



Welsh Government consultation:

“Improving access to substance misuse treatment for veterans”

Response of The Royal British Legion

About The Royal British Legion

The Royal British Legion (the Legion) safeguards the welfare, interests and memory of those who are serving or have served in the Armed Forces. We are one of the UK's largest membership organisations and are recognised as the custodian of Remembrance. The Legion is the largest welfare provider in the Armed Forces and veterans charity sector. We provide financial, social and emotional support to millions of Service personnel and veterans, as well as their dependants. In 2011/12, we spent, on average, £1.6m per week on our health and welfare work. For further information, please visit www.britishlegion.org.uk.

Introduction

The Royal British Legion welcomes this opportunity to feed into the Welsh Government's efforts to improve veterans' access to substance misuse treatment. Whilst there is no evidence that veterans in Wales abuse drugs or alcohol at a higher rate than the general population, those who do fall into this category may face specific barriers to accessing care services.¹

In order to ensure that the views of veterans themselves were accounted for within this response, the Legion consulted members of the Pontypridd Veteran Support Group on Thursday 8 August. Their responses have been fed anonymously into this document. The Legion is grateful for their input into this response.

Consultation questions

“There are proposed actions within the document. Are there any other actions we should be taking to improve access to substance misuse treatment services for veterans?”

Statutory services

Substance misuse services for veterans should be integrated into statutory services, but with an understanding of veterans' needs. In some cases, veterans may require treatment from specialist practitioners (e.g. those trained in trauma-focused cognitive behavioural therapy - CBT) rather than generalised IAPT therapists. The Welsh Government should work with local Health Boards to ensure that these services are available to veterans throughout Wales.

Furthermore, veterans suffering from comorbid substance misuse and mental health problems such as post traumatic stress disorder (PTSD) should be able to access a smooth pathway from detox and other substance misuse services to specialist mental health treatment. This would lead to fewer patients becoming trapped in a cycle of repeated relapses from detox whilst awaiting access to mental health treatment to address their underlying problems.

In general, the Veterans' Support Group's members ('the members'), including veterans, their partners and their parents, were unclear on where they should go to access help and support in relation to substance misuse. They felt that the NHS was the main provider, but did not speak highly of local statutory services.

The members appeared to be better informed in relation to where they should go to access mental health support. References were made to Combat Stress and the All Wales Veterans' Health and Wellbeing Service (AWVHWS); although, in this specific geographical area, the departure from post of the veterans' therapist within the Local Health Board was a key concern.

The Legion have previously made representations to Welsh Government regarding the funding of the AWVHWS, and expressed concern that funding levels appear to have remained static (£485,000 annually) since 2010. To ensure the mental health needs of this vulnerable client group continue to be met in all areas, the Legion would urge Welsh Government to examine funding and increase capacity of the service where possible. The Legion and partners in Wales have also highlighted to Welsh Government Ministers and officials the need to improve the promotion and publicity around the AWVHWS pathway and hope to see significant action in this regard.

Some support group members had turned to voluntary sector mental health providers falling outside of the AWVHWS pathway, which provide interventions such as neuro-linguistic programming and life coaching, aimed at addressing PTSD symptoms. There is not yet any evidence that these interventions are effective in treating PTSD. Whenever possible, veterans with mental health or substance misuse problems should be strongly encouraged to access NHS services, or those services recognised as providing effective, evidence-based treatment.

Finally, the consultation paper focuses strongly on PTSD – rightly pointing out that substance misuse workers need to be familiar with NICE guidelines on PTSD, and recommending a clearly documented process for managing veterans with PTSD. Whilst the Legion welcomes this important recognition of the significance of this illness, which can have a devastating effect on its sufferers, we would urge the Welsh Government to pay equal attention to more common mental health problems, such as anxiety and depression. These also commonly appear in veterans presenting with substance misuse issues, and sufferers may experience greater stigma than those diagnosed with PTSD; perhaps due to the less obvious (and possibly non-existent) link between their Service experiences and their mental illness.

Training

Veterans should be encouraged to look forward and plan for a healthy and productive future on 'civvy street'. Nevertheless, a treatment provider's understanding and awareness of a veteran's Service experiences can make the difference between engagement in and attrition from services. It can also assist providers with identifying any Service-related mental health problems that might lie behind a veteran's substance misuse.

The Support Group members endorsed this view, emphasising repeatedly that it was vital for those involved in treating veterans to have some understanding of their Service experiences. This did not necessarily mean that the clinician or therapist should be a veteran; just that they should express empathy and demonstrate an understanding of how a client's military experiences might be impacting on their mental health and their substance misuse behaviours. Armed Forces Community Covenants, which local authorities continue to sign up to across Wales and the rest of the UK, should be used a vehicle to improve awareness of

the needs of the Armed Forces community amongst service providers, with a particular focus on front-line staff.

The Legion has worked with the Royal College of GPs to produce an e-learning package on veterans' health needs, and would encourage all treatment providers, whether in primary or secondary care; NHS or the third sector; to ensure that their staff receive specific training on caring for veterans. We would endorse veteran-specific pathways for substance misuse, along the lines of the mental health pathway led by the All Wales Veterans Health and Wellbeing Service (AWVHWS). Local Health Boards should also ensure that GPs and other professionals are aware of these pathways, and of other services for veterans, e.g. via posters, staff circulars and formal training.

Information and sign-posting

The consultation document rightly identifies how important it is for GPs to identify veterans amongst their patients, in order to signpost them to the most appropriate secondary services and assist them in picking up on any Service-related medical conditions.

The Support Group members agreed that posters in GP surgeries (encouraging patients to inform their GP if they have served in the Armed Forces) were helpful, but pointed out that many veterans – especially the younger cohort who have Served in Iraq and Afghanistan – rarely or never visit the GP. They may need to be encouraged to access services through different routes, or to register with a GP surgery in the first place. This younger group are also much less likely to use British Legion clubs, for which the consultation paper proposes developing posters.

The members thus recommended reaching out to this group via other settings, such as supermarkets and hairdressing salons. This would also encourage family members to seek help on behalf of veterans in need of specialist services.

Greater use should also be made of social media websites such as Facebook to communicate with hard-to-reach subgroups of veterans. If financially viable, the Welsh Government should consider invested in targeted advertisements online and in local media outlets, in order to promote local veterans' services to those not currently accessing them.

“Appendix 1 provides details of a range of resources available to veterans, some of which are not available to the general population resident in Wales. Are there any other resources we should include?”

As noted above, hard-to-reach groups of veterans, who may not present to primary or secondary care services until they reach crisis point, may be more likely to access online resources.

The Big White Wall (BWW) offers confidential peer support, self-help guides, networking and live online therapy for mental health problems, including substance misuse, depression, anxiety and PTSD. Users can access all of this online, 24/7, from the comfort of their own home. An independent review found that:

- 75 per cent of members talked about an issue for the first time on BWW
- 80 per cent self-managed their psychological distress, and
- 95 per cent reported one or more improvements in wellbeing.

Some users also found BWW to be a useful first step towards more intensive interventions.

The Big White Wall is available free to all Service personnel, veterans and their family members across the UK. The Welsh Government should consider possible steps to examine regional take-up and encourage more veterans to utilise this valuable service. Usage figures suggest that the Big White Wall is currently under-used by Wales-based personnel, veterans and families. As a proportion of total users, the latest figures suggest that they account for:

- Three per cent of veteran users
- Three per cent of Service personnel, and
- Four per cent of families.

“Are there any other actions we should be taking to improve the identification of veterans in primary care?”

As outlined below, it is vital that the Welsh Government – and local Health Boards – support the needs of carers of veterans with substance misuse problems and other mental health needs. Such individuals can also serve as a route to support and treatment for the veterans themselves. If partners, family members and other carers are unsure of where to seek help, the likelihood of the veteran reaching these services is further diminished.

The Legion recommends that the Welsh Government considers ways of communicating with carers, including the methods recommended above in relation to veterans (e.g. social media, posters in supermarkets and GP surgeries etc). A simple message such as “Are you worried about someone who has Served in the Armed Forces?”, along with contact details for the AWWHWS, Combat Stress and other services, could prompt referrals from concerned family members.

“We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use the space to report them:”

Asides from the case studies, the consultation document makes no mention of the needs of partners, family members or other carers of veterans. This was a key concern of the Support Group members, with partners and parents of the veterans describing their perception that they had been “fobbed off” by statutory services.

These members expressed a strong need for “someone to talk to”, whether one-to-one or via a support group. The Legion urges the Welsh Government, local Health Boards and local authorities in Wales to consider possible steps to support family members and carers of veterans with substance misuse problems (and other mental health problems), including the establishment of a specific support group, or an additional support worker, attached to the local authority therapist, to support them on one-to-one basis.

Summary of key recommendations

- Substance misuse services for veterans should be integrated into statutory services, but with an understanding of veterans’ needs.
- Veterans suffering from comorbid substance misuse and mental health problems such as PTSD should be able to access a smooth pathway from detox and other substance misuse services to specialist mental health treatment (e.g. trauma-focused CBT).
- Despite the significance of PTSD, we would urge the Welsh Government to pay equal attention to more common comorbid mental health problems, such as anxiety and depression.

- All treatment providers, whether primary or secondary care; NHS or third sector; should ensure that their staff receive specific training on caring for veterans. The Community Covenant scheme also provides an opportunity for local authority staff, housing associations and other local providers to increase their awareness of veterans' issues. The Legion is currently actively delivering such training across Wales.
- Local Health Boards should also ensure that GPs and other professionals are aware of any veteran-specific pathways, and of other services for veterans, e.g. via posters, staff circulars and formal training.
- The Welsh Government and local Health Boards should consider alternative methods of communication with hard-to-reach veterans and their families/carers e.g. posters in supermarkets and hairdressing salons; targeted advertisements online and in local media outlets.
- The Welsh Government should consider possible steps to examine regional take-up of the Big White Wall and encourage more veterans to utilise this service.
- The Welsh Government, local authorities and local Health Boards are urged to consider possible steps to support family members and carers of veterans with substance misuse problems (and other mental health problems).

Contact Information

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¹ Iverson et al (2011). The stigma of mental health problems and other barriers to care in the UK Armed Forces. *BMC Health Services Research*, 11: 31