

## **Manchester Health and Wellbeing Board Report for Resolution**

**Report to:** Manchester Health and Wellbeing Board - 5 June 2024

**Subject:** Armed Forces Community JSNA Update

**Report of:** Strategic Director of Children and Education Services

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### **Summary**

This Joint Strategic Needs Assessment (JSNA) provides a summary of the evidence and data regarding the health of the armed forces community. It describes some of the health issues that may affect members of the armed forces community and what the data from the 2021 Census tells us about UK armed forces veterans living in Manchester.

It also describes what Manchester City Council and other organisations working in the city are doing to support members of the armed forces community and their families as well as some of the opportunities for action that exist.

This report provides an update on new or updated content that has been added to the JSNA since it was originally presented to the Board in September 2023 and describes the progress of work to take forward the opportunities for further action described in the JSNA.

### **Recommendations**

The Board is asked to:

1. Note the new and updated content of the JSNA.
  2. Note the progress of work to take forward the opportunities for further action described in the JSNA.
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### **Wards Affected: All**

<b>Environmental Impact Assessment</b> - the impact of the issues addressed in this report on achieving the zero-carbon target for the city	
<b>Equality, Diversity and Inclusion</b> - the impact of the issues addressed in this report in meeting our Public Sector Equality Duty and broader equality commitments	

## Our Manchester Outcomes Framework

Manchester Strategy outcomes	Summary of how this report aligns to the OMS/Contribution to the Strategy
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	Members of the ex-Service community and their families are also at greater risk of financial and debt-related problems linked to poorer access to suitable employment opportunities.
A highly skilled city: world class and home-grown talent sustaining the city's economic success	Members of the ex-Service community are more than twice as likely than the general population to receive sickness or disability benefits, contributing to the high levels of ill-health related economic inactivity in the city.
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	Members of the ex-Service community are more likely than the general population to report health conditions that limit their daily activity. Work to addressing these disparities will contribute to strategies to tackle health inequalities in the city.
A liveable and low carbon city: a destination of choice to live, visit, work	
A connected city: world class infrastructure and connectivity to drive growth	

### Contact Officers:

Name: Paul Marshall  
 Position: Deputy Chief Executive  
 Telephone: 0161 234 3804  
 E-mail: paul.marshall@manchester.gov.uk

Name: Neil Bendel  
 Position: Public Health Specialist (Health Intelligence)  
 Telephone: 0161 234 4089  
 E-mail: neil.bendel@manchester.gov.uk

Name: Alfie Hewitt  
 Position: Armed Forces Specialist, Equality, Diversity and Inclusion Team  
 Telephone: 0161 219 2836  
 E-mail: alfie.hewitt@manchester.gov.uk

**Background documents (available for public inspection):**

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy, please contact one of the contact officers above.

Manchester City Council. [Armed Forces Annual Report 2021/22](#)

## **1.0 Background**

- 1.1 The Local Government and Public Involvement in Health Act 2007 (as amended by the Health and Social Care Act 2012) states that every local authority must produce a Joint Strategic Needs Assessment (JSNA) describing the health needs of the population(s) within its area. Local Health and Wellbeing Boards are statutorily responsible for ensuring that a JSNA is published and that local partners have regard to the JSNA when planning health and care services for the populations they are responsible for.
- 1.2 This Armed Forces Community JSNA is designed to:
- provide a summary of the evidence and data regarding the health issues that may affect members of the armed forces community.
  - summarise what the data from the 2021 Census tells us about UK armed forces veterans living in Manchester.
  - describe what Manchester City Council and other organisations working in the city are doing to support members of the armed forces community and their families.
  - outline some of the opportunities for action that exist to address the health and care issues that affect the armed forces community in Manchester.
- 1.3 The first version of the JSNA was presented to, and approved by, the Health and Wellbeing Board on 20 September 2023. This report provides the Board with an update on new or updated content that has been added to the JSNA and describes the progress of work to take forward the opportunities for further action described in the JSNA.

## **2.0 Update on content of the Armed Forces Community JSNA**

- 2.1 The JSNA was always intended to be a ‘live ‘document and, to that end, it has continued to be updated with new or more timely evidence and data relating to the armed forces community in Manchester.

### Suicides in UK armed forces veterans

- 2.2 In April 2024, ONS published data on suicide rates among UK armed forces veterans in England and Wales based on death registration records linked to Census 2021 and the Ministry of Defence (MOD) Service Leavers Database (SLD). This showed that, after accounting for age, there was no evidence of a difference in the rate of suicide between male UK armed forces veterans and the male general population. However, male armed forces veterans aged 25 to 44 had a higher rate of suicide compared with males of this same age group in the general population.
- 2.3 These findings are consistent with the research undertaken by the University of Manchester which found that the overall rate of suicide in veterans was slightly lower than in the general population. This research also identified some factors which increased suicide risk in veterans, including being male,

having served for less than 10 years, being discharged from the military before the age of 35 years and being untrained. There were also some factors which appeared protective, including being married and being of a higher rank. Serving in a conflict also appeared to reduce suicide risk.

- 2.4 The University of Manchester also found that a quarter of veterans who died by suicide had been in contact with specialist NHS mental health services in the 12 months before death. However, the rate of contact with these services was lowest in the age-group most at risk (veterans under the age of 25).

#### Children of parents serving in the regular armed forces

- 2.5 State schools, academies and free schools in England can receive extra funding to support children and young people with parents in the armed forces. This is known as the Service Pupil Premium (SPP). Pupils attract the SPP if one of their parents is serving in the regular armed forces or is on full commitment as part of the full-time reserve, one of their parents died whilst serving in the armed forces and the pupil receives a pension under the Armed Forces Compensation Scheme or the War Pensions Scheme or they have been registered as a 'service child' on the school census at any point since 2016.
- 2.6 Data to inform a school's eligibility for the SPP is collected as part of the school census. Based on the January 2023 school census, there are 89 pupils attending Manchester schools who receive the 'Service Child' element of pupil premium (PP). This is equivalent to 0.1% of the pupil population. The number of service children has remained stable since 2015/16, ranging between 62 and 106 (0.08% - 0.12% of the total school population) each year.
- 2.7 Less than a quarter (24.7%) of service children are eligible to receive free school meals, compared to 42.8% of the general Manchester school population. The proportion of service children with a SEND (17.9%) is similar to the level seen in the general population (19.6%). The proportion of service children with English as an Additional Language (6.7%) is significantly lower than the general population (43.6%). Service children are predominantly White British (68.5%), in contrast to the general school population (38.5%)

#### Veteran friendly GP practices programme

- 2.8 The Royal College of General Practitioners (RCGP) are working with NHS England to accredit GP practices as 'veteran friendly'. The veteran-friendly GP programme supports GP practices to deliver the best possible care and treatment for patients who have served in the armed forces.
- 2.9 As of 31 March 2024, 33 out of the 83 GP practices in Manchester are accredited with the RCGP veteran friendly GP practices programme (39.8%). This means that just under 282,500 patients are registered with a RCGP accredited veteran friendly GP practice, which is equivalent to 38.3% of patients registered with a GP practice in Manchester. Overall, 13 out of the 14

Primary Care Networks (PCNs) in Manchester have at least 1 accredited GP practice.

### **3.0 Progress update on work in respect of armed forces community in Manchester**

- 3.1 In response to the JSNA data, work has been done to promote and aid GP practices attain the GP veteran friendly accreditation and raise the profile of the veteran community and their support needs. The Armed Forces and Engagement lead will continue to work with primary care to further increase the number of accredited practices in Manchester.
- 3.2 Evidence reviews into the needs and experiences of LGBTQ+, ethnic minority, female and commonwealth veterans have been completed in order to provide a us with a better understanding of the communities that make up the armed forces community. This evidence will help to ensure that the work of Manchester City Council and its partners in respect of the armed forces community is inclusive, and that all veterans can benefit from the Covenant and other related work tackling veteran health inequalities.
- 3.3 Key findings from these evidence reviews are given below. Copies of the completed evidence reviews with full references to the source materials are available on request.

#### Female veterans

- Less than 33% of female veterans identify with the term “veteran”.
- The Confederation of Service Charities (COBESO) attribute the higher levels of suicide of older female veterans to the historical ban on pregnancy and "homosexuality".
- Infertility rates and menstrual disorders are shown to increase in parallel with the number and length of deployments.
- Women in the British Army have been found to be seven times more likely than men to suffer from musculoskeletal injuries and are ten times more likely than men to suffer from hip and pelvic stress fractures.

#### Ethnic Minority veterans

- Ethnic Minority personnel report poorer health than white British personnel and sometimes fear criticism from their community on disclosure of traumatic experiences.
- Compared with the UK veteran population as a whole, ethnic minority veterans are disproportionately higher users of NHS veteran-specific mental health services when compared to white British veterans in all categories, but particularly services that fall under [Op Courage: the NHS Veterans Mental Health and Wellbeing Service](#).

- Research indicates that veterans from ethnic minority communities are less likely to be offered treatment for mental health conditions. This may be explained by the fact health-care provision is not always culturally appropriate and based on evidence from Western culture, and therefore clinicians' understanding of mental health conditions. *Source: Experiences of ethnic minority personnel in the armed forces: A systematic review - Journal of Military, Veteran and Family Health 9 (1) 2023*

### Commonwealth veterans

- Veterans from commonwealth countries experience different barriers to mental health treatment compared with veterans from non-commonwealth countries.
- Commonwealth veterans reported barriers to accessing treatment that suggested experiences of racism and discrimination in the civilian health service and in the UK Armed Forces.
- Commonwealth veterans are underrepresented in research and results are skewed toward veterans from white British backgrounds.

3.4 The Manchester Armed Forces Community JSNA has been shared on request with a number of armed forces leads in other parts of the country via the FutureNHS Collaboration Platform and potential partnerships are starting to emerge through this route.

## **4.0 Recommendations**

4.1 The Board is asked to:

- Note the new and updated content of the JSNA.
- Note the progress of work to take forward the opportunities for further action described in the JSNA.