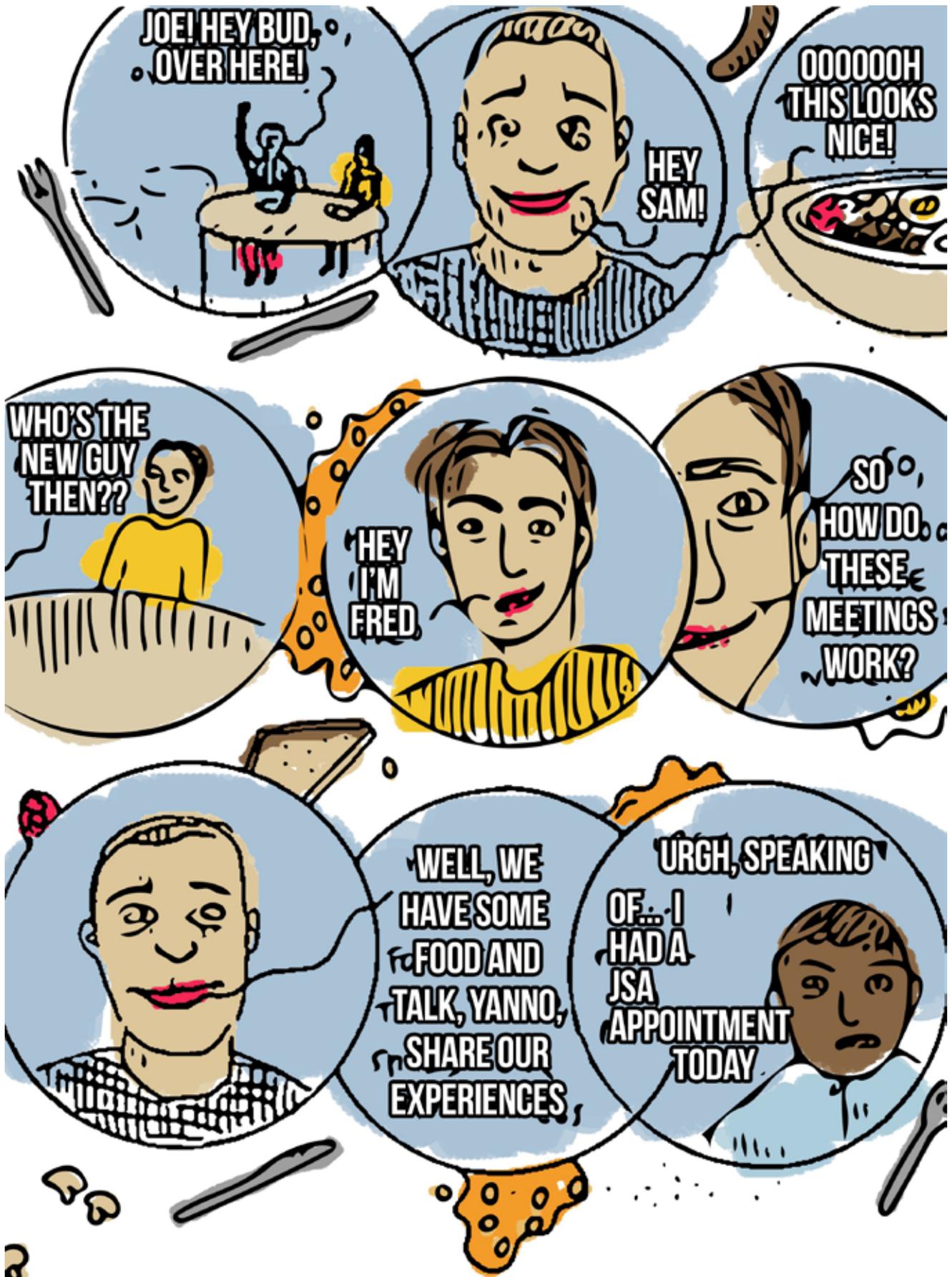


I WENT DOWN TO THE JOB CENTRE TO SEE WHAT I WAS ENTITLED TO AND SHE BASICALLY SAID TO ME



I THOUGHT IT HAD ALL CHANGED SO I WENT TO CITIZEN'S ADVICE





# 9. POLICY & PRACTICE

## Stakeholder perspectives

In addition to our interviews with veterans and their families, we also undertook 19 interviews with policy and practice stakeholders representing a mix of national organisations and those providing frontline services in our fieldwork areas. This chapter provides an overview of the useful supplementary information these interviews provided, exploring policy-makers' and practitioners' views on transition issues more broadly and experiences within the benefits system more specifically, as well as reflections on DWP commitments to the Armed Forces Covenant. The respondents were mainly drawn from a range of national and local charities and third-sector organisations, the majority of which specifically aimed at supporting serving personnel and/or veterans, but also included officials in government departments with responsibility for veterans' issues. Some of the respondents were military veterans themselves who were now undertaking a support role within various organisations<sup>60</sup>.

### 9.1 Perspectives on transitions

Many of the stakeholders highlighted that the overwhelming majority of those leaving the Armed Forces every year transitioned with little or no difficulties, and many attributed this to the greater emphasis that was now given to transition support through formal support packages such as the CTP, which one stakeholder described as *'the most extensive employment focused transitional or resettlement support available to anybody'* (Representative of an Armed Forces employment charity).

Additionally, others cited the recent implementation of employment trials for those still in Service, as well as projects to map military qualifications across to civilian equivalents and the introduction of the Veteran's Gateway website<sup>61</sup> as supporting positive transitions. In general, the current packages of support for those leaving the Armed Forces was seen as much more robust than that available in the past, with better collaboration and multiple pathways. However, although there was evidence that significant resources did exist, it was

suggested that the employment focus *'doesn't address housing, health, all the other issues that might be there'* (Representative of an Armed Forces employment charity). Stakeholders indicated that these did not always reach the most vulnerable, nor was the support always taken up even when offered, and those with the greatest needs were potentially the least likely to engage:

*CTP is great if you're in a position where you're ready to move into work and you have no issues. They're great with continuing that support for a period of time... but the further they get away from discharge, the less likely they are to be engaged with those kinds of organisations (Representative of an Armed Forces charity).*

Respondents stated that ESLs were particularly at risk of not utilising transition support, either because their entitlements were limited or because their discharge was sudden. Two stakeholders acknowledged that support was still dependent on length of service, which one felt was at odds with *'a needs based paradigm'* (Representative of an Armed Forces employment charity). It was felt that ESLs were more likely to leave the Armed Forces without qualifications or financial resources and sometimes found it difficult to find employment:

*So they've come out with no pension, no nothing, probably not really a lot of transition support either (Representative of a third sector organisation).*

*I am seeing this as more difficult for what we call [early] Service leavers. These are people who've served four years or less; and they may experience difficulty in gaining employment. MoD is doing a lot to mitigate this situation (Head of Welfare, MoD)*

Overall, the majority of discussions focused on the experiences of personnel leaving the Army, often because, in the case of charities and other support organisations, the majority of clients had been lower-ranking infantry soldiers. Those leaving the Royal Navy or RAF were perceived as far less likely to require support, which was attributed to a generally higher standard of education among entrants (and tougher

<sup>60</sup> The identifiers used alongside the quotes were agreed with the respondents following their interview.

<sup>61</sup> <https://www.veteransgateway.org.uk/>

selection criteria), better career progression and more opportunities for specialist training. Conversely, infantry soldiers were perceived to have lower attainments prior to joining and fewer prospects for skills development. However, it was suggested that the challenge lay in encouraging Service leavers to articulate how the qualifications and skills they had gained while in the military were transferable to the civilian workplace: *they feel like they come out with loads of experience but no real way of showing it* (Representative of a third sector organisation). It was perceived that the RAF were very good at providing civilian-compatible qualifications, but this was not necessarily the case with the Army, where the process of converting qualifications was not regarded as being as straightforward.

There was a consensus among stakeholders that the nature of life in the Armed Forces was fundamentally different to civilian life and that this posed particular challenges for some veterans. More than one stakeholder described it as a 'bubble', and it was suggested that this 'insulated' culture meant that individuals were essentially 'cocooned' within their respective units and were not exposed to the information and situations encountered by civilians. Stakeholders characterised an environment where most, if not all, personal business was handled by military administration:

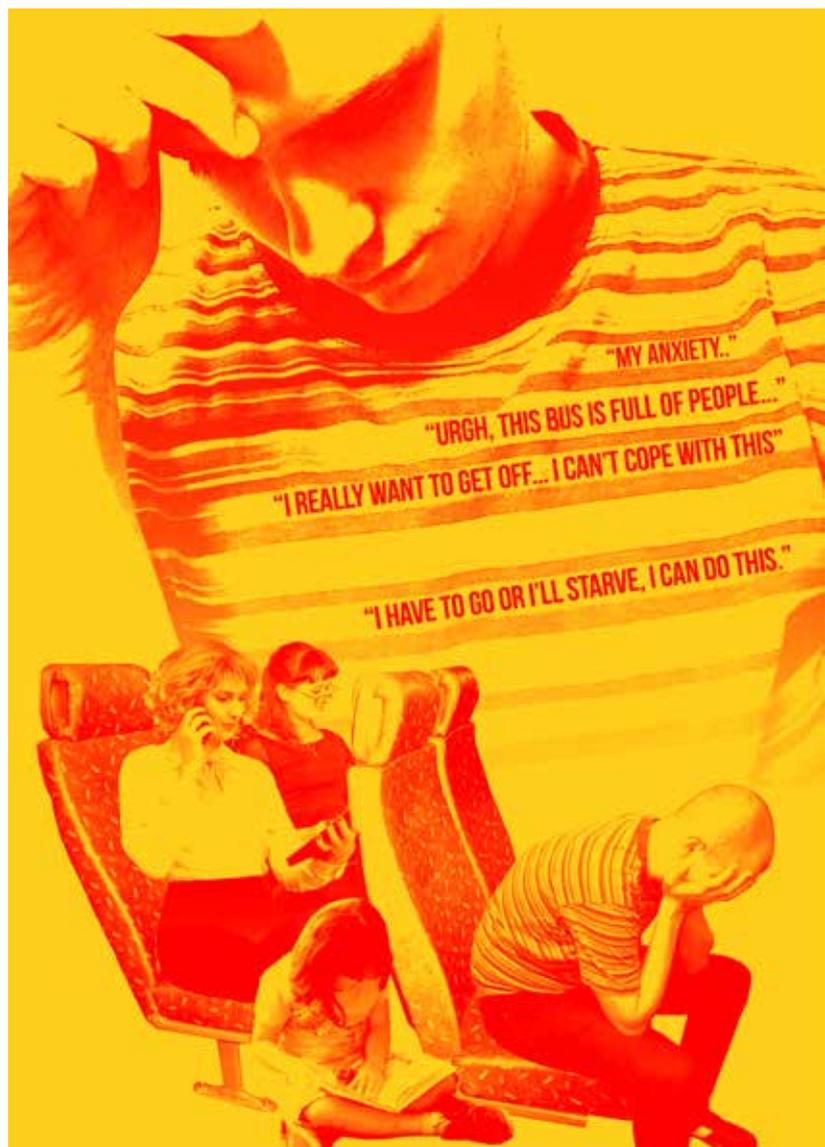
*[When] you're in the Army everything's taken out at source and everything's paid for, even though some of these are bright people. 'You must have known that you've got to pay Council Tax, do you not see this bill?' 'Yes, well I thought...' [referring to their interactions with some of the people they had been supporting], and because everything was sort of done for them they didn't realise that that they had to do it themselves (Representative of a military charity).*

This was seen to pose a number of risks for veterans, not least an expectation that there would be something 'on offer' when needed and that it would be relatively straightforward to obtain:

*I think they were surprised at how little money they would get [referring to benefits]; they were surprised at how they have to wait; they were surprised at the hoops they'd have to jump through to get it (Representative of a criminal justice agency).*

The structure provided within the Armed Forces was seen to generate an outlook among Service personnel of expecting clear and consistent pathways. Furthermore, a mind-set that valued discipline, durability and self-reliance could make it harder for veterans to seek help even when they needed it, and it was often at 'crisis' points that people would be referred to the relevant services.

Perhaps unsurprisingly, mental health impairments were identified by stakeholders as the factor most likely to derail transitions. This could be triggered by Service or be unrelated to their time in the military. Combat, whether relatively recent or in Northern Ireland or the Falklands, was a common cause. One stakeholder stated: *it doesn't matter about the length of Service, it matters about what operations they've done* (Representative of a third sector organisation). It was highlighted that the legacy of Service could mean that mental ill health could appear many years after leaving the Armed Forces. The impact of this, whether manifested as PTSD, anxiety or other psychological conditions, was suggested to be profound. Loss of employment (or inability to sustain employment), relationship breakdown and addiction



issues were commonly cited, as well as difficulties in coping with everyday activities and interactions.

Finally, stakeholders highlighted that difficulties in transition often also related to the social background of the veteran and the issues they had faced prior to joining the Armed Forces:

*I do see a trend where people have joined the Army as a last resort to get away from a really bad home life when they've been young. That's been really detrimental then, because they're already in a bad place, and they go and get trained up, then they become ex-Service leavers and they can't cope anyway because they weren't coping before, and everything has just compounded that issue (Representative of a third sector organisation).*

*If people have got baggage... it hasn't gone away, and then they resurface when they leave because they're now having to find their own accommodation, deal with life generally... once you're inside the front gates of camp, real life can go away if you want it to (Policy official 2).*

A number of stakeholders commented that the preponderance of infantry veterans within this cohort was due in part to the nature of recruitment, which picked up higher proportions of young people from deprived backgrounds, who were likely to be less well educated.

## 9.2 Perspectives on interactions with the benefits system

With specific reference to the social security benefits system, stakeholders highlighted complex interactions between personal and systemic factors that affected veterans' engagement with, and experiences of, the benefits system.

### 9.2.1 Pride, non-engagement and non-disclosure

A common factor noted by stakeholders was the reluctance among veterans to admit that they needed support from state welfare provision. As highlighted above, the value placed on self-sufficiency, strength of character and resilience while in the Armed Forces meant that veterans often saw accepting benefits as a humiliating reduction in status from a position of respect or as in some way 'failing':

*There has been a lot of people who haven't made claims for benefit because they'd be deemed as a failure (Representative of an Armed Forces charity).*

*Our Service leavers do have a lot of pride. Sometimes, it's pride to a fault, where they don't want to come forward and admit that there's a problem (Representative of a criminal justice agency).*

The process of applying for benefits, which is inherently dependent on providing detailed personal information, was also described as challenging, particularly if it

involved disclosure of mental health issues. Additionally, it was suggested that there was sometimes a reluctance for people to disclose that they were ex-Forces, which was attributed to a number of factors, including pride/shame (as highlighted above), a fear that it might affect their entitlements, or that they would be 'pigeonholed' into certain types of careers. However, stakeholders suggested that not disclosing their ex-Service status could have negative implications when it came to assessing claims of ill health, work capabilities or reasons for non-compliance with conditions, particularly when the additional support or easements offered through the Armed Forces Covenant were dependent on this disclosure.

### 9.2.2 Lack of understanding of eligibility and entitlements

Stakeholders suggested that veterans often had a lack of even basic knowledge of the benefits system and what they might be entitled to. Although difficulties in navigating the complexity of the system are not unique to veterans, it was felt that they often faced additional levels of complication. Again, legacies of their time in Service were referred to:

*One of the key things that I always say is an issue, if you join the military at 16 years of age your knowledge base around accessing benefits/the welfare state, anything to do with the NHS, doctors surgeries, dentists, housing, anything like that, well at 16 you don't need to know them things (Representative of a third sector organisation).*

Those stakeholders who were working in support agencies provided examples of the intensive assistance that caseworkers and advocates were providing to veterans with regard to completing initial applications for benefits or providing relevant evidence with regard to assessments.

The circumstances of veterans in receipt of lump sums or ongoing payments specific to their Service (e.g. War Pension or the Armed Forces Compensation Scheme) could also pose particular challenges when attempts were made to establish benefit entitlements, and a number of stakeholders stated that incorrect decisions were being made:

*'You're not entitled to anything' or 'You're only entitled to this'. When in actual fact they are entitled to more (Representative of a housing provider for ex-Service personnel).*

There was a perception that this situation could be compounded by a tendency for some veterans to accept orders from authority without question, such that veterans were less likely to challenge unfair or opaque decisions: *a lot of Service people don't question what they're told* (Representative of an Armed Forces charity).

### 9.2.3 Difficulty in meeting the conditions of their claim

Stakeholders provided numerous examples of clients who, particularly as a result of mental health issues such as PTSD and anxiety, struggled to meet some of the requirements, such as attending regular appointments at the Jobcentre or attending mandated training courses. The following are some of the examples provided from people's casework:

*He had to do 37½ hours a week, he had to go and sign every two weeks, and this guy had PTSD, so the underlying issue was PTSD and anxiety and nervousness around these environments, and he lost his temper when he was in those places (Representative of a third sector organisation).*

*I've got many examples... a typical one is a young man who has two children. He's in a stable relationship, his partner works, he was being supported by [Armed Forces charity]. He was fairly stable, he was doing quite well, he was going through the process but then found it quite demanding, the conditions that were being placed on him, and failed to achieve some of them. He did turn up for his appointment, although he struggled to do that as well, because he knew that he hadn't achieved what he was supposed to achieve. It became quite a spiral downwards for him because he was sanctioned and he felt that he was failing even more, and that created a lot of problems, and he's not on his own, I've seen quite a few similar to that (Representative of an Armed Forces charity).*

Stakeholders highlighted that in some cases people were being wrongly assessed as being 'fit for work', which at times related to the reluctance of veterans to admit their health issues (and their connection to Service) in the first place. For example, one stakeholder described the case of an individual who 'wanted to work' and had been placed in the WRAG of ESA. However, in the judgement of their support worker they were not capable of looking for, let alone sustaining employment:

*He can't keep appointments and he has days where he locks himself away. So, he's going to be sanctioned if he goes into the Work Related [Activity Group], so it's not even working for him (Representative of a third sector organisation).*

With regard to sanctions, again, many stakeholders could supply examples of clients who experienced sanctions, which they often felt were unreasonable:

*People who when they fail the ESA medical and they're found 'fit for work', even though they're not fit and the GP says they're not fit... DWP tell them to sign on. They go and sign on, and then of course they can't fulfil the Claimant Commitment, so they end up sanctioned (Representative of a third sector organisation).*

The consequences of sanctions were also outlined, with a number of participants referring to clients accessing emergency food grants or food banks, as well as seeing increased debt, housing arrears and homelessness.

### 9.2.4 Functional assessments and Service history

Stakeholders expressed frustration that medical evidence from Service did not always appear to be taken into account in the assessment of benefit claims. Referring to a current appeal that they were supporting, one stakeholder stated:

*They said because he can look at social media on his laptop then he can do, he can cook a meal, he can get dressed, he can wash himself, he can do everything like that. But if you read the actual report from the MoD that lists, that goes through everything, you would know that he can't... It's like, 'Well, the decision-maker's had the assessment from Capita and they say that you can do all that; it's accepted that you can do it, but we've not looked at the evidence from the MoD' (Representative of an Armed Forces charity).*

Indeed, stakeholders were puzzled as to why those who had been medically discharged or had received a medical assessment prior to departure from the Armed Forces would then be required to undergo another assessment to access PIP or ESA<sup>62</sup>. A number of stakeholders provided considerable detail on the assessment process, often having accompanied veterans to appointments. Although there were examples of individual assessors being sympathetic, overall, it was observed that many assessments were carried out by assessors with very little knowledge of combat-related conditions. It was felt that Armed Forces veterans with mental health issues should be assessed by suitably qualified staff. Indeed, for some stakeholders the majority of their working week was spent representing veterans in tribunals who had – in their opinion – been wrongly assessed as 'fit for work'.

### 9.2.5 Reflections on the Armed Forces Covenant and Armed Forces Champions

More broadly, many stakeholders working with veterans were aware that JCP and other mainstream services had introduced an option for clients to disclose if they had been in the military, and respondents advocated that it should be a gateway question completed as part of any initial assessment by any service. However, there was sometimes uncertainty about exactly what resulted from such monitoring, even among government officials:

*Would the Jobcentre staff know why they're asking it? Is it just a requisite? I don't know. That's just a kind of example where, yes, we want to know and we're doing it for very good reasons, to ask, 'Okay, you've served in the military', but I just wonder, if we don't explain, and I say 'we' as the government, don't explain why we're asking. That can put them off (Policy official 1).*

Stakeholders were asked about the specific adjustments, easements and exemptions within the Armed Forces Covenant relating to the social security benefits system. Overall, the level of knowledge and understanding of stakeholders themselves was mixed, with some unaware

<sup>62</sup> As highlighted in Chapter 2, Footnote 30, the DWP stated that for the most severely disabled military personnel there is currently a process in place whereby DWP uses evidence from the Service Medical Board.

of any specific exemptions or easements or only familiar with a few of the measures.

Aside from the broader issue highlighted above vis-à-vis what happens following disclosure of military service, a number of stakeholders discussed the role of AFCs. For many stakeholders who had regular, direct contact with JCP, there appeared to be a 'vague' awareness of the role, but often people described having received limited information about their AFC. For example, one commented that: *I heard that mentioned some time ago, but I've not had any further information* (Representative of a third sector organisation), while another indicated that they had struggled to identify who the AFC was for their area despite asking at a Jobcentre: *and nobody could help me with it* (Representative of an Armed Forces Charity). Furthermore, while one stakeholder welcomed the role of the AFCs, they had only met one AFC during the course of their work and had felt that this individual did not have an appropriate knowledge of Forces life. As such, there was felt to be a huge variation across the country with regard to the quality of the service provided by AFCs: *the best Armed Forces Champions do a fantastic job, really fantastic job... but on the other side of that is [those with] absolutely no interest whatsoever* (Representative of a third sector organisation). It was suggested that this may have been because the role was assigned in addition to existing duties, meaning that the DWP AFCs were *'double/triple-hatted'* (Representative of the Army Families Federation). Variability was also linked to proximity to military bases where *'people in the local health centres, the local DWP offices are used to dealing with the military'* (Representative of military third sector organisation). Nonetheless, there were some examples of strong partnerships between Armed Forces charities and particular DWP offices and officials:

*Because the relationships that we've got, I've wrote a letter now – and this is where I'm really chuffed with what we've achieved – I can send one of my clients into the Jobcentre with this letter saying that they are engaged with us and we request that they don't put them onto the Work Programme (Representative of a third sector organisation).*

This comment suggests a negative view of the Work Programme from a stakeholder perspective, which is interesting, given that early access to the Work Programme was listed as an 'employment and benefit initiative' that formed part of the DWP commitment to the Covenant<sup>63</sup>.

There was evidence that some stakeholders had supported people in using some of the exemptions/easements that related to the Covenant, e.g. exempting compensation for injuries during Service from the UC means tests and exemption from the voluntary unemployment conditionality rules for spouses/families. However, it was felt that JCP staff were not always themselves aware of these exemptions and easements: *we have to point them out to the Jobcentres on a regular basis, that this person's entitled* (Representative of an Armed Forces charity).

Several examples were also provided where it was felt that exemptions and easements were not working or had created 'grey areas'. For example, one stakeholder had found that divorced spouses were often regarded as outside the Covenant's purview as they were no longer with the veteran. Another noted that exemption from the Habitual Residency Test worked if you came straight to an area after leaving the military, but if there was a gap (e.g. working overseas) the Test would still have to be applied. Furthermore, as highlighted above, very few stakeholders referred to Service medical records being used in assessments (e.g. WCAs):

*That's come out quite a lot, and they [veterans] say to me, 'what about the Covenant? No one seems to take any notice of it' (Representative of a third sector organisation).*

<sup>63</sup> The Work Programme has now been replaced by the Work and Health Programme, which is being rolled out this year.

# 10. CONCLUSIONS

## Concluding comments and recommendations

This report presents the first-wave findings of an ongoing project funded by the Forces in Mind Trust (FiMT) called *Sanctions, Support and Service Leavers: Welfare conditionality and transitions from military to civilian life*, focusing on how veterans and their families experience the social security benefits system. The first-wave findings act as a baseline for the project, allowing us to build up a picture of people's experiences of the benefits system to date and also to explore other aspects of participants' lives that feature as part of their transition experiences (e.g. education and employment experiences, financial situation, health, housing and relationships). This chapter provides some concluding comments and also some policy and practice recommendations emerging from our first wave of interviews.

The specific focus of this project (i.e. interactions with the social security benefits system) means that our research does not claim to be representative of the whole veteran population, for whom it is widely acknowledged that transitions are often relatively unproblematic. Rather, our evidence is reflective of those engaging with the benefits system during their life course. Although this group may represent a smaller proportion of the veteran population, these are individuals with complex needs, often requiring intensive and ongoing support.

### 10.1 Recommendations

It was evident that Armed Forces veterans commonly found the social security system extremely complex to navigate. The ongoing rollout of UC adds a further layer of complexity to what is already a complicated system. People routinely struggled to comprehend the benefits that may be available, the contemporary conditions attached to continued entitlement, and how to apply for, and manage, their ongoing claims.

**Recommendation:** for guidance on the UK social security system that clearly sets out an individual's rights and attendant responsibilities in respect of out-of-work benefits to be included as part of the transitional support provided to those leaving the Armed Forces<sup>64</sup>.

As highlighted in Chapter 2, as part of its commitment to the Armed Forces Covenant, the DWP has made a series of adjustments and easements to JCP services to support current and former Service personnel and their families. Although such commitments are welcome, our interviews suggest significant variations in both the understanding of JCP staff in relation to these adjustments and easements and the effectiveness of AFCs.

**Recommendation:** for the DWP to ensure that all JCP staff are provided with training on the adjustments and easements applicable to Armed Forces veterans and their families and, more broadly, around the mental and physical health impairments that may affect some veterans' fitness to undertake paid work and/or ability to engage in compulsory work-focused activities.

**Recommendation:** that each Jobcentre should have at least one designated individual who takes a leading role in supporting Armed Forces veterans and their families in their interactions with the social security system.

**Recommendation:** for the DWP to review the efficacy of the current AFCs, map geographical areas of good practice (i.e. where strong partnerships/relationships exist between AFCs and NGOs) and identify those areas requiring improvement. This review should include an assessment of the additional responsibilities that AFCs are undertaking and how these may affect their ability to effectively deliver the AFC role.

<sup>64</sup> The newly launched *Veterans' Gateway*, for example, provides information on 'benefits options for ex-military': <https://www.veteransgateway.org.uk/>

Our interviews with both veterans and key stakeholders suggest that experiences of WCAs and some other assessments (e.g. for PIP) have been overwhelmingly negative. In particular, it was felt that mental health impairments were poorly understood and/or regularly disregarded by those undertaking assessments. Furthermore, concerns were raised that Service medical information was not routinely being included within benefit-related assessment processes. This omission was often only rectified when a third party, such as a GP or Armed Forces charity worker, advocated on behalf of a claimant when appealing an initial assessment.

**Recommendation:** for the DWP to urgently review the assessment process applied to those claiming working-age incapacity benefits to ensure that assessors are suitably qualified to assess the specific mental and physical health issues facing those leaving the Armed Forces.

**Recommendation:** for the DWP to ensure that Service medical information is consistently included within any work capability or impairment assessment process.

At the time of the interview, around one-third of respondents were required to undertake extensive mandatory job search activities or training in order to meet 'actively seeking work' requirements and avoid benefit sanctions. However, overall, veterans did not believe that the conditions of their claims were reasonable or achievable, and in some cases compliance with the conditions attached to continued receipt of benefits was counterproductive with regard to chances of securing future employment. Additionally, there was a perception that the support provided by JCP was not always appropriate for their specific needs as Armed Forces veterans.

**Recommendation:** for the DWP to ensure that the conditions set out in Claimant Commitments for Armed Forces veterans reflect their individual needs and capabilities (including appropriate consideration of mental and physical health issues, as highlighted previously).

It was apparent that much of the support that people were receiving came from outside the DWP (i.e. Armed Forces Charities, other third-sector organisations, housing providers, etc.).

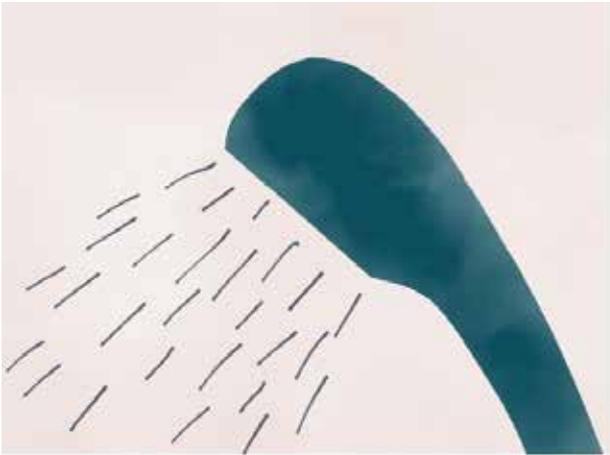
**Recommendation:** for the DWP to ensure consistency in signposting Armed Forces veterans to organisations who can provide support with transition issues, including the translation of military skills and qualifications to the civilian labour market, but also broader issues relating to benefit claims, health, housing, etc.

It was evident that the application of benefit sanctions had negative consequences, and also that such sanctions had sometimes occurred as a result of difficulties in understanding the system or difficulties arising from ongoing mental health issues.

**Recommendation:** for the DWP to ensure that benefit sanctions are not applied to those experiencing mental and physical health impairments resulting from Service in the Armed Forces.

## 10.2 Next steps

The analysis and recommendations presented in this report are based on the first wave of interviews completed with our veteran participants. As such, this report represents the starting point, rather than the end point, for our research. A second wave of interviews will take place between June and November 2018. This longitudinal approach provides a meaningful way to explore the transitions, adaptations, coping strategies and trajectories of veterans within the benefits system, and how there may be diverse outcomes for different people over time. In addition, we will be continuing our consultation with policy-makers and practitioners for the remainder of the project, and we encourage organisations to come forward to give their views on supporting veterans in the benefits system. The final report will be published in spring 2019.



'Sanctions, Support and Service Leavers: Welfare Conditionality and Transitions from Military to Civilian Life' has been funded by the Forces in Mind Trust (FiMT), a £35 million funding scheme run by the FiMT using an endowment awarded by the Big Lottery Fund.



The 'Sanctions, Support and Service Leavers' project is a parallel stream of work related to the ESRC-funded 'Welfare Conditionality: Sanctions Support and Behaviour Change' project.

