

Tackling Serious Stress in Veterans, Carers and Families E-Bulletin

November 2020

University of Chester

Update from Professor Alan Finnegan RN PhD FRCN FRSA CF FAAN

Welcome to the fourth E-Bulletin for the Armed Forces Covenant Fund Trust's (AFCFTs) Serious Stress programme.

This is written during another lockdown caused by the chaos created by the Covid 19 pandemic. We are now moving into the third year of the project and no-one could have predicted the challenges of having to deliver Serious Stress projects in such a volatile and dynamic environment. I've found it hard to keep up with the changes in rules and guidance, and it must be an immense task for the Serious Stress beneficiaries to know what they are allowed to do. Some programmes were understandably suspended for a time but have recommenced to some extent, although what toll another series of lockdowns will harvest is difficult to predict. Against this backdrop, as of the 11th of November 2020, we had received 435 entry questionnaires, of which 356 were veterans and 79 were a family member/carers. Seventy-six exit questionnaires have also been received. Needless to say, motivation and focus on ensuring the evaluation questionnaires are completed needs to be maintained. Figures have improved, but it remains impossible to empirically define the positive outcomes of the Serious Stress programmes without the supporting data.



Grant Holder Webinar Series

The regular contact I had with grant holders from site visits has stopped for the foreseeable future. Our Centre has tried to fill that void with a Serious Stress monthly Webinar series, and to date Wigan, WWTW, CAIS and Inspire have presented their programmes in more detail. These Serious Stress Webinars are being well attended (see Table 1).

Serial	Date (2020)	Grant Holder	Project
1	6 th of August	Wigan Borough Council	Unite, Inspire, Achieve Programme
2	3 rd September	WWTW	Northern Care Co-Ordination Project (NCCP)
3	1 st October	Inspire	Recovery Together
4	5 th November	CAIS	Change Step – Next Steps
5	3 rd December	Ely Centre	Veterans, Support. BT35 to BT94
6	7 th January 2021	Solent NHS Trust	Portsmouth Military Wellbeing Alliance
7	4 th February 2021	Veterans 1 st Point	Live Life- Veterans & Families

Table 1: Serious Stress Case Study Webinar Schedule ¹

¹ Programme – may be subject to change.

The events have provided good insights into grant holder activities, what is working well, the positive outcomes, developments and also the challenges. The webinars follow the same structure, with the first 20 minutes allocated to one specific grant holder to present their project, including what is working best and the 3 biggest challenges. The next 10 minutes is allocated to the University of Chester to provide specific and targeted results related to the grant holder who has just presented. This is then followed by a general update, and an opportunity for questions and discussion. Everyone has been engaged and open. Additionally, each grant holder is provided with a tailored individual report. These reports are shared with the AFCFT and grant holders were informed that the evidence is for their use only, and not for public dissemination. The feedback has been very encouraging, and more current results from all the programmes are included below.

Case Studies

The Centre has requested that grant holders provide 2 to 3 case studies that can help exemplify their programmes and outputs. There is rich case study evidence emerging from the programmes, and it is necessary to find a medium for displaying these narratives. Presenting a case study is a fantastic opportunity to sell the service being provided with the AFCFT funding. The intent is to include case studies in the final report. Ideally this will be a one-page document (around 700 words) in which the grant holder will include:

- A little about the client's military career, how long they served and where.
- What made them settle in the geographical area.
- With the consent of the client, use of their name or pseudo name.
- Timeline from entering the programme to exit to include; issues presented with, interventions delivered.
- How client engagement was achieved.
- Any ongoing support being provided.

The Evaluation

This E-Bulletin provides details regarding the evaluation of participant's entry questionnaires for those that entered the Serious Stress programmes during the period from the April 2019 (start of recruitment) until the 11th of November 2020. There were at total of 511 questionnaires. These consisted of 435 entry questionnaires and 76 exit questionnaires. Most participants (N = 335; 66%) favoured the completion of paper questionnaires, and 175 participants (34%) completed online versions (missing data = 1). (See Table 2).

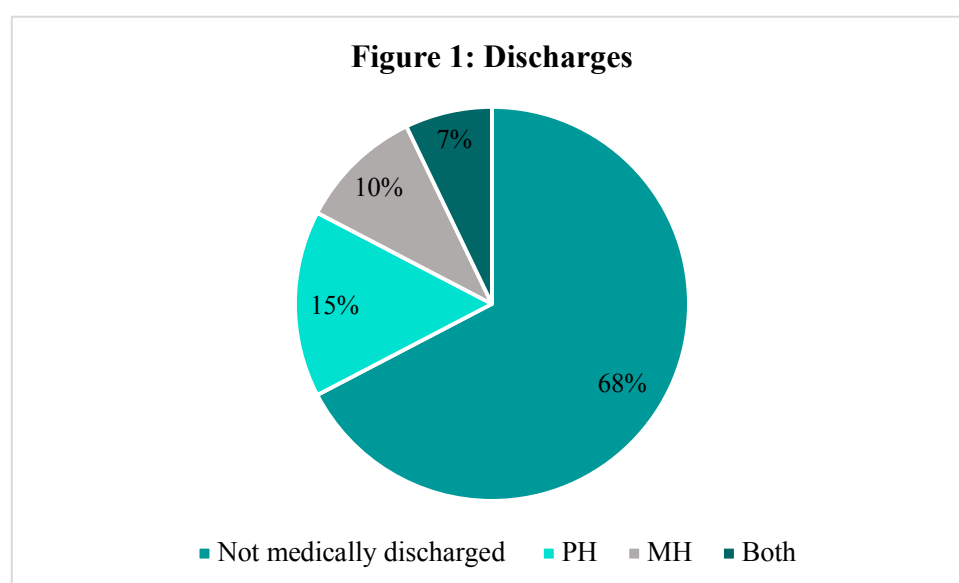
Grant Holders	Entry Questionnaires		Exit Questionnaires	
	Veterans	Family / Carer	Veterans	Family / Carer
Veterans 1 st Point	9	2	0	0
Inspire	89	34	15	3
Ely Centre	30	7	7	2
CAIS	63	2	16	1
Wigan	93	15	18	2
WWTW	47	17	6	2
Solent NHS Trust	25	2	3	1
<i>Totals</i>	356	79	65	11
Total = 511	435		76	

Table 2: Received questionnaires separated by organisations delivering the programmes

Veteran participants were predominately male (92%, N = 327) with females totalling 7% (N = 25, missing data N = 4). In the family / carer group, 70% (N = 55) were female, and males were 29% (N = 23, missing data N = 1). The most common relationship status declared by veterans were single (38%, N = 134), followed by married (37%, N = 131). For the family / carers group, the most common relationship status was married 47% (N = 37) followed by single (18%, N = 14). The majority of veterans had no dependent children (58%, N = 206). Similarly, the majority of the family and carers had no dependent children 53% (N = 42).

Veteran participants were predominately from the Army 88% (N = 313), with Royal Navy at 6% (N = 20), RAF 3% (N = 10), Royal Marines 2% (N = 6), others were 1% (N = 4; and missing data was N = 3). Of these, those who served in the Regular service were 86% (N = 308), Reserves / Territorial Army were 10% (N = 36) and others were 2% (N = 8; and missing data was N = 4). Veterans were predominately Private soldiers or equivalent when they left the Armed Forces (53%, N = 189). The mean years of length of service in the Armed Forces was 10 years. The majority of participants (77%, N = 274) conducted operational tours (OT) and 21% (N = 77) did not (missing data N = 8).

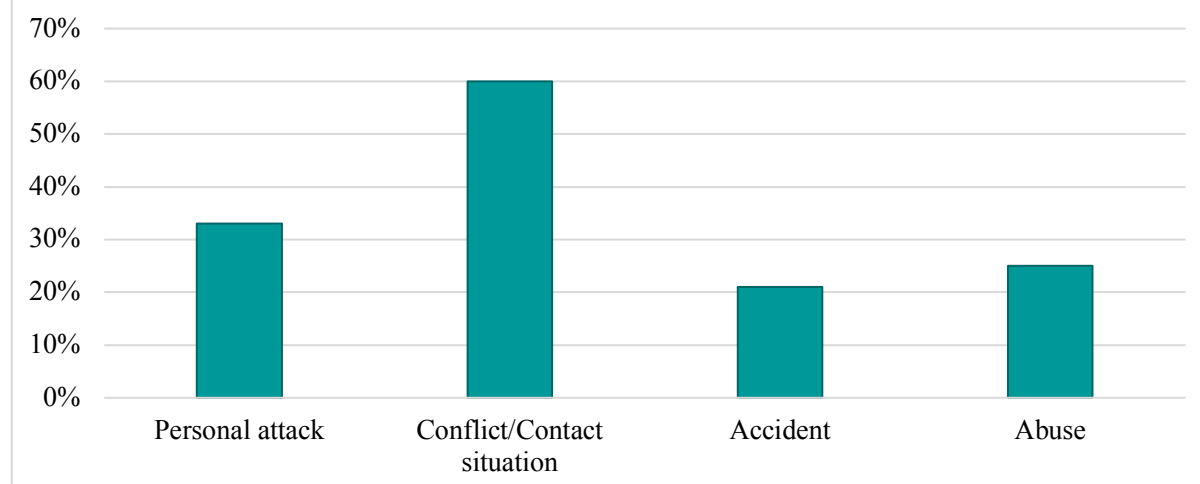
The most common reasons for leaving the armed forces were 'medical discharges' at 32% (N = 108) followed by 'end of the contract' (30%, N = 107).



The majority of participants (veterans and family members) self-reported high levels of stress. Veterans and the Family / Carers reported a medium grade of eight on a scale ranging from 0 (no stress) to 10 (maximum stress). A mean of five predisposing factors were reported by both veterans and family members, the most common factors being: family stress, relationship problems, previous unresolved trauma, and traumatic exposure and isolation.

Those veterans reporting exposure to a traumatic event during their service was 79% (N = 278), with a mean of two events (median = 1.6; mode = 1; SD = 1.25; range 1 to 4 traumas). Traumatic events (which are not mutually exclusive) were mostly reported as being Conflict/ Contact situations 60% (N = 213), followed by personal attack 33% (N = 119), abuse 25% (N = 88), and accidents 21% (N = 76). See Figure 2.

Figure 2. Type of traumatic events experienced by veterans during service



Veterans and the family members / carers reported their social network status. 54% (N = 191) reported having 'some' people to rely on, 24% (N = 84) reported having 'no one' to rely on and 22% (N = 77) of the veterans reported 'having people to rely on' (four were missing data). Similarly, from the families / carers group, 52% (N = 41) reported having 'some' people to rely on, 28% (N = 22) reported 'having people to rely on', and 19% (N = 15) reported having 'no one' to rely on.

Of those veterans whose social interactions involved meeting people, most met people 'once or twice a week' (37%, N = 132) as did the families / carers participants (32%, N = 25). This was followed by meeting people 'once or twice a month' (23%, N = 80 of veterans, and 23%, N = 18 of family / carers), 'three times a week' (16%, N = 57 of veterans, and 24%, N = 19 of family / carers), and 'every few months' (14%, N = 51 of veterans, and 15%, N = 12 of family / carers).

Veteran participants currently living with their spouse / partner were 41% (N = 145), followed by those living alone at 33% (N = 118), with family 18% (N = 63), with friends 3% (N = 12), professional house share 3% (N = 11), in shelters 1% (N = 2), those who preferred not to say were 1% (N = 4), and those who responded with other were 4% (N = 15). It is anticipated that Covid 19 will hold further implications regarding employment and housing.

Comments on housing difficulties, precarious housing and living status were common (N = 78). Participant referred to be *sofa surfing*, living with their family or in supported accommodation, such as: "Living in a van with my dogs", "Find that housing is an issue I had to get my flat myself...", "I am a council tenant", "Currently living with my ex who is trying to force me and the children out..."

Psychometric Scores

Psychometric scores indicate a sample with moderate to moderately severe depression and anxiety. Differences between the two analysed groups of participants is observed on the work and activity scale (WSAS), on their alcohol consumption (AUDIT) and in their valuation of their quality of life (EQ-5D-5L), with veterans reporting greater functional impairment, harmful drinking and poor quality of life than family members and carers.

Exit Data

Exit data is now available from 76 questionnaires. Of these, 66 were planned exits (87%), whereas 8 were early exits (11%, and two participants omitted the information). The overall experience was rated as 'very good' by 62 participants, 'good' by 11 participants, 'average' by 2, and 'poor' by one individual.

Analysis shows improvements in participants health and wellbeing. Results reflected a decreased in the levels of self-reported Stress in the VAS and in the number of self-reported stressors affecting their life. Similarly, improvements in self-reported scores of validated psychometrics were found for the PHQ-9, GAD-7, WEMWBS, and AUDIT.

Qualitative Data

Some common themes and lessons are beginning to emerge from the qualitative data, such as participants satisfaction of the programmes (reported by N = 28), focusing on the help/support and services received, activities and the related social element, especially when involving other service or ex-service personnel (see below quotes in Table 5).





<p>M Veteran, 58 Years</p> 	<p>The best parts were: Regular contact with peer mentor and the measures that were provided. Transport to appointments. Support with activities likely to meet other veterans. Talking through my journey and therapy access...</p>
<p>M Veteran, 55 Years</p> 	<p>I have joined the programme very useful. The people are very understanding and kind. All will go out of their way to help everybody. I would recommend that this would be the first point of call for any ex-service personnel in need of advice.</p>
<p>F Spouse, 22 Years</p> 	<p>The positive elements were: 1 Helped to move into a property, 2 Helped my partner with mental health.</p>
<p>M Veteran, 60 Years</p> 	<p>Tremendous help. I feel like a different person. Extremely helpful and totally understanding of the military life. I would highly recommended to others who have been in the military.</p>

Figure 3: Exit quotes

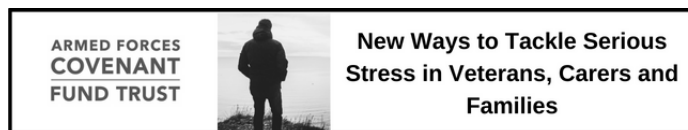
Ensuring Quality

Despite the significant changes in working patterns, it remains essential to collect as many entry and exit questionnaires as possible. A key aspect in this strategy is to explain the relevance of the data to provide a foundation for future sustainability. This in turn will defend the health and wellbeing of those members of the Armed Forces Community requiring help in the future. Risks are being managed through the establishment of a robust two-way communication forum with the grant holders. The Centre has a generic email (WCVeterans@chester.ac.uk) with the intent to answer queries ASAP and within 48h (on working days).

The Centre will continue to add emerging themes onto the Q&A section of the Centre website under the heading of “frequently asked questions”: <https://www1.chester.ac.uk/westminster-centre-research-veterans/research/serious-stress-veterans-carers-and-their-families>. This section also contains hyperlinks to useful websites, and grant holders can add additional references to the Centre if required. In addition, please call upon our team if there are any staff who need training regarding the evaluation and online platforms. If any grant holder wishes to speak to any the Centre team then please let us know. We are always here to help.

Armed Forces Covenant Fund Trust

Update from AFCFT



New Ways to Tackle Serious Stress in Veterans, Carers and Families

An update from the Trust

- The Armed Forces Covenant Fund Trust (the Trust), is going through an exciting period of new development.
- Following on from the launch of our new website back in May 2020, we've since added additional features to make searching and applying for the right Trust funding for your project, easier than ever.
- Our eligibility checker is designed with applicants in mind, guiding you through our application eligibility and offering tips and advice along the way.
- With funding programmes live now, and others to come in the new year, you're sure to find this a really useful tool to make the path to grant funding a little smoother.

New app

- Our latest digital release is the new Trust app – the AFCT Project Finder!
- Whether serving personnel, Service families and carers or veterans; the AFCT Project Finder features a whole array of activities for you to get involved with in your local area.
- With searchable categories and an interactive map, we encourage you to find out what great work is taking place near you. This app is being rolled out to projects as awards are made. You may, however, find it useful as a source of suggestions for possible activities for veterans and their families in their local area.

Tackling Loneliness

- Throughout this year's Covid-19 pandemic and the ensuing restrictions, we've continued to deliver a range of funding programmes in support of the Armed Forces community.
- The Tackling Loneliness programme was developed following consultation feedback earlier in the year that showed the importance of identifying and dealing with social isolation triggers amongst the Armed Forces community.
- The Tackling Loneliness programme will award two-year grants of £70,000 and so offering long-term support for the duration of these projects is imperative.
- In support of these applications, which will receive decisions in February 2021, we have followed the successful model used for our [Veteran's Mental Health and Wellbeing Fund grantmaking](#).
- We're supporting a small number of previous Tackling Serious Stress awardees to mentor and support those due to be awarded under the Tackling Loneliness programme in the new year.
- In our experience, this support has proven invaluable. The six Strategic Partners who were awarded funding to support Positive Pathways awardees have added strength to our grant making and have become a great example of best practice that we hope to replicate with this new programme.

Force for Change

Of course, the Trust manages a portfolio of funding programmes and as well as the Tackling Loneliness programme, this year we have launched the successor to our Local Grants programme – The Armed Forces Covenant: Force for Change programme.

This small grants programme, offering awards up to £20,000, focuses on social isolation, but more in line with improving social integration in comparison to the larger Tackling Loneliness awards.

The Force for Change programme will make its first awards this November. Round two closes for applications noon on 30 November with awards being made in February 2021. Further rounds will take place in 2021.

NAAFI Fund

We are delighted to be working with NAAFI to deliver the NAAFI Fund, which will make grants to improve quality of life on Armed Forces bases for serving personnel and their families.

Map of Need

Did you know that you can access reports from the Map of Need via our website? Find out more via our website at: www.covenantfund.org.uk/the-map-of-need

Stay in touch

To keep up-to-date with all of the Trust's exciting work and developments, why not sign up to our e-newsletter and receive monthly updates straight to your inbox?

Sign up and find out more about the Trust at our website: www.covenantfund.org.uk

Download the AFCT Project Finder for free either through the app store or Google Play store.

Grant Holder Updates

Solent NHS Trust



- Since March of this year delivering services to Veterans and their families has been seriously challenged due to the ongoing Covid pandemic. At the start of the initial lockdown demand from Veterans dropped off dramatically and those in contact with our services were more often asking how **they** could help rather than reaching out for help.
- The Veteran's Wellbeing Advisors in PositiveMinds moved to providing support by phone rather than by face to face drop in and after a short period demand began to increase. Many veterans were seeking support to help manage their anxiety and stress due to losing their jobs or being furloughed and, for others it was adjusting to working from home and not being able to connect as normal with their social networks that was a significant issue.
- As restrictions eased and face to face services resumed the demand began to rise and until the current lockdown kicked in had reached the level back in mid-March. Services have reverted to phone and online support for the time being.
- Psychological therapies provided by our local IAPT service have remained using remote platforms such as phones and Zoom but will revert to face to face delivery as soon as is safe to do so.
- Support from Solent Recovery College ceased for a short period whilst the curriculum was "converted" to online delivery. This opportunity allowed for a review of the curriculum with our local Military Mental Health Alliance partners and the recruitment of a new coordinator who has put in place a much stronger programme from October.
- The Veterans Wellbeing Advisors have worked with MOD medical services to help facilitate the transfer of forces medical records to "civilian" GPs to ensure veterans are better supported in primary care. We will promote this "service" to GPs and their practise managers in Portsmouth and the surrounding area in the coming months.
- During this period, we have worked with the University of Chester to improve management and take up of the questionnaires and are hopeful this will be a more seamless process going forward.
- Social media has been developed to promote the offer to our Armed Forces family including a Q&A veteran's podcast during Armed Forces Week and focusing on veterans during mental health week and Father's Day.
- The initial lockdown and diversion of key people to more pressing demands delayed the development and mobilisation of the Quick Reaction Force. However, we resumed this work in September and working with one of our key partners, All Call Signs, have developed a new service model which we are in the process of mobilising with support from other key partners.
- Whilst demand was lower a lot of groundwork was done to strengthen the relationships and pathways our programme funded services have with other organisations supporting our veteran community. This work continues with the aim of reaching common standards for triage and assessment and to enable "warm transfers" of veterans between support organisations thereby reducing the stress of re-telling of stories and also reducing the time taken for support to be given.
- During the 3 months to the end of September the programme has supported 101 veterans and 9 family members.

Walking with the Wounded

Our Northern Care Co-ordination Programme (NCCP) has been extremely successful throughout the pandemic, although most of the partnership working has stopped.



Last quarter we reported supporting 41 beneficiaries of which 17 were new referrals in that time frame.

The whole NE/NW WWTW team have supported our NCCP beneficiaries at times with support ranging from low level welfare support to assisting with volunteering to build confidence through to support to gain employment.

Positive Use of Time support area, has seen the biggest positive increase support area with the beneficiaries with 79% of them reporting their lives have improved in this area, whilst we have also seen increases in the following areas:

Mental Health and Wellbeing	72%
Living and Life Skills	65%
Managing strong feelings	72%

The largest decrease support area we capture has been Addiction which has recorded a 19% of our service users decrease in this area. This tells us, this area of support remains a difficult area to tackle however, at the same time 30% of beneficiaries recorded a positive change in this area whilst a further 42% stayed the same.

The NCCP team now are fully focused on closing down the programme in good order, ensuring we maintain the support for our beneficiaries being referred to us.

No more referrals will be taken in to the NCCOP post 31 Dec 2020 to enable us to close down the service. This being said, WWTW have other programmes we will be able to support future referrals with and the success of NCCP has seen WWTW staff now embedded in to the NHS High Intensity Service around the North of England, which you should all hear about very soon, if not already.

Covid-19 delivery

Like all organisations, our model had to adapt quickly when face to face support was prohibited due to restrictions. We noticed that some service users were anxious about fundamental care elements such as prescription deliveries, access to services such as therapy, and employment interruptions. The case management aspect of our support was very beneficial in the early period of COVID restrictions and enabled a good flow of communication between service users and relevant support providers, this swiftly reduced stress levels and allowed service users to refocus towards their wider progress.

After initial concerns were addressed and tensions eased, we were able to engage service users in areas that are best addressed with mentorship and restorative practice methods. Service user milestone measures were adjusted to suit the situation in hand, and many were encouraged to upskill during this period and take advantage of online training opportunities. It was interesting to note that some service users viewed the restrictions as like an operational situation and as such became better able to self-manage, whilst continuing to engage.

There was also part of our cohort that found the stresses of the situation extremely detrimental and compounded their existing adversity. The cause and effect to delivery was two-fold in as much as speed of delivery was slowed somewhat as many agencies reduced their offer or furloughed and suppressed face to face contact created some barriers also. Peer mentors were often in a position of having to find new pathways at short notice and be dynamic in their problem solving.

The hours that were saved due to lack of travel also allowed us to increase peer mentor caseload and work cross border. Waiting list was reduced to zero and support was delivered effectively at a time when it was most needed.

Social inclusion via online drop ins has been successful after initial trialling and sessions have been well attended, whilst not as desirable as face to face drop ins they have successfully created opportunities for communication.

COVID emergency food provision.

Successful funding application to the AFCT to provide emergency food provision during the COVID restrictions has given us the opportunity to direct essential support to those that would benefit the most from it without them having to further disclose personal information to additional agencies. Many would have not accessed this type of service due to perceived stigma.

To date we have made **178** deliveries which have benefited **55** service users and their families, **108** men, women, and children. Peer mentors have welcomed the opportunity to interact with service users when delivering and see them in person (whilst observing social distancing protocols).

To ensure that our provision could be scaled to suit an individual or a family, we designed a modular box system that could reflect the end user. Initial deliveries also included toiletries and household goods, then subsequent focussed on groceries. The system was developed with Castell Howell foods, as a well-established local distributor they had the infrastructure to enable delivery to hubs around Wales. We also felt that a Welsh business supporting veterans in Wales was appropriate. They have been proactive partners and added value to our offer.

Service user feedback shows that the contents of deliveries were considered a positive contribution and that they directly reduced stress within the household. Some reported that these deliveries helped alleviate financial stress which allowed them to catch up with pressing outgoings.

Food Parcels

Store Cupboard	Meat	Vegetarian	Fruit and veg	Vegan	Household cleaning	Toiletries Male/Female	Toiletries family	Cat/Dog food
168	159	19	171	4	53	86	31	66
Parcels: 757					Deliveries: 178			

Single Males	Single Females	Couples	Families	Single Parent Families
27	3	7	13	5
Households: 55				

Total Males	Total Females	Total Children
53	23	32
Individuals: 108		



Hi,
On behalf of my family and myself I would like to show my appreciation for the food parcel that was delivered to my doorstep by Neil Davies yesterday 04.08.20. This has helped us immensely and very much appreciated and can't thank you enough for the help and support we have received from Change Step through these difficult times. Thank you all very much.

"The person who came up with the list of food knew what they were doing and were thorough and spent time to get the right balance. The parcel had everything we could have possibly needed, and it also forced me to try new foods that I hadn't tasted before because being from Ghana we tend to just stick to foods we know. We have adopted some of the new foods and we will be buying them ourselves in the future"



Hi Simon, it's one of Rogers caseloads (Brum) thank you so much for the food package it means the world to me

Dear Sir,
I'm writing to tell you how grateful I'm to Change Step. Mr. Roger delivered provisions to us today which we are grateful for. My husband is a veteran who's suffering from stage 6 dementia. We've nothing but unlimited support and care from Change Step.
Thank you.

Wigan Council



Wigan Borough Armed Force HQ have continued to provide a good service despite ever changing restriction as a result of the COVID 19 Pandemic. Our dedicated bank of volunteers continue to deliver emergency support to the vulnerable and isolated members of the Armed Forces Community in Wigan & Leigh.

We are very pleased to announce the start of our Emotional Support Animal programme. We have been truly blessed to be awarded Positive Pathways funding from the Armed Forces Covenant Trust Fund which will add value to the beneficiaries of the Tackling Serious Stress Programme to tackle social isolation and mental health while educating professionals on service animals in partnership with Red Oak Kennel Services



Our mental health support has built capacity due to the demand of crisis presentations. With support from the AFCTF COVID emergency grant we have a further three psychotherapists and two students delivering interventions under the supervision of our Mental Health Service Manager.



Our Strong Heroes program has now commenced with a pilot 12 weeks to deliver a strength and conditioning physical health intervention. The beneficiaries of this programme are receiving virtual coaching and have been giving an exercise starter pack. The original attendees of the programme will be the future mentors of the programme and will support us with learning and development for future and wider delivery.



V1P

- **Service update** - we are continuing to maintain regular contact with partner agencies on a weekly basis and have group meetings every six weeks. We have come together and been able to diversify and adapt all our services. We've also been working hard to make the best of social media, getting photos and feedback from families to a wider audience
- **Cyrenians** has been able to conduct mediation by zoom and have had success through this medium.



"I feel like this is a sad time to finish up. I would like to take this opportunity to thank you both for such an amazing opportunity and that you were both fantastic support. This opportunity should now be passed on to another family in need. Your input has been invaluable and I hope that we can continue to grow with the tools you both provided us in order to communicate more effectively. Thank you ever so much again, I appreciate it greatly."

- We have got together with other services within Cyrenians and are now about to start "Cook off" over zoom. We send out all the ingredients to the families, they log in and together we'll learn how to cook a three-course meal.
- Our Farm, near Kirknewton, has seen some improvements over the last few months and we are now able to offer family activities out there, including: Bushcraft and fire lighting; growing food/healthy eating/outdoor cooking; walking clubs; environmental education/rural skills; seated yoga; woodwork, chainsaw work and furniture making; eco-Landscaping; dry stone dyking.
- Horseback UK are also keen to bring some of their horses down for our family days. **Horseback UK** managed to run one of their family weeks and the response has been fantastic. They took two families, comprising of 2 adults and 4 children, away for a week and really managed to get everyone out of their shells and help rebuild relationships.
- We have also just started art therapy and so far, have two families looking to take this up. All partners are going to be doing an art therapy workshop, as well as Conflict Resolution training, later this month.

Rock2Recovery Client

"It's amazing having a Brill time. Bit strange living with another family, but me and R are having a good laugh. We got soaked today at a waterfall 😊 The staff are all good, easy to chat too. Me and R have made some really good progress together. Thanks for recommending this, had a fab week. Me and R have really gelled together. My turn to go on a horse tomorrow 🐾 I've registered to do the 3 weeks course today."

Lothians Veterans Centre

"Thank you for putting us forward, I am extremely grateful for this wonderful experience especially when everything is quite bleak."



- **Fares 4 Free** took the families up to Horseback, in rural Aberdeenshire, and got them home safely. They are also going to offer city tours of Edinburgh and Glasgow for Live Life families to help get them out and about (safely!) during local lockdowns and give them a light-hearted history lesson. They are also still taking veterans to their appointments and helping collecting supplies and furniture for those requiring assistance.

- **Stand Easy** have been unable to hold their family weekend due to restrictions on the number of people who can come together. Instead, they are looking into doing online drama sessions which will involve sending out a bag of props to families and doing fun drama activities in a virtual way!



- **Rock 2 Recovery** have also been conducting sessions electronically but managed to see some people face to face in a safe space in Dunfermline. They have also been working with Stand Easy to help adapt their veteran activities.

- **Lothians Veterans Centre** are still closed but have still been working hard to stay in touch with local veterans and families. They have moved their D-Day club to zoom which they have every Wednesday and veterans can go to the centre and collect food hampers at a pre-arranged appointment time. Always looking for ways to help their veterans through these times they have started organised walks to help get people out and about.



- **V1P** centres remain open Monday- Friday 9am - 5pm. Staff are available to answer calls, receive emails and carry out telephone appointments. The drop in remains closed and no face to face appointments are being carried out. Fife Health & Social care partnership has committed to funding a dedicated and permanent base for V1P in Fife.
- To date **Live Life** has received 32 referrals. That is 97 people who've engaged with the Partnership, 27 men, 25 women, 21 boys and 24 girls.
- We have now had 15 entry questionnaires completed.

Inspire

Inspire's Recovery Together Project has continued to run under Covid-19 conditions, delivering our work in person when possible, but with a significant proportion of services being delivered online or by telephone. We have seen the importance and value that our local veterans place on being able to attend certain programmes in person, with the social impact of our equine and horticultural programmes really being emphasized in the feedback over the past 6 months.



However, it is clear that the Covid-19 pandemic has a very serious impact on the mental health of veterans locally, with increased levels of risk and complexity of presenting issue, and so this service remains exceptionally important to those in need, those in treatment and all their families. Feedback from our veteran client group during this time has been very positive though and we thought we would take this opportunity to share a little of this below:

"I would just like to thank everyone at Inspire for the outstanding work that they all are doing in helping us veterans combat the scourge of PTSD..... I have been treated with nothing but respect and compassion and I will be forever thankful to you all."

"..... thank you to all the team at Inspire for the help and support I have received over the past 6 months it has been a life changing experience for me personally and for my family and I can't thank use all enough."

".... It's the most amazing service. It's fantastic. It really is fabulous. A big thank you to everyone!..."

Taking on board the feedback regarding the social elements of the service delivery, we are planning on running a number of equine and mindfulness programmes through the Christmas period to provide further therapeutic opportunities to bring Veterans and their families together (socially distanced of course!).

Brooke House



BROOKE HOUSE
HEALTH & WELLBEING CENTRE

- Originally an ELY Centre project, Brooke House was established in October 2018 when funds were secured from HM Treasury and the Armed Forces Covenant Trust. It's unique setting in Colebrooke Park provides a therapeutic backdrop to support its overall aim of improving the health and wellbeing of military veterans and their families.
- A successful few years has helped Brooke House transition from operating under its parent body, to seeking charitable status itself. The last few months of 2020 will see completion of this process under the guidance of a new Board of Directors.
- This is a vital step towards becoming a regional centre of excellence and fulfilling its broader strategic approach of being needs led and recovery orientated.
- Recovery means gaining and retaining hope, understanding one's abilities and disabilities, engaging in an active life, having personal autonomy, social identity, meaning, purpose in life, and a positive sense of self.
- A recent external evaluation gave particular praise to Brooke House's ability to adapt and innovate new ways of reaching out and offering high level support during the Covid-19 pandemic. Feedback indicated that clients felt they were still benefiting from the, 'Brooke House experience' while the staff team worked remotely and on-site.
- In line with its central themes of: Health, Home, Community, Purpose, activities have included:
- An online nutritional workshop providing information and advice on the importance of good nutrition and sleep, and how to boost energy and the immune system
- A wellness workshop focusing on emotional health, self-care, stress reduction and gratitude was delivered to families
- A weekly bulletin to all clients that included updates, advice, guidance and inspirational thinking.
- The 10-week Defence Garden Scheme was adapted to an online version. In September the course was able to restart outdoors adhering to social distancing
- A fortnightly veteran's market was held in the walled garden selling produce grown by volunteers and on site. Veterans were invited for an informal drop in from 11am to 1pm
- An online blog, 'growing together in extraordinary times' helps clients feel connected to Brooke House and Colebrooke Park in uncertain times, articles accessed here: <https://brookehouse.co.uk/walled-garden-blog/>
- Staff continue to work remotely and onsite following guidance from a Covid-19 committee
- Work has been completed for the new build of disabled toilet facilities at the Walled garden area
- Brooke House was successful under the, 'Tackling Social Isolation' funding from the AFCT and will provide mentoring to veteran's groups benefiting from the, 'Tackling Serious Loneliness' grants in 2021
- Plans for the future include developing and building on nature-based therapy and utilizing more of the outdoor space on the 1000-acre estate.
- Brooke House is also committed to developing partnerships with other veteran community and voluntary sector organisations and the regional Health & Social Care Boards in terms of integrated care.

University Staff Project Team

Staff Members



Dr Alan Finnegan
Professor of Nursing and
Military Mental Health,
and Director of the
Westminster Centre for
Research

Colonel (Ret'd) Alan Finnegan's military career included appointments as Commanding Officer at the Royal Centre for Defence Medicine, MOD Nurse Consultant Advisor in Military Mental Health and Defence Professor of Nursing. His overseas deployments include Iraq, the Balkans, Afghanistan, Africa and four years in Northern Ireland where he was OIC of the Stress and Trauma Clinic within HQNI. On retirement from the Army, he joined the University in 2016.



Dr Lisa Di Lemma
Senior Researcher –
Veterans Projects

Lisa is a psychologist and her research interests focus on health and cognitive processes, behaviour change and cost-effective interventions. Currently, she is a post-doctoral researcher at the University, and the Tackling Serious Stress in Veterans, Carers and Families project is one of her main focuses.



Lottie Ainsworth-Moore
Project Administrator –
Veterans Projects

Lottie has a strong background in working with serving personnel, their families and veterans in previous employment with military charities and volunteer work. She is also an Army wife of 10 years.



Lauren West
Administrative Assistant &
PA to Dr Alan Finnegan

Lauren studied at the University of Chester before gaining employment at the Westminster Centre for Research. She has good links to the military community and assists a number of military forums including being Secretary for the Cheshire Armed Forces Covenant Partnership Committee.

Westminster Centre Other Team Members

Staff Members



Dr Becky Randels
Researcher

Rebecca combines knowledge in both qualitative and quantitative methodologies. She has gained experience from completing several different research-based roles in areas including touch perception, health perception, domestic homicide and, more recently, the psychological impact of COVID-19. She previously also worked within Student Experience at the University of Liverpool.



Tom Burke
Researcher in Health
Economics

Tom is a Researcher in Health Economics and guest lecturer at the University of Chester. He advises across a range of ongoing research grant work drawing from his experience in industry, having spent 10 years working in health economics and outcomes research (HEOR). Tom also holds a Senior Health Economist position at HCD Economics, a global health economics consultancy, where he leads a team of Health Economists.

Meet some of our External Committee Members

(a full list is at: <https://www1.chester.ac.uk/westminster-centre-research-veterans/who-we-are>)



Dr Bhairavi Sapre
Consultant Psychiatrist -
Cheshire and Wirral NHS
Foundation Trust

Dr Bhairavi Sapre is a General Adult Psychiatrist working for Cheshire and Wirral NHS Foundation Trust as a Community Psychiatrist Trustwide Perinatal Mental Health Service. She has been an NHS Consultant since 2011 with previous experience working as an Acute Care Consultant in and Community Psychiatrist working in adult mental health in Wirral.

She is also a serving medical officer, holding the rank of Lt Colonel, with 208 Field Hospital, Liverpool since 2002 when she first qualified as a doctor. During her time with 208 she has spent time at the Department of Community Mental Health, Catterick with her military counterparts and has attended numerous military psychiatry training courses and conferences in Trauma focused CBT and EMDR.

She was involved in delivering post operational stress management to personnel in her unit returning for Operation Herrick and takes a lead role in delivering psychiatrist training within her unit. More recently, she has worked collaboratively with the Liverpool Medical Institute in delivering a number of military psychiatry lectures on Post Traumatic Stress Disorder.



Andy Simpson
Research Manager,
Royal British Legion

Andy Simpson is currently leading on the Royal British Legion's 2021 Household Survey of ex-military veterans. Prior to taking up his present position Andy worked with Help for Heroes. Andy also spent ten years working within the Ministry of Defence as Head of Profession for Community Development & Learning and as the Army Welfare Service Chief Community Development Officer.

Andy also has considerable experience within the university sector, initially as a Senior Lecturer before becoming Head of Division for Non-Formal Education & Social Pedagogy at the University of Birmingham.



Andy Bacon, NHS England & NHS Improvement, Head of Policy & Strategy for Armed Forces

Andy Bacon has been a senior health leader for over 20 years in England and overseas. He has worked in the public and the charitable/not for profit sectors. He has also worked with and in primary care, community and hospital-based services (including specialist tertiary teaching hospitals). He has led both the providing of clinical services and in the commissioning, purchasing and procurement of them. His areas of interest are armed forces health, mental health, health system management, developing integrated health care, and improving health in low income countries. He has been responsible for the delivery of new networks and types of providers to enhance the capacity of in the English National Health Service (NHS). He was also the Chief Executive of the only specialist children's hospital in East and Central Africa. His current job is developing the policy and strategies for the NHS support for healthcare for the Armed Forces community, having served for over 10 years in the Army as an infantry and staff trained officer before his work in health. He is "passionately curious" about finding new ways of improving people's health.

Andy holds and has held several non-executive posts in charitable bodies concerned with the armed forces and international health and is a past Trustee and Honorary Advisor of Tropical Health Education Trust. Most recently he led to the development of mental health awareness for peacekeepers from the Ugandan People's Defence Forces, Kenya Defence Forces and management training for a mental health charity in India. He was awarded a Post Graduate Certificate in Global Mental Health in 2019 and appointed as a visiting professor at the University of Chester the same year.



Mary Steen, Professor of Midwifery at the School of Nursing and Midwifery, University of South Australia

Mary Steen is a visiting professor of the centre and is currently a professor in midwifery at the School of Nursing and Midwifery, Division of Health Sciences, University of South Australia (UniSA). She is the Chair of Mothers, Babies & Families Health and Wellbeing Research within the Rosemary Bryant AO Research.

Mary qualified as a registered general nurse in 1986 and as a registered midwife in 1988 in the UK. She has a vast amount of nursing and midwifery clinical experience in hospital and community settings. She became interested in research in 1990 and undertook her first Randomised Controlled Trial (RCT) in 1993. Her PhD research studies investigated and explored the care and consequences of perineal trauma after childbirth. This research involved the designing and development of a patented cooling pain relief treatment known as the 'femepad' which is now commercially available.

During her career as a midwife, whilst employed by the NHS in the UK she managed to undertake clinical, educational and research activities. She has an excellent track record of obtaining grants and funding. In 2008, she was appointed as a Reader in Midwifery and then successfully became a Professor of Midwifery, in 2010 at the University of Chester, UK. These previous appointments have given Mary valuable experience to enable her to mentor and support both undergraduate and post-graduate students whilst undertaking their studies.

Mary is interested in a wide remit of midwifery and family health issues. Her wide remit of interests has led her to undertake several service development projects and research studies in developing and developed countries, with the overall aim to improve the care and services for women, babies and families. Mary's has received several awards for clinical innovation, original research and outstanding services to midwifery. She is a well-recognised international midwifery researcher and prolific writer who has experience in mixed methods.

Events, News & Information

North West Coast Research and Innovation Awards 2020

The Westminster Centre for Research in Veterans were proud to attend the North West Coast Research and Innovation Awards ceremony on 28th February 2020 at the Park Royal Hotel in Warrington. We were nominated for the *The Ruth Young Award for Implementation*, for our project: *Finding the Forgotten: Motivating Military Veterans to Register with a Primary Healthcare Practice*. Unfortunately, we did not win on this occasion, but it was a pleasure to be there. There's always next year!



MOD Employer Recognition Scheme Silver Award

The University of Chester has received the Silver Award from the Ministry of Defence Employer Recognition Scheme for their support to Defence and the wider Armed Forces community.

The Employer Recognition Scheme was launched to reward employers who support Defence People objectives and encourage others to do the same. This includes employing serving and former members of the Armed Forces community, and demonstrating flexibility towards training and mobilisation commitments for Reservists and Cadet Force Adult Volunteers.

Johnny Mercer, Minister for Defence People and Veterans said: "The breadth and diversity of the winners this year shows how business support for the Armed Forces continues to grow no matter the sector, company size or location. I am grateful for the positive attitude and flexible policies these organisations have adapted towards the defence community, which is testament to the fantastic contribution our serving personnel, veterans and their families can make to any organisation. I am delighted that so many companies are supporting our people and that, through this scheme, we can give them the public recognition they deserve."

Jan Cox, Regional Employer Engagement Director at the North West of England and the Isle of Man Reserve Forces' and Cadets' Association (NW RFCA), said: "On behalf of the Ministry of Defence, we are honoured to be able to recognise the support and commitment given to the Armed Forces Covenant by employers in the region, through the Employer Recognition Scheme awards. Each recipient has demonstrated not only that they support the Covenant and the Armed Forces community, but also that they are prepared to support their Reservists, Service Leavers, Veterans and Cadet Force Adult Volunteers in the workplace. The experiences and skills gained through service in the regular forces, with the Reserve Forces, or with the Cadet Forces, equips people with valuable life skills – self-discipline, confidence, communication, teamwork and leadership – all of which are in demand by employers."

Current Grants

Evaluation of the NHS Veterans High Intensity Service (Southern England)

Solent NHS Trust has been successful in its bid to develop a Mental Health High Intensity Service (HIS) for Veterans across the South East Region. The HIS is a 22-month pathfinder programme under the leadership of NHSE to deliver an ambitious transformative support model for veterans. The Westminster Centre for Research in Veterans will be evaluating this programme.



Armed Forces Covenant Fund Trust. Veteran Educational Sessions

The Armed Forces Covenant Fund Trust have awarded a grant to develop our armed forces community educational sessions for undergraduate nurses. We're looking forward to developing our new E Learning project, incorporating new video and emerging technologies. Read the background information to this project here:

<https://www.sciencedirect.com/science/article/pii/S1471595319305785>



Where Are All The Veterans

Forces in Mind Trust has awarded us with a grant to conduct research to examine how an advertising campaign can motivate ex-Service personnel to register with Primary Health Care practices. Read more here:

<https://www1.chester.ac.uk/news/forces-mind-trust-awards-grant-university-chester-help-motivate?list=8442>



BMJ (Military Health) Special Issue

The Centre has the approval from the British Medical Journal (Military Health) for a veteran and their family's international special issue. BMJ (Military Health) is the most downloaded military journal and has the highest Impact Factor. This publication is scheduled for April 2021. This publication should include a Serious Stress protocol paper and an article on the evaluation of the Aged Veterans Fund.

International Webinar Series

The Westminster Centre for Research in Veterans is hosting a new series of research presentations. The Armed Forces Community Research international webinar series is free to all and registration is available [here](#). The sessions will take place every two months. The first was held on Thursday, 17 September 2020 with Professor Andy Bacon, the Lead for the NHS Policy and Strategy Armed Forces Health, followed by Lieutenant Colonel Debra Ritsperis, the Lead Nurse for Education, Research and Clinical Development at Army Headquarters. The webinar was well attended and engaging. The next series was held on the 13th of November 2020 with two USA speakers: Professor Susan Sheehy from Delaware University, who discussed which type of questions a clinician should ask to determine if a patient is a veteran. This was followed by Professor Alicia Rossier from the University of South Florida in Tampa who presented an overview of the stressors in military families and the related required support. The next Webinar will take place at 1600h on Thur 14 January 2021 and will feature Brigadier Professor Robin Simpson from the Royal College of General Practitioners and Professor Matt Kiernan from the University of Northumbria.

We encourage grant holders to share the E-Bulletins with delivery partners, participants and interested parties. We will continue to include portfolios of the Centre staff and hopefully this can reassure participants of the military background of the Chester academic team.

Useful links

<https://www1.chester.ac.uk/westminster-centre-research-and-innovation-veterans-wellbeing>

<https://www.covenantfund.org.uk/>

Publications (2020)

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Finnegan, AP & Aitkenhead, S (2020). A Research Portfolio: Transformational change by nursing, midwifery and care staff across health and care. *Journal of Advanced Nursing*. 76, 7,8 doi: 10.1111/jan.14228.