

THE ROYAL BRITISH
LEGION



Manifesto 2015

Building a better future for our
Armed Forces community



An open letter to British politicians

from Chris Simpkins, Director General

The treatment of Serving men and women, veterans and their families has come a long way since the establishment of the Royal British Legion in 1921. Then, many were neglected by the society they had returned to after serving in the trenches of the First World War. Today, the vast majority are happy, healthy and in gainful employment.

Recent years have seen an acceleration of welcome changes under Governments of all political hues. The principles of the Armed Forces Covenant - which the Legion successfully campaigned to have enshrined into law - now help to guide future reforms:

"Those who serve in the Armed Forces, whether regular or Reserve, those who have served in the past, and their families, should face no disadvantage compared to other citizens in the provision of public and commercial services."

"Special consideration is appropriate in some cases, especially for those who have given most such as the injured and the bereaved."

Nevertheless, as the Legion's recent household survey of veterans and their families has revealed, significant challenges remain. Veterans and their spouses are more likely than other citizens to be unemployed, to suffer from hearing loss, and experience back pain and limb problems. A significant minority of the working age community are struggling financially, and we are particularly concerned that those with a Service related illness or injury receive the special consideration they deserve.

This 'manifesto' is the product of an extensive grass-roots consultation exercise with our members, volunteers and staff - those who are in closest contact with our beneficiaries. For example, our proposals to improve mental health care, offer high quality hearing aids for veterans with Service-induced hearing loss, and work towards better employment opportunities, originated with the Two Gates and Wilnecote branch in Warwickshire. We are grateful to all who took part.

At the last election many politicians, including all three main party leaders, pledged to "Do their bit" for the Armed Forces community. Since then, politicians representing every local authority in Great Britain have signed a Community Covenant, which is a statement of intent to honour the principles of the Armed Forces Covenant locally. However, we now need you to turn these theoretical commitments into tangible measures that improve the health, finances and well-being of our community. In this manifesto we provide a shortlist of practical measures that will help.

We know that the will to improve matters is out there; we thank you for what you've done in the past and we urge you to do more.

Yours sincerely,

CHRIS SIMPKINS DMA, HON.DUNIV, FIoD, DL
DIRECTOR GENERAL
THE ROYAL BRITISH LEGION



National Memorial Arboretum, Armed Forces Day

The Legion's Top 5 Policy Recommendations

The Legion believes that the next Government should:

Enable all Armed Forces widows to retain their pension should they decide to later cohabit or remarry.

Ensure that all veterans with Service-induced hearing problems can have their MOD-issued hearing aids serviced and replaced at no cost, and that working-age veterans can access higher grade hearing aids, including 'in-the-ear' aids.

Protect the lifetime income of injured veterans by uprating their military compensation by the higher of earnings, inflation or 2.5% (the 'triple lock').

Offer veterans evidence-based treatment for mental health problems within a maximum of 18 weeks from referral, provided by practitioners with an understanding of veterans' needs, in line with the Government's commitment to parity of esteem between physical and mental health.

Include spouses and Early Service Leavers in the resettlement support provided by the Careers Transition Partnership.

Enable all Armed Forces widows to retain their pension should they decide to later cohabit or remarry.

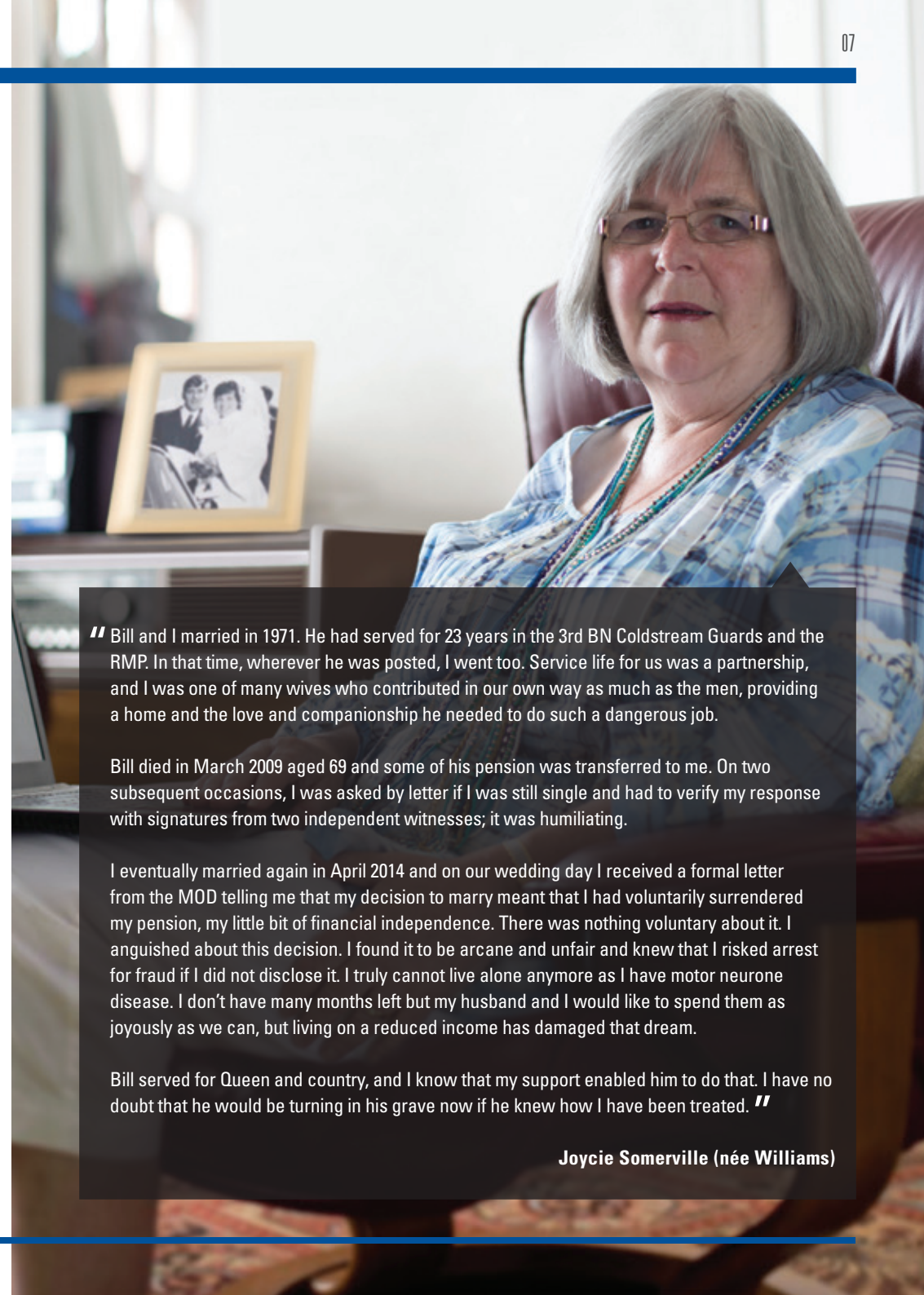
The fact that spouses are often unable to build up their own independent pension pot means that many widows and widowers find themselves reliant on occupational and attributable pensions linked to their partner's military service. Under current rules, however, some Armed Forces widows and widowers are able to retain their pension for life whilst others are forced to surrender their pension if they decide to later cohabit or remarry.

There are two military pension schemes affected by these surrender rules; the occupational Armed Forces Pension Scheme 1975 (AFPS 75) and the attributable post-March 1973 War Pension scheme. This means that over half of those currently married to retired or Serving personnel could find themselves subject to these rules should

they be left widowed and wish to enter a new relationship, along with four thousand War Widows whose partners have died while on active duty.

The Legion maintains that this arrangement is overly complex, out-dated and unfair in modern society. It also causes unnecessary hardship and unhappiness for those widows and widowers affected, as well as their families. What's more, because many of these widows and widowers would have moved around frequently as a result of their partner's Service, the policy is in clear breach of the Armed Forces Covenant, which states that there should be no disadvantage due to Service and that "pension schemes should be fair and appropriate to the particular circumstances of Service personnel".

The Legion calls on the Government to end the practice of stripping Armed Forces widows and widowers of their pensions when they cohabit or remarry, and urges Ministers to use the implementation of Armed Forces Pension Scheme 2015 to align pension entitlement rules for all widows and widowers from that point forward.



“ Bill and I married in 1971. He had served for 23 years in the 3rd BN Coldstream Guards and the RMP. In that time, wherever he was posted, I went too. Service life for us was a partnership, and I was one of many wives who contributed in our own way as much as the men, providing a home and the love and companionship he needed to do such a dangerous job.

Bill died in March 2009 aged 69 and some of his pension was transferred to me. On two subsequent occasions, I was asked by letter if I was still single and had to verify my response with signatures from two independent witnesses; it was humiliating.

I eventually married again in April 2014 and on our wedding day I received a formal letter from the MOD telling me that my decision to marry meant that I had voluntarily surrendered my pension, my little bit of financial independence. There was nothing voluntary about it. I anguished about this decision. I found it to be arcane and unfair and knew that I risked arrest for fraud if I did not disclose it. I truly cannot live alone anymore as I have motor neurone disease. I don't have many months left but my husband and I would like to spend them as joyously as we can, but living on a reduced income has damaged that dream.

Bill served for Queen and country, and I know that my support enabled him to do that. I have no doubt that he would be turning in his grave now if he knew how I have been treated. ”

Joycie Somerville (née Williams)

Ensure that all veterans with Service-induced hearing problems can have their MOD-issued hearing aids serviced and replaced at no cost, and that working-age veterans can access higher grade hearing aids, including 'in-the-ear' aids.

Legion research has shown that veterans under the age of 75 are three and half times more likely to report difficulty hearing than their peers in the general population (7% compared to 2%). When a Service person's hearing loss can be attributed to their military Service, the Defence Medical Services will provide some of these individuals with high-grade 'in-the-ear' (ITE) hearing aids, when clinically appropriate. When they leave the Armed Forces, some veterans have reported that they are unable to get these hearing aids serviced or replaced

on the NHS. They are instead being offered a lower grade hearing aid, or face the expense of replacing the hearing aid themselves, at a cost of several thousand pounds.

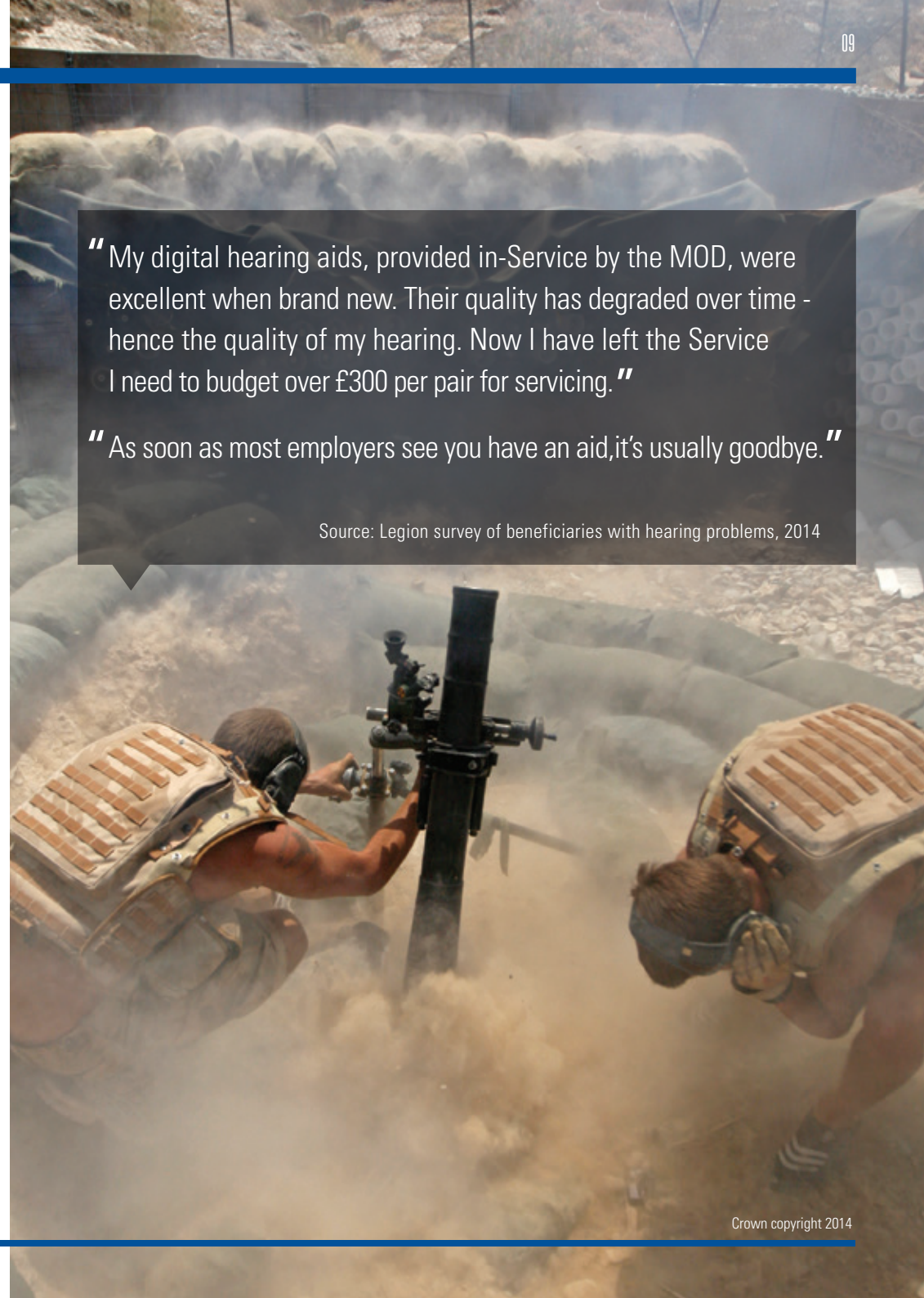
In contrast, if an individual loses a limb in Service, the Government will pay for advanced prostheses under the Covenant principle of 'special consideration' for the injured. The Legion believes that the same principle should apply for those veterans with less visible injuries; in this case, hearing problems caused by military Service.

The Legion calls on the Government to make available specific funding for veterans with Service-related hearing problems, so that their military-issue hearing aids can be serviced and replaced on the NHS. The Government should also ensure that working age veterans can access ITE aids, in order to reduce some of the stigma associated with hearing loss and to encourage the use of aids.

"My digital hearing aids, provided in-Service by the MOD, were excellent when brand new. Their quality has degraded over time - hence the quality of my hearing. Now I have left the Service I need to budget over £300 per pair for servicing."

"As soon as most employers see you have an aid, it's usually goodbye."

Source: Legion survey of beneficiaries with hearing problems, 2014



Protect the lifetime income of injured veterans by uprating their military compensation by the higher of earnings, inflation or 2.5% (the 'triple lock').

War Disablement Pensions and Armed Forces Compensation Scheme Guaranteed Income Payments are awarded partly as recompense for loss of earnings due to injuries or conditions sustained during Service.

However, these regular payments are currently uprated annually in line with price inflation, as opposed to average earnings. As earnings typically increase faster than prices, the purchasing power of these payments is gradually being eroded and they are failing to keep up with military salaries.

For example, in a hypothetical scenario, a payment of £5000 p.a. awarded in 1982 would now be worth around £15,000 if linked to prices,

and £22,000 if linked to average earnings. The situation has worsened in recent years as the move from uprating compensation in line with the RPI measure of inflation to CPI has already reduced expected increases by around 1% a year.

In uprating compensation payments by price inflation, the original objectives of the military compensation scheme have been undermined. Applying the 'triple lock' to regular military compensation payments would ensure that the value of such payments is protected, by uprating them annually by the higher of the Consumer Price Index (CPI), average earnings growth or 2.5% - as is already the case with the Basic State Pension.

The Legion calls on the Government to protect the lifetime income of wounded, injured and sick veterans by uprating their military compensation by the higher of earnings, inflation or 2.5% (the 'triple lock').



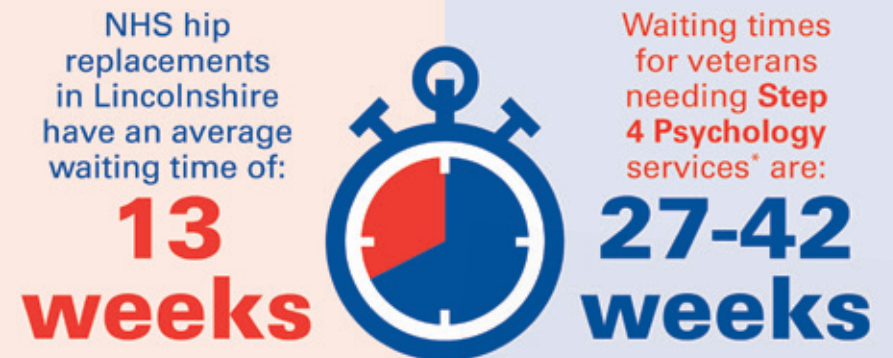
Offer veterans evidence-based treatment for mental health problems within a maximum of 18 weeks from referral, provided by practitioners with an understanding of veterans' needs, in line with the Government's commitment to parity of esteem between physical and mental health.

Research indicates that Service personnel are not at a significantly higher risk of developing mental health problems than the general population, although some sub-groups are more vulnerable, such as those with combat experience, medics and Reservists. Research by the Legion has found that working-age veterans are more likely than the general population to report depression, and veterans who seek help from specialist providers (such as Combat Stress) tend to be 'atypical' mental health clients, with much higher rates of PTSD than mental health help-seekers in general; often with accompanying depression and alcohol problems. This indicates that veterans with Service-related mental health problems have specific needs that may not always be properly met through mainstream NHS services.

The ten NHS National Veterans Mental Health Networks now operating in England, alongside the clinical service provided by Veterans NHS Wales, are undoubtedly a positive step towards improving provision in this area and achieving cohesion, with the NHS, military charities and other agencies working together to improve outcomes for veterans and Reservists with mental health problems. There has been significant additional investment by local commissioners in some parts of the country, which enables the Networks to employ their own

clinical staff and ensure a smooth and rapid patient journey from assessment to treatment. For some areas, though, funding remains limited to the £150k per annum provided by central Government, and waiting lists for specialist psychological treatment in mainstream NHS services can be up to two years long. Put simply, £150k per year is insufficient to provide anything more than a signposting service in these areas, which leads to a postcode lottery for veterans with mental health problems.

The Handbook to the NHS Constitution, which sets out all NHS patients' rights, includes a right for patients to start consultant-led, non-emergency treatment within a maximum of 18 weeks from a GP referral. This does not yet apply to mental health treatment which is not consultant-led, although the Government recently committed to introducing waiting time targets across NHS mental health services. It is vital that veterans are not just sign-posted to the fastest available treatment within an allocated time frame, but that they receive the treatment with the best evidence base for their particular condition. Ideally, this should also be provided by a clinician with an understanding of veterans' specific needs, which will require appropriate training and continuing professional development for mental health practitioners.



* At 1st August 2014, the average wait for psychodynamic psychotherapy services in Lincolnshire was 27 weeks. The average wait for other mainstream Step 4 IAPT services was 42 weeks.

The Legion calls on the Government to offer veterans evidence-based treatment for mental health problems within a maximum of 18 weeks from referral, provided by practitioners with an understanding of veterans' needs, in line with the Government's commitment to parity of esteem between physical and mental health.

Include spouses and Early Service Leavers in the resettlement support provided by the Career Transition Partnership.

Legion research has found that more working age veterans and their partners are out of work than their civilian counterparts (37% compared to 27%). It is important that individuals who are leaving Service are properly supported in their transition into civilian life and that they are in the best possible position to compete in the civilian jobs market. This is particularly true for Early Service Leavers (ESL), who are especially likely to be out of work, with only 52% of ESLs in work six months after leaving the Armed Forces.

It is also true for the spouses of Service personnel, who are likely to have greater difficulty in accessing employment or training than their civilian counterparts as a result of their partner's military Service.

For instance, Service spouses are known to have difficulty finding employment because of frequent relocations, living in fairly isolated communities and effectively being a single parent during periods of deployment.

As recommended in Lord Ashcroft's Veteran's Transition Review, the Legion therefore believes that both spouses of Service personnel and ESLs should have access to the resettlement support provided by the Career Transition Partnership (CTP). The CTP provides assistance when searching for a job, as well as help with training, CV writing, and interview preparation and technique. Extending this type of practical support to the spouses of Service personnel and ESLs would prove valuable to these individuals' personal development and employment prospects.

The Legion calls on the Government to include spouses and ESLs in the resettlement support provided by the Career Transition Partnership.





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