# Demographic Research of the SERVING AND FORMER OFFICER COMMUNITY



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# Forewords



Lee Holloway

Chief Executive Officer The Officers' Association The Officers' Association (OA) works to support the serving and former officer community wherever and however it is most needed. We have constantly sought to understand the structure and needs of this community to ensure the services we deliver are effective and relevant.

This ground breaking research offers a much-needed insight into the full demographics of serving officers, former officers, and their families; as well as predicting trends among the officer community over the next 20 years. The information will be combined with other research relevant to the sector to form a sound basis upon which the Officers' Association, other military charities, the MOD, health services and others may continue to support our Service community.

The research will help us to influence policy and practice over the coming years, in order to ensure that the officer community is not disadvantaged when institutional and demographic change takes place; it will also allow the OA to prioritise our services, and to better plan ahead for the next two decades.

Of note in the report is the predicted rise in the number of people likely to be diagnosed with dementia which will require a specific response in the benevolence services we offer, while continuing to meet the growing need for long term care for the elderly.

The report also shows a trend of officers leaving the services earlier. This data will help us to monitor our employment-focussed work, to ensure that future military leavers continue to receive appropriate careers support and are able to fulfil their potential.

Thank you to Forces in Mind Trust for their support of this project. As an organisation dedicated to serving the needs of our officer community, we are grateful for the insight the data and its analysis have given us. We will continue to build upon it to become yet more effective and efficient.



Air Vice-Marshal Ray Lock CBE

Chief Executive Forces in Mind Trust As a Trust whose stated purpose is to provide sound evidence upon which decision makers can make rational choices, we needed little convincing that a study into the future needs of a particular segment of the ex-Service community was worth conducting. We welcome the Institute of Public Care's findings, and in particular the desire of the Officers' Association to identify the future needs of the officer cohort, and how they might differ from those of the broader ex-Service population.

The conclusions seem fairly straightforward: serving and ex-serving officers can suffer increased barriers to helpseeking through heightened individual pride and stigma; but overall their type of needs are really no different to those of the general ex-serving population. The report suggests that there might indeed be categorizations other than rank that are of greater relevance and utility – such as length of service, or age. Undoubtedly the quantitative findings are particularly useful for those with a specific purpose to support serving and ex-serving officers; but more widely across the military charities sector, there seems little to alarm in this report as it largely mirrors the results of previous research on future needs.

None of this is to question the added value organizations such as the Officers' Association can bring to their particular beneficiary population. It is worth making a distinction, though, between the provision of charitable welfare, and the more transactional transition support, such as that provided for employment. Welfare support can rely on restricted charitable funds, which makes officer status a factor in eligibility, whereas employment support is arguably better delivered in a business to business relationship. The differences in an individual's Service career make individually tailored transition support, a concept that Forces in Mind Trust has been advocating for at least 3 years, probably the key factor of success. Being commissioned or not on leaving service seems far less important than such parameters as qualifications, experience or age.

So what this report challenges us to identify, as the sector plans for the years ahead, is the optimum way in which we can deliver the necessary support, whether it be welfare or other types. If through this report we have prompted such thinking amongst decision makers, the study will have been well worth the money we have invested in it.

# **Executive Summary**

This report on the demographics of the serving and former officer community which was commissioned by the Officers' Association (OA) and funded by Forces in Mind Trust.

The project aimed to provide a greater understanding of the size and nature of the current and former officer community in the UK across the Army, Air Force, Royal Navy and Royal Marines over the next 20 years; and to explore the implications in terms of the needs of officers and their dependents.

A mixed methods approach was used involving: desk research, interviews with the representatives of key organisations, focus groups with current and former officers and their partners, an online forum and analysis of data to generate projections of future numbers.

Key contextual factors include: the ageing of the World War II and National Service generations, changing terms of conditions of current officers, the latest Strategic Defence Review and recent Families Strategy, growing pressures on health and social care along with the ongoing welfare reforms.

The number of serving officers is likely to remain around 27,000 for the foreseeable future, with 12,590 Army, 6,770 Royal Navy/Royal Marines and 7,460 RAF officers in 2016.

The average age of serving officers is 37 years, although RAF officers tend to be older than officers in the other services.

The study points to a significant decline in the number of former officers over the next 20 years. From an estimated total of 371,600 former officers across the UK in 2016, the figure is projected to decline by more than 55% to 161,700 in 2036. While total numbers will fall, needs may become more complex and acute.

The steepest decline in numbers will be among the 85 and over age group which is currently estimated at 61,400 and projected to fall to 16,400.

There are a large number of former officers with disabilities and/or dementia. It is estimated that there are over 116,000 officers with long-term illnesses which significantly limit their ability to undertake day to day activities and over 27,000 with dementia. These numbers will also fall dramatically in the next 20 years.

A growing proportion of former officers will be in the under 65 age group. A range of factors are likely to lead to a higher turnover of officers with many leaving at a younger age than previously.

The higher turnover of officers is likely to increase the need for services around transition, including finding accommodation, and help with the move into civilian employment for former officers.

Other changes which will affect the composition of the former officer community are the planned increase in the Full-Time Reserve Service. FTRS Officers found little career support and this is likely to be an ongoing and increasing need.

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officers with long-term illnesses which significantly limit their ability to undertake day to day activities

About 1 in 8 current officers is female and less than 1 in 40 serving officers is from a Black, Asian or other Minority Ethnic (BAME) group. Planned increases in the proportion of women and BAME personnel in the Armed Forces will feed through into the former officer community and potentially generate new and different needs at transition and beyond.

Help with transition in finding employment, concerns about finding affordable and good quality accommodation, the difficult decision around whether or not families should move with the serving officer, the strains of separation versus the lack of continuity, and the challenges faced by an officer's partner were recurring themes.

There was limited discussion of needs around mental health, although there was a view that officers were reluctant to seek help for mental illness, and a feeling that mental health needs may increase over time as a result of the Iraq and Afghan conflicts.

Finally, there was a view that the OA and other service charities need to raise their profile and their influence on behalf of the service community, as well as raising awareness among serving officers to ensure that they are aware of the help that is available.

# 1 Introduction

This report presents the results of a research project into the demographics of the serving and former officer community which was commissioned by the Officers' Association (OA) and funded by Forces in Mind Trust.

Up to the present, there has been little research focused on identifying the size and nature of the serving and former officer armed forces community, although there have been a number of studies looking at a wider group, for example, the Royal British Legion's 2014 study covering the whole of the armed forces ex-Service community<sup>1</sup>, the Maritime Charities Funding Group's 2015 study covering the whole seafaring population<sup>2</sup>, and OA Scotland's 2013 report<sup>3</sup>.

# 2 Aims

The project aimed to provide a greater understanding of the size and nature of the officer community in the UK. Specifically, the project aimed to:

- Identify the size of the current officer community, including dependants, by several demographic variables, such as age and disability.
- Project the size of the serving and ex-officer community for the next 20 years by several demographic variables, such as age and disability.
- Explore the implications in terms of current and future needs with a view to carrying out a detailed research project on service needs in the future.

The research was focused on the three major forces which are: British Army, Royal Air Force, Royal Navy and Royal Marines. The researchers were also mindful of the growing importance of the Reserves Service as part of the UK armed forces community.

# 3 Methodology

The project began with scoping activities which involved:

- Desk research
- Interviews with representatives of key organisations
- Focus groups with serving and former officers and their spouses.

This was followed by analysis of the available data on the number of current and former officers and their dependants and the development of projections of future numbers of former officers and their dependants; and finally, preparation of this final report bringing together the findings from the scoping activities and the data analysis.

<sup>&</sup>lt;sup>1</sup> Royal British Legion (2014) A UK Household survey of the ex-Service community, RBL.

<sup>&</sup>lt;sup>2</sup> Institute of Public Care (2015) *UK Seafarers' Demographic Profile*, Maritime Charities Funding Group.

<sup>&</sup>lt;sup>3</sup> Officers' Association (2013) *The Way Ahead*, OA.

# 3.1 Desk research

Desk research was carried out to identify relevant studies and reports concerned with the serving and former officer community. This included academic research papers, policy studies, annual reports and survey reports, as well as a review of the available Ministry of Defence (MoD) statistics. These background materials informed the development of topic guides for interviews and focus groups, and have also contributed to the final report, providing a better understanding of the variables that affect the size and nature of the serving and former officer community and their particular needs, and a source of data for analysis.

# 3.2 Interviews with representatives of key organisations

Interviews were carried out in September and October 2016 with representatives of the following organisations:

- ABF The Soldiers' Charity
- Army Families Federation
- BLESMA
- Blind Veterans UK
- Combat Stress
- Help for Heroes
- King's College London
- Poppy Scotland & Officers' Association Scotland
- RAF Benevolent Fund
- Royal Navy and Royal Marines Charity
- Royal Naval Benevolent Trust
- Royal Navy Officers' Charity & Association of Royal Navy Officers
- Royal British Legion (Policy and Operations)
- Recruit for Spouses
- Sandhurst Trust
- Seafarers UK
- SSAFA

The interviews were carried out using a topic guide to provide a structure for the interviews (Appendix 1). The researchers explored the needs and nature of the officer community, how these may differ or be similar to other ranks, and how these are expected to change over the next twenty years. The interviews also helped to identify additional sources of relevant data and research.

# 3.3 Focus groups with serving and former officers and their spouses

Two focus groups were held in Scotland with serving and former officers and spouses in November 2016 organised and hosted by Poppy Scotland. A further focus group was carried out in London organised and hosted by the Officers' Association. A topic guide and project information sheet were prepared for the groups (Appendix 2) and basic

profile data collected on participants. A profile of focus group participants is provided in Appendix 3.

A virtual on-line focus group was also conducted during January 2017. There were 16 members of the on-line forum.

#### 34 Data analysis and development of projections

Data from a range of sources, but mainly the Ministry of Defence (MoD) and the Royal British Legion (RBL), was analysed to obtain an understanding of the demographics of the current and former officer population. These were then used to generate projections of future numbers. More detail is available in section 8 of this report.

#### 4 The policy context

Both the defence and social policy context are relevant to an understanding of the number and needs of the serving and former officer community and their dependants.

#### 4.1 Defence

The latest Strategic Defence Review<sup>4</sup> in 2015 made a commitment to maintaining the size of the regular Armed Forces and not to reduce the regular Army below 82,000. while increasing the Royal Navy and Royal Air Force by a total of 700 personnel, and growing the Reserves to 35,000. In addition, the Review stated that by 2020 the Armed Forces will be recruiting at least 10% Black, Asian and Minority Ethnic personnel, and at least 15% women.

Through the Armed Forces Covenant, which recognises the nation's obligations to service personnel, veterans, and their families, the government provides support to the families and dependants of members of the armed forces through:

- The creation of an NHS Specialist Rehabilitation Unit with £2 million grant funding.
- A Service Pupil Premium so that 60,000 Service pupils in state schools get extra support.
- Enabling spouses returning from overseas to immediately claim Jobseeker's Allowance.
- Establishing a credit union offering for military personnel, delivered by Plane Saver Credit Union, Police Credit Union and London Mutual Credit Union.
- Helping more than 5.200 Service personnel onto the property ladder through the Forces Help To Buy scheme.

A recent joint report<sup>5</sup> identified a mismatch in expectations of the Covenant between some members of the Armed Forces Community on the one hand and government, national and local, on the other. The researchers commented that recent changes to the wording of the Covenant, including the explicit introduction of the concept of "fairness", had exacerbated that mismatch and suggested a clearer statement of expectations

<sup>&</sup>lt;sup>4</sup> Cm 9161 (2015) National Security Strategy and Strategic Defence and Security Review 2015: A Secure and Prosperous United Kingdom, HMG, Crown Copyright. <sup>5</sup> Shared Intelligence/LGA/FIMT (2016) *Our Community – Our Covenant: Improving the delivery of local* 

Covenant pledges, SI/LGA/FIMT.

flowing from the Covenant at the local and national levels, including examples of what it cannot deliver. The authors recommended that:

- The LGA and COSLA explore the factors underlying our finding that councils are less likely to have adjusted their policies and strategies on adult social care to reflect the Covenant than other service areas.
- The MoD and the Armed Forces explore ways of improving the transition process by:
  - Putting more effort into identifying people who are at risk of facing challenging circumstances and to whom additional support could be offered;
  - Ensuring people leaving the Armed Forces are well briefed on the realities of civilian life and that spouses are at least as well-briefed as their serving partner;
  - o Involving more outside organisations in the transition process.

In 2016, the MoD published its first comprehensive Families' Strategy<sup>6</sup> for the Armed Forces, which aims to do more on spousal employment, healthcare and children's education. The seven priority areas for the strategy are:

Partner Employment

Citing evidence that one of the key 'push' factors for Service personnel deciding to leave the Services is the difficulty experienced by their partner in finding employment, the Strategy makes a commitment to work to ensure partners are able to draw on the appropriate and necessary support (which might include training) to find employment, upskill or become self-employed.

Accommodation

The new accommodation model is described as seeking to: provide more choice, support more personnel to live in the house they choose, in the place they choose, and with the people they choose and meet their aspirations for home ownership.

Children's Education and Childcare

The Strategy notes that Service children may experience disadvantage through both long or regular periods of separation from their Service parent or through frequent changes of school and curriculum during key stages of education. It states that efforts will be directed at ensuring the disruption to a child's education is minimised as far as possible given the reality of Service life; and that consideration will be given as to what form any MoD assistance should take in order to mitigate disadvantage to Service families.

Community Support

The importance of ensuring that all Service families have the information to be able to access the community support services that are available to families is emphasised.

<sup>&</sup>lt;sup>6</sup> MoD (2016) UK armed forces families' strategy.

Specialist Support

The Strategy states that it is essential that Service families experiencing challenging times such as domestic abuse, debt or substance misuse are able to access appropriate specialist support from an appropriate provider.

- Health and Wellbeing The health of the family is underlined as an important contributor to the health and wellbeing of Service personnel. Consequently, the MoD must ensure that the health needs of all families are addressed, including those of families serving overseas where bespoke arrangements are in place.
- Transition

The Strategy recognised the need for families to understand and engage in the transition process from the outset.

Many of these areas were also mentioned as subjects of concern by interviewees and focus group participants in the scoping stage of the project (see below).

An Action Plan is currently under development. It will operationalize the Strategy's vision and seek to direct and implement change to benefit Service families.



# 4.2 Other policies

A range of other policy areas are relevant to the dependants and families of officers in 2016 and in the future, including: the Care Act, 2014; Children and Families Act, 2014; and the Special Educational Needs and Disability Code of Practice: 0 to 25 years, 2015; Scottish Government's 2020 Vision; Social Services and Well-being (*Wales*) Act, 2014; welfare reforms; the introduction of the National Living Wage; and changes in social housing rents and rights.

## 4.2.1 Social care

Social care policies are diverging across the different administrations with the UK. In England, the Care Act 2014 introduced a number of changes and new duties on councils including:

- Providing information and advice about care and support services to help people make the best choices.
- Introducing personal budgets for all those who are eligible for support.
- Implementing new rights for carers, putting them on the same footing as the people they care for.
- Improving early intervention and prevention.

The Care Act 2014, the Children and Families Act 2014 and the Special Educational Needs and Disability Code of Practice: 0 to 25 years, 2015 create a new comprehensive legislative framework for young people with disabilities in transition from children's to adult services. The framework is focussed on personalised, outcome-based approaches with a new focus on carers that recognises the role of families in the transition process. Some young people will be entitled to support through both pieces of legislation. The legislation aims to ensure continuity in provision until adult services have a plan in place, and to promote the extension of best practice in transition arrangements, highlighting the value of keyworkers in raising the quality of care coordination.

The Scottish Government's 2020 Vision is that by 2020 everyone is able to live longer healthier lives at home, or in a homely setting and, that Scotland will have a healthcare system where:

- 'We have integrated health and social care
- There is a focus on prevention, anticipation and supported self-management
- Hospital treatment is required, and cannot be provided in a community setting, day case treatment will be the norm
- Whatever the setting, care will be provided to the highest standards of quality and safety, with the person at the centre of all decisions
- There will be a focus on ensuring that people get back into their home or community environment as soon as appropriate, with minimal risk of readmission.'

Integration of health and social care is one of Scotland's major programmes of reform.

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In Wales, the Social Services and Well-being (Wales) Act aims to:

- Put the individual at the centre by giving them a stronger voice and control over services they receive
- Support people to achieve their own well-being
- Support more preventative services
- Strengthen partnership working.

Similar to the Care Act, there is greater emphasis on information and advice, and on supporting carers.

#### 4.2.2 Health

Pressure on health service budgets is likely to continue for the foreseeable future due to the ageing population and the growing number of people with long-term conditions, along with developments in medical treatments and technologies. This is leading to concerns about the future sustainability of the NHS as a taxpayer funded, free at the point of use service, and the possibility of charging, reductions in 'non-essential' services, and a safety net service.

The NHS Five Year Forward View argues for more attention to be given to prevention and public health; greater control for patients of their own care; and more integration. The Forward View outlines a number of care models that may be adapted in different areas to put in place services fit for the needs of local populations.

## 4.2.3 Housing

The availability of affordable housing has been affected by changes to housing benefit, the continuing erosion of social housing through the Right to Buy, and low rates of housebuilding over several decades. The government announced a new programme of garden town and cities across the country, with the potential to deliver over 100,000 homes in 2016, and other policy initiatives have aimed to alleviate the pressure on the housing stock, but any change is likely to take many years to redress the current situation, and younger people are less likely to be able to afford to buy their own home than their parents.

In terms of housing for people with disabilities, the government has plans for 8,000 specialist homes for older people and people with disabilities, as well as funding of £500 million by 2019-20 for the Disabled Facilities Grant, which will fund around 85,000 home adaptations that year. Many local authorities have made significant reductions to their housing related support budget in recent years which may affect some particularly vulnerable groups, for example, people with mental health problems, those at risk of domestic violence, people with physical and sensory disabilities.

Regular armed forces personnel can benefit from a £200 million scheme to help them get on the property ladder. The Forces Help to Buy scheme enables service men and women to borrow up to 50% of their salary, interest free, to buy their first home or move to another property on assignment or as their families' needs change. The pilot scheme, which will run for 3 years, aims to address the low rate of home ownership in the armed forces.

### 4.2.4 Disability

The replacement of Incapacity Benefit, Severe Disablement Allowance and Income Support due to illness or disability with Employment and Support Allowance (ESA) has been controversial. The government plans to cut ESA entitlement from April 2017 for new sick and disabled claimants found *'unfit for work'* and assigned to the work-related activity group (Wrag) or its equivalent under the new Universal Credit so that they will receive almost £30 less a week, than previously. Evidence from disability charities and disabled people themselves indicate serious concerns that such a cut would negatively impact on people's health, not least their mental health, from the increased stress and anxiety that goes with struggling to pay the bills<sup>7</sup>.

Disability Living Allowance (DLA) is being replaced by Personal Independence Payments. It is estimated that by the time it has been fully rolled out, 600,000 fewer people will receive the benefit than would have received DLA.

The Children and Families Act, 2014 and the Special Educational Needs (SEN) and Disability Code of Practice: 0 to 25 years, 2015 extended support for children and young people from birth to twenty-five years of age, including:

- Children, young people and their families must be involved in discussions and decisions about their individual support and local provision.
- The right to make requests and decisions under the Act will apply directly to disabled young people and those with SEN over compulsory school age, rather than to their parents.
- New Education, Health and Care Plans (EHC) for 0-25 years, replace the current system of Statements and Learning Difficulty Assessments, which reflect the child or young person's aspirations for the future, as well as their current needs.
- Young people have the right to request an (education) personal budget as part of the EHC planning process.
- The EHC planning process requires preparation for adulthood to begin at 14 years (school year 9) with a clear focus on life outcomes.
- A Local Offer of support including information and advice available to children and young people with SEN or disabilities to help them to prepare for adulthood.

<sup>&</sup>lt;sup>7</sup> Halving the Gap? A review by Lord Low of Dalston CBE, Baroness Meacher and Baroness Grey-Thompson DBE - A Review into the Government's proposed reduction to Employment and Support Allowance and its impact on halving the disability employment gap, December 2015.

## 4.2.5 Carers

The Care Act creates new rights for carers to have an assessment, however, levels of Carers Allowance remain unchanged. Carers UK estimated in 2015 that over the next five years, around 10 million people will become carers and around 10 million people will have ceased caring. The trend in full-time care is increasing, with an estimated 1.6 million people currently providing care for 50 hours or more per week – up 33% since 2001. Leaving work to care puts pressure on carers' day-to-day finances and can also affect their long-term financial independence and security.

## 4.2.6 Poverty and welfare

The effects of austerity measures to limit, or even reduce, public spending will adversely affect some former officers, dependants and families. Austerity policies including a freeze on most working age benefits between 2016 and 2020 (including tax credits and Local Housing Allowance) will affect the situation of poorer households, according to the Institute of Fiscal Studies<sup>8</sup> while real reductions in social care funding and other services will have an impact on those who rely on this kind of help. However, the introduction of the National Living Wage in April 2016, the increase of the Personal Allowance, and other changes such as the extension of free child care for working families with three and four year olds to 30 hours aim to improve the finances of working families.

In terms of welfare benefits, a number of changes in recent years have affected welfare benefits, and further changes are in the pipeline, including:

- Universal Credit is to become the main means-tested social security benefit for people of working age, replacing Housing Benefit, Income Support, Income-related Employment and Support Allowance (ESA), Income-based Jobseeker's Allowance, Working Tax Credit and Child Tax Credit. Universal Credit is due to be phased in by 2017.
- Families with two or more children will not be eligible for any additional support for additional children born after April 2017.
- From April 2017, parents will be expected to prepare for work when their youngest child turns two, and to look for work when their youngest child turns three (including single parents).
- For those reaching pension age, from April 2016 a new State Pension has been introduced to replace the basic State Pension and State Second Pension.

Other measures to reduce the deficit are also affecting services for children and families, such as the closure of some Sure Start Children's Centres, funding cuts in youth work, and pressure on child and adolescent mental health services. These changes may increase the need for support to the dependents and families of officers.

<sup>8</sup> IFS (November, 2016) Winter is coming: the 2016 Autumn Statement

https://www.ifs.org.uk/uploads/Presentations/Autumn%20Statement%202016%20Presentation%2015111 6.pdf



5 Desk research - review of the literature

# 5.1 Demographics

In terms of the demographics of current and former officers, there is evidence from a number of charities, such as the ABF The Soldiers' Charity of a decline in the number of benevolence cases as the WW2 generation passes on, while individual cases are becoming more complex, due in part to increased longevity.

A study of the demographics of seafarers predicted a significant decline in the number of former Royal Navy and Royal Marines seafarers. In an unpublished report<sup>9</sup> on the needs of the families and dependants of seafarers, some changes in the terms of service in the Armed Forces were predicted as likely to increase turnover, while having a moderating effect on the decline in numbers of ex-seafarers.

According to the RAF Benevolent Fund, there is a wide diaspora of former RAF personnel, including Zimbabwe, France, Malta, Canada, Cyprus, Ireland and more in descending size of support across 30 countries. The Fund reported a significant increase in transition grants for wounded, sick and injured personnel (88%); a 56% increase in Minor Financial Assistance Awards; and a 44% increase in the number of people receiving domiciliary care and equipment in the last year (2015-16).

The OA's own data indicates the global spread of the former officer population from Australia to Zambia. About one-third (32%) of their employment contacts and 44% of their benevolence contacts are aged between 51 and 60, indicating higher levels of need among older officers.

<sup>&</sup>lt;sup>9</sup> MCG (2016) The needs of the families and dependants of seafarers, Unpublished.

# 5.2 Current needs

There is little research evidence specifically related to officers in the UK and their families, apart from work undertaken by the OA. A report by the OA of a non-contact survey in 2015 found that respondents had sought help or advice in the following areas:

- Employment
- Redundancy
- Transition support
- Health (including mental health and long-term health problems)
- Physical disability
- Housing
- Legal costs and advice (including relationship advice and legal costs)
- Loneliness and isolation
- Caring needs and responsibilities
- Addiction

There was also a recurring theme around raising awareness of the range of services and help provided by the OA. This was echoed in a survey by OA Scotland which suggested more work is needed to raise the profile of the OA among those who left the services some time ago.

## 5.2.1 Transition

A study of OA Scotland clients in 2013<sup>10</sup> indicated particular concerns among officers at transition around self-marketing and selling transferable skills, followed by networking and lack of civilian qualifications.

## 5.2.2 Health and mental health

For officers' families there are some barriers to accessing care and support; for instance having to relocate when nearing the top of NHS waiting lists, continually re-registering with GPs, and the lack of a nationwide system for identifying dependants who qualify for certain priority support all cause real hardship. In 2010, the Local Government Information Unit advised local authorities that: 'both simple chores such as registering for GPs, dentists and more demanding interactions, such as receiving IVF treatment and mental healthcare can present Service families with added childcare difficulties'.

There is some evidence that officers have lower rates of mental ill-health than other ranks, although it is possible that they may be more reluctant to seek help. Rates of those assessed with a mental health disorder in other ranks was higher than Officers (33.2 per 1,000 strength and 16.7 per 1,000 strength respectively).

# 5.2.3 Housing

According to the RBL 2014 study serving personnel are concerned about homelessness when they leave the Forces. The study cited evidence from a survey of those undergoing Career Transition Partnership resettlement programmes which found that 7% of officers (and 21% of other ranks) had sought advice before leaving on "*What to do if you are made homeless*".

# 5.2.4 Employment

In terms of employment, officers are more likely to have a qualification than other ranks: almost all commissioned officers have a qualification (97%) and over half have a degree<sup>11</sup>. Veterans who served as officers or NCOs are more likely to be working full-time (72%) than those in other ranks (58%).

<sup>&</sup>lt;sup>10</sup> Officers' Association Scotland (2013) *The Way Ahead*, OA Scotland.

<sup>&</sup>lt;sup>11</sup> RBL (2014) Op. cit.

According to the Annual Population Survey, the level of employment among all working age veterans (75%) was equivalent to that of non-veterans. Most veterans were employed in the 'associate professional and technical' (20%) and 'professional occupations' (16%) fields.

The impact of the 2010 Strategic Defence Review will continue to be felt with officers more likely to be of working age when they leave the Services, with often 20 to 30 years more working life before their retirement. Past and future changes to service pension schemes also means that in the longer haul there is an increasing likelihood of service leavers having to find employment regardless of the age at which they retire.

### 5.2.5 Partners

There is some research into the needs of partners and spouses of military personnel, although none specifically relates to those of officers. One study of spouses accompanying their partner on a foreign posting identified stressors associated with overseas postings including communication difficulties and additional financial strains due to limited spousal employment opportunities, while family unity and new travel and cultural experiences were potential positive benefits<sup>12</sup>.

According to the Centre for Social Justice, spousal employment can be a crucial part of a successful transition to civilian life for some military families. The stability provided by a second income, combined with the support of social networks that come as a part of working, gives families more resilience at a time of change<sup>13</sup>.

A survey by one large forces charity found that more than half of respondents had had to give up a job as a result of their military partner's job and more than half said that there was a shortage of suitable jobs for them nearby. Three-fifths of respondents said that they did not have a support network to help them nearby.

## 5.2.6 Families

Research evidence also suggests that long periods of deployment have a negative effect on family relationships<sup>14</sup>. An unpublished study of the needs of families and dependants of seafarers found that for naval families and dependants, there were specific needs related to the naval lifestyle with long deployments and frequent moves around the country. Survey respondents highlighted the need for emotional and practical support to help them and their children cope with the consequences of separation and moving to a new area. Help with school admissions, medical appointments, and support for those with children with special needs was mentioned regularly in connection with moves. Childcare was a key feature of the help that spouses and partners felt they needed in getting and maintaining employment, especially during deployment or when moving to a new area.

<sup>&</sup>lt;sup>12</sup> Blakely G., Hennessy C., Chung, M. C. & Skirton, H. (2012) A systematic review of the impact of foreign postings on accompanying spouses of military personnel, *Nursing and Health Sciences*, 14, pp121 – 132.

<sup>&</sup>lt;sup>13</sup> Centre for Social Justice (2016) Military Families and Transition, London: CSJ.

<sup>&</sup>lt;sup>14</sup> Centre for Social Justice (2016) Military Families and Transition, London: CSJ.

# 6 Scoping interviews

The interviews revealed a wide range in the number of beneficiaries across the different charities: some provide specific help to a small number of people, and others provide a varied range of services and information to several thousand people. However, few charities collect data on the breakdown of officers receiving their services compared to other ranks, and this means that many of the comments were largely anecdotal in terms of reported differences. The absence of this data will hamper the ability of researchers to develop a profile of the geographical location of officers and the extent to which they are concentrated in particular parts of the UK.

A number of interviewees expressed concern that collecting data by rank could be perceived as discriminatory, and did not think it would be appropriate to collect such data. Others commented that other types of similarity and difference were more important, particularly in relation to veterans, such as: length of service; whether RN, Army or RAF; the age of the person; whether they have been disabled through service; etc.

In terms of whether or not there were differences in needs between officers and others, interviewees thought that officers were generally less likely to be in need than other ranks, due mainly to higher earnings but also officer culture and expectations. Officers



were described as 'a proud community' who tend to apply for help when their problems are acute. Some interviewees thought that officers (and their spouses) were more reluctant to ask for help than others, due to the culture of resilience and expectations of self-reliance. This could mean that when they did finally ask for help, their needs were greater and more complex.

As with other ranks, charities frequently stepped in to support officers and their families following ill-health or injury, relationship breakdown, and employment difficulties which could lead to financial and other needs for practical support or advice. Junior officers with injuries and few savings might face similar problems to junior other ranks, and might therefore need just as much help. Among older veterans, isolation and care at home were perceived to be growing needs.

A number of recent changes in the employment terms and conditions of officers were mentioned which were likely to affect the level of needs in the future. The move to a needs-based allocation model for forces housing (Future Accommodation Model) and the introduction of a rental allowance was mentioned as making it more difficult for officers to find accommodation for themselves and their families. One interviewee questioned what the long-term impact of this would be on the operational effectiveness of the Armed Forces if personnel and their families became more dispersed. The more limited availability of the Continuity of Education Allowance was also mentioned by interviewees as being of particular concern to officers and their dependants.

Interviewees commented on the way that membership of the armed forces was no longer seen as a job for life, but increasingly likely to be part of a long career. Although some thought that officers were leaving at younger ages than previously, there was a view that their transition needs were different to those of other ranks as they tended to be older than other personnel at the point of departure from the armed forces.

A number of interviewees mentioned the challenges for officers' spouses in terms of maintaining their career development if they moved with their partner to each new posting. Equally some employers were reluctant to employ a spouse on the assumption that they would be moving within a couple of years. Lack of support for officers' partners with mental health needs was also mentioned, and the expectations of the partners of other ranks that officers' wives would provide leadership and support while their (usually) husbands were on deployment.

Future needs could increase as officers with student loans may be less well-off financially. In general, the future needs of serving officers were seen as similar, but less severe to those of other ranks. Help and support was needed for officers and their families particularly during deployment, moves to new postings, relationship breakdown and before and during the transition to civilian life; and for older officers, future support would continue to be needed around care for ageing officers.

Overall, numbers were expected to decline, reflecting the fall in numbers employed and the passing away of the generation who had fought in World War II. One charity had already seen a halving in the number of beneficiaries in the last ten years, while another had seen an increase in the number of serving officers seeking assistance. Some interviewees thought that more officers would be willing to ask for help than previously (particularly with less stigma around mental illness), and there would also be a growth in needs related to the impact of active service in Iraq and Afghanistan on mental health. Several interviewees commented that needs are increasingly complex.

# 7 Focus groups

The focus groups highlighted concerns about the changes in officers' terms and conditions. In particular, participants mentioned the Future Accommodation Model, changes to pension arrangements, the tightening of the Continuity of Education Allowance, longer tours of duty, and planned changes to the tax regime in Scotland. In one case, a spouse had had to stay in a hotel for several weeks due to the lack of available accommodation following a move.

Housing both for serving officers was a recurring theme in the focus groups. Some participants mentioned problems with the poor standard and maintenance of quarters for serving officers, and also commented on the move to an allowance to pay for rented housing which was not considered sufficient for the cost of housing in some areas of the country.

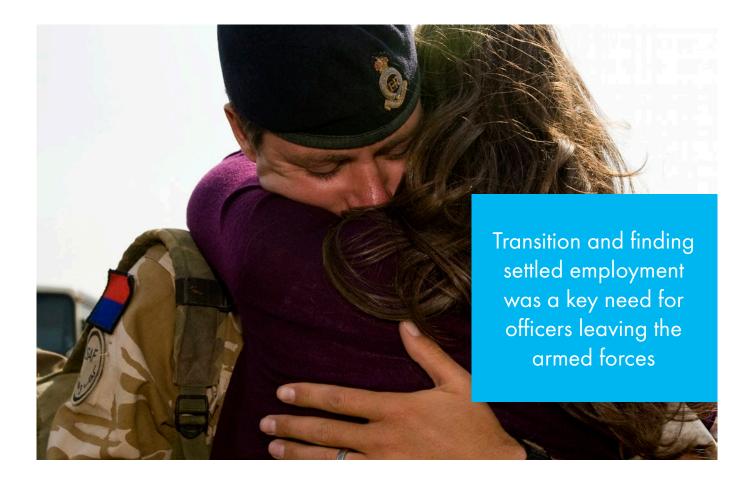
Participants felt that service in the armed forces was increasingly a job, rather than a career. There were fewer perks and officers' quality of life had declined. Those in the Full-Time Reserve Service commented on the lack of career support.

Both spouses and other participants mentioned the difficulties of moving families in terms of the continuity of education, health and dental care, and spousal employment. Around a quarter of spouses and families were thought to stay put rather than move with their officer partners. Officers and their families were faced with a choice between moving the whole family to each new posting which could help to keep the family together, but also created challenges in terms of continuity of education and health and the spouse's employment; or leaving the family in one place which could place a strain on the relationship and result in a lack of community support if not living on a base, but did mean that continuity was maintained.

Some schools had little understanding of the armed forces and the kind of support a child might need if a parent was on deployment. However, some participants felt that the Armed Forces Covenant had improved support for the families of those in the armed forces and mentioned particular locations – often where there were a large number of forces families or where a local politician had links with the forces.

Most focus group participants thought that the differences between the needs of officers and other ranks were only of degree. In general, on the employment front, it was felt that former officers found it easier to find a job after leaving the forces. To some extent the differences *between* the forces were considered to be more significant in thinking about needs. For example, naval deployment created different pressures on family members compared with army officers on a base.

Transition and finding settled employment was a key need for officers leaving the armed forces. Participants spoke positively about the advice and support they had received from the OA and from the CTP. Officers could struggle with the change in status and sometimes have unrealistic expectations about what kind of job they could get. Some officers valued the help of the OA in providing peer networks and in identifying their transferable skills: '*They're doing a lot of things right*'. Peer support with finding employment was felt to be very useful. Spouses could also need help to find employment once their partner left the armed forces if they had been moving with them on tours of duty.



For former officers, accommodation was a potential cause for concern as rents and property prices have risen steeply in some areas. As one participant commented, the two things most former officers worry about are: '*Where am I going to live and have I got a job?*' Former officers could find it difficult to get on the housing market.

Financial and pension advice was one area where former officers needed help. This was expected to be increasingly important in coming years as officers' pensions would be lower as a result of successive changes to the pension scheme. Many participants thought that there were already fewer long-term career officers and this would also affect pensions and increase the need for sound advice.

Other future needs were considered to be broadly similar to those of other armed forces personnel. One focus group participant thought that there would be a growing need for support for former officers with combat stress, due to the large number of military engagements in recent years. Another participant highlighted loneliness in older officers and their (mainly) widows.

The decline in the number of serving officers, the higher turnover of officers, and the increase in the number of Full-Time Reserves were mentioned as significant changes that are taking place. With the passing of the older WW2 generation and the decline in the number of serving officers, fewer civilians know people in the armed forces and consequently will have less understanding of military life. Other future changes which were mentioned which might affect current and former officers' circumstances were the ongoing development of devolution, the increasing number of women in the workforce, the rise of the sandwich generation (caring for children and ageing parents) and underfunding of health and social care.

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The need for officers and armed forces personnel to have a representative voice and 'political clout' was mentioned in two of the focus groups. There was a feeling that officers lacked representation at the policy level and that this would help to articulate their needs. A number of participants mentioned the need to raise the profile of the OA at the earliest opportunity with officers - ideally when in training so that young officers could understand what help might be available to them at transition. A couple of participants said that they had not heard of the OA until they received an invitation to attend the focus group. Officers could be made aware of the OA through their payslips.

#### 8 Data analysis

Data collection and analysis was undertaken of the available data to define the size and nature of the officer community. Data from the Ministry of Defence (MoD), the Royal British Legion report, and the Maritime Charities Funding Group study was extracted and assessed in terms of quality and completeness. The MoD provides good data on the current number of officers, covering age, gender and ethnic origin.

Suitable data were analysed to provide a profile of the current size and nature of the officer community, including data on age, gender and ethnic origin. Using MoD data and ONS data on household characteristics, estimates of the number of dependants were generated.

The future size and nature of the UK serving and former officer community and their dependants over the next twenty years up to 2036 was estimated, informed by agespecific mortality rates. In addition, the prevalence rates used in the POPPI<sup>15</sup> and PANSI<sup>16</sup> information systems were applied to develop projections for data on aspects of health.

#### Serving officers 8.1

Following the Strategic Defence and Security Review<sup>17</sup> in 2010, the number of people serving in the armed forces has fallen steadily with a corresponding decline in the total number of officers. Table 1 and Chart 1 below show how the total number of officers has fallen from 31,830 to 26,820 between 2011 and 2016, reflecting the implementation of the Review.

It appears that the number of officers has now levelled off to a total (including the Full-Time Reserve Service) of around 27,000 officers. It seems likely that the number of officers in the Armed Forces will remain stable for the foreseeable future.

In 2016, the largest group of officers was in the Army (12,590) followed by the RAF (7,460) and then the Royal Navy and Royal Marines (6,770).

<sup>&</sup>lt;sup>15</sup> www.poppi.org.uk\_Originally developed for the Care Services Efficiency Delivery Programme (CSED), part of the Department of Health, this system provides population data on older people by age band, gender, ethnic group, religion, tenure, transport, living with no central heating, household growth and by state pension for English local authorities.

 <sup>&</sup>lt;sup>16</sup> www.pansi.org.uk
 <sup>17</sup> Cm 7948 (2010) Securing Britain in an Age of Uncertainty: The Strategic Defence and Security Review, HMG, Crown Copyright.

Table 1: Total number of serving officers in the UK Armed Forces, 2011-2016
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	2011	2012	2013	2014	2015	2016
Army	14,760	14,480	13,890	13,200	12,830	12,590
Royal Navy/Royal Marines	7,410	7,190	6,940	6,800	6,780	6,770
RAF	9,660	9,030	8,230	7,850	7,630	7,460
FTRS						211
Total excluding FTRS	31,830	30,700	29,060	27,850	27,230	26,820



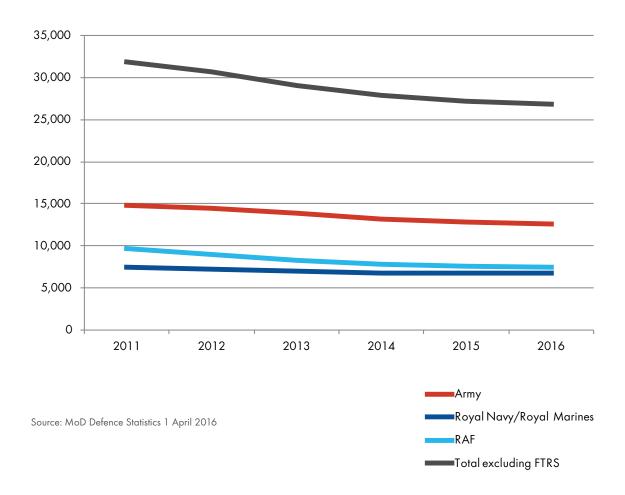




Table 2 and Chart 2 below illustrate the age profile of serving officers across the three services. In the Army and the Royal Navy/Royal Marines, the largest cohorts are in the age range 25-34 years, while in the RAF the largest cohort is aged 30-39 years. Numbers in the Army and RN/RM peak at the age of 25-29 years, and in the RAF at age 35-39 years. There is also a slight bulge in Army numbers at age 40-44 years.

	rm/rn	Army	RAF	Total
Under 18	0	0	0	-
18 & 19	40	0		60
20 - 24	540	850	320	1,720
25 - 29	1,220	2,570		4,790
30 - 34	1,210	2,110	1,430	4,750
35 - 39	1,090	1,820		4,570
40 -44	1,000	1,960	1,110	4,070
45 - 49	970	1,920		3,910
50 -54	630	1,220	760	2,610
55 - 59	80	130		340
60 and over	~	~	~	10
Total	6,770	12,590	7,460	26,820

Table 2: Total number of serving officers in the UK Armed Forces by age group, April 2016

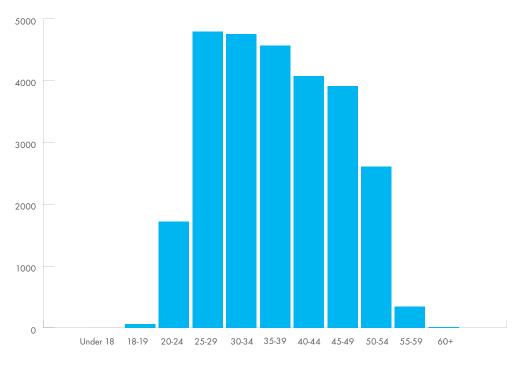


Chart 2: Total number of serving officers in the UK Armed Forces by age group, April 2016

Source: MoD Defence Statistics 1 April 2016

Chart 2 shows the highest number across all services are aged 25-29 years although the average age of serving officers is 37 years. Peak outflow is at age 50-54 years. A breakdown of the different age distribution of officers across the three services is available in Appendix 4.

Table 3 shows the numbers and proportion of female officers across the three services. It should be noted that there are no female officers currently serving in the Royal Marines. The RAF has the highest proportion of female officers serving in the Armed Forces (17%). The overall average across the three services is 13%.

Table 3: Total number and proportion of serving UK officers by gender

Officers	Male	Female	% Female
Royal Navy/Royal Marines	6,070	700	10.4
Army	11,110	1,480	11.8
RAF	6,210	1,250	16.7
All officers	23,380	3,440	12.8

Table 4 shows the number and proportion of serving officer by ethnic origin. Less than one in forty officers (2.4%) are of Black, Asian or Minority Ethnic origin. In comparison, 14% of the population of England and Wales were from a Black, Asian or Minority Ethnic group in the last Census in 2011.

	White	Black, Asian and Minority Ethnic (BAME)	% BAME
Royal Navy/Royal Marines	6,580	120	1.8
Army	12,170	350	2.8
RAF	6,940	160	2.2
All Services	25.690	630	2.4

Table 4: Total number and proportion of serving UK officers by ethnic origin



# 8.2 Former officers

There are two key sources of data on the number of armed forces veterans: the Royal British Legion's (RBL) 2014 study<sup>18</sup> and the Ministry of Defence's new <u>Annual</u> <u>Population Survey</u> (APS): UK Armed Forces Veterans residing in Great Britain (which excludes veterans in Northern Ireland for security reasons).

The RBL survey estimated that there were around 2.8 million veterans living in the UK in 2014, with 2.1 million dependent adults (including spouses and widows) and 1 million dependent children. There were estimated to be an additional 190-290,000 ex-Service community members living in communal establishments such as care homes. The RBL reported that about one in seven veterans are former officers.

Using data from the ONS 2015 Annual Population Survey, the MoD calculated that there were 2.56 million veterans living in Great Britain, (excluding Northern Ireland and individuals who were homeless, or were living in communal establishments such as care homes or prisons).

Due to the larger sample size of the Annual Population Survey (N=319,717), compared to the RBL 2014 Household Survey (N=20,698), the results from the APS are considered to provide more reliable estimates of the veteran population. It is worthy of note that both surveys provide similar estimates given their slightly different coverage.

To calculate the current number of *former officers* in the veteran population, we have estimated that 15% of veterans are officers. Although just under 17% of the current Service community is made up of officers, this represents an increase in recent years, for example it was 15.5% in 1997. The figure of 15% was the historical amount awarded to OA Scotland by the Earl Haig Fund Scotland as a result of the Scottish Poppy Appeal. This is also close to the RBL estimate that one in seven veterans (14.3%) are officers.

Table 5 illustrates that based on this percentage, there are 384,000 veteran officers in Great Britain.

Table 5:Estimate of veteran officers from each service based on current proportion of<br/>officers leaving the Armed Forces in Great Britain

	Number
Total estimate of veterans in 2015 (APS)	2,560,000
Proportion of veterans assumed to be officers	15%
Estimated total number of veteran officers in Great Britain	384,000

#### 821 Northern Ireland

The APS data does not cover Northern Ireland for security reasons. However, the RBL survey did provide an estimate for the number of veterans and adult dependants in Northern Ireland of 104,000. Assuming that the proportion in the adult population of veterans is 2% lower in Northern Ireland than for the UK overall (as indicated by the RBL survey). This would indicate that 3.4% of the adult population of Northern Ireland is a service veteran  $(1.466.400^{19} \times 0.034 = 49.900)$ . Assuming that 15% of this population are officer veterans indicates a total of 7,500 officer veterans in Northern Ireland to the nearest 100.

Ulster University researchers are currently working on a project which aims to establish how many veterans are living in Northern Ireland, and what their current and future health and well-being needs are.

#### 8.2.2 The 'hidden' population

There is a hidden population of former officers who were not within the scope of the APS or the RBL survey. These are people who are not living in private residential dwellings, but in institutions or some kind of communal establishments such as a care home, prison or hostel. By far the largest group in the hidden population are likely to be people living in care homes. The RBL estimated that between 45 and 80% of the care home population were part of the ex-Service community, reflecting the very high number of people in the relevant age group who served in the Second World War or did National Service. However, given that 74% of care home residents are female<sup>20</sup>, the great majority of these care home residents are likely to be spouses or widows of veterans. We propose taking a lower percentage of 12% as a realistic proportion of care home residents who are likely to be service veterans (i.e. about half the male care home population).

According to Laing and Buisson<sup>21</sup>, there are 426,000 older and disabled people in residential care. Assuming that 12% of these are veterans and that 15% of the veterans are former officers indicates that there are approximately 7,700 veteran officers in residential care.

#### 8.2.3 **Total former officers**

Adding the estimates of former officers in the Great Britain to those for Northern Ireland and the hidden population, the total estimate for the number of veteran officers is 399,200 (to the nearest 100) in 2015.

In 2016, the total number is projected to be 371,600 including the new outflow from the Armed Forces and an estimate for Northern Ireland, but *excluding* those in communal establishments (see Table 10 below).

#### 8.2.4 Regional distribution of former officers in 2015

Tables 6 and 7 and the accompanying charts illustrate the distribution of former officers aged below 65 years, and aged 65 and over across Great Britain. This assumes that veteran officers are distributed in similar proportions to the total distribution of veterans across Great Britain.

<sup>&</sup>lt;sup>19</sup> Northern Ireland Population Estimates, 2015 http://www.ninis2.nisra.gov.uk/InteractiveMaps/DataVis/NI%20Population%202015.pdf 20 ONS Census 2011

<sup>&</sup>lt;sup>21</sup> Laing and Buisson (2014) Care of Elderly People Market Survey 2013/14, Laing and Buisson

	Number
London	5,250
North East	7,950
East of England	9,900
East Midlands	10,800
West Midlands	11,100
Yorkshire and The Humber	13,350
North West	15,750
South West	17,550
South East	21,150
Wales	8,700
Scotland	14,550
All	136,350

Table 6: Region of residence of former officers aged under 65 in 2015

Source: MoD Defence Statistics 1 April 2016

On the assumption that the geographical spread of former officers follows a similar pattern to that of all veterans, it appears that a relatively high proportion of former officers of working age live in the south-east and south-west of England (Chart 3). This may reflect the fact that most personnel are stationed in the south. A relatively low number live in London, particularly when compared with the general population of working age, and numbers are also low in the north east.

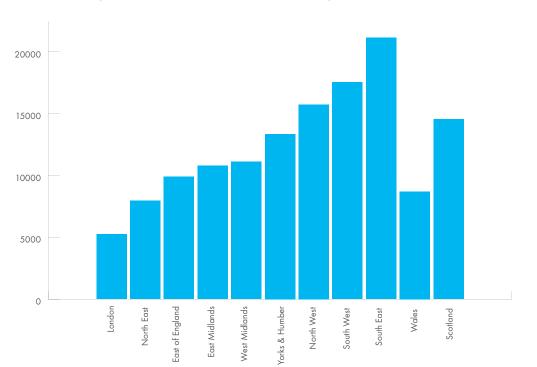


Chart 3: Region of residence of former officers aged under 65 in 2015

	Estimated number of former officers aged 65+
North East	10,650
London	14,850
East Midlands	17,100
West Midlands	19,800
Yorkshire and The Humber	22,500
North West	27,000
East of England	27,300
South West	31,650
South East	41,550
Wales	13,650
Scotland	21,450
All	247,650

Table 7: Region of residence of former officers aged 65 and above in 2015

Source: Annual Population Survey 2015

A similar pattern of distribution appears for officers aged 65 and over, with concentrations in the south east and south west, and relatively low numbers in the north east, Wales and London.

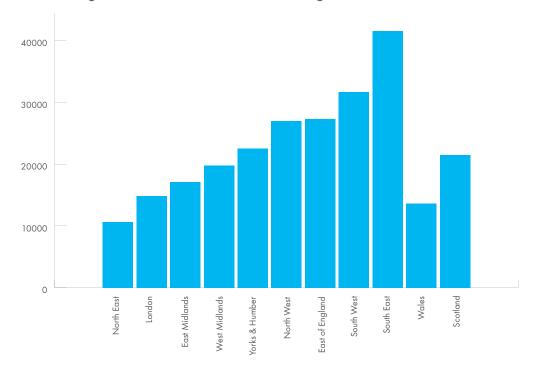


Chart 4: Region of residence of former officers aged 65 and above in 2015

Using the APS data provided by the MoD and the estimate based on RBL data provided earlier, the location of former officers in terms of country within the UK, is presented in Table 8 below.

Country	Aged under 65	Aged 65 and over	% aged 65 and over of the total	Total	Total %
England	113,100	212,550	65%	325,650	83%
Wales	8,700	13,650	61%	22,350	6%
Scotland	14,550	21,450	60%	36,000	9%
Northern Ireland	n/a	n/a	n/a	7,500	2%
Total	136,350	247,650	64%	391,500	100%

 Table 8:
 Estimated breakdown of former officers in the UK by country in 2015

Note: Excludes hidden population

Table 8 indicates that the proportion of older former officers in England is slightly higher than the proportion on in Wales or Scotland. Assuming that the pattern of residence is similar to that of all veterans, the great majority of former officers are in England.

The RBL report forecast a similar split in the ratio by country with 82% in England, 9% in Scotland, 7% in Wales and 2% in Northern Ireland.

The figure for Scotland is half the estimate made by the Officers' Association Scotland in 2007<sup>22</sup>. The 2013 report notes that in 2007, there were an estimated 72,000 officer veterans in Scotland of whom 40,000 were aged 65 and over (and around 80,000 dependants). However, the author comments that the total may have substantially reduced in the intervening years with an accelerating decrease in the next five to ten years.

## 8.2.5 Service of former officers

To estimate the number of former officers by service, current ratios have been applied to the total estimate. Table 9 presents these data.

Table 9: Estimated breakdown of former officers in the UK by service in 201	Table 9:	Estimated break	down of former	officers in the U	K by service in 2015
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Service	Number
Royal Navy/Royal Marines	97,900
Army	184,000
RAF	109,600
All Services	391,500

Note: Subject to rounding

A report for the RAF Benevolent Fund using the RBL survey data from 2014 indicates that there are 735,000 RAF veterans. Assuming that 15% of these veterans are former officers indicates that there are 110,300 former RAF officers in the UK. This is close to the figure in Table 9 and helps to strengthen confidence in the estimates.

The report found that the proportion of the adult RAF ex-Service community who are aged 65+ is much higher (74%) than in the general adult population (22%) but also

<sup>&</sup>lt;sup>22</sup> Officer's Association Scotland (2013) The Way Ahead, OA Scotland.

higher than among the whole UK adult ex-Service community (64%)<sup>23</sup>. The report concluded that the RAF ex-Service community is even older than the total ex-Service community. It may be assumed that this applies to former RAF officers as well. Related to this older profile, the adult RAF ex-Service community are more likely to live alone.

## 8.2.6 Age of former officers

The APS provides data on the age distribution of all veterans. Using the proportions and making an adjustment for the youngest age groups where there will be no officer veterans (age 16-19 years), it is possible to generate an estimate of the age of former officers in Great Britain (Table 10). Nevertheless, there may be an overestimate of the numbers in the younger age groups, with a corresponding underestimate of those aged 50 and above.

Age Group	Former officers		
Under 25	3,150		
25-29	7,050		
30-34	8,850		
35-39	8,100		
40-44	13,500		
45-49	19,500		
50-54	26,100		
55-59	26,850		
60-64	22,800		
65-69	25,950		
70-74	23,550		
75-79	73,350		
80-84	68,400		
85-89	37,650		
90+	19,200		
Total	384,000		

Table 9: Estimated breakdown of former officers in the UK by service in 2015

Note 1: Subject to rounding

Note 2: Applying the same age distribution across all veterans would generate 450 former officers aged 16-19 years. Instead 450 former officers have been added to the highest age group aged 90 and above.

<sup>&</sup>lt;sup>23</sup> RAF Benevolent Fund/Compass Partnership (2015) Meeting the Needs of the RAF Family.

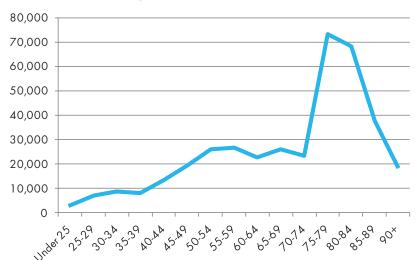


Chart 5: Estimated age distribution of former officers in Great Britain in 2015

Chart 5 illustrates powerfully the extent to which the veteran officer population is aging. More than 50 per cent of former officers were aged over 75 – reflecting the mandatory National Service in place until 1960 and 5 per cent were aged 90 or above.

It should be noted that the RBL calculated a higher proportion of all veterans in younger age groups with 45% under 65 years old. In contrast the APS calculates that 36% are aged below 65 years old. Using the RBL age distribution to estimate the number of future former officer veterans would therefore lead to a younger age profile and a slower decline in numbers. However, as mentioned earlier, the APS data is considered to be a more reliable data set for this study.

# 8.3 Future numbers of former officers

To estimate the future number of former officers in the UK, we have taken the estimated number of former officers (excluding the hidden population in care homes and other institutions<sup>24</sup>) and assumed the age distribution as presented in Table 9 based on the APS survey data. Age specific outflow data for officers from the Armed Forces (based on the average in the last two years) has been assumed to continue steadily over the next 20 years and age specific mortality rates have been applied up to age 99 years (although a small number of former officers will live to 100 and beyond). Table 11 and Chart 6 present the projected numbers based on these estimates and assumptions.

Table 11: Estimated number of former officers in the UK from 2016 to 2036, excluding those in communal establishments

Age	2016	2021	2026	2031	2036
Total under 65	133,300	118,000	100,300	84,000	72,500
Total aged 65 and over	238,300	173,000	127,400	103,900	89,200
Total aged 85 and over	61,400	62,200	48,100	26,100	16,400
Total	371,600	290,900	227,800	187,900	161,700

Note: Figures rounded to the nearest 100.

<sup>&</sup>lt;sup>24</sup> Hidden population numbers were excluded as there was no way to make a reasonable estimate of the age distribution of this group. A similar approach was taken by the RBL study.

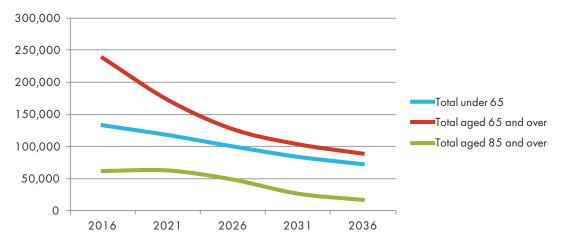


Chart 6: Estimated number of former officers in the UK from 2016 to 2036, excluding those in communal establishments

The table and chart show that the total number of former officers is projected to fall to almost half the current number in the next fifteen years, with even greater reductions in those aged 65 and over, and the very old aged 85 and over. The number of former officers aged 85 and over is projected to fall by 22% in the next 10 years, 57% in the next 15 years, and 73% in the next 20 years, although it is expected to increase slightly over the next 5 years.

For former officers aged 65 and over, the fall over the next 10 years is projected to be 47% by 2026, 56% by 2031 and 63% by 2036.

There is also projected to be a decline in the number of former officers under the age of 65, as the number of serving officers levels off and the outflow from the Armed Forces stabilises following the redundancy programmes earlier this century.

While those aged under 65 are estimated to represent 36% of all officer veterans in 2016, this proportion is projected to rise to 45% of the total by 2036, reflecting the passing of the generations that served in World War 2 and did National Service. There is a pronounced spike in the age profile of the former officer community in the 75-84 age band which reflects this. Over the next twenty or so years, the veteran officer population will come to resemble the general population more closely in terms of age.

Estimates for the hidden population have not been made due to the lack of information on their age distribution.

# 9 Health

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The APS found no significant difference between the proportion of working age veterans (74.2%) and non-veterans (77.5%) who viewed their health as good or very good. Across all UK Armed Forces veterans and non-veterans residing in GB, the APS reported no differences in the types of long term health conditions, with the most prevalent long-term health conditions being musculoskeletal, cardiovascular and respiratory problems. A significantly higher percentage of retirement age (65+) veterans (44.9%) reported conditions relating to legs and feet, when compared to the non-veteran population (33.9%). This may partly be due to the physical activities veterans undertake whilst in Service. There were no differences in the health conditions reported by the working age (16-64) veterans when compared to the standardised non-veteran population. The data is not broken down by rank, but it seems likely that the data for officer veterans will be similar.

### 9.1 Disability

Projections for the numbers of former officers with a '*long-standing illness, disability or impairment which causes substantial difficulty with day-to-day activities*' were estimated by applying the percentage of people at different ages reported in the Family Resources Survey<sup>25</sup> to the projected distribution. The percentages used are those reported for men, as the majority of former officers in the higher age groups are men. This is likely to be an under-estimate as a higher proportion of women report limiting long-standing illness – across all age groups – and a growing proportion of officers are female.

Table 12: Estimated number of former officers in the UK aged 65 and over with a long-term limiting illness whose day-to-day activities are limited a lot

Age	2016	2021	2026	2031	2036
65-69	7,600	6,700	7,500	7,200	5,900
70-74	9,600	9,200	8,100	9,000	8,700
75-79	27,800	9,100	8,700	7,700	8,500
80-84	36,800	25,300	8,400	8,000	7,100
85 and over	34,400	34,800	26,900	14,600	9,200
Total	116,200	85,100	59,500	46,500	39,300

Note: Subject to rounding to nearest 100

Chart 7: Estimated number of former officers in the UK aged 65 and over with a long-term limiting illness whose day-to-day activities are limited a lot

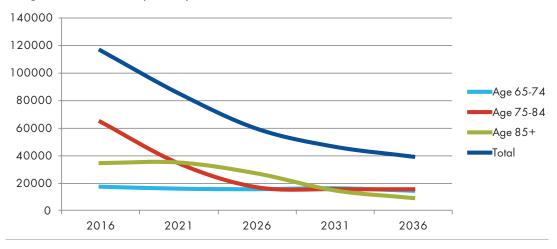


Table 12 and Chart 7 indicate that while the number of former officers with a disability aged 65 to 74 are projected to remain fairly stable over the next 20 years, a significant decline in the number of former officers with a disability in higher age groups is predicted, reflecting the passing of the older generation of officers. Overall, the number of former officers aged 65 and over with a disability is likely to fall by more than two-thirds (66%) over the next twenty years, with the steepest fall in the next ten years.

<sup>&</sup>lt;sup>25</sup> Department for Work and Pensions (2014) Family Resources Survey, United Kingdom, 2012/13, DWP.

#### 9.2 Dementia

Projected numbers of former officers with dementia were estimated by applying the agespecific rates from the European Community Concerted Action on the Epidemiology and Prevention of Dementia (EURODEM) study<sup>26</sup>. The rates for men have been used.

Table 13 and Chart 8 show a similar pattern to the disability data as dementia is also age-related. Thus, the number of former officers aged between 65 and 74 is projected to remain fairly constant over the next twenty years while the number in the age range 75 to 84 is projected to fall relatively steeply over the next ten years, and the number aged 85 and over is projected to increase in the next five years before declining continuously over the next fifteen years. Overall the decline in the number of former officers with dementia is projected to be over 70%.

Age	2016	2021	2026	2031	2036
65-74	1,600	1,500	1,500	1,500	1,400
75-84	11,100	6,500	2,800	2,600	2,500
85 and over	14,400	14,900	12,000	7,200	4,100
Total	27,100	22,900	16,300	11,300	8,000

Table 13: Projected number of former officers in the UK with dementia

Note: Subject to rounding to nearest 100

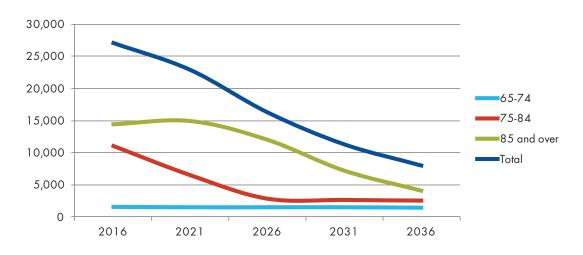
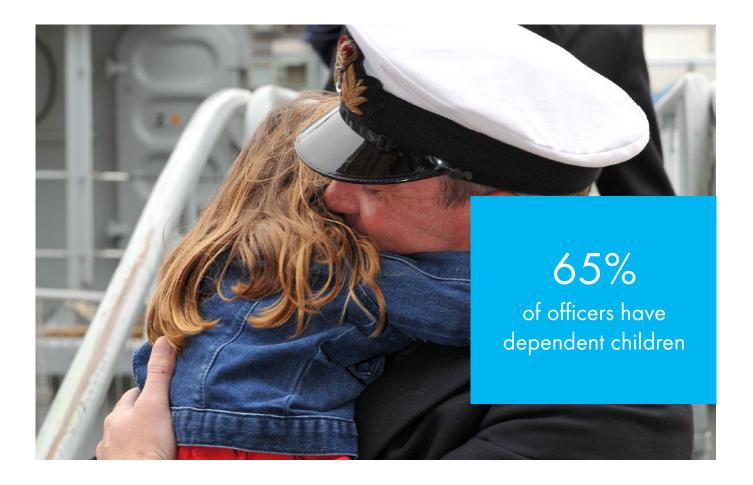


Chart 8: Projected number of former officers in the UK with dementia aged 65 and over

<sup>&</sup>lt;sup>26</sup> http://www.alzheimer-europe.org/Research/European-Collaboration-on-Dementia/Prevalence-of-dementia/Prevalence-of-dementia-in-Europe



#### **Dependants** 10

According to the Armed Forces Continuous Attitude Survey (AFCAS) 2016, just over half of Service personnel (52%) report that they are married or in a civil partnership and a further 22% are in a long-term relationship. Around half (51%) state that they have children that they support financially. These figures are fairly stable over time, although both the proportions of those married or in a civil partnership, and those with children have increased slightly since the AFCAS survey began in 2007. The MoD's Families Continuous Attitude Survey (FAMCAS) 2016 found that 65% of officers have dependent children (ie aged under 18 years)<sup>27</sup>. Officer families are more likely to only have children aged over 18 (9%) than the families of Other Ranks (3%)<sup>28</sup> reflecting the older age profile of officers.

To estimate the number of dependent adults for current and former officers, we have used the proportions from the APS of ex-Service personnel with a spouse or civil partner (61.5%) or ex-spouse or ex-civil partner (9.8%). To estimate, the number of widows we have applied the proportion among the population aged 65 and over from the Census 2011 (29%). To estimate the number of dependent children of serving officers, we have assumed that 65% of current officers have a dependent child, aged 0-18 years. This is likely to result in an underestimate of the number of dependent children of serving officers as many will have more than one child. To estimate the number of dependent children of former officers, given their older age profile, we have assumed that there will be a smaller proportion and have used 55% for former officers aged under 65 and that there will be none for former officers aged 65 and over.

<sup>&</sup>lt;sup>27</sup> FAMCAS (2016) Annex B <sup>28</sup> AFCAS (2016) Main report.

In contrast, the RBL estimated that 38% of veterans had a dependent spouse or partner, 6.5% were divorced or separated dependent adults, and 27% were widows. The main difference between the RBL and this report is the higher proportion of married/partnered officers which we have assumed.

Table 14 indicates that serving officers have 19,000 adult dependents and 17,400 dependent children. Assuming that numbers of serving officers remain stable, this is not projected to change over the next 15 years. Among former officers, there are an estimated 267,000 dependent adults and widows. The number of dependent adults and widows is projected to decline significantly in line with the decline in former officer numbers.

This corresponds with the conclusions of OA Scotland which in their 2013 report commented on the ongoing fall in the number of annuitants and concluded that there was a steadily reducing need for welfare services: *The picture is therefore one of a steadily reducing need for Welfare Services. This is not only because of the age profile of the beneficiaries but because with the minimum income guarantee and changes to female working patterns, there are fewer dependents who need financial help of this type.* The Maritime Charities Group also concluded that there would be a steady decline in the overall number of dependent adults among Royal Navy veterans.

Although the projected decline across the age groups of adult dependants and widows will mean there will be fewer dependants in need, it is likely that needs will become more complex and that younger age groups will need help as a result of some of the policy changes outlined earlier in the report.

Dependants	%	2016	2021	2026	2031	2036	
Serving officers							
Dependent adults	71%	19,000	19,000	19,000	19,000	19,000	
Children (0 - 18 years)	65%	17,400	17,400	17,400	17,400	17,400	
Former officers (under 65 years)	Former officers (under 65 years)						
Dependent adults	71%	94,600	83,800	71,200	59,600	51,500	
Children (0 - 18 years)	55%	73,300	64,900	55,200	46,200	39,900	
Former officers (65 years +)							
Dependent adults	71%	169,200	122,800	90,500	73,800	63,300	
Widows aged 65+	29%	69,100	50,200	36,900	30,100	25,900	
All officers							
Dependent adults excluding widows		282,900	225,700	180,700	152,500	133,800	
Widows aged 65+		69,100	50,200	36,900	30,100	25,900	
Total adult dependants		352,000	275,800	217,700	182,600	159,700	
Total children (0 - 18 years)		90,700	82,300	72,600	63,600	57,300	

#### Table 14: Projected number of UK officers' dependants

Note: Dependent adults includes (ex)spouses and (ex)partners Note: Subject to rounding

## 11 Conclusion

The study of the demographics of the serving and former officer community and their dependants indicates that the number of serving officers is likely to remain around 27,000 for the foreseeable future, with 12,590 Army, 6,770 Royal Navy/Royal Marines and 7,460 RAF officers in 2016.

There will be a significant decline in numbers of former officers over the next 20 years. From an estimated total of 371,600 former officers across the UK in 2016, the figure is projected to decline by more than 55% to 161,700 in 2036.

The steepest decline in numbers will be among the 85 and over age group which is currently estimated at 61,400 and projected to fall to 16,400 as the WW2 and National Service generations pass on. While total numbers will fall, tighter budgets in health and social care and welfare reforms mean that needs may become more complex and acute.

There are a large number of former officers with disabilities and/or dementia. It is estimated that there are over 116,000 officers with long-term illnesses which significantly limit their ability to undertake day to day activities and over 27,000 with dementia. These numbers will also fall dramatically in the next 20 years.

A growing proportion of former officers will be in the under 65 age group. The scoping exercise indicated that changing terms and conditions, along with greater participation in the workforce of the (mainly) female partners of officers, is likely to lead to a higher turnover of officers with many leaving at a younger age than previously. This is likely to increase the need for services around transition, including finding accommodation, and help with the move into civilian employment for former officers. It may also affect the projected number of former officers, resulting in a higher number than projected in this report.

Other changes which will affect the composition of the former officer community are the planned increase in the Full-Time Reserve Service. FTRS Officers found little career support and this is likely to be an ongoing and increasing need. Planned increases in the number of women and BAME personnel in the Armed Forces will feed through into the former officer community and potentially generate new and different needs at transition and beyond.

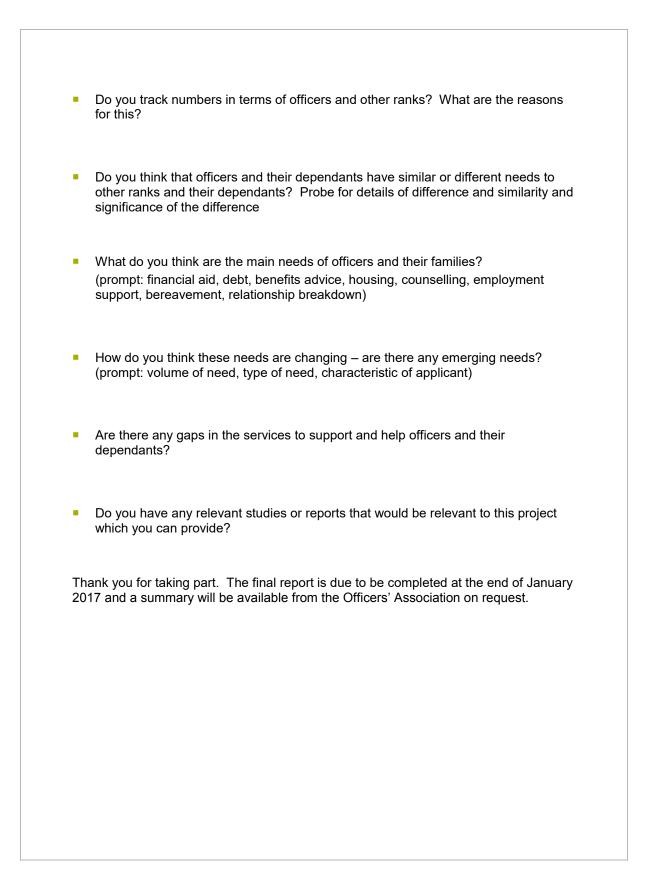
Many of the needs of current and former officers were repeated in both the primary and secondary research conducted for this study. In particular, help with transition in finding employment, concerns about finding affordable and good quality accommodation, the difficult decision around whether or not families should move with the serving officer and the strains of separation versus the lack of continuity, and the challenges faced by the spouse were recurring themes.

There was limited discussion of needs around mental health, although there was a view that officers were reluctant to seek help for mental illness and a feeling that mental health needs may increase over time as a result of the Iraq and Afghan conflicts.

Finally, there was a view that the OA and other service charities need to raise their profile and their influence on behalf of the service community, as well as raising awareness among serving officers to ensure that they are aware of the help that is available.

## Appendix 1 Topic guide for stakeholder interviews

	mographic research on the serving and ex-officer community
•	Introduction
ca co	e Institute of Public Care at Oxford Brookes University has been commissioned to ry out a project for the Officers' Association on the size of the serving and ex-officer nmunity now and in the future, and to explore the implications of this work in terms of cers' current and future needs.
ex ex sig the	part of the project, we are doing a number of interviews with key stakeholders to blore the needs and characteristics of the officer community, and how these are bected to change over the next 20 years; and to understand to what extent there are nificant differences and/or similarities between officers and other ranks in terms of ir current and future needs. We will also be carrying out focus groups with current d ex-officers to obtain their perspective.
Th	e aim of the project is to:
•	Identify the size of the current officer community, including dependants, by several demographic variables, such as age and disability.
•	Project the size of the serving and ex-officer community for the next 20 years by several demographic variables, such as age and disability.
•	Explore the implications in terms of current and future needs with a view to carrying out a detailed research project on service needs in the future.
	e will not identify individual interviewees in any report on the project but will provide a of all those interviewed in an appendix.
Th	e interview will probably last around 30 to 40 minutes.
ls	hat OK? Do you have any questions?
_	Can you tell me about your organisation and what kind of help it provides to officer and their dependants?
•	
•	What is your role in the organisation?



# Demographic research on the serving and ex-officer community

The Institute of Public Care at Oxford Brookes University has been asked to carry out a project for the Officers' Association on the size of the serving and ex-officer community now and in the future, and to find out what this means for officers' current and future needs.

As part of the project, we are running some group discussions with serving and former officers and dependants to find out about the needs of the officer community and their families, and how these are expected to change over the next 20 years; and to find out whether there are significant differences and/or similarities between officers and other ranks in terms of their current and future needs. This will help the Officers' Association and other forces charities to plan better how to meet the needs of officers and their families.

We will not identify individuals taking part in the focus group discussions in any report on the project. Participation is voluntary.

The focus group discussion will last approximately one hour and a half. There are no right or wrong answers, we are interested in your views and opinions.

The research is due to be completed by the end of January 2017 and a summary report will be available from the Officers' Association on request.

If you have any questions or concerns, please contact the Institute of Public Care, Oxford Brookes University on 01865 790312 and leave a message for Liz Cairncross or email her at: <u>lcairncross@brookes.ac.uk</u>

November 2016

#### Topic Guide for focus groups

#### 1 Introduction (10 mins)

Hello my name is .....and thank you very much for attending today and agreeing to participate in this discussion.

Before we start, it is important just to go over some house-keeping arrangements:

We have up to 1.5 hours for this discussion. The toilets are.... Fire alarms Mobile phones please turn off/ or to silent

[Quick introduction about yourself and IPC – an independent institute – part of Oxford Brookes University. Then Individual introductions – first names and service background only]

#### 2 About the research

The Institute of Public Care at Oxford Brookes University has been asked to carry out a project for the Officers' Association on the size of the serving and ex-officer community now and in the future, and to find out what this means for officers' current and future needs.

As part of the project, we are doing some focus groups with serving and former officers to find out about the needs of the officer community, and how these are expected to change over the next 20 years; and to find out whether there are significant differences and/or similarities between officers and other ranks in terms of their current and future needs. This will help the Officers' Association and other forces charities to plan better how to meet the needs of officers and their families.

We will not identify individuals taking part in the focus group discussions in any report on the project.

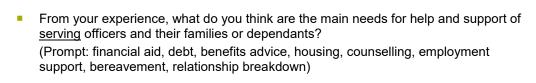
The focus group discussion will last approximately one hour and a half.

Is that OK? Do you have any questions?

#### 3 Before we start...

- No right or wrong answers interested in your views and opinions
- Reassure participants about confidentiality.
- Permission to record for analysis purposes only.

45



- From your experience, what do you think are the main needs for help and support of former officers and their families or dependants?
   (Prompt: financial aid, debt, benefits advice, housing, counselling, employment support, bereavement, relationship breakdown)
- How do you think these needs are changing are there any emerging needs? (prompt: volume of need, type of need, characteristic of applicant)
- Are there any gaps in the services to support and help officers and their families or dependants? (Probe for details)
- Do you think that officers and their families or dependants have similar or different needs to other ranks and their dependants? (Probe for details of difference and similarity)
- If you were advising the Officers' Association what kind of help and support to provide in future, what would be your priorities?

#### 4 Conclusion

Thank you very much for all of your contributions. We have also have a form (Appendix A) to fill into give you further information should you wish to do so – this is confidential.

This information will be used only for describing the general characteristics of the focus group.

#### Demographic research

Please could you provide some basic information about yourself to help us understand a little about the profile of the people taking part in the focus groups. Please tick or circle the appropriate answer.

Army

Royal Air ForceRoyal Navy / Royal MarinesReserves

Are you	Serving as an Officer	
	An ex-Officer	
	Partner or other family member	

#### Which age group are you in?

Under 25	
25-34	
35-44	
45-54	
55-64	
65-74	
75-84	

Gender	Male	
	Female	

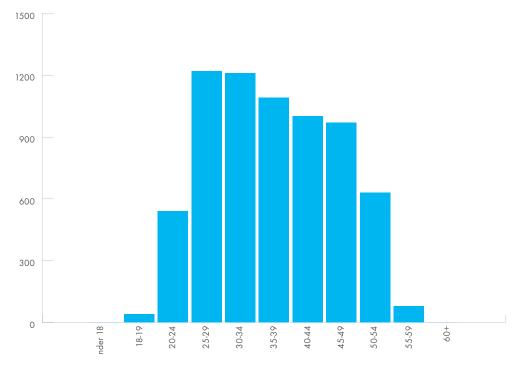
#### Are you?

Single (never married or never registered a civil partnership)		
Married		
Living with a partner as a couple		
In a registered same-sex civil partnership		
Separated (but still legally married or still legally in a civil partnership)		
Divorced or formerly in a civil partnership which is now legally dissolved		
Widowed or surviving partner from a civil partnership		

## Appendix 3 Profile of focus group participants

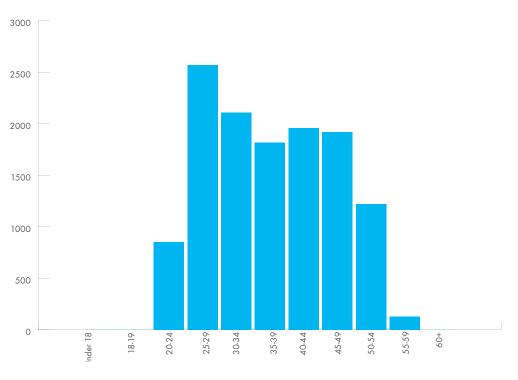
Service	Service	Type of respondent	Age group	Gender	Marital status
Army		Ex-Officer	65-74	m	Married
Army		Partner	45-54	f	Married
Army		Ex-Officer	65-74	m	Married
Army	Reserves	Serving	35-44	m	Living with partner
Army		Serving	45-54	m	Married
Army	Reserves	Ex-Officer	45-54	m	Married
Army		Serving	35-44	m	Married
Army		Serving	Under25	m	Single
Army		Serving	25-34	m	Married
Army		Serving	25-34	m	Single
Army		Ex-Officer	55-64	m	Married
RAF		Ex-Officer	65-74	m	Married
RAF		Ex-Officer	45-54	m	Separated/Divorced
RAF		Partner	45-54	f	Married
RAF		Partner	35-44	f	Married
RAF		Serving	45-54	m	Married
RAF		Serving	45-54	m	Married
RAF	Reserves	Serving	45-54	m	Married
RAF		Ex-Officer	45-54	m	Separated/Divorced
RNRM		Serving	25-34	m	Married
RNRM		Ex-Officer	65-74	m	Married
RNRM		Ex-Officer	65-74	m	Married
RNRM	Reserves	Ex-Officer	25-34	m	Single
RNRM		Ex-Officer	55-64	m	Married
FTRS	Reserves	Serving	55-64	m	Married
FTRS	Reserves	Serving	45-54	m	Married
FTRS	Reserves	Serving	45-54	m	Married

## Appendix 4 Officers by age group



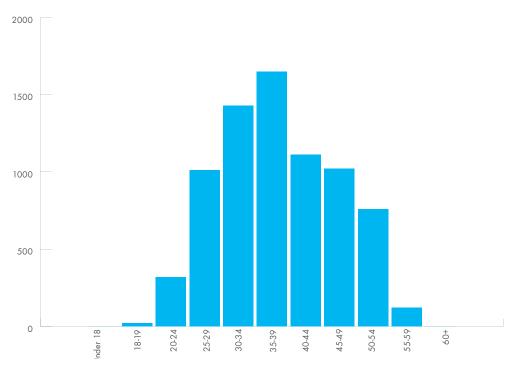
Total RN/RM officers by age group, April 2016

Source: MoD Defence Statistics 1 April 2016



#### Total Army officers by age group, April 2016

Source: MoD Defence Statistics 1 April 2016



Total RAF officers by age group, April 2016

Source: MoD Defence Statistics 1 April 2016

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