



# Exploring the Need for a Veterans' Centre in Northern Ireland

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# Foreword

Setting aside for one moment the unique security environment, the current political situation and the recent history of Northern Ireland, this report has identified some common themes that run through the whole Armed Forces community across the United Kingdom, and indeed internationally too. Veterans, we know from other studies, face barriers to accessing support services that range from stigma through to more practical logistics. Conceptually, a centre, or series of centres, can afford the service user easier physical access. And if that centre also provides a sense of comradeship and security, and is operated by those with an empathy for, if not actual experience of, the Armed Forces, then the some of these barriers can be overcome and the success of the services provided can be improved. Of course, centres can also create dependency, and hinder integration into the wider community. Within the totality of finite public and charitable resources, they might also represent less value for money. So it is not surprising that when considered in the context of Northern Ireland, this report does not present unequivocal conclusions. This is to be applauded.

It is fashionable to support the creation of veteran-specific services across the spectrum of need. But the evidence on their efficacy is, in many cases, sparse. Popularity for a cause alone should not drive policy or provision, this being particularly important in the absence of strong policy/political leadership and austere finance.

So where does this leave us? I thoroughly endorse the recommendations, which sensibly call for more work to be done. This might appear to indicate a failure of this particular strand of the seminal 'Northern Ireland Veterans' Health and Wellbeing Study', but we see it differently. Policy decisions that are based on credible evidence are the standard for which we at Forces in Mind Trust are aiming. This credible report concludes that there *is* sufficient evidence to warrant investigating further, but that there is *insufficient* evidence to press ahead immediately with a campaign to secure funding. We will consider these recommendations carefully, and I would invite all those involved in supporting the Armed Forces community in Northern Ireland to do likewise.



**Air Vice-Marshal Ray Lock CBE**

Chief Executive, Forces in Mind Trust

# Forces in Mind Trust

The Forces in Mind Trust was founded in 2012, through an endowment of £35 million from the Big Lottery Fund, to promote the successful transition of Armed Forces personnel, and their families, into civilian life.

Our Vision is that all ex-Service personnel and their families lead successful and fulfilled civilian lives. Our Mission is to enable them to make a successful and sustainable transition.

Our Strategy is to use our spend-out endowment to fund targeted, conceptually sound, evidence generation and influence activities that will cause policy makers and service delivers to support our Mission.

For full details of what we have funded, our published research, and our application process visit our web site [www.fim-trust.org](http://www.fim-trust.org)



# Acknowledgements

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# Acronyms

CTP	Career Transition Partnership
FiMT	Forces in Mind Trust
GB	Great Britain (i.e. England, Wales, Scotland)
HS	Home Service
MOD	Ministry of Defence
NI	Northern Ireland
NIVHWS	Northern Ireland Veterans' Health and Wellbeing Study
NIVSC	Northern Ireland Veterans Support Committee
PRRT	Police Rehabilitation & Retraining Trust
PRU	Personnel Recovery Unit
PSNI	Police Service of Northern Ireland
R IRISH	Royal Irish
RFEA	Regular Forces Employment Association
UDR	Ulster Defence Regiment
UK	United Kingdom
VCS	Voluntary and Community Sector

# Executive Summary

## Overview

*Exploring the Need for a Veterans' Centre in Northern Ireland* is the third in a series of reports from the Northern Ireland Veterans' Health and Wellbeing Study (NIVHWS). The aim of this research was to gain insight into the perspectives of veterans and service providers in Northern Ireland (NI) regarding the potential need for a dedicated Veterans' Centre. This was accomplished by analysing qualitative data from a series of focus groups and interviews with veterans and service providers, and early quantitative data from an ongoing large-scale and fully anonymous *Northern Ireland Veterans' Health and Wellbeing Survey*.

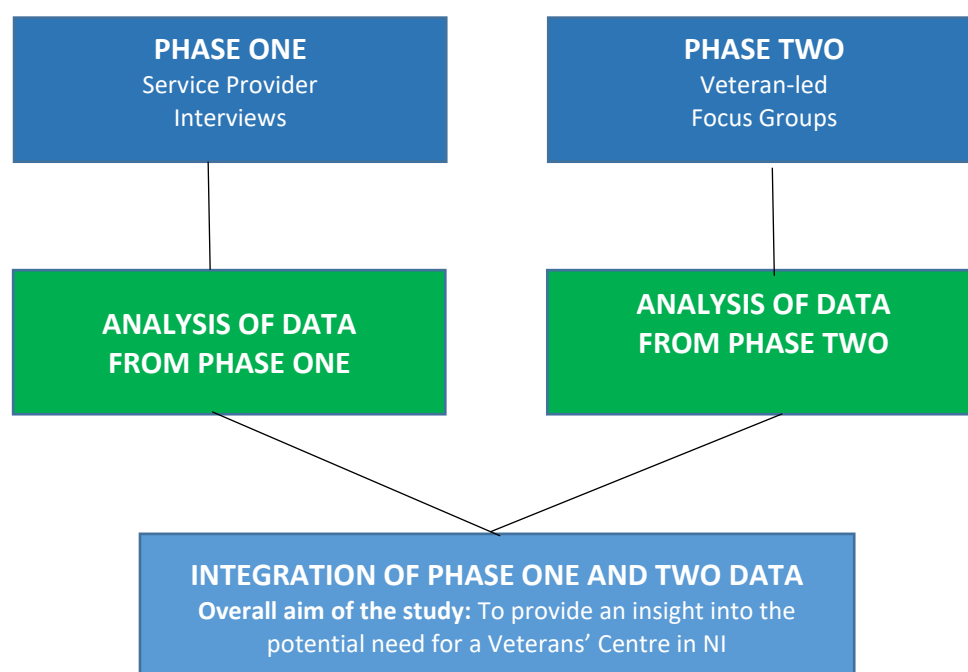
The current report builds upon the findings of our previous two reports: *Supporting & Serving Military Veterans in Northern Ireland*, which scoped the services available to NI veterans through the statutory, Ministry of Defence (MOD) and voluntary and community sector (VCS) organisations; and the *Current and Future Needs of Veterans in Northern Ireland*, which outlines the findings of focus groups with a range of veterans in NI as well as perspectives of those providing direct services to this population regarding the needs of the veteran population in the region. The first report identified a large infrastructure of various support services, with a paucity of veteran specific services in the statutory sector. The second report found that veterans' needs are often complex and overlapping, and accessing support is hindered by a number of social and institutional barriers. With the complexity of veterans' needs, and the obstacles to identifying and accessing appropriate services described by veterans themselves, there is some appeal in a dedicated Veterans' Centre. The possibility and acceptability of such a centre, what it might look like, and what services it may provide, is the primary concern of this report.

## Methods

The current study is based on the analysis of qualitative and quantitative data collected by the research team through interviews, focus groups and a large-scale self-report Wellbeing Survey.

## Focus Groups and Interviews

A total of 13 veteran-led focus groups and 20 service provider interviews were conducted between October 2016 and October 2017. The majority of veterans were male (96%) with an average age of 56 years. Service providers represented the statutory sector, the MOD and the VCS. The verbatim transcripts from both focus groups and interviews were coded and analysed using content analysis in NVivo software, focusing specifically on the data pertaining to the Veterans' Centre questions (the data collection for the current report was part of the data collection for the *Current and Future Needs of Veterans in Northern Ireland* report, but the data was analysed separately). The integration of narratives from veterans and service providers occurred at the interpretation phase:



## Wellbeing Survey

At the time of writing this report, the survey has been live for approximately five months (late December 2017 – early May 2018). The survey is fully anonymous, with participants having the option to skip as many questions as they want. Because of this, the survey data for this study comes from between 301 and 314 veterans, depending on the question asked. The majority of the 314 participants were male (90%) with mean age of 55 years.

## Key Findings

One of the key findings of this report was the split between veterans, the majority of whom were in support of a Veterans' Centre in Northern Ireland, and service providers, who largely opposed the idea. Data from the self-report survey indicates that 66% of veterans would 'definitely' support the development of a Veterans' Centre and a further 13% would 'probably' support it. A total of 65% of veterans indicated that they would use the centre for mental health support, 64% would use it for social activities and 62% for education and training. Only 12% of participants reported that they would not use a Veterans' Centre at all. Throughout the focus groups, phrases such as 'safe space', 'advice and information', and 'one stop shop' frequently occurred in discussions about the intended purpose of the centre. The emphasis on mental health and social support is consistent with the findings in previous reports that these services were underrepresented in the veteran sector (Armour et al, 2017a; Armour et al, 2017b).

One of the disadvantages of a Veterans' Centre, and potentially a barrier to accessing it, was security concerns, as voiced by participants in our survey, those in the focus groups and those in the interviews. According to a number of participants, a physical building dedicated to providing veteran-specific services would be seen as an easy target. Further pitfalls identified in relation to the centre were: the potential for the centre to stifle self-help and create dependence; issues around funding for the centre; possible duplication of services already being provided; and the need to identify an appropriate location, which would have to be sufficiently central and easily accessible by public transport.

## Conclusions and Recommendations

The current report presents initial empirical evidence on the potential need for a dedicated Veterans' Centre in NI, from the perspective of veterans who supported the establishment and service providers, who largely opposed it. The data from veterans showed a clear desire for a Veterans' Centre that would provide a variety of support services, however, since a large proportion of veterans voiced concerns about their personal safety and security if they were attending the centre, it is not clear at the moment, how many veterans would actually utilise the centre.

Many of the services that a Veterans' Centre might offer are already provided by other organisations, which raises concerns about potential duplication of services. Regardless of whether or not a Veterans' Centre is established in NI, the current work reiterates the findings of earlier reports (Armour et al, 2017a; 2017b), which found that fragmented and piecemeal services in NI are leading to problems in access and outcomes for veterans in the region. At this stage, rather than making concrete recommendations, we advocate the setting up of an exploratory committee formed of veterans, service providers, potential funding bodies and possibly local politicians to examine the possibility of addressing some of these issues outside the confines of a Veterans' Centre, if that is deemed to be the most appropriate avenue at this time, and to discuss the practicalities and the feasibility of the following key areas related to the establishment of a Veterans' Centre, (or Centres) in NI:

Key Area	Recommendation	Implications
<b>Location and opening times</b>	Explore the possible location of a centre that would provide the best accessibility to all veterans, covering a range of times.	Many services are currently located in Belfast and are not always accessible at appropriate times for veterans who work. Additionally, they are often not served well by public transport.
<b>Best practice</b>	Examine evidence of best practice, including how effective the PRRT has been for ex-PSNI officers, how effective other UK veteran centres have been, and the benefits that veterans have received from these other centres.	This would assist in streamlining the resources and provide the most appropriate services for current and future needs of veterans.

Key Area	Recommendation	Implications
<b>Services</b>	Examine what services can, or should be, provided to cover a range of current and future needs.	Avoid duplicating services that are already available in the area where the centre might be located.
<b>Costing</b>	Undertake a cost analysis for the development of a new centre, the refurbishment of an existing establishment, or combining a centre with an existing organisation.	In an age of austerity, funding is likely to be scarce. Hence, the most cost-effective way of developing a centre is likely to represent the most successful way of securing funding.
<b>Usage</b>	Explore the likely footfall to the centre, including the busiest days and times. This could be done by exploring the data held by other service providers.	This would assist in streamlining the resources and staffing of the centre, but it will be important to also include questions about attendance and perceived security.

# Full Report

## 1.0 Introduction

### Overview:

- **Northern Ireland Veterans' Health and Wellbeing Study (NIVHWS)**
- **Aims of the current report**

This is the third in a series of reports, which together provide the first ever comprehensive evidence base on military veterans living in Northern Ireland (NI). Using the experiences and perspectives of veterans and veteran service providers residing and working in the region, this report focuses specifically on the need for a Veterans' Centre in NI.

### 1.1 The Northern Ireland Veterans' Health and Wellbeing Study

In 2015, Professor Cherie Armour from Ulster University was commissioned by Forces in Mind Trust (FiMT) to conduct two research studies examining the health and wellbeing of Northern Irish veterans. The studies were a direct response to a significant gap in information about the support needs of the veteran population living in NI. Due to the overlap between the different components of the two studies and seeing the value in combining resources and approaches to create a more streamlined and holistic project, the two studies were merged into one to create The Northern Ireland Veterans' Health and Wellbeing Study (NIVHWS) – a large-scale project to be conducted over a period of four years. The NIVHWS consists of the following four work packages (see also Figure 1):

## 1. Scoping services to veterans in NI

- A report entitled *Supporting & Serving Military Veterans in Northern Ireland* (Armour, Waterhouse-Bradley, Walker, & Ross, 2017a) was published in June 2017. It scoped the services available to veterans in NI through the statutory, Ministry of Defence (MOD) and voluntary and community sector (VCS) organisations
- The highlight of the report was a series of practical recommendations to be adopted at the strategic and operational levels

## 2. Current and future needs of veterans in NI

- A report entitled *Current and Future Needs of Veterans in Northern Ireland* (Armour, Walker, Waterhouse-Bradley, Hall, & Ross, 2017b) was published in December 2017. It discussed the current and future needs of veterans in NI, based on the data from veteran-led focus groups and one-to-one service provider interviews
- **The current report** utilises data from the focus groups and one-to-one interviews, as well as a draw down of data from the ongoing health and wellbeing survey to examine the potential need for a Veterans' Centre in NI
- The final report from this work package is anticipated in Spring 2019. It will be based on the analysis of data from a large-scale health and wellbeing survey, in which NI veterans report on their health, lifestyle, military experiences and other important areas of their lives

## 3. Quantifying the veteran population in NI

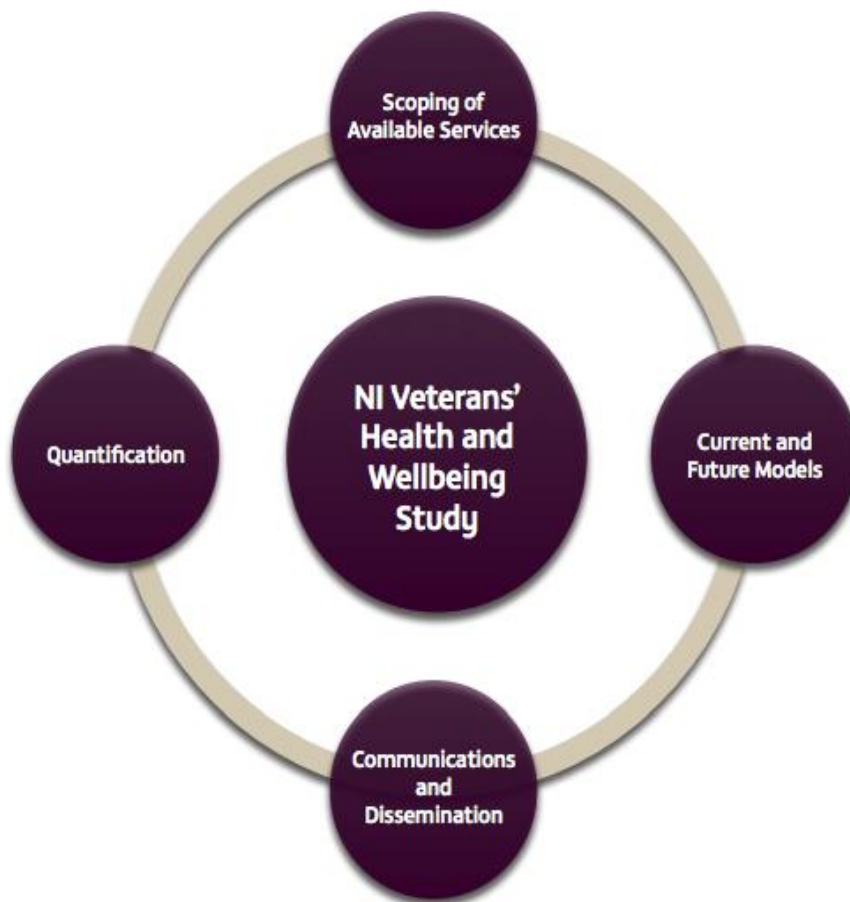
- A study estimating the number of veterans residing in NI, using a self-identification survey and administrative data, is anticipated to be published in Winter 2018

## 4. Communication and awareness raising

- An ongoing work package, the aim of which is to consult with key stakeholders, raise awareness of the wider project and disseminate the findings to a wide range of audiences



**Figure 1: Project Work Packages**



The following section briefly outlines the methods and, where relevant, the findings of the NIVHWS work packages.

### Scoping review of supports and services

The *Supporting & Serving Military Veterans in Northern Ireland* report (Armour et al., 2017a) was a scoping review of the support and services available to veterans in NI through the statutory, MOD and VCS organisations. In order to map these services, the study undertook a detailed desktop review, which extracted information from websites and publicly available documents. Requests for information were then sent to service providers to fill the gaps identified through the review. The information was synthesised and compiled into a review of available services, including the channels of communication between these services.

The scoping review found evidence of a wide range of support services available to veterans in the region. However, several potential barriers were identified, including regional variations in the way these services are accessed by veterans, regional differences in the number and nature of the available services, and differences in the representation of these services in both local and regional governments. Such differences highlight the potential for the policy and implementation structures to be misunderstood by national legislators and by those organisations that are based in GB. This points to the importance of having specialist local knowledge to inform services as well as having effective communications across sectors and governments; the report did not find evidence of either of these and thus recommended that more should be done to make local support networks more relevant and appropriate. These issues are compounded by veterans' security concerns, which makes some of them reluctant to disclose service history when accessing services. As a result, the visibility of some support organisations can be stilted.

Whilst the report did not assess the quality or effectiveness of services available to NI veterans, it highlighted the availability and accessibility of what regional services were available (Armour et al., 2017a). Findings of the research into support and services highlighted the importance of a central coordinating point for veterans in NI. With the support of early research findings from the NIVHWS, and networking events hosted by the NIVHWS research team, the Northern Ireland Veterans Support Committee (NIVSC) – facilitated by the Reserve Forces' and Cadets' Association (RFCA) – has successfully acquired additional human and financial resources (from both NI Executive and Westminster funding streams) and gained significant political traction as a representative body working for veterans' issues in NI. This has included improved relationships between NIVSC and the NI Assembly, and an increased remit for Armed Forces Champions in local councils.

## Current and future needs

The *Current and Future Needs of Veterans in Northern Ireland* report (Armour et al., 2017b) was a sequential content analysis of the needs of NI veterans from the dual perspective of veterans and service providers (veteran-specific organisations within the statutory, MOD and VCS providing support either directly or indirectly to veterans in NI). This cross-sectional qualitative research involved conducting in-depth audio-recorded semi-structured interviews

with individuals working for, or representing, either a veteran-specific organisation or statutory service providers and focus groups with veterans. Service providers were asked to express their attitudes, perceptions and experiences of service provision, their interactions with veterans, veterans' needs, barriers to veterans seeking support, the delivery of services, and the way they interact with other service providers. Veterans were asked to express their attitudes, perceptions and experiences of their transition from military to civilian life, the support they did/did not receive during this process, barriers to accessing support and the support they would like to receive. The study identified several key themes, including the complex nature of veterans' needs; personal, social and institutional barriers to accessing support; the problems associated with this population being an "ageing population"; the importance of one's social networks and peer support; the ongoing impact of the Troubles on veterans' lives; and the need for improved communication across the public and voluntary sectors (see Armour et al., 2017b for more details).

During the data collection for the *Current and Future Needs of Veterans in Northern Ireland* report (Armour et al., 2017b), both veterans and service providers were additionally asked specific questions relating to a Veterans' Centre. The analysis of these questions forms the basis of the current report and is discussed in detail in the Methods section.

The quantitative part of the Current and future needs work package is the *Northern Ireland Veterans' Health and Wellbeing Survey*, the first ever large-scale survey of the health and wellbeing needs of NI veterans conducted in the region. It is a self-report survey, including a range of pre-existing, validated measures, as well as some bespoke measures, to capture data specific to this population. The purpose of the survey is to provide a clearer picture of the NI veteran community, particularly their perceptions, attitudes and experiences on issues such as lifestyle, relationship with their community, their military life, health, coping mechanisms and a variety of other issues. The survey also contains specific questions relating to participants' views on a Veterans' Centre (see Appendix). The survey is ongoing, but at the time of writing this report, the data from veterans who have already completed the survey was drawn down and participants' responses to the Veterans' Centre questions analysed.

## Quantifying the veteran population

This work package addresses the lack of reliable information about the number of veterans residing in NI and their basic demographic profile. The study utilises administrative data routinely collected about veterans by voluntary and MOD organisations, as well as primary data collected by the research team through a veteran self-identification survey. By linking anonymised data from different data sources, the study will utilise advanced statistical methods to provide an estimate of the number of veterans residing in NI. The report is expected to be published in Winter 2018.

## Communication and awareness raising

The aim of this work package is to communicate the findings of the wider project to a variety of audiences and to increase awareness of the supports and services available to veterans in NI. Initially, the work package involved the development of a website that would serve as the first point of contact for NI veterans seeking help and support for a variety of issues. Our findings from the *Supporting & Serving Military Veterans in Northern Ireland* report were to serve as the basis for the website development. However, during the course of the project, the Veterans' Gateway<sup>1</sup> project was set up and it became clear that the two websites had overlapping goals. In order to avoid duplication of effort and potential confusion arising from there being two similar products available to NI veterans, the NIVHWS research team are (at the time of writing this report) working closely with Veterans' Gateway and other key stakeholders to ensure the resultant outputs from this work package are appropriate and complementary to existing support for veterans in NI.

## 1.2 Aims of the Current Report

The veteran population in NI continues to be under-researched. The current study is the first of its kind to examine the potential need for a Veterans' Centre in NI, or in other words, a physical building, in which veterans could receive veteran-specific help and support for a variety of issues. This report builds directly upon our *Current and Future Needs of Veterans in*

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<sup>1</sup> <https://www.veteransgateway.org.uk/>

*Northern Ireland* report (Armour et al., 2017b), in which participants acknowledged that what is needed in NI to support veterans is improved organisational communication, a wider variety of services, and a greater awareness of veteran-specific needs. A Veterans' Centre could possibly achieve all of these.

Veterans in the mainland UK have the possibility of accessing several different "veterans' centres" (e.g. Help for Heroes' recovery centres), but no such thing currently exists in NI. Using qualitative and quantitative methods, the current report looks at veterans' and service providers' perspectives and attitudes towards a veteran-specific centre, the services it might provide, and potential downsides of having such a centre in NI or barriers to accessing it.

## 2.0 Background

### Overview:

- **Veterans' needs**
- **Barriers to accessing support**
- **Supports and services available to veterans**
- **Conclusion**

At the time of writing this report, the NI Assembly has been suspended for over a year. This has led to increased pressure being put on the public services utilised by veterans, because operational and budgetary decisions cannot be made without Ministerial assent. Welfare reforms, already in place across GB, are currently being rolled out in NI. These reforms have been predicted to take £750 million per annum out of the NI economy. This equates to about £650 a year for every adult of working age (Beatty & Fothergill, 2013). These reforms are also likely to impact upon the delivery of services that veterans in NI use. Moreover, given that the Armed Forces Covenant<sup>2</sup> has not been formally adopted in NI, because of interpretations of Section 75 of the Northern Ireland Act 1998, veterans living in the region may experience disadvantage.

Yet, as this chapter will show, veterans in NI have a number of complex needs, some of which are unique to this population. With these needs also comes a number of barriers for accessing support and again, some of these barriers are unique to NI veterans. This chapter will also briefly outline the services that are available to veterans in the region, thus setting the scene for our examination for the need of a Veterans' Centre that would exist alongside this existing infrastructure of supports and services.

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<sup>2</sup> The Armed Forces Covenant is a promise made on behalf of the UK Government and society that those who serve and have served in the Armed Forces will not experience disadvantage. The NI Assembly has not formally adopted the AFC due to interpretations of Section 75 of the Northern Ireland Act 1998, which requires NI public authorities to carry out their functions and duties equally irrespective of gender, ethnicity, political opinion, religious belief, disability, age, sexual orientation, dependant and marital status. It has been argued that the implementation of the AFC in NI could provide preferential access to cross-government services for military personnel. However, some local councils in NI have adopted the principles of the AFC at a community level.

## 2.1 Veterans' Needs

The idea of a dedicated Veterans' Centre is closely linked to veterans' support needs. We have examined these in detail in our *Current and Future Needs of Veterans in Northern Ireland* report (Armour et al., 2017b). The main findings, outlined below, highlight the complex and often overlapping nature of veterans' needs:

- Many NI veterans have physical and/or mental health needs, with the mental health needs often linked to the Troubles. Physical health needs are linked to ageing or specialist issues, such as missing limbs (also common among veterans in GB). The demand for counselling and talking therapies is high amongst NI veterans.
- The veteran population in NI is an ageing population and, in this respect, veterans are likely to/ will face many of the same challenges as the ageing general population. One of the major ones reported by participants was loneliness and isolation.
- Financial problems are often associated with leaving the Armed Forces, as many veterans will have had limited experience with handling finances. Assistance with welfare, benefits and pensions is often required.
- Feeling part of a military network and being amongst their own kind is important for many veterans even after their service; it is the need to be amongst people where one can feel understood and not judged.
- Many veterans talked about the 'cultural shock' of transitioning from the military to civilian life and how unprepared for life they felt upon leaving the military.
- Veterans also reported the need for a "safe space", meaning a place where they could feel emotionally safe and where they could visit when feeling vulnerable, suicidal, or in need of someone to talk to without being judged.

Veterans' potential future needs are also an important issue as they may impact upon the way services operate. In the *Current and Future Needs of Veterans in Northern Ireland* report (Armour et al., 2017b), the following future needs were identified:

- Mental health needs are seen as an ongoing issue, due to the time lag between developing a problem and seeking help, due to the waiting lists for mental health treatments being longer in NI than in GB, but also due to the increasing awareness of mental health issues in the UK.

- The ageing nature of the veteran population is likely to lead to increased demands placed on the health and social care services.
- Families, spouses and children are core to the support needs of veterans. These individuals may also need facilities and services that recognise the strain of living with the complex needs of some veterans in NI.
- There may be a need for alternative therapies and supports that do not carry as high a level of stigma as mental health therapies (e.g. emotional support dogs and exercise related therapies).

## 2.2 Barriers to Accessing Support

Veterans' needs may be exacerbated by perceived or real barriers to accessing support. In the *Current and Future Needs of Veterans in Northern Ireland* report (Armour et al., 2017b) veterans and service providers identified several different barriers:

- The lack of full adoption of the Armed Forces Covenant in NI means that veterans cannot enjoy veteran-specific statutory services like their GB-based counterparts, such as additional cycles or IVF or prosthetic work for veterans with service related injuries. This gives veterans in NI a sense of being disadvantaged compared with veterans in the rest of the UK.
- There is an issue with accessibility of support due to many services being located in the greater Belfast area. There is also a lack of information and understanding amongst veterans about available services. The often low visibility of services (lack of advertising due to security concerns), limited opening hours, and face-to-face support being replaced by telephone or internet communication, are all significant barriers to accessing support. The forthcoming Veterans Gateway (government portal) seeks to address this very issue, as does the creation of a new Veterans' Service Officer post in NI.
- Stigma was identified as a barrier to accessing support primarily, although not exclusively, for mental health issues.
- Due to the military culture being deeply ingrained into one's identity, it may be difficult for some veterans to seek help, as they are not used to openly talking about, or even admitting to, their difficulties. Seeking help for physical or emotional pain may be seen by many as weakness.



- Many veterans have issues with trust due to the ongoing real and perceived threat to personal safety (especially the home service veterans who served in the Royal Irish Regiment, mostly during Operation Banner, living constantly both on and off duty in their operational theatre) and this often leads to a reluctance or refusal to seek help or disclose their service history. Additionally, civilian service providers are seen as having little understanding of military-related issues.
- Other barriers to accessing support have been identified as stemming from organisational, systemic and institutional challenges. These include limited resources (e.g. staffing and funding), disjointed service provision due to lack of effective communication between services, and even some level of competition between services due to limited funding.

## 2.3 Supports and Services Available to Veterans

As shown in our *Supporting & Serving Military Veterans in Northern Ireland* report (Armour et al., 2017a), there is a well-established infrastructure of support services available to veterans in the region. Our findings are briefly summarised below.

### 2.3.1 Statutory Services

- In NI, veterans are entitled to the same statutory sector service provision as the general population. No specialist services are provided for veterans as these could be seen as preferential treatment, which would be in breach of equality legislation in the region<sup>3</sup>. This could mean that some health treatments are not as readily available to veterans compared to veterans in GB, with the added disadvantage that the waiting lists for mental health treatments through the statutory sector are longer in NI than in GB. Additionally, as is the case across GB, it could mean that some statutory service providers might not be aware of, or trained in, veteran-specific needs.

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<sup>3</sup> Section 75 of the Northern Ireland Act 1998 outlines the requirement for statutory agencies to proactively promote equality of access and opportunity across all NI citizens. It prohibits discrimination based on gender, religion, marital status, disability, ethnicity, and political affiliation. This legislation has been cited as the reason for why the Armed Forces Covenant has not been adopted in NI. The prevailing interpretation of the legislation is that the second principle of the Armed Forces Covenant, which states that at times special measures should be taken to support veterans who have 'given most' in the line of duty, would be seen as direct violation of the equality legislation.

- In relation to further and higher education services, UK veterans can avail of the Enhanced Learning Credits Scheme – a MOD initiative supporting lifelong learning and continued professional development. It is available for up to five years post-discharge. For veterans who have served for six or more years, there is also the Publicly Funded Further Education/Higher Education Scheme, which provides funding covering the tuition fees of a first level 3 qualification, a foundation degree or an undergraduate degree.
- Statutory services in NI do not provide any veteran-specific support to veteran jobseekers. Some Jobcentres will, however, have nominated Forces Liaison Officers, whose role is to provide advice to the service personnel, veterans, and their families on the various sources of support available.
- As for the housing services, our scoping review did not find any evidence of priority for veterans when applying for housing.
- The criminal justice system similarly does not recognise veterans as a subset of the population who may require additional support.

### 2.3.2 MOD-Funded Services

- MOD-funded support to veterans in NI is available through Veterans UK, the Career Transition Partnership (CTP) in collaboration with the Regular Forces Employment Association (RFEA), and the UDR & R IRISH (HS) Aftercare Service.
- Veterans UK are primarily responsible for administering pensions and compensation, but also provide administrative support services (e.g. medals and service records).
- CTP is the MOD's official provider of resettlement services. The type of support available is dependent on the length of military service and is only available up to two years post-service. The employment aspect of CTP is delivered by the RFEA.
- The UDR & R IRISH (HS) Aftercare Service is the only MOD-funded organisation that is specific to NI. It provides support to certain Army veterans (UDR, R Irish, ex PRU) in relation to welfare, medical treatment, employment and financial issues. There are plans for Aftercare: VWS Ireland to provide support for all veterans (tri-service), throughout Ireland in the near future.

### 2.2.3 Veteran-Specific Voluntary and Community Sector (VCS)

- Our scoping review identified 19 VCS organisations that provide direct support and services to veterans in NI. About 45% of these organisations have headquarters outside of NI, with the rest being locally developed organisations.
- The main categories of service provision include befriending, respite, employability and training, mental health support, financial assistance, welfare (housing and benefits assistance), wellbeing (complementary therapies, social gatherings), remembrance and commemoration, and advocacy.
- The main VCS provider of mental health services in NI is Combat Stress. Its community outreach team consists of two community psychiatric nurses, an occupational therapist, a consultant psychiatrist and a cognitive behavioural therapist. Residential mental health treatment is available to NI veterans only on the UK mainland.

## 2.4 Conclusion

As shown above, veterans' needs are likely to be complex. For the home service veterans, they are likely to be further complicated by the legacy of the Troubles. A number of specific support services are available to veterans in NI from the MOD and VCS organisations. Through the statutory sector, veterans are entitled to the same provision as the general population. Section 75 of the Northern Ireland Act (1998) precludes any preferential treatment for veterans from statutory service providers and this is where veterans could benefit from having a local facility to meet their needs, possibly alleviating the pressure on existing statutory services. Indeed, it was felt that it would be good to have many services under one roof, in that services could be co-ordinated effectively. Currently there is a precedent in NI, where groups such as SSAFA, Combat Stress and Help for Heroes, while functioning separately, all work out of the same building in Belfast. A central point of contact could prove beneficial here, but it is important to examine whether there is sufficient demand from veterans to justify the existence of a Veterans' Centre.

## Key Points:

- **Veterans have complex and overlapping needs**
- **A number of barriers to accessing support for veterans already exist in NI**
- **Support is available to veterans through the statutory, MOD and VCS organisations**
- **The complexity of veterans' needs may create confusion about which services are appropriate**

## 3.0 Methods

### Overview:

- **Research design**
- **Data collection**
- **Data analysis**

The current report is based on primary data analysis of qualitative and quantitative data collected by the NIVHWS research team. The qualitative data was collected at the same time as the data for the *Current and Future Needs of Veterans in Northern Ireland* report (Armour et al., 2017b). The quantitative data comes from a draw down from the *Northern Ireland Veterans' Health and Wellbeing Survey*, which is live at the time of writing this report. The research methods employed to conduct the current study are briefly outlined below, but **for full details of the qualitative aspect of the methodology, please refer to our previous report on the *Current and Future Needs of Veterans in Northern Ireland*** (Armour et al., 2017b).

### 3.1 Research Design

The study was cross-sectional in nature and used a mixed methods approach. The qualitative aspect of the study involved two phases:

- Phase One: In-depth semi-structured interviews with individuals working for, or representing, veteran-specific organisations from the VCS and the MOD sector, and statutory organisations that do not have a veteran-specific client base, but provide services to veterans as part of their remit
- Phase Two: Focus groups with veterans who are resident in NI

The quantitative aspect of the study was a large-scale and fully anonymous self-report survey entitled *Northern Ireland Veterans' Health and Wellbeing Survey*.

Both aspects of the study were approved by Ulster University Research Ethics Committee and followed The British Psychological Society's (2014) *Code of Human Research Ethics*.

## 3.2 Data Collection

### Interviews and Focus Groups

#### Phase One: Interviews

Twenty in-depth semi-structured interviews were conducted between October 2016 and February 2017 with representatives (service providers) from 19 different organisations<sup>4</sup> from the VCS, MOD and statutory sectors. The interviews were audio recorded and transcribed verbatim.

#### Phase Two: Focus groups

Thirteen veteran-led focus groups, ranging in size from 3 – 8 participants<sup>5</sup> (a total of 50 participants), were conducted between April 2017 and October 2017. The majority of participants were male (96%) with a mean age of 56 years<sup>6</sup>. Participants were assigned into focus groups based on their age: 25-44 year olds, 45-64 year olds, and 65-84 year olds. The focus groups were audio recorded and transcribed verbatim.

#### Interview Themes

As part of the interviews and focus groups conducted for the *Current and Future Needs of Veterans in Northern Ireland* report (Armour et al., 2017b), both veterans and service providers were asked specific questions about a Veterans' Centre:

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<sup>4</sup> Andy Allen Veterans Support NI, Belfast Health and Social Care Trust, Beyond the Battlefield, BLESMA, Castlehill Foundation, Combat Stress, Decorum NI, Department of Health, Help for Heroes, Housing Executive, Not Forgotten Association, Royal Air Force Association, The Royal British Legion, South East Fermanagh Foundation, Somme Nursing Home, SSAFA, The Ely Centre, UDR & R IRISH (HS) Aftercare Service

<sup>5</sup> All participants met the criteria for having a veteran status according to the MOD definition: Someone who has served for at least one day with the Regular Armed Forces (this may include current Reservists) or someone who has served with the Reserves and no longer serves

<sup>6</sup> See Armour et al. (2017b) for more information about the participants

- *What would a Veterans' Centre deliver in regard to support services and activities offered?*
- *Would this be a unique addition to the supports available for veterans or would this be a duplication of existing supports and services?*
- *Would such a facility be welcomed and utilised by the veterans' community in NI?*
- *Given the geographical spread of NI, where would be the best location for such a centre?*

## Wellbeing Survey

The quantitative data for the current study comes from a drawdown of data from the *Northern Ireland Veterans' Health and Wellbeing Survey* – an ongoing large-scale, fully anonymous self-report survey of veterans residing in NI. The survey enquires about topics, such as stressful life events, physical and mental health conditions, relationships, military experiences, barriers to accessing care and many others. Of relevance to the current report is a module within the survey that explores a number of questions related to the possibility of creating a Veterans' Centre:

- *Whether participants would support the development of a Veterans' Centre*
- *What they would use a Veterans' Centre for*
- *Where in NI they would like to see a Veterans' Centre established*
- *Any reasons why they would not use a Veterans' Centre*

The exact wording of the survey questions can be found in the Appendix. The survey questionnaires are available online and in paper format and the NIVHWS research team have been recruiting participants since December 2017. It is anticipated that the survey will be live until December 2018. Prior to going live, the survey was piloted with ten veteran volunteers in the so-called "Thinking aloud" pilot. The researchers sat with the veterans on a one to one basis and asked them to verbalise their thoughts and feelings as they were completing the questions. They were also asked to comment on the structure and wording of the questions, as well as any other aspects of the survey. Following the pilot stage, several amendments were

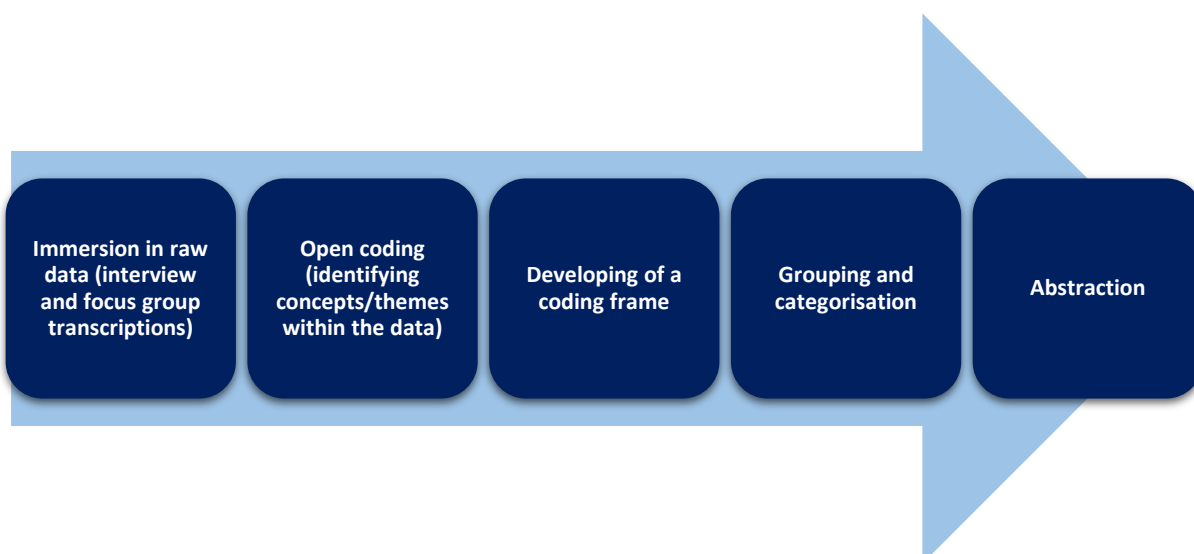
made to the format of the survey and the wording of some questions. Additionally, some questions were deleted, while others were added in. This was to ensure that the questionnaires were understandable and as relevant to the population of interest as possible. To date, participants for the survey have been recruited through the use of flyers (distributed in hardcopy through some of the project's stakeholders and placed electronically on the NIVHWS project's website), by word of mouth, and from the database of contact details that the research team have compiled since the start of the project. The survey findings presented here are a draw down from the survey data collected to date. Whilst completing the survey, participants are offered the option to skip any questions they want. Because of this, the sample size for the current study varies between 301 – 314 participants, depending on the question. Of the 314 participants so far, 90% are male and the average age of participants is 55 years.

### 3.3 Data Analysis

#### Interviews and Focus Groups

The interview and focus group data was analysed using content analysis in the software package NVivo 11, focusing specifically on the questions related to the Veterans' Centre. Figure 2 below shows the steps taken in the content analysis.

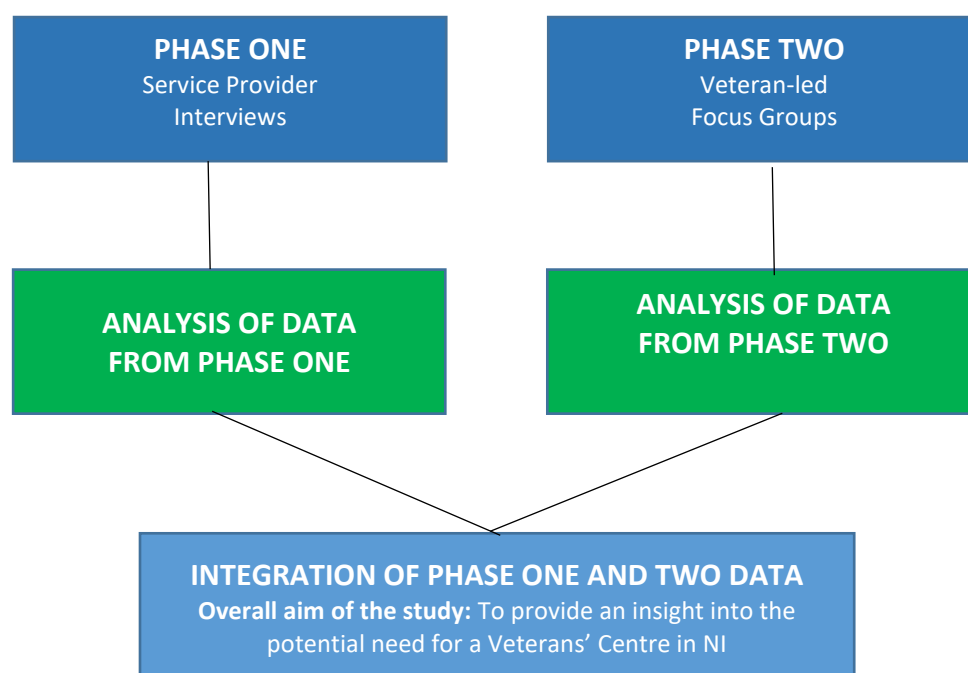
**Figure 2: Steps in content analysis**





The results from interviews and focus groups were analysed separately and integrated during the interpretation of the findings, as shown in Figure 3 below.

**Figure 3: Visual model of qualitative design and integration of study phases**



## Wellbeing Survey

The data from the survey was analysed using the software package SPSS 24. For closed questions with a set of possible answers to choose from, we present percentages. Answers to open-ended questions (in which participants were asked to elaborate on their responses), were read thoroughly and are presented here only as examples of what participants said.

### Key Points:

- The study used a mixed methods approach
- Data was collected through 20 interviews, 13 focus groups, and a self-report quantitative survey

## 4.0 Results

### Overview:

- **Introduction**
- **Support for a Veterans' Centre**
- **Purpose**
- **Pitfalls (security, dependency, funding, location)**
- **Conclusion**

### 4.1 Introduction

Through concurrent qualitative and quantitative data collection, gleaning the perspectives of both veterans and service providers, we gained insights into the potential need for a dedicated Veterans' Centre in NI. Comparisons were made between responses from veterans and service providers wherever possible.

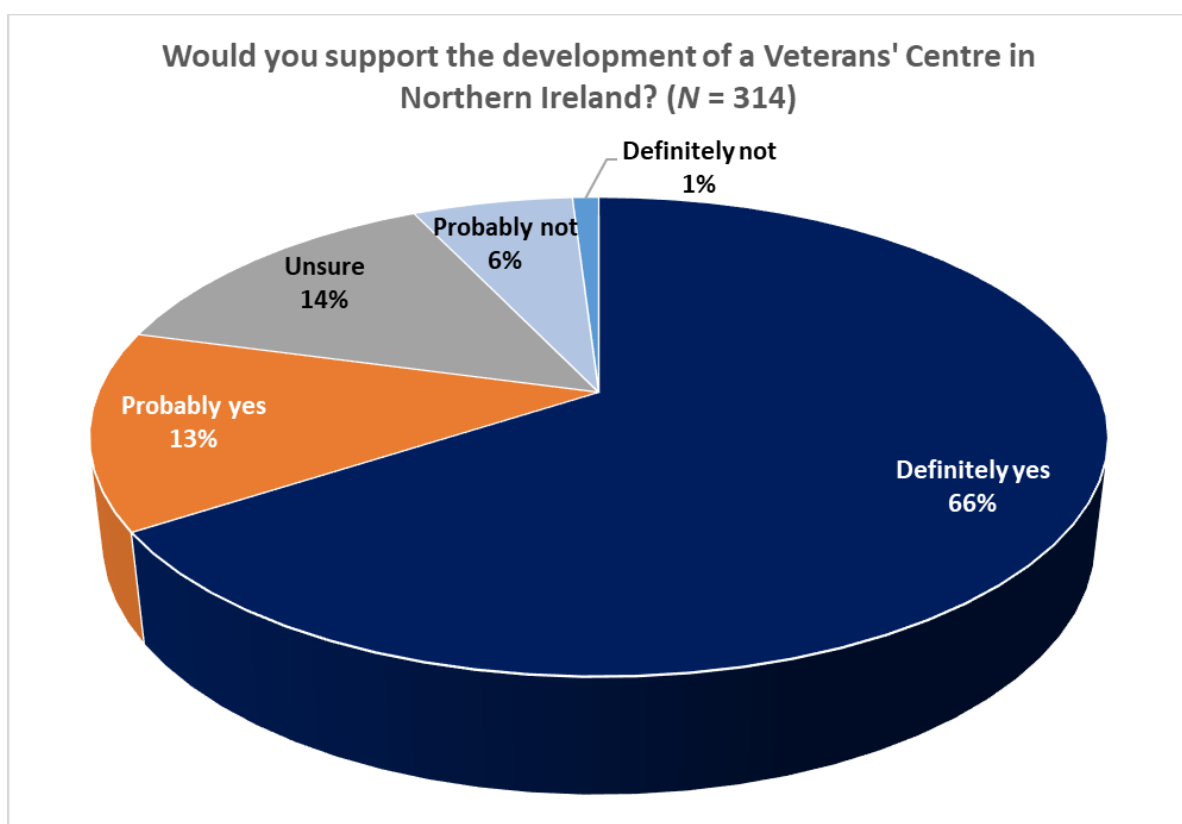
The findings of both strands of data collection showed a clear preference for a dedicated Veterans' Centre on the part of veteran participants, while interviews with service providers showed a reluctance to support such a centre. The key topics of discussion identified from the qualitative data were 1) the *purpose* of a Veterans' Centre, and 2) the *pitfalls*, including the security, dependency, funding and location. These findings will be discussed in depth throughout this chapter.

### 4.2 Support for a Veterans' Centre

As part of the Wellbeing Survey, we directly asked the veterans whether they would support the development of a Veterans' Centre in NI, which we defined as “a physical building dedicated to providing services specifically for veterans”. As shown in Figure 4 below, a total of 66% of participants answered, “definitely yes”, with a further 13% saying that they would

“probably” support such a centre. When asked to elaborate (open-ended question), many participants argued that there are simply not enough services for veterans in NI, with many veterans having to travel to mainland UK to get their treatment. A few others, however, said that the existing services may be sufficient. Veterans also argued that having a focal point for accessing services would be useful, but many have immediately voiced their concerns about security.

**Figure 4: Veterans’ responses to the question about the development of a Veterans’ Centre in NI**



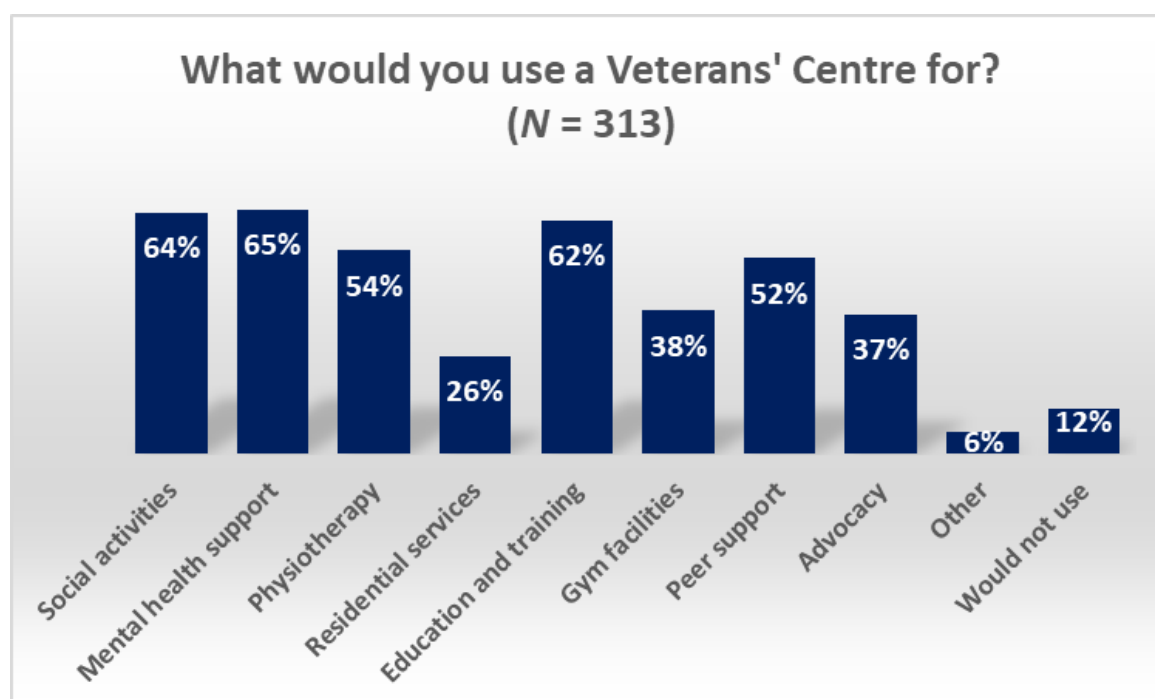
### 4.3 Purpose

Traditionally, in the mainland UK, veteran centres have been used for intensive psychological treatment (e.g. Combat Stress’s trauma-focused therapy offered through a six-week residential programme) and specialist physical rehabilitation (e.g. Help for Heroes’ recovery centres). Given what we know from previous reports (Armour et al., 2017a; 2017b; Community Innovations Enterprise, 2017) which all indicated a gap in mental health provision

for veterans in NI, we anticipated that this could be an area of focus for a Veterans' Centre. In our Wellbeing Survey, we asked participants what they would use a Veterans' Centre for. With ten different response options to choose from, including 'Other' and '[I] would not use [a Veterans' Centre]', *mental health support* came as the top reason for using a Veterans' Centre, with 65% of participants selecting this option. This is consistent with our previous findings, and unsurprising given the unique experiences of the home service veterans, who had to serve and live in their operational theatre during the Troubles, and the empirical evidence suggesting that ongoing perceptions of threat are detrimental to one's psychological health (Holbrook, Hoyt, Stein, & Sieber, 2001). NI also has the highest rates of posttraumatic stress disorder in the general population worldwide (Bunting, Murphy, O'Neill, & Ferry, 2012) and yet a limited number of veteran-specific mental health services (Armour et al., 2017a).

The second most prevalent reason for utilizing a Veterans' Centre was *social activities* (64% of participants selected this option), followed by *education and training* (62% of participants). Just over a half of the participants indicated that they would also use the centre for *physiotherapy* (54%) and *peer support* (52%). Only 12% of veterans indicated that they would not use such a centre at all. Figure 5 presents the percentage of veterans that would use the Veterans' Centre for each indicated activity.

**Figure 5: Purpose of a Veterans' Centre in NI**



In the veteran-led focus groups, the phrases ‘safe space’, ‘advice and information’ and ‘one stop shop’ were used many times, further highlighting the proposed main purpose of a Veterans’ Centre from the veterans’ perspective:

*A place where folk can come and network, you know, you’ve got lots of employed veterans out there who could be supporting each other, doing better. A place where you can have private consultations for stuff that’s bothering them or troubling them, a place where they can come and remember, a place where they can have social gatherings, a safe neutral space, a place where we can conduct arbitration if they’ve got problems with their pensions or disability or whatever. Just a place where [veterans] can come and be. (Veteran)*

As noted by Murphy and colleagues (2015), previous research has identified a number of barriers in access to services, such as external stigma (including public stigma and mistrust in services) and access factors (including lack of knowledge of available services). In the *Current and Future Needs of the Veterans in Northern Ireland* report (Armour et al. 2017b), one of the major barriers to accessing help was a lack of face-to-face interaction and the suggestion of more safe spaces available to go to seek help for the future. The development of a Veterans’ Centre could allow for physical space to meet some of these needs.

Looking to related facilities outside the UK, there are several innovative approaches that are being implemented on college campuses across the United States to accommodate the growing numbers of returning veterans. Providing veterans with a safe and welcoming campus requires collaboration between the veterans’ community and higher education leadership. This approach also utilises existing resources, such as veterans’ camaraderie and established social networking systems (Lederman, 2008). In parallel, the exchange below highlights a desire for a similar approach in NI:

*Participant 1: Well, there’s something about, you know, putting that on and do you know what? Just going to chew the fat with your colleagues and you knowing that you’re in a safe location and nobody’s going to judge you and*

*you can speak. That's a big thing in Northern Ireland. Being able to speak freely.*

*Participant 2: Yeah.*

*Participant 3: Really big. And, like, it should not be underestimated. So, if there was going to be anything, you know, it has to be in a safe, secure location, there's certain caveats, you know, security, the people that you're talking to. That'll be your ideal place for the dissemination of information.*

There was a particular resonance among veterans about the desire and drive to help one another by creating a physical empathic space that could increase awareness of, and accessibility to, services via greater spread of information within and across the veteran community. Conversely, whilst service providers did express that a single point of contact would be beneficial, they felt that it would not have to take the form of a physical building, which directly opposed veterans' opinions:

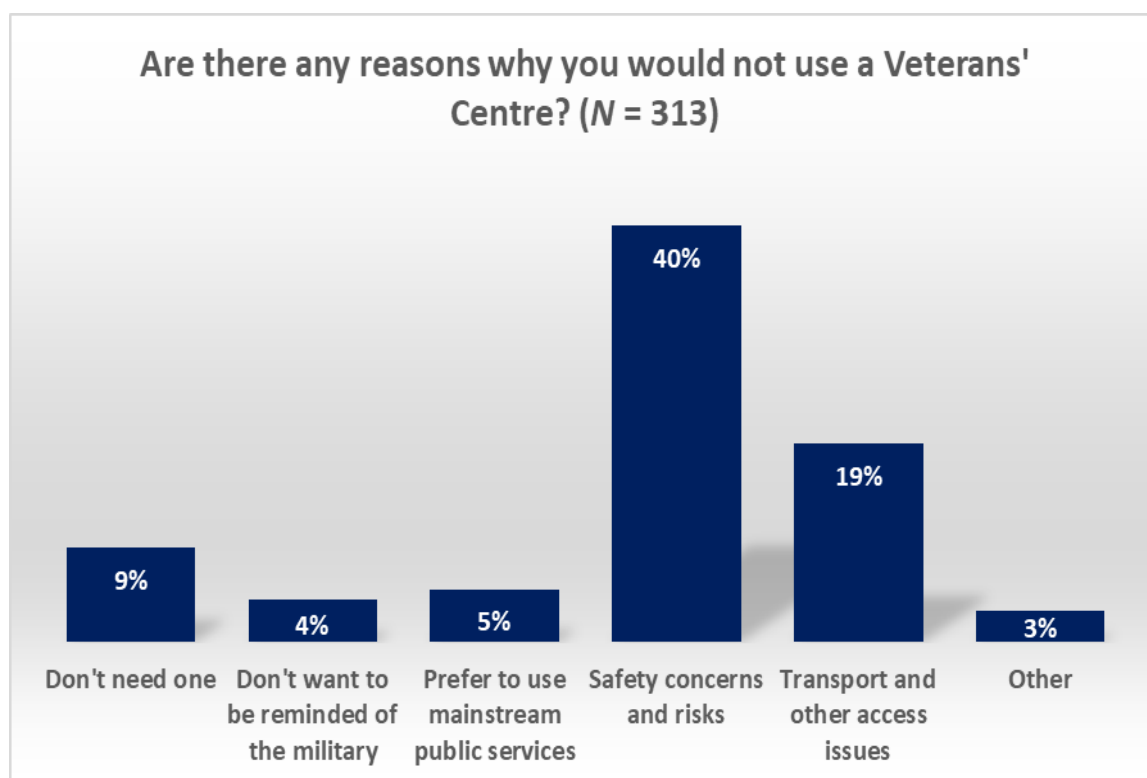
*But does it have to be a physical building? No. probably not, probably the demand wouldn't support that. But it would be good if you had, if you phoned the helpline in Cardiff and said I live in BT something that they said we will put you on to the BT specialist eh, you know, postcode. So you'll get a Northern Ireland subject matter expert to answer your query. (Service provider)*

Following discharge from military Service, personnel have to make the shift from their strong identification with the military culture into often differing forms of accepted civilian norms and values (Cooper, Caddick, Godier, Cooper, & Fossey, 2018). Veterans expressed a strong belief that because of their common purpose and shared transitional journey, ex-Service personnel were best placed to complement existing professional help by supporting one another on 'civvy street' and as such a Veterans' Centre would be used in the form of a more informal, non-clinical space.

## 4.4 Pitfalls

Although most veterans strongly endorsed the idea of a Veterans' Centre, many raised some issues that could have a negative implication on the realisation of such a facility for veterans in NI. According to our Wellbeing Survey data, the most commonly cited reason for why participants would not use a Veterans' Centre were *safety concerns and risks*, with 40% of participants selecting this option. This was followed by transport and other access *issues* (19% of participants). Figure 6 below details the percentage of veterans in the Wellbeing Survey who would not use a Veterans' Centre for the indicated reasons.

**Figure 6: Barriers to the use of a Veterans' Centre in NI**



The findings from our interviews and focus groups largely complement the survey data. The theme '*Pitfalls*' encompasses some of these qualitative results and includes sub-themes of security, dependency, funding, and appropriate location. Below we present each of these in turn.

#### 4.4.1 Security

One of the main concerns shared by both service providers and veterans centred around the possibility that a physical building that was known to be associated with the military could become the subject of security threats:

*Provision for a centre within Northern Ireland, uh, would draw attention to the fact that it's military personnel or ex-military personnel that are going there and it'll not be seen as a safe place. (Veteran)*

*I think people would be, might be reluctant to come to it because it'd be viewed as a target. It might well be a target. I don't think I'd like to work in it. (Service Provider)*

*But people are still quite aware here and they might not just want to walk somewhere that's advertising itself as being for ex-service personnel you know, things like that. (Service Provider)*

Trust (or lack thereof) and fears for personal safety were found to be barriers to accessing support among veterans in NI. However, some military charities, such as The Royal British Legion actually operate from a heavily branded public-facing building in Belfast city centre. One service provider felt:

*But, you know, um, with all military operations from the Troubles ceased, as far as the, as far as the military are concerned, uh... Yeah, I think people are willing to move on. (Service Provider)*



#### 4.4.2 Dependency

A further pitfall, raised only by service providers, was the belief that a Veterans' Centre could "create dependency" and "reinforce victimhood":

*To me, if there was a building that was a one stop shop for all veteran's issues, it would be lying empty most of the time, and you would have a few poor hangers on who never left the place, who were the, the dependant ones.*

(Service Provider)

*I've nothing against people getting together. I don't think it's a good place for getting them to reminisce the past. Because it just re-enacts it all, you know. The problem with trauma is you're stuck in the past, you live in terror of the future and you miss the present.* (Service Provider)

While service providers acknowledged that a facility used as a single point of information (e.g. communications hub) could make valuable contributions to promoting wellbeing and help-seeking behaviour through learning among the veteran community, some service providers specialising in treating trauma argued that the constant presence of a helper or dedicated centre may result in a limited presence of veterans actively helping themselves and may possibly create unnecessary or unhealthy dependencies.

#### 4.4.3 Funding

The issue of *who* would fund a Veterans' Centre was a major topic of debate across service providers and veterans. Funding issues were raised around all aspects of operational viability, ranging from securing premises to staffing. Veterans put forward ideas of a multi-agency approach whereby Armed Forces charities, military Benevolent Funds and the government could all "chip in", which in their opinion could make running a facility sustainable. However, service providers, particularly those representing the statutory sector, highlighted that

government bodies need to go through various stages of appraisal before proposals can be granted funding:

*Unfortunately, government doesn't work like that because they will have had to done all the economical appraisals and assessments to make sure that it's good value for money, so building it in the hope that people would go would not be a runner with the government, but it would probably have to be led by the voluntary and community sector. (Service Provider)*

Many veteran participants expressed frustration that other armed security occupations, such as policing, have seen greater investment in their support upon retirement or medical leave. Currently in NI, ex-police officers can gain access to the Police Rehabilitation & Retraining Trust (PRRT), which is a non-departmental public body of the Department of Justice for NI, set up to support retired and retiring police officers, to help them create a future after their policing career. The PRRT became operational in 1999, after a working group was formed with the purpose of securing government funding to provide a package of services, which was approved by the then Secretary of State for NI<sup>7</sup>. Incidentally, police officers in NI have also been targeted by dissident republican groups (House of Commons, 23 October 2017 HCWS189), but no major incidents have been reported in relation to PRRT, whose premises are very discrete and access controlled.

While military veterans in NI do not have a dedicated centre like their policing colleagues, other individual organisations do exist to meet their needs, and in some cases work together with statutory services, in order to address any gaps in provision. This process could continue to meet the needs of those who might be reluctant to go to a centre (due to safety concerns, as noted above). However, remote contact from service providers has previously been highlighted as a barrier to accessing services due to a lack of personal interaction. One service provider did acknowledge that a collaborative, joined-up approach from all service providers, may be of greater benefit to the veteran community:

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<sup>7</sup> Marjorie 'Mo' Mowlam, Secretary of State for NI May 1997 – October 1999

*Would it not be much better to put that into four resource centres, where people can go to and do things than all different, smaller projects? Yes, I know they're all giving, uh, delivering great benefits but I feel the resource centres would have a lot more benefit. (Service Provider)*

Many charities in NI are local community groups with limited funding and are often run by volunteers. Organisations that need to rely on volunteers may have to operate restricted opening hours, which can result in piecemeal service delivery. The same operational obstacle was predicted for a Veterans' Centre among all participants if funding was not in place to recruit staff:

*But the centre we're talking about needs to be there all day, every day. We're not talking something that — 'well, sorry, we can't see you today because we can't get any volunteers'. This needs to be funded by somebody. (Veteran)*

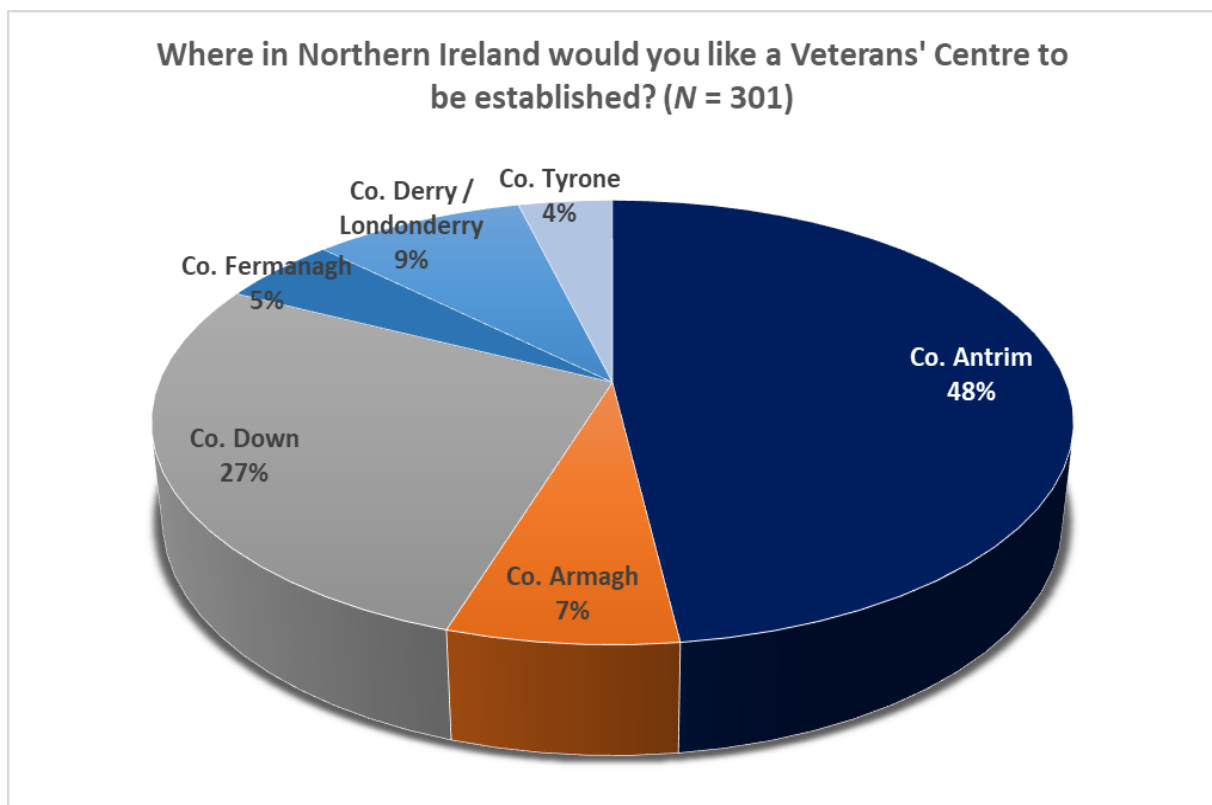
*When it was needed it wouldn't be properly manned or it wouldn't have the service, so you know. Two o'clock in the morning on a Friday night, Saturday morning when an ex-soldier wants to commit suicide and needs someone to talk him out of it, the hub wouldn't be manned with the requisite capability. Eh so, it would be a bit of a white elephant in my opinion. (Service Provider)*

Veteran participants voiced that they would engage in self-help and peer support in the absence of 'round the clock' support from external providers. This mentality was also found in the literature for this population. Greden et al. (2010) used a buddy system to support ex-Service personnel with mental health conditions on discharge by 'using culture to change culture'; their findings suggest that talking to another colleague who has been part of, or has a qualified understanding of the Armed Forces, is as valuable in supporting veteran peers as a known military colleague or friend, which is perhaps an early predicative indicator of one of the benefits of a Veterans' Centre for NI.

#### 4.4.4 Appropriate Location

The geographical location of a Veterans' Centre generated varied opinion across both participant groups (i.e. veterans and service providers). In our Wellbeing Survey, we asked participants in which county in NI they would like a Veterans' Centre to be established. Forty-eight percent selected County Antrim and 27% selected County Down<sup>8</sup>. However, some participants elaborated on their responses by saying that they simply picked a location based on where they live. Others argued that the centre should be somewhere central or ideally, there should be one in each county where it would be accessible to everyone. Figure 7 shows the percentage breakdown by county.

**Figure 7: Proposed location of a Veterans' Centre**



The *Supporting & Serving Military Veterans in Northern Ireland* report (Armour et al., 2017a), which reviewed existing services available to veterans across NI, highlighted that a large

<sup>8</sup> Participants were allowed to choose only one option

number of cross-sector services are concentrated in the East of the province (particularly the Greater Belfast area/Counties Down and Antrim), with this east/west imbalance also affecting the infrastructure and transport links. Following on from that finding, our qualitative data presented similar trends in accessibility, particularly for those living in the West of the province (Armour et al., 2017b).

In relation to the Veterans' Centre, there was agreement among service providers and veterans that if no hypothetical central location for a centre could be agreed upon, then rather than having just one Veterans' Centre in NI, several smaller 'satellite' hubs could be an alternative solution. This would ensure that all veterans had easier access to a centre closer to where they reside:

*Is it then unfair to just be based in Belfast? I do think if you were going to do that you would have to have satellite locations throughout Northern Ireland.*

(Veteran)

*And each of them could specialise in certain things. You could have fork lift in one, you could HGV training in the other and you could have specialised, obviously, vocational outputs in them. I feel we need to provide rather than one centre, um, satellite centres. Resource hubs. Um, that would be my preferred option.* (Service Provider)

## 4.5 Conclusion

One of the most pressing issues identified in this report is that of the enduring effects of the complexities unique to NI and their impact on veterans' willingness and ability to access relevant and appropriate services. Broadly, our findings reveal that although there is much support for a Veterans' Centre from the veterans' perspective, concerns remain around security and personal safety. Our findings further highlight issues of uncertainty around funding, disagreement over the geographical location of such a centre, and around possible duplication of services.

Some of these barriers have been highlighted in the previous reports from the NIVHWS (Armour et al., 2017a; 2017b) and adoption of recommendations to address these concerns may allay some of the problems reiterated here even in the absence of a dedicated Veterans' Centre. However, even with those amendments, there remain a number of pitfalls highlighted in this report that require broader discussion and reconsideration of the existing nature and delivery of services. Also, key to these findings is the importance to veteran respondents of having a 'safe space' to talk to other veterans and the potential for that space to enhance their quality of life and that of their families. This crucial point cannot be easily overlooked.

### Key Points:

- **Veterans and service providers differed in their opinions regarding the need for a Veterans' Centre, with veterans largely supporting the idea and service providers opposing it**
- **Mental health support, social activities and education and training would be the most welcome purposes of a Veterans' Centre**
- **Service providers were cautious that a centre could promote unhealthy dependency on services among veterans**
- **Security concerns were a major pitfall and the primary reason for why veterans might not use a Veterans' Centre**
- **Veterans and service providers agreed that the centre should be centrally located, or alternatively, that there should be several satellite hubs**

## 5.0 Conclusions and Recommendations

### Overview:

- **Summary of findings**
- **A missing perspective**
- **Recommendations**
- **Conclusion**

The *Supporting & Serving Military Veterans in Northern Ireland* report (Armour et al., 2017a) showed that a number of support services exist in NI for veterans residing there. It also showed, however, that there are significant barriers for accessing these services, which was further supported by narratives from focus groups and interviews with veterans and service providers in our *Current and Future Needs of Veterans in Northern Ireland* report (Armour et al., 2017b). The aim of the current report was to build upon these findings by exploring the potential need for a dedicated Veterans' Centre in NI.

### 5.1 Summary of Findings

Through the use of veteran-led focus groups, service provider interviews and a quantitative Wellbeing Survey of veterans, we found that there was clear evidence of high support for a Veterans' Centre amongst the veterans, but an opposing view on the side of service providers. Veterans would likely use the centre for a variety of reasons, with mental health support being the top reason, followed closely by social activities and education and training. The focus group participants frequently verbalised the need for a safe space, a place to get advice and information, and a one stop shop for all support and services. They expressed that ideally the centre would be staffed by current or former military personnel, so they could speak freely to someone who could understand the nature of their being a NI veteran. Peer support and a desire to help one another were voiced repeatedly. Service providers agreed that a single

point of contact might be useful but argued that it did not have to take a physical form. This stands in direct contrast to our finding from the *Current and Future Needs of Veterans in Northern Ireland* report (Armour et al., 2017b), where veterans expressed the need for more face-to-face interaction.

The biggest barrier to accessing a Veterans' Centre, as identified by both veterans and service providers, was security concerns, as a veteran-specific physical building could be considered an easy target. Additionally, service providers specializing in trauma argued that a Veterans' Centre could create unhealthy dependencies, precluding veterans from helping themselves. However, this is a common problem for any veteran-specific service, and therefore requires careful management. In terms of funding, veterans proposed a multi-agency approach, with the possibility of peer support during the hours when staff would be unavailable. Finally, both veterans and service providers largely agreed that the centre should be in a central location, or alternatively, that there should be a number of smaller satellite hubs throughout the region. The need for a central location was further reflected by the survey participants who selected *Transport and other access issues* as the second main reason for why they might not use the Veterans' Centre.

## 5.2 A Missing Perspective

The current report presents the attitudes and opinion about a Veterans' Centre from the perspective of veterans and service providers. One important perspective that is missing from the picture is that of the general public. The *2017 Northern Ireland Life and Time Survey* included for the first time a module of questions enquiring about public's attitudes to UK Armed Forces in Northern Ireland. The attitudes were largely positive (Armour, Waterhouse-Bradley, Ross, McLafferty, & Hall, 2018), but of special significance to the current report was the following question:

*In England there is going to be a specialist mental health service set up for people from the UK Armed Forces. Do you think a similar mental health service should be provided in NI?*



As shown in Figure 8 below, a total of 76% of the NI population believe that a specialist mental health service should be ‘definitely’ or ‘probably’ provided in NI. The percentages varied slightly, but the majority of the population, regardless of their gender, age group, education level and even religion, were in favour of a specialist mental health service. By extension, it can be concluded that the general public in NI would largely support the development of a Veterans’ Centre.

**Figure 8: NI public’s attitudes towards setting up a specialist mental health service for people from the Armed Forces**



## 5.3 Recommendations

The current report presents initial empirical evidence on the expressed need for a dedicated Veterans’ Centre in NI. At this stage, rather than making concrete recommendations, we advocate the setting up of an exploratory committee formed of veterans, service providers (cross-sector), potential funding bodies, and possibly local politicians, to discuss the practicalities and the feasibility of the following key areas related to a Veterans’ Centre in NI:

Key Area	Recommendation	Implications
<b>Location and opening times</b>	Explore the possible location of a centre that would provide the best accessibility to all veterans, covering a range of times.	Many services are currently located in Belfast and are not always accessible at appropriate times for veterans that work. Additionally, they are often not served well by public transport.
<b>Best practice</b>	Examine evidence of best practice, including how effective the PRRT has been for ex-PSNI officers, how effective other UK veteran centres have been, and the benefits that veterans have received from these other centres.	This would assist in streamlining the resources and provide the most appropriate services for current and future needs of veterans.
<b>Services</b>	Examine what services can, or should be, provided to cover a range of current and future needs.	Avoid duplicating services that are already available in the area where the centre might be located.
<b>Costing</b>	Undertake a cost analysis for the development of a new centre, the refurbishment of an existing establishment, or combining a centre with an existing organisation.	In an age of austerity, funding is likely to be scarce. Hence, the most cost-effective way of developing a centre is likely to represent the most successful way of securing funding.

Key Area	Recommendation	Implications
Usage	Explore the likely footfall to the centre, including the busiest days and times. This could be done by exploring the data held by other service providers.	This would assist in streamlining the resources and staffing of the centre, but it will be important to also include questions about attendance and perceived security.

## 5.4 Conclusion

This report examined the need for a dedicated Veterans' Centre in NI from the perspective of veterans and service providers. The data from veterans showed a clear desire for a Veterans' Centre that would provide a variety of support services, however, since a large proportion of veterans voiced concerns about their personal safety and security, it is not clear at the moment how many veterans would actually utilise such a centre and more evidence is required before any firm recommendations can be made.

Moreover, many of the services that a Veterans' Centre might offer are already provided by other organisations, which raises concerns about potential duplication of services. Nevertheless, at present, the communication and collaboration between many service providers is rather piecemeal, which has resulted in fragmented pockets of service provision. Greater linkage between services, including improved collaboration, could create a joined-up network of services across NI, thus perhaps surpassing the need for a dedicated Veterans' Centre in NI. In the age of austerity, it may be necessary to explore this option alongside that of whether a standalone Veterans' Centre (or set of Veterans' Centre hubs for wider geographical spread) should be established.

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# Appendix

Questions about the Veterans' Centre asked in the Health and Wellbeing Survey

**1. Would you support the development of a Veterans Centre (*i.e., a physical building dedicated to providing services specifically for veterans*) in Northern Ireland?**

- ☐ ... Definitely yes
- ☐ ... Probably yes
- ☐ ... Unsure
- ☐ ... Probably not
- ☐ ... Definitely not

**Please explain your answer:**

**2. What would you use a Veterans Centre for? Please select ALL that apply:**

- ☐ ... Social activities
- ☐ ... Mental health support
- ☐ ... Physiotherapy
- ☐ ... Residential services
- ☐ ... Education and training
- ☐ ... Gym facilities
- ☐ ... Peer support
- ☐ ... Advocacy
- ☐ ... Other – *Please specify:* \_\_\_\_\_
- ☐ ... I would not use a Veterans Centre

**3. Where in Northern Ireland would you like a Veterans Centre to be established?**

***Please, select only ONE answer:***

☐ ... Co. Antrim

☐ ... Co. Fermanagh

☐ ... Co. Armagh

☐ ... Co. Derry / Londonderry

☐ ... Co. Down

☐ ... Co. Tyrone

**If you wish to provide more information, please use the following box:**

**4. Are there any reasons why you would not use a Veterans Centre? *Please select ALL that apply:***

☐ ... Don't need one

☐ ... Don't want to be reminded of the military

☐ ... Prefer to use mainstream public services

☐ ... Safety concerns and risks

☐ ... Transport and other access issues

☐ ... Other – *Please specify:* \_\_\_\_\_