Sanctions, support & service leavers: social security benefits and transitions from military to civilian life

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Sanctions, Support & Service Leavers

Social security benefits and transitions from military to civilian life

Final report

Lisa Scullion, Peter Dwyer, Katy Jones, Philip Martin and Celia Hynes

June 2019
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We would like to thank our Project Advisory Group for their guidance throughout the project: Dr Alan Barrett (Military Veterans’ Service); Col (Retd) Professor Alan Finnegan (University of Chester); Major Neil Lewis (Covenant Team, MoD); Lt Col John Lighten (The Duke of Lancaster’s Regiment); Andy McAtee (University of Salford); Andy Pike (RBL); Rob Powell (Covenant Team, MoD); Jennifer Stone (CMVES).

We are also grateful to the Department for Work and Pensions (DWP) for fact-checking the report and for giving us access to some of their Armed Forces Champions and the DWP Armed Forces Covenant Team.

We would like to thank Robert Shadbolt from the School of Arts and Media at the University of Salford, with special thanks to our illustrators Isabel Dane and Dylan Worthington. We are also grateful to Damian Cross and Dr Graeme Sheriff for their support with the production of the report and graphic novel.

Particular thanks go to all the veterans and their families who found the time to talk to us about their experiences. It is hoped that this report is able to accurately reflect their views.

This report is based on research undertaken by the study team, and the analysis and comment thereafter do not necessarily reflect the views and opinions of the Forces in Mind Trust (FiMT) or any participating stakeholders and agencies. The authors take responsibility for any inaccuracies or omissions in the report.
Foreword

Depending on who you ask, the answer to “how would you rate the military’s approach to preparing for civilian life?” is likely to fall somewhere between fantastic and awful, with most being in the “could do better” category. Once again, we’re publishing a report that calls for better information for those leaving the military, the removal of disadvantage in public sector delivery, and a deeper understanding by front-line staff of the unique challenges facing former serving members of the Armed Forces.

And all before the subject of the report has even been mentioned.

This research project, so passionately, thoroughly and professionally conducted, shines a light on an area that is rarely visited, and barely ever mentioned during military service. Somehow, preparing for transition into civilian life by discussing the benefits system would be seen as preparing to fail. Yet we as a nation should be proud that we help large swathes of society with social security to help overcome the disadvantage that birth and circumstance can bring. At the very least those leaving the Armed Forces should not be disadvantaged because they lack the understanding (and probably experience) of navigating around this complex and unfamiliar landscape. We need to find ways of making sure that those most likely to need benefits are properly educated about the system. Perhaps the solution does indeed lie with the new Veterans’ Gateway or Defence Transition Services. A lot has changed during the conduct of this project, much of it aimed at helping the most vulnerable. Inculcating the idea of taking personal responsibility for your own successful transition is critical, but so is the public sector meeting its obligation to inform and to guide.

Naturally there are areas closer to the front line that could be improved through practical changes – such as making sure that assessments are conducted fairly, taking into account the unique challenges faced by the ex-Service person, and more so when mental or physical ill health feature. It would be easy simply to throw stones at the Department for Work and Pensions; this would be both unhelpful and unfair. Many within the Department work tirelessly to help those most vulnerable, and some excellent progress in supporting the ex-Service community has been made. But there is plenty more to do to overcome regional variations and a lack of understanding in front-line delivery.

Let us also not avert our gaze from the twin challenges of continued austerity, manifest in reduced public services (whatever the Chancellor might say) and the introduction of a modern benefits system that strives to meet the needs of those who are amongst the hardest to help in our society. Whilst these may not be specifically aimed at the former soldier or sailor, airman or airwoman, they likely heighten the vulnerability and magnify the disadvantage that those in need will feel.

The role of Forces in Mind Trust is to support the Armed Forces community, and particularly those and their families who have left Service. This is exactly the same role as (in part) that of the public sector. We discharge our responsibilities by commissioning independent and authoritative evidence resulting in recommendations for positive change. The responsibility for delivering that change, and for overcoming the disadvantage that this report clearly demonstrates ex-Service personnel suffer in the benefits system, lies elsewhere. It lies with Government, and we call upon those Departments of State identified in this credible report to take the necessary action and so deliver the pledge the whole of Government has made that our Armed Forces community will be treated fairly.

Air Vice-Marshall Ray Lock CBE,
Chief Executive, Forces in Mind Trust
## Glossary of terms

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<th>Term</th>
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<tr>
<td><strong>Armed Forces Covenant</strong></td>
<td>Published in 2011, the Armed Forces Covenant is a ‘promise by the nation ensuring that those who serve or who have served in the armed forces, and their families, are treated fairly’. The Covenant states that members of the Armed Forces community should face no disadvantage in comparison with 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.</td>
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<td><strong>Armed Forces Independence Payment (AFIP)</strong></td>
<td>Introduced in 2013 by the Ministry of Defence (MoD) in conjunction with the Department for Work and Pensions (DWP), AFIP is designed to provide financial support to Service personnel and veterans seriously injured as a result of Service to contribute towards the extra costs they may have as a result of their injury. To be eligible, Service personnel and veterans have to be entitled to a Guaranteed Income Payment (GIP) of 50% or higher through the Armed Forces Compensation Scheme. Service personnel whose GIP entitlement is less than 50% can apply for Personal Independence Payment (PIP: see below). In contrast to PIP, individuals eligible for AFIP are not required to undergo an initial, or any future, functional assessment, and payments continue throughout their life.</td>
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<td><strong>Career Transition Partnership (CTP)</strong></td>
<td>The CTP is the resettlement support service that assists the transition of those leaving the Armed Forces into the civilian labour market, with support including advice and guidance, vocational training and a range of employer brokerage activities.</td>
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<td><strong>Claimant Commitment</strong></td>
<td>The Claimant Commitment is a document that is required to be accepted as a condition of entitlement to Universal Credit (UC). People’s work-related responsibilities are recorded in one place, clarifying both what they are expected to do in return for benefits and support and what happens if they fail to comply (i.e. the application of a benefit sanction). Any work-related requirements detailed in the Claimant Commitment should be tailored to an individual’s needs, capabilities, experience and circumstances, making them realistic and achievable.</td>
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<td><strong>Department for Work and Pensions (DWP)</strong></td>
<td>The DWP is the government department responsible for welfare and pension policy.</td>
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<td><strong>Early Service leavers (ESLs)</strong></td>
<td>Those who have completed less than four years’ Service or are compulsorily discharged.</td>
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<td><strong>Employment and Support Allowance (ESA)</strong></td>
<td>Introduced in 2008, ESA replaced Incapacity Benefit and Income Support for those who are ill or disabled. Following the application of a Work Capability Assessment (WCA: see below), those determined as ‘fit for work’ are not entitled to claim ESA but can claim Jobseeker’s Allowance (JSA) (or UC if they live in a UC area) and will be subject to conditionality appropriate to those benefits. Those assessed as having ‘limited capability for work’, but deemed likely to become capable of work, are placed in the Work Related Activity Group (WRAG) and must undertake mandatory steps to prepare for paid work in the future. Failure to undertake personalised work-related activity as specified in the claimant’s action plan may result in the application of benefit sanctions. Individuals assessed as having ‘limited capability for work and limited capability for work-related activity’ due to their levels of impairment are placed in the Support Group (SG) and exempted from any work search and preparation requirements. Income-based ESA is currently being phased out and replaced by UC (see below).</td>
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<td><strong>Jobcentre Plus (JCP)</strong></td>
<td>Established in 2002 when the Employment Service and the Benefits Agency were amalgamated, JCP is the government-funded employment agency tasked with helping working-age people find paid employment and delivering social security benefits. It is a part of the DWP.</td>
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**Jobseeker's Allowance (JSA)**

JSA can be paid to claimants who are unemployed and looking for full-time work. It is available for men and women aged 18 or older but below State Pension age. There are some exceptions for individuals aged 16 and 17. Recipients must have entered into a Jobseeker’s Agreement and must be capable of, and available for, work as an employee or as self-employed. Recipients must also be actively seeking work (i.e. taking such steps as they can reasonably be expected to take in order to have the best prospects of securing employment). There are two types of JSA: (1) JSA (contribution-based) (JSA(C)). This is a personal benefit paid at a flat rate to those who have paid or been credited with sufficient National Insurance (NI) contributions in the last two full tax years before the benefit year in which they make their claim. It is payable regardless of the amount of any savings or investments held, but the amount payable can be reduced by part-time earnings and occupational or private pensions. (2) JSA (income-based) (JSA(IB)). This is paid to those whose income and capital (including those of any partner) are below a certain amount. Where appropriate, entitlement to JSA(IB) can arise irrespective of how much (if anything) the claimant has paid by way of NI contributions, and thus a claimant who is entitled to JSA(C) may be entitled to JSA(IB) at the same time. To be entitled to JSA, a person must not be engaged in remunerative work, i.e. working for more than 16 hours a week on average. JSA is currently being phased out and replaced by UC (see below).

**Personal Independence Payment (PIP)**

PIP replaced Disability Living Allowance for people with a disability who are aged 16 to 64. PIP is designed to contribute towards some of the extra costs associated with living with a long-term health condition or disability.

**Post-traumatic stress disorder (PTSD)**

PTSD is a trauma- and stress-related disorder caused by stressful, frightening or distressing events. PTSD can develop immediately after someone experiences a disturbing event or can occur weeks, months or even years later.

**Universal Credit (UC)**

Initially introduced in 2013, UC replaces four of the existing means-tested social security benefits and the two tax credits for working-age people (Income Support, JSA(IB), income-related ESA, Housing Benefit, Child Tax Credit and Working Tax Credit). The rollout of UC is currently ongoing, and new claims for these benefits or credits will end nationally from February 2019. The remaining claimants still receiving these benefits or tax credits will be moved over to UC in a process managed by the DWP. This managed migration of claimants will take place between July 2019 and December 2023. Claimants on UC with a health condition or disability will have their requirements tailored to meet their capabilities. Claimants on UC with health conditions or disabilities may also be subject to the WCA (see below) to determine their required level of support and engagement.

**Universal Jobmatch**

Universal Jobmatch was the website that benefit claimants could use to find job vacancies. It enabled the DWP to monitor a person’s job search activities if the individual claimant granted their Work Coach/advisor access to their personal Universal Jobmatch account. In May 2018 Universal Jobmatch was replaced by the ‘Find a job’ website.

**Veteran**

Anyone who has served for at least one day in Her Majesty’s Armed Forces (Regular or Reserve) or Merchant Mariners who have seen duty on legally defined military operations.

**Work Capability Assessment (WCA)**

The WCA is the test used to determine eligibility for ESA and UC. The WCA assesses how a person’s health condition or disability affects their ability to complete a range of functional activities and has three potential outcomes. Claimants are classified as either ‘fit for work’, having ‘limited capability for work’ but deemed likely to become capable of work in the future, or having ‘limited capability for work and limited capability for work-related activity’. These classifications determine both the amount of benefits received and the conditions attached to them.

**Work Programme/ Work and Health Programme**

Delivered mainly by private companies (with some limited public and third-sector involvement), the Work Programme (2011–2017) provided compulsory training, back-to-work and job sustainment support for longer-term recipients of JSA, ESA and UC. The Work Programme has now been replaced by its successor the Work and Health Programme. The Work and Health Programme was launched throughout England and Wales on a rolling basis between November 2017 and April 2018.
Executive summary

This report presents the final findings of a project funded by the Forces in Mind Trust called Sanctions, Support and Service Leavers: Welfare conditionality and transitions from military to civilian life. This project represents the first substantive qualitative research in the UK to focus specifically on the experiences of veterans within the social security benefits system. Central to our project was the desire to establish an original evidence base to inform policy and practice in relation to veterans and their families who are trying to navigate the benefits system.

Methods and sample

The research was delivered through two methods: two waves of repeat qualitative longitudinal interviews with veterans and their families who were claiming social security benefits, and consultations with key national, regional and local policy and practice stakeholders.

Qualitative longitudinal interviews with veterans and their families

A total of 120 in-depth interviews were undertaken: 68 at Wave A and 52 at Wave B, which represented a retention rate of 76%. The two waves of interviews took place between June 2017 and January 2019.

The veterans were a diverse cohort. The sample was a mix of those claiming Employment and Support Allowance, Jobseeker’s Allowance and Universal Credit (UC). The majority of the respondents were male (66), with two female veterans included in the sample. The sample ranged in age from 18 to 65, and the majority had served in the Army (61). With regard to their length of time in the Armed Forces, 13 had served less than four years (i.e. early Service leavers); 33 respondents had served between four and 10 years; and 22 had served over 10 years. The majority of the respondents (51) had left the Armed Forces over 10 years previously, demonstrating the longer-term nature of transition and how for some people issues can occur many years (or even decades) post-Service. With regard to health, 59 people indicated that they had a mental health impairment, and 37 people indicated that they had a physical health impairment; 51 respondents attributed their health impairments to their Service in the Armed Forces. In addition to speaking to veterans, we interviewed a small number of spouses (six at Wave A; five at Wave B), who were often the primary carers for their partners.

Consultation with policy and practice stakeholders

The interviews with veterans and spouses were supplemented with insights from a range of policy-maker and practitioner stakeholders. This included 20 interviews with representatives from a diverse range of statutory and third-sector organisations and three focus groups with Department for Work and Pensions (DWP) Armed Forces Champions (AFCs) and ‘leads’ (15 DWP participants in total).

Findings and recommendations

A need to ensure information on social security benefits is provided with resettlement information

Overwhelmingly, veterans found the social security system complex and difficult to navigate, with the ongoing rollout of UC adding a further layer of complexity. People routinely struggled to comprehend the benefits that may be available, the contemporary conditions attached to continued eligibility, and how to apply for and manage their ongoing claims. For many, it was the first time they had interacted with the social security system since leaving the Armed Forces, or their prior experience had been many years (or even decades) previously, when a different system had been in operation. It was evident that information about the social security system and their eligibility for benefits was largely absent from the information provided during transition.

Recommendation: for the Ministry of Defence (MoD) and DWP to work collaboratively to ensure that guidance on the UK social security system that clearly sets out eligibility and how to apply, but also an individual’s responsibilities, is included as a routine part of the resettlement support provided to those leaving the Armed Forces.

It is important to acknowledge that at the point of exiting the Armed Forces some respondents were not interested in the transitional information that was provided or were selective about the take-up of resettlement support. This
suggests that the provision of social security information needs to be done in such a way as to engender an understanding that, although it may not seem immediately relevant, the benefits system is a support system that may become relevant to veterans or their families in the future. Following the publication of our interim findings in April 2018, the MoD committed to working closely with the DWP around the provision of information, including DWP staff undertaking awareness sessions on MoD bases. This is a collaborative approach that we would endorse, and we believe that this should be rolled out on a consistent basis.

A need to ensure appropriate support for veterans at the point of disclosure

The majority of our respondents had disclosed their status as a member of the Armed Forces community. Overall, there were significant differences in the responses of Jobcentre Plus (JCP) Work Coaches/advisors to this disclosure, although the majority of veterans felt that it made little difference to the support that was subsequently provided.

**Recommendation:** for the DWP to ensure that Armed Forces background is consistently recorded by Work Coaches to ensure appropriate tracking of the needs of individual veterans and their progress through the system.

The majority of the support that veterans were receiving often came from outside the DWP (i.e. Armed Forces charities, other third-sector organisations, housing providers, etc.). This support was sometimes employment-related but also focused on wider issues ranging from health to housing. Hence, the DWP has an important role to play in ensuring the signposting of veterans to relevant local and national agencies that can provide specialist support.

**Recommendation:** for the DWP to ensure consistency in signposting veterans to organisations that can provide support with transition issues, including the translation of military skills and qualifications to the civilian labour market and also broader issues relating to health, housing, etc.

However, more needs to be done to encourage the disclosure of people’s Armed Forces background or any other issues that may affect people’s ability to manage their ongoing social security claim. Without this disclosure, they may not get the support that is available.

A need to ensure appropriate support in the assessment of capability for work

Across our sample, physical and/or mental impairment was a significant factor affecting the ability of people to sustain paid work. As a result, a large proportion of respondents had undergone a Work Capability Assessment or another form of assessment (e.g. for Personal Independence Payment). Their experiences of these assessments were overwhelmingly negative, with significant concerns about the ability of the process and those undertaking the assessments to appropriately consider the specific mental and physical health impairments that may result from Service in the Armed Forces.

**Recommendation:** for the DWP to urgently review the assessment process applied to those claiming working-age incapacity benefits to ensure that assessors are suitably qualified to assess the specific mental and physical health issues related to Service in the Armed Forces.

Furthermore, concerns were raised that Service medical records and other relevant supporting medical information were not routinely being included within the benefit-related assessment processes. This omission was often only rectified when a third party, such as a GP or Armed Forces charity, advocated on behalf of a claimant when appealing against an assessment that had deemed them ‘fit for work’.

**Recommendation:** for the DWP to ensure that Service medical records and other relevant supporting medical information are consistently included within any work capability or impairment assessment process.

A need to ensure consistency in the support provided to veterans

There were significant variations in the support provided to veterans within the social security system. These variations appeared to be manifested in two key ways: geographical variations, in that the support provided in one area was vastly different from that experienced in another location, and variations within Jobcentres, in that respondents could experience varying and inconsistent levels of support when interacting with more than one Work Coach or when allocated a new Work Coach.

Furthermore, as part of its commitment to the Armed Forces Covenant, the DWP has made a series of adjustments and easements to JCP services to support current and former Service personnel and their families. Although such commitments are welcome, there appeared to be differences in the understanding of JCP staff in relation to these adjustments and easements and also in relation to the issues that may have an impact on veterans as they transition to civilian life (e.g. mental and physical impairments, difficulties in translating qualifications and skills to the civilian labour market, etc.).

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The variations and inconsistencies in approaches and understanding were attributed to staff training and also the proximity to Garrisons. However, we believe that members of the Armed Forces community should be able to expect appropriate and consistent support within any Jobcentre.

**Recommendation:** for the DWP to ensure that all JCP staff are provided with guidance and/or training on the specific adjustments and easements applicable to the Armed Forces community and also, more broadly, around the mental and physical health impairments that may affect some veterans’ ability to engage in work-related activity.

**Recommendation:** that each Jobcentre should have at least one designated individual who takes a leading role in supporting the Armed Forces community in their interactions with the social security system.

The issue of variations also related to the support currently provided through the AFC network. Although good practice was evident, there were inconsistencies in relation to the delivery of the role and the degree to which different AFCs engaged with the role. Following the publication of our interim findings in April 2018, the DWP indicated a commitment to review the AFC role, which we would advocate, to ensure that those undertaking the role are provided with clear objectives, are committed to the role and are also appropriately resourced.

**Recommendation:** for the DWP to undertake a comprehensive review of the AFC role. This should include: reviewing the different models currently being used across the UK to map areas of good practice and identify areas requiring improvement; the development of a job description to ensure consistency in the delivery of the role; consistent training of AFCs; and a commitment to appropriately resource those undertaking the role.

**Recommendation:** for the DWP to ensure that the conditions set out in Claimant Commitments for veterans reflect their individual needs and capabilities, including appropriate consideration of mental and physical health issues relating to Service in the Armed Forces.

Respondents also raised a broader issue around wanting to be treated with dignity and respect during their interactions with JCP. It was evident that veterans were aware of the stigmatisation of benefit claimants and felt that such narratives can have an impact on how people are treated within the social security system. The application of sanctions is one element of this. It was evident that the application of benefit sanctions had profoundly negative consequences for the respondents in our sample and also that such sanctions had sometimes occurred as a result of difficulties in navigating the social security system or difficulties arising from ongoing mental health issues. We believe that there is a need for a widespread review of benefit sanctions to ensure that they are not applied to vulnerable people. We believe that this recommendation should apply to members of the Armed Forces community and is in line with the Armed Forces Covenant commitment of special consideration for those injured and bereaved.

**Recommendation:** for the DWP to review the sanctioning of members of the Armed Forces community to ensure that benefit sanctions are not applied to those experiencing mental and physical health impairments resulting from Service in the Armed Forces.

Finally, we need to recognise that the social security system is in a period of significant transition, with the ‘managed migration’ of claimants of legacy benefits to UC until December 2023. Over the duration of our fieldwork, a small number of respondents transitioned from legacy benefits to UC. It was evident that this transition had been problematic for those people, who reiterated widely acknowledged issues around the waiting period for the first payment and also highlighted issues around reductions in their benefit entitlements and new requirements to engage more regularly with JCP. However, a significant number of our respondents are still claiming legacy benefits and will eventually transition to UC. Respondents expressed concerns about what would happen when they moved to UC, including concerns around impacts on other benefits and War Pensions and their ability to manage variable monthly payments and a ‘digital by default’ system. Indeed, consultations with DWP AFCs and ‘leads’ suggested that some of the more ‘complex cases’ may experience difficulties with this change. Hence, more needs to be done to explain the implications of transitioning to UC and to support people through the managed migration process.

**Recommendation:** for the DWP to provide additional support to veterans as they transition from legacy benefits to UC. This support should be tailored and/or enhanced to reflect the unique circumstances of those who have served in the Armed Forces.

A need to ensure the provision of personalised support for veterans

Linking in with the issue of consistency of support, respondents were often critical of the mandatory support provided by JCP. Good practice was evident; however, on the whole, the support was seen as generic and focused more on compliance than on sustainable employment outcomes or addressing health and well-being issues. Furthermore, many veterans did not believe that the conditions of their claims were reasonable or achievable. In some cases, compliance with the conditions attached to continued receipt of benefits had been counterproductive to their chances of securing future employment. Therefore, the Claimant Commitment and allied support need to be personalised to each individual, with particular consideration of their specific needs as an Armed Forces veteran.

**Recommendation:** for the DWP to ensure that all JCP staff are provided with guidance and/or training on the specific adjustments and easements applicable to the Armed Forces community and also, more broadly, around the mental and physical health impairments that may affect some veterans’ ability to engage in work-related activity.

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Respondents also raised a broader issue around wanting to be treated with dignity and respect during their interactions with JCP. It was evident that veterans were aware of the stigmatisation of benefit claimants and felt that such narratives can have an impact on how people are treated within the social security system. The application of sanctions is one element of this. It was evident that the application of benefit sanctions had profoundly negative consequences for the respondents in our sample and also that such sanctions had sometimes occurred as a result of difficulties in navigating the social security system or difficulties arising from ongoing mental health issues. We believe that there is a need for a widespread review of benefit sanctions to ensure that they are not applied to vulnerable people. We believe that this recommendation should apply to members of the Armed Forces community and is in line with the Armed Forces Covenant commitment of special consideration for those injured and bereaved.

**Recommendation:** for the DWP to review the sanctioning of members of the Armed Forces community to ensure that benefit sanctions are not applied to those experiencing mental and physical health impairments resulting from Service in the Armed Forces.

Finally, we need to recognise that the social security system is in a period of significant transition, with the ‘managed migration’ of claimants of legacy benefits to UC until December 2023. Over the duration of our fieldwork, a small number of respondents transitioned from legacy benefits to UC. It was evident that this transition had been problematic for those people, who reiterated widely acknowledged issues around the waiting period for the first payment and also highlighted issues around reductions in their benefit entitlements and new requirements to engage more regularly with JCP. However, a significant number of our respondents are still claiming legacy benefits and will eventually transition to UC. Respondents expressed concerns about what would happen when they moved to UC, including concerns around impacts on other benefits and War Pensions and their ability to manage variable monthly payments and a ‘digital by default’ system. Indeed, consultations with DWP AFCs and ‘leads’ suggested that some of the more ‘complex cases’ may experience difficulties with this change. Hence, more needs to be done to explain the implications of transitioning to UC and to support people through the managed migration process.

**Recommendation:** for the DWP to provide additional support to veterans as they transition from legacy benefits to UC. This support should be tailored and/or enhanced to reflect the unique circumstances of those who have served in the Armed Forces.
1. INTRODUCTION

Each year approximately 14,000 men and women leave the British Armed Forces and enter civilian life. For the vast majority, this transition is relatively unproblematic. For the smaller number who do experience difficulties, it is recognised that a range of complex issues can occur in the transition to civilian life, including mental health and/or physical impairment following active Service, homelessness, drug and alcohol use, interactions with the criminal justice system and gambling.

In 2011 the UK Government published the Armed Forces Covenant (hereafter referred to as the Covenant), a ‘promise by the nation ensuring that those who serve or who have served in the armed forces, and their families, are treated fairly’. As part of a commitment to the Covenant, the Department for Work and Pensions (DWP) has made a series of adjustments to Jobcentre Plus (JCP) and other services to support current and former Service personnel and their families. Additionally, in 2018 the UK Government launched the Strategy for our Veterans. This new Strategy has a 10-year scope with the aim that ‘every Veteran feels even more valued, supported and empowered and, in accordance with the Armed Forces Covenant… will never be disadvantaged as a result of their service’.

Following the sacrifices of many citizens, post-World War II a welfare state was established that emphasised entitlement to an extensive set of social rights, with individuals meeting their responsibilities through a shared sense of duty. However, in recent decades significant UK welfare reforms have rebalanced the relationship between social rights and responsibilities and a more conditional welfare state has emerged. The extent to
which veterans are accessing our social security system is still relatively unknown\textsuperscript{12}. With the introduction of Universal Credit (UC), ‘the most important and fundamental reform since the inception of the welfare state’\textsuperscript{13}, it is vital to ensure that not only are the needs and experiences of veterans and their families acknowledged and understood, but that their needs are appropriately considered as the UK social security system continues to reform. However, no research to date has focused specifically on veterans’ experiences within the social security system and whether or not they feel adequately and appropriately supported within a system undergoing significant reform.

1.1 Project summary

This report presents the final findings of a project funded by the Forces in Mind Trust called Sanctions, Support and Service Leavers: Welfare conditionality and transitions from military to civilian life\textsuperscript{14}. This project represents the first substantive qualitative research in the UK to focus specifically on the experiences of veterans within the social security benefits system. Central to our project was the desire to establish an original evidence base to inform policy and practice in relation to veterans and their families who are trying to navigate the benefits system. As such, our project was developed around addressing the following linked objectives:

- To understand veterans’ diverse pathways into, and out of, the UK social security benefits system;
- To assess the extent to which the conditionality inherent within the benefits system may enhance or inhibit successful transitions to civilian life;
- To consider the effectiveness of the exemptions and easements made through the UK Armed Forces Covenant in relation to social security benefits in meeting the needs of veterans and their families; and
- To explore wider debates about the appropriateness of the application of welfare conditionality for veterans and their families.

The project was delivered through two rounds of qualitative longitudinal interviews with veterans and their families, alongside consultations with a number of key national, regional and local stakeholders (see Chapter 2 for a discussion of methods). This project was a parallel stream of work linked to the ESRC-funded Welfare Conditionality: Sanctions, Support and Behaviour Change project\textsuperscript{15}.

1.2 Structure of this report

This report is structured as follows:

- Chapter 2 provides a brief overview of the methods used in the research.
- Chapter 3 provides an overview of broader experiences of transition, including employment, but also health experiences and family and relationships post-Service.
- Chapter 4 provides a discussion and analysis of experiences of accessing social security, focusing on movements into the benefits system and subsequent experiences of navigating its complexities.
- Chapter 5 provides a discussion and analysis of experiences of assessments of capability for work, exploring views on the ability of this process to appropriately assess Service-related impairments.
- Chapter 6 provides a discussion and analysis of experiences of the conditionality inherent within the social security system, focusing specifically on experiences of both sanctions and support, but also the effectiveness of conditionality in triggering movements into paid work.
- Chapter 7 provides a discussion and analysis of some of the commitments made in relation to social security as part of the Armed Forces Covenant, focusing specifically on DWP Armed Forces Champions (AFCs) and leads, but also broader views on the nature and adequacy of the veteran-specific support currently provided.
- Chapter 8 provides some more detailed discussion of the changes (or lack thereof) that occurred for respondents over the period of the research, including some illustrative case studies of where policy and practice can variously help and hinder veterans in their transition to civilian life.
- Chapter 9 provides some concluding comments and outlines our policy and practice recommendations.

\textsuperscript{12} Recent research linking DWP data to existing data from a King’s Centre for Military Health Research cohort suggested that, of a sample of 7,942 regular veterans, nearly a quarter (23.4%) had claimed unemployment benefits at some point since leaving Service, with 5.2% claiming disability benefits (Burdett, H., MacManus, D., Fear, N., Rona, R. and Greenberg, N. (2018) Veterans and benefits: Relationships between social demographics, Service characteristics and mental health with unemployment and disability benefit usage by GB ex-Service personnel, online at: https://www.fim-trust.org/wp-content/uploads/2018/05/20180511-DWP-KCMHR-data-linkage-report-FINAL.pdf)


\textsuperscript{14} An interim report was produced in April 2018 and provided an overview of the findings from the first year of the project. We have incorporated the findings from the interim report into this final comprehensive report.

\textsuperscript{15} See: http://www.welfareconditionality.ac.uk
2. METHODS

As highlighted in Chapter 1, this project aims to provide the first substantive qualitative research that focuses specifically on how veterans are experiencing the social security benefits system. The research involved two main methods: (1) two waves of repeat qualitative longitudinal interviews with veterans and their families; and (2) consultations with policy and practice stakeholders. A brief overview of these methods is provided below.

2.1 Qualitative longitudinal research (QLR) with veterans and their families

QLR is a valuable methodological approach that moves away from providing a ‘snapshot’ of experiences to explore people’s ‘varied and changing fortunes’ over a period of time16. Our project was undertaken over a two-year period (February 2017–February 2019), which enabled us to undertake two waves of interviews with veterans and their families.

The interviews with veterans were carried out in England, primarily in the North East, North West, Yorkshire and London; however, a small number of interviews were carried out in other areas where people came forward to the research team in response to our calls for participants. Purposive non-random sampling techniques17 were used to recruit our participants through a range of organisations. These organisations were primarily, but not exclusively, providing support to Armed Forces veterans and included Armed Forces charities, other third-sector organisations, Armed Forces and Veterans Breakfast Clubs, local authorities, churches and housing/accommodation providers. The inclusion criteria for the research were those who identified themselves as Armed Forces Service leavers/veterans18 who were living within our specified geographical fieldwork areas and were claiming one of the following social security benefits at the time of the first interview: Employment and Support Allowance (ESA), Jobseeker’s Allowance (JSA) or UC. Although we endeavoured to ensure that all participants were claiming benefits at the start of the fieldwork, there were a small number of people who had very recently moved off benefits and into employment, education or retirement. A decision was made to include these participants, given the important insights they provided in relation to movements into and out of the social security system.

A total of 68 veterans were included within our starting sample (Wave A) and were interviewed between June and November 2017. Six of these 68 veterans were interviewed with their spouses in a ‘family’ interview at Wave A in order to explore how spouses were supporting people to navigate through the benefits system and also providing support more broadly in transitions to civilian life. The Wave A interviews acted as a baseline for the study, enabling us to establish a comprehensive picture of people’s experiences of the benefits system up to that point, but set within the context of other aspects of participants’ lives, e.g. education and employment experiences, financial situation, health (mental and physical), housing and relationships. The Wave A interviews lasted approximately one hour, and the majority took place face-to-face; however, a small number were undertaken via telephone or Skype where people had

18 We used the definition of a ‘veteran’ as ‘anyone who has served for at least one day in Her Majesty’s Armed Forces (Regular or Reserve) or Merchant Mariners who have seen duty on legally defined military operations’ (MoD, 2017, Veterans: Key Facts, online at: https://wwwarmedforcescovenant.gov.uk/wp-content/uploads/2016/02/Veterans-Key-Facts.pdf). We have primarily used the term ‘veteran’ within this report when referring to our participants, although we recognise that not all ex-Service personnel identify with this term (see, for example: Burdett, H., Woodhead, C., Iversen, A.C., Weissely, S., Dandeker, C. and Fear, N.T. (2012) “Are You a Veteran?” Understanding of the Term “Veteran” among UK Ex-Service Personnel: A Research Note’, Armed Forces & Society, 39(4): 751–759).
come forward to take part but were outside the main geographical areas of the fieldwork. At the Wave A interviews, the participants were asked for their permission to be re-contacted to take part in a follow-up interview 12 months later; all participants agreed to be re-contacted. In order to minimise the attrition that is common in longitudinal research, the participants were asked to provide their own contact details and also, where possible, a second contact that we could use should we have difficulty re-connecting with them (e.g. a family member, friend or support worker).

A total of 52 veterans took part in the follow-up Wave B interviews, which were conducted between July 2018 and January 2019. The analysis and discussion in this report is therefore based on a total of 120 qualitative interviews with veterans. The Wave B sample represents 76% of the original sample, which is a significant retention rate for longitudinal research. Five of these 52 veterans were interviewed with their spouses in a joint interview. In one case, a veteran participant was experiencing significant mental health problems at the time of the follow-up interviews. However, his spouse requested to participate, and we interviewed her alone. Routinely, Wave B interviews were slightly shorter than Wave A interviews (approximately 40 minutes). These focused specifically on understanding what had occurred in the participants’ lives since the Wave A interviews in relation to their benefit claims, any movements into work and any support received. The interviews took place face-to-face wherever possible; however, a higher number of telephone interviews were conducted at Wave B to provide flexibility for those who had relocated to a new geographical area, were working or had other commitments that had an impact on their time and availability.

In line with good research practice, each participant received a £20 shopping voucher as a thank-you for their time in each wave of interviews.

2.1.1 The sample
As a qualitative project, our research does not claim to be representative of the entire veteran population. Rather, we believe our sample is reflective of the diversity of those veterans who engage with the benefits system during their life course. This includes those who claim for relatively short periods of time, but also those individuals with complex needs who require intensive and ongoing support beyond any initial post-Service transition period.

The majority of the respondents were male (66), with two female veterans included in the sample. Table 1 below provides an overview of the sample. As can be seen, the sample ranged in age from 18 to 65, and the majority had served in the Army (61). With regard to their length of time in the Armed Forces, 13 had served less than four years (i.e. early Service leavers); 33 respondents had served between four and 10 years; and 22 had served over 10 years. The majority of the respondents (51) had left the Armed Forces over 10 years previously, demonstrating the longer-term nature of transition and how for some people issues can occur many years (or even decades) post-Service.

2.2 Consultation with policy and practice stakeholders
In addition to the repeat qualitative longitudinal interviews with veterans and their families, we also consulted with a range of policy and practice stakeholders. These consultations involved two methods. Firstly, we undertook 20 interviews with policy and practice stakeholders representing a mix of national organisations and also those providing frontline services in the fieldwork. These were primarily, but not exclusively, interviews with people who represented organisations that were providing support specifically to the Armed Forces community. The aim of these interviews was to provide contextual and supplementary information for the interviews with veterans, exploring policy-makers’ and practitioners’ views on transition issues more broadly and veterans’ experiences with the social security system more specifically. These interviews ranged between 30 minutes and one hour and included a mix of face-to-face and telephone interviews.

Secondly, following the publication of the interim report we began a constructive dialogue with the DWP around the findings and recommendations. Following this engagement, we were also able to include the perspectives of some DWP staff through focus groups in three of the main geographical fieldwork areas (North East, North West and London). One focus group was carried out in each area with participants selected by the DWP. The focus groups were attended by DWP AFCs and also frontline staff who acted as Armed Forces Leads within their individual Jobcentres. A total of 15 DWP staff took part in the focus groups. This consultation focused on understanding their roles in relation to the Armed Forces community, their experiences of the issues that veterans face within the benefits system, and how they approach providing support to veterans and their families.
2.3 Analysis and report writing

The interviews (with both veterans and policy/practice stakeholders) and focus groups were audio recorded, with permission from the participants, and transcribed verbatim. All interviews were analysed using thematic coding and retrieval methods, assisted by a qualitative data analysis software package (QSR NVivo). Following completion of the Wave A interviews, a first-wave findings report was produced (April 2018)\(^{19}\), which provided an overview of findings from the baseline interviews, as well as the substantive stakeholder consultation completed during the first year of the project. We have incorporated the findings from the interim report into this final report.

Please note that in some of the chapters that follow a small number of quotes may include explicit language.

2.4 Note on ethics

The research received ethical approval from the School of Health and Society Research Ethics Panel at the University of Salford and complied with the ethical governance procedures at both the University of Salford and the University of York. To ensure anonymity with regard to the veterans and their families, all identifying information (e.g. names, geographical locations, etc.) has been removed and each respondent has been given an identifier that relates to the benefit they were claiming and the wave of interviews (e.g. UC claimant, Wave A).

With regard to the policy and practice stakeholders, the identifiers used alongside their quotes were agreed with the respondents following their interviews.

2.5 Note on the images used in this report

As part of the dissemination strategy for this project, we commissioned two Graphic Design students (Isabel Dane and Dylan Worthington) in the School of Arts and Media at the University of Salford to produce a graphic novel from the research. The images included in this report are some of the illustrations produced by Isabel and Dylan for the graphic novel and are based on anonymised excerpts from the interviews. The full graphic novel is available as a separate output.

### Table 1 - Sample information

<table>
<thead>
<tr>
<th>Age (at Wave A)</th>
<th>Length of Service</th>
<th>Branch of Armed Forces</th>
<th>Length of time since leaving Service</th>
<th>Benefit classification (Wave A)</th>
<th>Benefit classification (Wave B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>34</td>
<td>10 years +</td>
<td>Army</td>
<td>Universal Credit</td>
<td>Working full-time (permanent contract)</td>
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<td>ESA Support Group</td>
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<td>28</td>
<td>4–10 years</td>
<td>Army</td>
<td>ESA (assessment phase)</td>
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</tr>
<tr>
<td>5</td>
<td>47</td>
<td>10 years +</td>
<td>Navy (Royal Marines)</td>
<td>JSA</td>
<td>Universal Credit</td>
</tr>
<tr>
<td>6</td>
<td>51</td>
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<td>Army</td>
<td>Recently moved from JSA into part-time work</td>
<td>Working part-time</td>
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<tr>
<td>7</td>
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<td>ESA (WRAG)</td>
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<tr>
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<td>ESA Support Group</td>
</tr>
<tr>
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</tr>
<tr>
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<td>JSA</td>
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<tr>
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<td>Universal Credit</td>
</tr>
<tr>
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<td>ESA (respondent unsure whether SG or WRAG)</td>
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</tr>
<tr>
<td>15</td>
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<td>Less than 4 years</td>
<td>RAF</td>
<td>Being moved from ESA to JSA following WCA (was in the process of appealing against assessment outcome)</td>
<td>ESA Support Group</td>
</tr>
<tr>
<td>16</td>
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<td>ESA Support Group</td>
<td>No Wave B interview</td>
</tr>
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<td>17</td>
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<td>Recently retired (moved from JSA to Pension Credit, then State Pension)</td>
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<td>ESA (respondent unsure whether SG or WRAG)</td>
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<td>ESA (WRAG)</td>
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<tr>
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<td>Army</td>
<td>ESA Support Group</td>
<td>Signed off ESA (disengaged)</td>
</tr>
<tr>
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<td>54</td>
<td>10 years +</td>
<td>Army</td>
<td>Universal Credit</td>
<td>Universal Credit</td>
</tr>
<tr>
<td>Age (at Wave A)</td>
<td>Length of Service</td>
<td>Branch of Armed Forces</td>
<td>Length of time since leaving Service</td>
<td>Benefit classification (Wave A)</td>
<td>Benefit classification (Wave B)</td>
</tr>
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</tr>
<tr>
<td>24</td>
<td>48</td>
<td>10 years +</td>
<td>Army</td>
<td>Universal Credit</td>
<td>Universal Credit</td>
</tr>
<tr>
<td>25</td>
<td>45</td>
<td>4–10 years</td>
<td>RAF</td>
<td>ESA (WRAG)</td>
<td>ESA (WRAG)</td>
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<tr>
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<tr>
<td>27</td>
<td>51</td>
<td>4–10 years</td>
<td>Army</td>
<td>10 years + ESA Support Group</td>
<td>ESA Support Group</td>
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<tr>
<td>28</td>
<td>29</td>
<td>4–10 years</td>
<td>Army</td>
<td>5–10 years Appealing against suspension of ESA following WCA</td>
<td>ESA (WRAG)</td>
</tr>
<tr>
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<td>4–10 years</td>
<td>Army</td>
<td>10 years + ESA Support Group</td>
<td>ESA Support Group</td>
</tr>
<tr>
<td>30</td>
<td>34</td>
<td>4–10 years</td>
<td>Army</td>
<td>10 years + ESA Support Group</td>
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</tr>
<tr>
<td>31</td>
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<td>Army (Reserves)</td>
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<td>JSA</td>
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<td>10 years + ESA (WRAG)</td>
<td>Carer’s Allowance</td>
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<td>4–10 years</td>
<td>Army and Navy</td>
<td>2–5 years Universal Credit</td>
<td>No Wave B interview</td>
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<td>61</td>
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<td>Army</td>
<td>10 years + Respondent unsure of which benefit they were claiming (refers to Income Support)</td>
<td>Respondent unsure of which benefit they were claiming (refers to Income Support)</td>
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<td>Signed off UC owing to income increase from house sale</td>
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<td>Army</td>
<td>10 years + Recently moved from benefits into paid work (self-employed)</td>
<td>No Wave B interview</td>
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<td>30</td>
<td>Less than 4 years</td>
<td>Army</td>
<td>10 years + ESA (WRAG)</td>
<td>Working but reapplying for benefits owing to variable hours</td>
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<td>10 years + ESA Support Group</td>
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</tr>
<tr>
<td>Age (at Wave A)</td>
<td>Length of Service</td>
<td>Branch of Armed Forces</td>
<td>Length of time since leaving Service</td>
<td>Benefit classification (Wave A)</td>
<td>Benefit classification (Wave B)</td>
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<tr>
<td>49</td>
<td>Less than 4 years</td>
<td>Army</td>
<td>10 years +</td>
<td>Universal Credit</td>
<td>Universal Credit</td>
</tr>
<tr>
<td>50</td>
<td>4–10 years</td>
<td>Army</td>
<td>10 years +</td>
<td>ESA Support Group</td>
<td>ESA Support Group</td>
</tr>
<tr>
<td>51</td>
<td>4–10 years</td>
<td>Navy (Royal Marines)</td>
<td>10 years +</td>
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<td>ESA Support Group</td>
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<tr>
<td>52</td>
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<td>ESA (WRAG)</td>
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</tr>
<tr>
<td>53</td>
<td>10 years +</td>
<td>Army (Reserves)</td>
<td>10 years +</td>
<td>ESA Support Group</td>
<td>ESA Support Group</td>
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<tr>
<td>54</td>
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<td>Army</td>
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<td>ESA (WRAG)</td>
<td>Working full time (self-employed) (brief period on Universal Credit between Wave A &amp; B)</td>
</tr>
<tr>
<td>55</td>
<td>10 years +</td>
<td>Army</td>
<td>Less than 2 years</td>
<td>Recently signed off JSA (for full time study)</td>
<td>ESA Support Group</td>
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<tr>
<td>56</td>
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<tr>
<td>57</td>
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<td>Army</td>
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<td>ESA Support Group</td>
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<tr>
<td>58</td>
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<td>ESA Support Group</td>
<td>ESA Support Group</td>
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<tr>
<td>59</td>
<td>10 years +</td>
<td>Army</td>
<td>10 years +</td>
<td>ESA (awaiting assessment)</td>
<td>Universal Credit</td>
</tr>
<tr>
<td>60</td>
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<td>Army</td>
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<td>Universal Credit</td>
<td>No wave B interview</td>
</tr>
<tr>
<td>61</td>
<td>10 years +</td>
<td>Army</td>
<td>10 years +</td>
<td>Universal Credit</td>
<td>Universal Credit</td>
</tr>
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<td>Army</td>
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<tr>
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<tr>
<td>65</td>
<td>10 years +</td>
<td>Army</td>
<td>5–10 years</td>
<td>Universal Credit</td>
<td>Universal Credit and part time work</td>
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<tr>
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<td>10 years +</td>
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</tr>
<tr>
<td>68</td>
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<td>Army</td>
<td>10 years +</td>
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This chapter presents an analysis and discussion related to both the initial transition period when people left the Armed Forces and also the changes in their lives over a longer timeframe in the years, and on occasion decades, since leaving Service. Initial discussions briefly highlight the diverse reasons why the veterans in this study chose to leave the Armed Forces and enter civilian life, along with reflections on the transitional support they received during that period. This is followed by a consideration of people’s employment trajectories both in the immediate aftermath of leaving the Armed Forces and also in the longer term. Two significant factors that have shaped and had an impact on many of the respondents’ working lives since leaving the Armed Forces are then considered, namely, physical and mental ill health and family and relationship issues. This chapter provides important contextual information, helping us to understand the complexity of many participants’ lives as they then moved into the social security system.

3.1 Reasons for leaving the Armed Forces

As highlighted in Chapter 2 (see Table 1), the majority of the respondents (51) had left the Armed Forces over 10 years previously, with seven people leaving between five and 10 years previously, four leaving between two and five years previously, and six people indicating that they had left within the last two years. A range of reasons were given by participants as to why they had left the Armed Forces, including redundancy; medical discharge; ‘bullying’; ‘boredom’; being ‘kicked out’/compulsorily discharged; time served; and leaving owing to a change in their military role. A number also indicated that they had left for personal reasons related to their spouses and children, with people referring to leaving for the sake of their relationships and families. However, it was evident that many of these relationships had subsequently broken down:

My partner asked me to come out. She fell pregnant with my boy... I was like, ‘I don’t know, I don’t think I’m ready to get out’. Then I went to [country]. I got shot, and when I pulled myself round I thought, do you know what, what am I doing here? You’ve had a lucky escape... By that point, she was pregnant with my daughter, but I think we only lasted maybe nine months when I got out (UC claimant, Wave A).

One participant stated that he had been discharged owing to unpaid court fines from before his time in Service and wanted to reapply and go back into the Armed Forces. Indeed, a number of participants expressed regret at leaving the Armed Forces, particularly when reflecting on the difficulties they had experienced in the transition to civilian life:

Why did I get out the army? Why did I walk out those gates? Why didn’t they just lock me up in the glasshouse? I do regret getting out of the Army. It was the best life. You got paid. You got a roof over your head. You were working every day. You travelled the world (UC claimant, Wave B).

3.2 Resettlement support

Reflecting the diversity of the sample in terms of length of time in and post-Service, there were a range of views on the perceived level of support provided when people were transitioning from the Armed Forces. Especially among those who had left a number of years previously (10 years or more), the dominant narrative highlighted an absence of provision, whereas other respondents reflected a strong perception that when support was available much of it was inappropriate or inadequate to meet their needs:

I bought myself out of the Army. I paid in money. I got given a discharge date. The day of my discharge, I packed all my own stuff up. I was de-kitted. I had an interview with my commanding officer, and in the afternoon they said, ‘Here you go. There’s your travel warrant. Out you go’. That was it... I wasn’t offered any resettlement... It was just a case of, ‘Thank you very much for your service. Goodbye’ (ESA SG claimant, Wave B).
It was quite minimal really. It was just the basic interview techniques, filling out CVs, stuff like that, it was. They had a tendency to put the courses in front of you, and if you don’t really attend, I don’t think they were really that bothered, because you’re getting out anyway (ESA claimant in assessment phase, Wave A)

The limited support available a number of years ago was sometimes compared with the level of support that people had experienced in more recent years. For example, one man compared the lack of support with resettlement with the support he was receiving now from a veteran-specific third-sector organisation:

When I came out there was nothing. Not a thing. Not like there is now... It was a case of coming out, finding your bearings. Finding out where your local Jobcentre was, and then that actually was going down. Finding somewhere to live... There was nothing there where you could go and say, ‘Can somebody help me with my housing? Can somebody help me with my benefits? Can somebody help me get a dentist?’ (recently moved from JSA to pension, Wave A)

For some respondents, the lack of support was perceived to have contributed to the difficulties they subsequently faced. For example, one man described having complex needs including alcohol issues and post-traumatic stress disorder (PTSD), as well as prior experience of prison:

If they’d had back then... they’ve got welfare officers, they’ve got people you can go and see which guide you, tell you what’s available once you leave; I had nothing like that. If I’d had it back then, I might not have made half the mistakes I’ve made (recently moved from JSA into paid work, Wave A)

Comparisons between the resettlement and transition support available today and that provided previously were also reiterated by many of the policy and practice stakeholders, who highlighted the increasing emphasis on support through formal support packages such as the Career Transition Partnership (CTP) and the recent implementation of employment trials for those still in Service, as well as projects to map military qualifications across to their civilian equivalents and the introduction of CTP above, that some people were aware of the availability support but had not always engaged with it. This was sometimes due to the prioritisation of personal issues, the fact that people secured employment and so did not feel they needed the support at that time, or the fact that people did not know what to do with the resource at the point of leaving:

CTP is great if you’re in a position where you’re ready to move into work and you have no issues. They’re great with continuing that support for a period of time... but the further they get away from discharge, the less likely they are to be engaged with those kinds of organisations (representative of an Armed Forces charity)

Indeed, some of the veteran respondents who had left in more recent years did refer to being aware of and/or accessing resettlement support. For example, five indicated that they had engaged with the CTP. However, there were mixed views on the efficacy of some of the support that was on offer, particularly the perception that it primarily focused on post-Service employment. For some respondents, although the focus on employability was important, there was very little emphasis on preparing people for the day-to-day reality of civilian life:

That is fine, giving people all these learning courses and things, but it doesn’t mean that when they leave the Army that they’re going to land on their feet... we had the careers workshop and things like that, but it doesn’t, what does it help you do? Build your CV and gain some qualifications, okay, so I could do that as a civilian anyway... What they don’t teach you is how to pay bills, how to go and apply for houses... how to be a human being, basically... I think it would benefit a lot of the soldiers leaving where you just go maybe somewhere for a week or two weeks, and you literally go back to basics... how to be a civilian. You’ve got to pay gas, electric, water, Council Tax, all this because you’re not taught. It’s not rocket science, but still... Some lads won’t know, some of the lads can’t read or write (UC claimant, Wave A)

One participant, who was using his resettlement package to undertake a university degree, indicated that while he felt that it was a good resource to draw upon, the process of using the support had been difficult to navigate at times:

They do provide a good service [CTP], and it wasn’t there before. It’s got a lot better, but... knowing the process of how you can use your ELC and your HEFE schemes, the grants that are available, it’s been a minefield for me (recently moved off JSA for full-time study, Wave A)

It was also evident, as suggested by policy and practice stakeholders above, that some people were aware of the available support but had not always engaged with it.
I went on a couple of days away, I treated them as an excuse to go and get trolleyed... we had the Resettlement Officer, but basically they weren’t geared up for oiks like me, they were geared up for people who’d made a career in the Army (ESA WRAG claimant, Wave A)

There was a thing called ELC that can help you, learning credits... I never took up, and I think they’ve run out now anyway. I think you only get a certain length of time before you can... At the time I didn’t think about it. At the time all I was thinking about was, “I’m going to be a dad” (UC claimant, Wave A)

A small number of respondents also indicated that it was sometimes difficult to engage with the resettlement support on offer when still within the Armed Forces owing to competing demands to still fulfil their duties:

A three-day transition workshop is maybe not long enough, and doing it while you’re still in Service means that it’s not given the priority that it should get. I know people who have been booked to go on that three-day transition workshop. Because of the demands of work, even though they’re into the resettlement period, have been taken off it. Because the chain of command have basically said, ‘No. This takes priority over that’. That should not be the case when you’re leaving the military and going into the civilian world (recently moved off JSA for full-time study, Wave A)

3.3 Transitions into the civilian labour market

Before discussing employment experiences post-Service, it is important to understand participants’ backgrounds in relation to not only education prior to Service, but also qualifications gained during Service. The majority of participants reported having limited experience of paid work prior to joining the Armed Forces. Some had very brief spells of employment after leaving school, usually in manual work within the service or construction sectors; however, the majority had joined the Armed Forces immediately or shortly after leaving school. On the whole, respondents described their experiences of school in a relatively negative light. Most had left compulsory education as soon as they could (around the age of 16) with few or no basic qualifications. A small number of participants made reference to undertaking trade apprenticeships (for example, in joinery or plumbing) or starting further education, although this was not always completed. Participants also commonly reported being ‘bored’ at school, with some deciding from a young age that they wanted to join the Armed Forces and therefore unable to see the relevance of school for their chosen career:

Just didn’t enjoy it. Bored. Ever since I was 11, I knew I wanted to join the Army, so I just couldn’t be bothered with school. I wasn’t interested in it (ESA SG claimant, Wave A)

Although it was evident that levels of formal qualifications were relatively low upon entry into the Armed Forces, people described undertaking various training courses, ranging from basic skills qualifications (e.g. Maths, English and IT) through to weapons training, first aid, driving and engineering qualifications whilst in Service. However, many respondents made reference to the lack of transferability of the qualifications and skills that they had gained in the Armed Forces:

I’ll never forget it, I went in, the first day I went in to see about signing on, I says, ‘Right, I’ve just come out of the Army, I want to work, what can you do for us?’ ‘Fill this in.’ I was like, ‘Oh right, aye, I’ve got this, I’ve got this, I’ve got this’. ‘Well, you can’t use that.’ My driving, my HGV driving, “You can’t use that…’. Apparently I had no experience. All wagon companies look for experienced drivers. There’s a lot, a lot of soldiers want to do HGV driving when they come out the Forces, and a lot of them have problems with lack of experience, even though we’ve driven wagons... I’ve transported ammunition across war zones and now I haven’t got experience of transporting chicken! You know what I mean? (UC claimant, Wave A)

When I left the Armed Forces, I had to come outside and do the civilian equivalent of Level 1, 2 and 3 food and hygiene certificates. It’s like, ugh, god. I already know these (UC claimant, Wave A)

Policy and practice stakeholders reiterated the challenge of encouraging Service leavers to articulate how the qualifications and skills they had gained while in the military were transferable to the civilian workplace: they feel like they come out with loads of experience but no real way of showing it (representative of a third-sector organisation). It was perceived that the RAF, for example, were very good at providing civilian-compatible qualifications, but this was not necessarily the case with the Army, where the process of converting qualifications was not regarded as being as straightforward.

Although this was not commonplace, there were also examples where employers expressed views on people being either over- or underqualified for particular posts:

When I first left the Army I applied to [some telecommunications companies]... ‘Them qualifications, you wouldn’t be happy in our job.’ You’re overqualified, basically, to do their jobs, but what am I qualified for? I need to start somewhere. I just went wagon driving (ESA SG claimant, Wave A)

The interviewer was very sarcastic about the fact that I’d been in the Army, and she thought that I wouldn’t have learnt anything. Well, she said, more or less, that nobody’s ill in the Army. When I explained, actually they are ill, you know, the families are ill. You can get poorly children, and it’s exactly the same as you’d get on Civvy Street, but she was very anti-Army really. Thinking that the training was no good (ESA SG claimant, Wave A)

Although questions were raised around the transferability of qualifications and skills to the civilian labour market, many participants described being able to make use of the more generic skills and trades they had acquired whilst in Service to successfully apply for a range of jobs in the transport (for example, HGV driver, driving instructor), construction (joiner, labourer) and manufacturing industries (factory worker). Others had made use of the more specialist skills and training they had acquired in
Service and had found work in security/close protection, often through informal networks or on the recommendation of others who had previously left the Armed Forces. It was also evident that a number of interviewees had engaged in further training/education since leaving the Armed Forces. For most, this was closely associated with the jobs they had moved into (or were hoping to move into).

On the whole, the majority of participants described being able to find paid work immediately or very shortly after leaving the Armed Forces:

> I literally walked in with those certificates and my Army discharge book, and I did bounce from security company to security company... I barely had a job interview, you just got the job (ESA SG claimant, Wave A)

Although many participants had found employment relatively easily on first leaving the Armed Forces, there was a common narrative amongst participants relating to the difficulty experienced in sustaining the same employment for any significant length of time. Many people described their post-Forces labour market experiences in terms of intermittent work, with people having difficulty ‘settling’ and moving in and out of different jobs:

> I have had jobs when I haven’t been signing on... but none of them have ever lasted. I can never seem to settle, and I hate doing the same thing, in and out, day in, day out, day in (UC claimant, Wave A)

These pathways of intermittent employment are typical of many workers in the lower-skilled sectors of the manufacturing and service industries, where the majority of respondents found paid employment. However, for many participants patterns of intermittent and short-term employment were also related to ongoing physical and mental health impairments, many of which resulted from their time in Service (see below for a more detailed discussion of post-Service health experiences). For example, a number of respondents explained how PTSD, depression and other mental health conditions had made sustaining work a challenge:

> I got a job [recently], and I think I was only there a day, and I thought, no, I can’t face people. I couldn’t. There was one point I didn’t get out of bed for about three and a half weeks. I just shut every blind in my house. It was pitch black. It was like a dungeon. It was awful (UC claimant, Wave A)

One participant explained how his PTSD had limited some of his career options. When interviewed at Wave A, he explained that he had managed to sustain employment for a significant period of time, working in various jobs for around seven years, before he began a career in security. However, a combination of physical and mental health issues had resulted in him going on sick leave:

> Then I went into a career that I knew I could do, and I went into security work... I had to take time off to have my first bout of surgery in my right knee, but also as well, whilst I was on sick leave with this... How can I best explain this? I was struggling before I went off sick with mental health issues. On quite a few occasions I was being pulled up in front of management for my attitude, my anger issues, problems with being late and that sort of stuff. This was all tied up with my PTSD (ESA SG claimant, Wave A)

When interviewed at Wave B, he explained that his mental health diagnosis had had an impact on his ability to return to the security industry:

> I can’t go back into working in the job... my licences have been revoked. If I want to reapply for my licences they’ve added a disclosure form on the back of the application form that you have to disclose whether you’ve got any mental health issues. Unfortunately, because I’ve got PTSD, I’ve spoken to the SIA [Security Industry Association], and they say that it will stop me from reapplying (ESA SG claimant, Wave B)

In addition to the health issues highlighted above, drug or alcohol dependency featured in a number of accounts when describing difficulties sustaining employment. Almost half of the veterans interviewed (33 out of 68) described periods of alcohol dependency (22 respondents) or drug dependency (11 respondents). This was primarily attributed to either a ‘culture of drinking’, which they perceived to be part of Armed Forces life, or a response to experiencing trauma while in Service:

> I’ve had many a job. I’ve just bounced from place to place trying to find a place to settle in life. I’ve moved all over the country... Some were factory, some were retail, just labouring here and there, just loads of different things. I was just making money really... Nothing’s set in stone, and obviously, because I couldn’t control my alcohol, so I’m coming out and I kept on getting myself arrested and stuff (ESA WRAG claimant, Wave A)

> When I came out of the Forces I went straight into security. After about six months realised it wasn’t for me. Then went on to order picking in warehouses, which I did for a short while, earning a very good wage. Then I just fell off the tracks... I’ve been trying to keep employed, but because I was an alcoholic, smoking loads of weed, I wasn’t fit to work full-time, I just wasn’t fit for it (ESA claimant, respondent unsure whether SG or WRAG, Wave A)

In addition, a small number of other participants also made reference to structural factors affecting their ability to sustain employment. More specifically, they referred to the job insecurity that characterises some sectors of the contemporary labour market, describing a lack of job opportunities in their local areas and the increasing prevalence of agency work and short-term contracts:
I found it hard, because even the Jobcentre recognise it, that most of the warehouse work is done by agencies. An agency cannot guarantee you three/four months’ work. I can go work for an agency, I might work four days, and then I’ll have a two-week span where I don’t work... then you’re going to have to go back into the Jobcentre and claim again (recently moved from JSA to pension, Wave A)

It was evident that across the sample a complex interplay of structural and individual issues was attributed to the difficulties people faced in sustaining employment. As highlighted above, this related to health, housing, relationship breakdown, addiction and the ability to transfer skills and qualifications. However, a small number of respondents also referred to struggling with the loss of the identity and structure that the Armed Forces provided. This had created transition issues not just in relation to employment, but more broadly in terms of the ability to settle into the reality of civilian life:

I’ve been out the Army about ten years, and I’ve never settled. I need what I was getting in the Army... Like a rank structure, routine, you know what I mean? I need orders... If it’s left to me I sometimes just sit and mope (UC claimant, Wave A)

The first couple of months it was all fun and games. It was, ‘Oh, I’m back home every night and I get every weekend off’. Then, obviously I’ve realised since, you lose your identity... It’s not nice. You were a part of something, and you were a part of something really big. To come out just to be nothing, it wasn’t the best. It was awful really (UC claimant, Wave A)

Consultations with policy and practice stakeholders suggested that the structure provided within the Armed Forces was seen to generate an outlook among some Service personnel of expecting clear and consistent pathways.

3.4 Mental and physical health post-Service

One of the most significant factors affecting people’s transitions to civilian life both in the short term and over longer periods, sometimes stretching to decades, was experiences of poor mental and/or physical health. Indeed, the majority of the sample had some form of physical and/or mental health impairment. Mental health difficulties were highlighted more frequently than physical health issues (59 people indicated that they had a mental health impairment, and 37 people indicated that they had a physical health impairment), with PTSD, anxiety and depression referred to most frequently. It was also common for people to discuss having multiple health issues21. Of the 68 veterans originally interviewed at Wave A, 51 attributed their health issues to their time in the Armed Forces.

Physical injuries sustained in Service that led to a medical discharge often had a negative and lingering knock-on effect on an individual’s mental health:

I loved everything about the regiment... it’s what I’ve always wanted to do... Then I damaged my shoulder quite badly... 40 per cent disabled in my shoulder, and I got medically discharged... I asked if I could soldier on... I broke down when I was told I was suicidal. Nobody thought I was going to last. I was being watched. I’d attempted me life quite a few times... Since then I’ve had loads, I mean loads of issues with my mental health problems. Just more with my moods, do you know what I mean? Just been up and down (UC claimant, Wave A)

It was evident that for many people a diagnosis of specific health issues regularly occurred a number of years after the individual had left the Armed Forces. This was the case for both common physical ‘wear and tear’ issues (e.g. back, neck and knee issues) that participants attributed to Service and also their mental ill health:

A knock-on effect from a knee injury. I’ve got arthritis on both knee and hip now. So it’s an early age really. It’s a confirmed MRI scan. Well, like today just walking down there I’m struggling, but it’s a bit annoying because it could have been sorted out when I was in the Forces. If they’d have looked after the lads a bit better I wouldn’t be struggling at the minute (JSA claimant, Wave A)

I suffer from PTSD... that’s what led to my breakdown... that’s definitely as a result of my time in Service... About eight years after I left... it started last year. I started getting bad. For eight years I was coping with it on my own, sort of ignoring it. One day I started crying in front of my little boy, the next minute I’m jumping behind the couch... by that time it was too late, there was no stopping it, it was just every day. I’m still having nightmares now, I still wake up screaming in the night... it’s never going to go, it’s always going to be there (ESA SG claimant, Wave A)

The participant directly above, and a small number of others, had been sectioned or had spent time in a mental health institution since leaving the Armed Forces. Indeed, one participant interviewed at Wave A was sectioned just prior to being re-contacted for the Wave B interview and was thus unable to take part in a follow-up interview. The symptoms and negative effects of mental ill health were simultaneously described as having long-term debilitating impacts and being episodic in their severity. As such, participants regularly described having ‘good days’ and ‘bad days’ in relation to the management of their illnesses:

So yesterday I was all like, ‘Oh my God! What’s this? Can’t wait for today [to] end’, do you know what I mean? Just from the moment I opened my eyes I just wanted to go back to bed. But some days, like today, I woke up this morning feeling fresh and, you know, like good day (ESA SG claimant, Wave A)

However, whereas many participants were clear about the role of their experiences in the Armed Forces in directly triggering their current health problems, a number acknowledged that factors unrelated to their time in Service were significant in their ongoing mental health issues. Previous research has suggested that a proportion of Service personnel come from ‘vulnerable backgrounds’ and that their vulnerabilities can resurface when people leave the Armed Forces. This was reiterated by our policy and practice stakeholders, who made reference to difficulties in transition being related to the social background of some veterans and the issues they had faced prior to joining the Armed Forces:

> I do see a trend where people have joined the Army as a last resort to get away from a really bad home life when they’ve been young. That’s been really detrimental then, because they’re already in a bad place, and they go and get trained up, then they become ex-Service leavers and they can’t cope anyway because they weren’t coping before, and everything has just compounded that issue (representative of a third-sector organisation)

If people have got baggage... it hasn’t gone away, and then they resurface when they leave because they’re now having to find their own accommodation, deal with life generally... once you’re inside the front gates of camp, real life can go away if you want it to (policy official 2)

It was evident from our interviews that this was the case for a number of our participants. The majority had joined the Armed Forces straight from school, with many not undertaking formal qualifications before entry (see section above on education and training). Furthermore, there were a small number who referred to having parents/carers who were drug/alcohol-dependent or having grown up within the care system:

> I grew up with a, pardon the expression, ‘smackhead’ for a mother... Raised basically by my grandmother, who was an alcoholic. School was when I could be bothered to go. Then I had a choice really, it was either jail, start selling drugs and do something stupid, or join the Forces... Best move I ever made, otherwise I’d be in jail or I’d be dead by now (ESA SG claimant, Wave A)

> I suffer two forms of PTSD, childhood and adult. From the age of four till nearly 14 I was brought up in kid’s homes, even though my brother and sister lived at home (ESA SG claimant, Wave A)

It was evident that there was a complex mix of pre-existing issues relating to childhood, experiences during Service in the Armed Forces and wider post-Service adverse events that negatively affected some participants’ ongoing mental health. Interactions with the criminal justice system featured within a number of participants’ ongoing mental health. Interactions with the criminal justice system featured within a number of accounts, with 18 participants indicating that they had served a custodial sentence post-Service. Furthermore, a significant proportion of the people we interviewed were living in veteran-specific supported accommodation across the geographical fieldwork areas (30 respondents at Wave A), with periods of homelessness (both rough sleeping and sofa surfing) featuring across a number of accounts. For some of those living in supported accommodation at Wave A, their experience of homelessness was very recent – that was a week ago... last week I was on the street and just wandering aimlessly (UC claimant, Wave A) – and was often a consequence of a ‘crisis’ in other areas of people’s lives or the culmination of multiple issues: Well, I’ve got PTSD, and I lost my job. I had a relationship breakdown. I ended up losing my house, so it was either here [supported accommodation] or the street (UC claimant, Wave A). Consultations with policy and practice stakeholders suggested that a mind-set that valued discipline, durability and self-reliance could make it harder for veterans to seek help even when they needed it, and it was often at ‘crisis’ points that people would be referred to the relevant services.22

### 3.5 Family and relationships post-Service

Across the sample it was evident that there were also some complex family and relationship situations. A significant number (32 respondents) made reference to experiencing a relationship breakdown post-Service. This was often attributed to difficulties in adjusting to civilian life as a couple when much time had previously been spent apart but was also due to the impact of mental health issues, as highlighted above. The majority of veterans had children; however, it was clear that a routine consequence of relationship breakdown was estrangement from children. Hence, some talked about having little or no contact with their children. Some attributed this to animosity – I don’t see my children because she [ex-partner] won’t let me (UC claimant, Wave A) – whereas others referred to geographical separation from their family, and their financial circumstances sometimes made it difficult for them to be able to visit their family. In addition, there were people who revealed that estrangement from their children had been a continuous feature since leaving Service and was related to their own ‘vulnerabilities’:

> My daughter, because I’ve been in and out of her life with prison and what not, she suffers with separation anxiety and sees a counsellor, so I don’t want to mess her head up any more than it already is (ESA SG claimant, Wave A)

Among those veterans still in contact with their children and family, some had caring responsibilities; for example, supporting family members who had health problems (e.g. spouses, parents or children) and providing financial support to children. A small number had experienced improved or increased contact with their children.

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between Waves A and B, often as a result of their health condition or housing situation stabilising and/or improving over that period.

As highlighted above, our sample included a small number of interviews in which both the veteran and their spouse (all of whom were female) were interviewed. In the majority of these interviews the spouse was the main interviewee, and it was evident that they were undertak- ing the role of primary carer for their veteran husband. These interviews reiterated some of the significant mental and/or physical health issues that participants were experiencing and also the key role of spouses in supporting the day-to-day management of their partner’s ongoing conditions and pushing them to seek the professional help they required. As one spouse revealed during Wave A:

[He] would drive off for hours on end, days on end, and I would hunt him down and find him in a hotel… I even made a hotel manager go up to his room and check he was okay and not suicidal at one point. It was quite, quite bad and I knew we needed professional help. You [speaking to her husband] didn’t really want to, so there was a couple of cycles, until it went to ‘that’s it, you get the help or you don’t, we’re over’, and that was when you made the change, wasn’t it? And you got the help (UC claimant, Wave A)

This couple had dependent children, and the wife revealed that part of her role was ensuring that the children were not aware of what was going on:

The children, they’re still young enough that they’re not seeing any effects, apart from I do say [speaking to her husband] ‘do not be in bed when they come home’. They tend not to see you constantly in bed asleep. You’ve just got to be up and doing something (UC claimant, Wave A)

When we re-contacted this couple for the follow-up interview, the spouse indicated that the relationship had experienced difficulties in the intervening period (including a period of separation), which she attributed to her husband’s ongoing mental health issues, and they were unable to take part.

In another joint interview a spouse revealed that her husband was sectioned a couple of weeks ago for about a week and so his mental health is not the best (ESA SG claimant, Wave A). When revisited at Wave B, her husband was not well enough to participate in the research, but she still wanted to contribute. She indicated that her husband’s mental health had not improved since the Wave A interview, and she was struggling to navigate the appropriate support available. More specifically, she revealed that he was not always eligible for support owing to the severity of his condition, and she had found it difficult to identify a service that would take responsibility for supporting him. This issue was affecting her and the wider family:

[I’m] his administrator, his care coordinator. I’m supposed to be his wife... It’s putting a strain on our whole family, especially me, because I’m the one having to chase everybody. The GP was asking me what did I want to do about medication? About changing medication, and asking what I thought. I’m like, ‘I’m not medically trained. I don’t know!’ (spouse of ESA SG claimant, Wave B)

3.6 Summary

The analysis and discussion in this chapter has highlighted the varied reasons why respondents left the Armed Forces. Transitional support to assist them to re-orientate and resettle into civilian life appeared variable, with a number of respondents suggesting that it was absent, whereas many others experienced it as inadequate or inappropriate to their needs. Nonetheless, the majority of respondents were able to find paid work on leaving the Armed Forces, and many had significant histories of employment following discharge. However, for a significant number employment was typically experienced as a series of often short-term posts. Physical, and especially mental, impairments acted as significant barriers to entering and sustaining paid work for a considerable number of veterans. PTSD, depression and other mental health impairments, which were both Service- and non-Service-related, had a considerable negative impact on the ability of many people to sustain employment within the civilian labour market and also affected people’s wider relationships with their spouse and other family members. Regardless of the underlying causes, it was evident that many respondents’ mental and physical impairments were central to incidences of inactivity in the paid labour market and the necessity of having to access social security benefits. Veterans’ experiences of accessing and claiming such benefits are considered in Chapter 4.
4. ACCESSING SOCIAL SECURITY BENEFITS

This chapter begins by outlining the varied pathways onto social security benefits among the participants. When considering how and why veterans initiated benefit claims, two factors need to be acknowledged. First, the majority of respondents had very limited prior experience and/or understanding of the workings of, or how to access, the UK benefits system. Second, respondents were interacting with a social security system undergoing a period of significant and sustained change, triggered by the introduction and continued rollout of UC. Consequently, with few exceptions, respondents were in receipt of UC or, in those locations where UC was not fully operational, one of the two main out-of-work ‘legacy’ benefits, i.e. JSA or ESA, alongside one or more of the additional payments (e.g. Housing Benefit, Working Tax Credit). The ongoing transition of the social security system therefore added a further layer of complexity to some people’s interactions with JCP, which is also discussed within this chapter. The chapter concludes with a brief exploration of the stigma that some veterans also associated with claiming social security benefits.

4.1 Movements onto social security benefits

Transitions from work onto social security benefits came about for a variety of reasons. For a number of our respondents, a period in receipt of out-of-work benefits was initiated owing to external circumstances beyond their control, such as redundancy or the end of a fixed-term contract:

I left the Army. Anyway, I got a job, and then I got another job, and it was only basically after maybe three or four years of coming out that I went, because I went and got made redundant and they had a set of people there. I can’t remember their name, who they were, but they deal with like a resettlement programme for redundancy and all that. They said the first thing you need to do is get down the Jobcentre, so make sure your cards are up to date (UC claimant, Wave B)

However, more routinely our participants were claiming benefits at a point of ‘change’ in their mental or physical health, which had an impact on their ability to sustain employment. As highlighted previously, it is acknowledged that the majority of people who leave the Armed Forces do not suffer from mental health conditions, and the causes and triggers among the minority of ex-Servicemen who have mental illness are complex and may relate to issues that occurred pre- and/or post-Service, as well as being due to specific experiences within the Armed Forces24. Nonetheless, the significance of ill health, particularly mental illness, as a key factor in initiating claims for social security benefits for substantial numbers of the veterans who took part in this research should not be dismissed lightly.

For some, untreated mental health issues also triggered further ‘crises’, including periods of homelessness and offending. In some instances, these crises led to individuals being supported to access their benefit entitlements for the first time. For example, one man talked about his benefit claim actually being triggered by the threat of eviction from his property. Although the council had taken steps towards eviction, they had recognised that the respondent had complex needs and was not claiming the financial support to which he was entitled:

Account balance: £12.58.

Are you eligible for benefits?
- E.S.A
- J.S.A
- U.C
- P.I.P
It was because of some ladies from the council that I ended up going 'on the sick'... because they took me to court for possession of my house, and the judge said to me, 'Listen, you've not claimed any benefits in all this for about seven or eight months'... I wasn't working or anything like that at the time. So, because of the depression I was stealing and stuff like that to pay for my drug habit, and because I wasn't claiming benefits and that and things spiralled... it was the council who said to the judge, 'Listen, I know we're here to basically say we want your house because of not paying anything, but we do think that this man needs some sort of help' (ESA SG claimant, Wave A)

Consultations with AFCs and ‘leads’ in the DWP focus groups also highlighted how difficult it could be for some veterans to engage with the social security system, given how unfamiliar many were with that system:

If you’ve never been in a Jobcentre and this isn’t your world it’s a big deal coming in, don’t know what to do, everything is online (DWP focus group respondent)

It was evident that many veterans had experienced difficulties in knowing which benefits they should be applying for in the first place. There were also a small number of respondents who were confused about which benefit they were actually currently claiming or which ESA group they had been placed in (see Table 1). Therefore, clearer advice on eligibility for social security benefits was needed:

I don’t understand the whole system. I do not understand it, and this is where I think the biggest [problem] is. You’ll sit there and [JCP] – and I love this statement – they’ll say, ‘Right, yes, I’d like to claim unemployment, please’. ‘Why?’ ‘Well, because I’m unemployed.’ ‘Yes, and?’ And I’ll say, ‘I’ve worked all my life. I was in the Army’. ‘Yes, what are you going to claim for then?’ ‘Well, I don’t know. I’ve never claimed it.’ ‘Well, you’ve got to tell me one or the other.’ ‘What about this one? I don’t know the names of them.’ One’s income-based or something and another one’s something else, and I’ll say, ‘Well, I don’t know...’ ‘Well, you’ve got to tell me one or I’ll have to put the phone down and we can’t have this interview’ (ESA claimant, respondent unsure whether SG or WRAG, Wave A)

4.2 The complexity of the social security system

The sample was divided between those who were accessing the social security system for the first time and those who had prior experience of claiming benefits (often many years ago). Regardless of whether people had prior experience or not, difficulties in accessing and navigating the contemporary system were commonplace. This related to the complexity of the benefits system, particularly for those who had served in the Armed Forces and had limited or no interactions with the system, as one respondent reflected during his Wave B interview:
4.2.1 A system in transition: Experiences of UC

The introduction of UC appeared to have introduced a further layer of complexity for our respondents. UC was introduced with the linked aims of simplifying the benefits system, making work pay, increasing benefit take-up and reducing fraud and error\(^{25}\). It is a single variable monthly benefit payment that replaces four of the existing means-tested social security benefits and the two tax credits for working-age people (Income Support, income-based JSA, income-related ESA, Housing Benefit, Child Tax Credit and Working Tax Credit). Since its introduction, UC has been the subject of criticism in respect of its underlying principles, adequacy of payment levels, and modes of implementation, which have been suggested to lead to new complexities and problems for benefit recipients\(^{26}\).

As can be seen in Table 1, just under a third of our participants were claiming UC at the first interview (Wave A). The Wave A UC sample included a mix of new claimants and those who had relatively recently moved from ‘legacy’ benefits (i.e. JSA and ESA). In terms of initially accessing UC, one of the key issues for both new and legacy claimants was the five-week minimum waiting period for the first payment. This often negatively affected people’s ability to meet their basic needs and increased their levels of debt and rent arrears before they had even received their first payment. For example, one participant had been waiting for around eight weeks for his first payment when interviewed at Wave A:

If I remember right, I did it on the computer [the initial claim], and then I had to go for a face-to-face at the Jobcentre. Yes, that was right. They had to take some information down there. The process itself wasn’t all that bad. It’s just this waiting seven, eight weeks to get paid. When you’ve got nowt, it’s horrific. It’s horrendous (UC claimant, Wave A)

In total, it had taken nine weeks for him to receive his first payment. He reflected on the impact of this during his Wave B interview, where he described the financial implications of the debt and arrears that he had incurred:

It destroyed my life. Like, my life was always in tatters to start off with... but waiting that long for so little money, I don’t think people realise, like, people who’s issuing out the Universal Credit side of things – I still had bills to pay. Obviously, I had no money to pay, so I was blacklisted with every credit referencing agency going because I just purely and physically couldn’t afford to pay for anything, and it got us in a real, real lot of trouble financially-wise. For the money that they give you to start off with, I think it’s absolutely criminal...

When I got my first payment from Universal Credit, I saved about £14 of it... My overdraft sucked most of my money up. I had to pay accommodation, I had to feed myself and not just that, I still had my kids to provide for... I was going to food banks, I couldn’t do anything (UC claimant, Wave B)

As mentioned above, one of the stated aims of UC is to simplify the social security system; however, for a number of our participants their initial experiences appeared to suggest more complexity, with respondents highlighting issues related to a lack of understanding about how the system operated; the reduction in UC payments when earnings from paid work increased; the deduction of previous crisis loans; the different expectations in comparison with legacy benefits; and also how the incorporation of Housing Benefit worked. In this context, some reflected on their experiences of claiming legacy benefits as being more favourable. For example, following release from a period in prison, one respondent reflected on how he was placed on UC and the subsequent difficulties he had managing his finances:

So I said, ‘Well, okay then, can I go back on Jobseeker’s Allowance?’ They said, ‘No, you’ve got to claim for this Universal Credit now’... which was a nightmare. They said four weeks, I went six weeks without any money... while I was working those three month they reduced it down [because... my hours increased... there wasn’t enough information. At first, I was getting, like, the rent paid, part of my rent depending on what I earned in that particular month... But then again, they never informed me; they just stopped my benefit and then they turned round and said, ‘Well, you were earning too much money... Then all of a sudden they’ve sent me a letter because you used to get crisis loans. £360 from two years ago; now they’ve only just started claiming that (UC claimant, Wave A)

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Another respondent felt that the previous separation of different types of benefits had made the system easier to understand and navigate, particularly in terms of entitlements and obligations:

> It were a lot easier to claim benefits, and I don’t mean easier as in you could just do nothing and still get your money. I mean it were – everything were a lot simpler to do. You know what I mean? Now they’ve changed it to this Universal Credit, I think it confuses a lot of people… on Jobseeker’s you had to claim for Jobseeker’s Allowance, and then you had to claim for Housing Benefit, and then you had to claim for Council Tax Benefit, and you get a letter from every single one telling you what you’re entitled to and whether you’re entitled to anything else, but with this one, because it’s all in one, they don’t tell you anything. That’s why it’s confusing, because you don’t know – you could do something wrong and not even know that you’ve done it wrong, and then your money’ll just get stopped. That’s when you’ll know it’s wrong! (UC claimant, Wave A)

It was evident that in many cases the support of NGOs (Armed Forces charities, other third-sector organisations, housing providers, etc.) played a vital role in enabling respondents to access their benefit entitlements (see Chapters 6 and 8 for a further discussion).

In addition, reforms to the social security system have included the introduction of a ‘digital by default’ approach within UC, with an expectation that claims will be managed through an online journal. For those currently navigating this system, there appeared to be a divide between those who saw this as a positive aspect of the system (in some cases the only positive aspect):

> That’s one positive thing I can actually say about Universal Credit there. The online system was very good (working full-time, Wave B (UC claimant at Wave A))

The only positive thing I’ll say about Universal Credit is the interaction you have with the journal… you can send messages to your Work Coach, you can send messages to the people that do the – I think it’s [the] Support Centre, I think that’s what they call it… you can respond, and it’s a much better way of working… rather than having letters (UC claimant, Wave A)

and those who struggled to cope owing to digital exclusion or low levels of digital literacy:

> I had to tick that box, but I didn’t even know, but the problem is I can’t afford internet. Everything to do with Universal Credit’s online… It takes a little bit of getting used to, because obviously I wasn’t sure how to navigate it. You’re not shown that anyway, you’re just told you need to go online, log in to your account and do whatever you need to do (UC claimant, Wave A)

Consultations with AFCs and ‘leads’ in the DWP focus groups also raised the issue of transitions to UC, highlighting that there could be difficulties for some of the veterans who had got used to the ‘legacy benefits’ system. Hence, they were mindful of the need to monitor the situations of those claimants:

> DWP focus group respondent 1: The one thing that is going to be a slight issue potentially is obviously when it comes to 2023, the last thing that will go over is ESA Support Group. Now how many veterans are going to be in that? So we’re going to have to keep an eye on that as Armed Forces Champions…

> DWP focus group respondent 2: Yes, because there will be issues. It’s different for them… That’s what has been your life for the past ten years or whatever. Now, all of a sudden, it’s this whole new thing, especially if someone is vulnerable or they’re alone or their computer skills aren’t great… That’s what we have to keep an eye out for, for those people that fall through the net.

The case study of ‘David’ in Chapter 8 highlights some of the difficulties faced by someone who moved over from the ESA SG to UC within the study period.

### 4.3 The barrier of stigma and pride

It was evident that people had experienced significant barriers to accessing social security benefits related to a lack of understanding of eligibility and also difficulties with applying and navigating through the claims process. However, it is also important to highlight that a number of people reflected on the perceived stigma associated with claiming benefits, which prevented some from initially claiming the benefits to which they were entitled. Indeed, from a number of accounts, it was clear that this had been a ‘last resort’ for people after trying unsuccessfully to manage on their own:

> I survived for two years without a penny… I didn’t claim anything, I was totally against it. I was too proud to go and do anything like that, and then, at the other end of it, my anxiety was too bad for me to walk into [the Jobcentre]… I remember my first appointment, going to the Jobcentre, and it was horrific. The woman was sat there speaking to me like I was some sort of little child that didn’t want to get out of bed in the morning to go to work, and that wasn’t the case… I don’t think the Armed Forces personnel should have to go to the Jobcentre once leaving the Army, because it’s degrading, and it is massively degrading, when you do something as proud as serving in the Army (UC claimant, Wave A)

> I didn’t want to sign on. I refused to sign on. I went through two or three years of being ill, refusing to sign on and looking for work. I must have had about 20 jobs, because I’d have a job for a week or two, then I’d be sick and go back to hospital, then I’d get sacked. I kept doing it until, at the time, my wife said, ‘Will you just go on the sick. You cannot keep doing this. You’re going to kill yourself!’… Now I feel terrible that I’m actually on ESA, but I know full well that if I start doing it again I’m just going to go right back to hospital. I’m going to go right back doing the same thing again, and, to be honest, my kids need a dad. They need me. All right, their Dad’s on benefits. I’m sorry. There’s nothing I can do about my health (ESA SG claimant, Wave B)
Existing research shows that such feelings are common amongst benefit claimants\textsuperscript{27}; however, this was perhaps amplified for those who had served in the Armed Forces, and there was evidence that some people wanted to hide the fact that they were currently claiming benefits:

\begin{quote}
I don’t think the DWP could have done anything, because I was not even interested going near them. So they could have had all the help in the world, and I wouldn’t have gone near them to ask. It was a pride thing with me and still is. I still tell people sometimes that I work, even though I don’t, because I can’t stand telling people I’m on the dole. It’s a pride thing with me... I try and portray an image sometimes that I’m not on the dole because it kills me. It literally hurts me to know someone else has got to pay for me. But on one side, then again, all right, maybe I’ve served, I’ve done my bit, maybe it is time that someone else gives me a little bit of help. You know, I’ve done enough (ESA SG claimant, Wave B)
\end{quote}

Indeed, a common factor noted by policy and practice stakeholders was the reluctance among veterans to admit that they needed support from state welfare provision. Stakeholders suggested that the value placed on self-sufficiency, strength of character and resilience while in the Armed Forces meant that some veterans saw accepting benefits as a humiliating reduction in status from a position of respect, or as in some way “failing”:

\begin{quote}
There has been a lot of people who haven’t made claims for benefit because they’d be deemed as a failure (representative of an Armed Forces charity)

Our Service leavers do have a lot of pride. Sometimes it’s pride to a fault, where they don’t want to come forward and admit that there’s a problem (representative of a criminal justice agency)
\end{quote}

4.4 Summary

The analysis and discussion in this chapter has highlighted the significance of ill health in necessitating people’s reliance on social security benefits. That said, many respondents had little or no initial understanding of the social security system and how to access their entitlements. For those with prior experience, this was often many years ago when a very different system was in operation. Many were confused by the complexity of the social security system in terms of eligibility and also how to access benefits. It was evident that in some cases this confusion was further compounded by the introduction of UC and the significant changes that accompanied this reform. However, for some the stigma associated with being a benefit claimant also acted as a further barrier to accessing the social security benefits to which they were eligible.

5. ASSESSING CAPABILITY FOR WORK

Given the significant proportion of our respondents who had mental and/or physical health impairments, part of their experience of moving into and through the social security system included having to undergo a Work Capability Assessment (WCA). This is a test used to assess how a person’s health condition or disability affects their ability to complete a range of functional activities. Claimants are classified as either ‘fit for work’, having ‘limited capability for work’ but deemed likely to become capable of work in the future, or having ‘limited capability for work and limited capability for work-related activity’. These classifications determine both the amount of benefits received and the conditions attached to them. This chapter provides an analysis and discussion in relation to participants’ experiences of assessments relating to capability for work, highlighting a number of profoundly negative experiences, which related to the perceived focus on physical rather than mental health; the perceived lack of qualification of the assessors to assess Service-related ill health and disabilities; inconsistencies in the use of Service medical records and other relevant medical information; and the impact of the assessment process on people’s health. Most commonly, these negative experiences related to the WCA for ESA or, more recently, for UC, although a small number of respondents also referred to experiences of Personal Independence Payment (PiP).

5.1 A focus on physical capabilities rather than mental health

For those who had undergone a WCA, a key concern relating to the assessment process was the ability of the WCA assessor to appropriately consider mental health needs. More specifically, it was felt that there was a focus on physical functional capabilities within these assessments, with limited attention paid to mental health issues. For a number of respondents, the perceived focus on physical capability had resulted in them wrongly being assessed as ‘fit for work’:

- It was more disabilities with more physical symptoms. It wasn’t – it didn’t feel like they were asking me anything about mental symptoms. So you’re answering the questions and you feel like it doesn’t apply to me. ‘Can you walk more than 20 yards unaided?’ and things like that. Which, obviously, I can do that, but it’s different because it’s mental symptoms (working full-time, Wave B (ESA assessment phase at Wave A))

- It’s a bit daunting... when you go there they ask you irrelevant questions. ‘Can you lift your right hand? Can you lift your left hand? Can you sit down, can you stand up? Can you stand here?’ That’s irrelevant to me. It’s not your physical, it’s what’s in your mind (recently moved from JSA to pension, Wave A)

As highlighted above, in addition to experiences of the WCA, a small number of people also referred to experiences of assessments for PiP. As with the WCA, concerns were raised about the expertise of those undertaking the PiP assessments and the perceived lack of understanding in relation to mental impairment:
I got a letter back from PIP saying I got no points... So I rang them up, I said, ‘Look, I’m not being funny’, I said, ‘but I’ve got no points, I’m not getting my PIP’, and I said, ‘my ESA’s been reduced to the standard rate’. I sent all the information regards my medical condition, and they said, ‘What evidence have you sent in?’ So I said, ‘Well, it’s about ten pages long, from [Armed Forces charity], signed and all the rest of it’... I said to them, ‘Do you understand the mental health condition I’ve got?’  They said, ‘Yes, we looked at it, but we can’t understand how that’s affecting your daily life’, and I thought, but surely, if you’re assessing me on a medical, on mental health issues, you should understand the different mental health conditions. ‘So, for example’, I said, ‘on my bad days I do need prompting to have a wash, I do need prompting to feed myself, because sometimes I just sit there and fester and do absolutely nothing’, I said, ‘and sometimes, if I’m cooking something and I’ve got the cooker on’, I said, ‘if I have a flashback, that flashback could last ten minutes, 15 minutes, and when I come round it could be on fire’. ‘Yes, but we don’t understand how your mental [health] affects you’ (ESA SG claimant, Wave A)

This respondent was subsequently awarded PIP but had been required to go through the process of providing evidence a number of times. This account, like those of many other respondents, also highlights that there was often a lack of understanding about the specific mental health issues relating to Service in the Armed Forces:

    Respondent: They didn’t ask me anything about my PTSD at all.

    Interviewer: What’s the main reason you’re on ESA?

    Respondent: For PTSD. At my work [capability] assessment they were asking me about how far I could walk and could I move my arms and legs, and pretty much that was it. There was nothing at all about mental health mentioned within it (ESA SG claimant, Wave A)

5.2 The qualifications and skills of assessors

Another key concern relating to the WCA process was whether the person undertaking the assessment was suitably qualified. A number of respondents were under the care of a doctor or a specialist, who had deemed them to be unfit for work because of their impairments. Therefore, they found it difficult to understand how the WCA had led to a different outcome from that recommended by the medical professional who was treating them:

    ‘Oh, no, but you’re not signed off enough.’ Hang on, you’re either fit for work or you’re not. I don’t understand how a Work Coach, no matter how qualified they are, they’re not medical practitioners... my shrink’s a professor... I think he’s more qualified to say whether I can do work than someone working in the DSS. I find it nuts (UC claimant, Wave A)

A small number of respondents described a more recent assessment as being slightly more positive than previous experiences of the WCA. One respondent reflected more positively, largely because the recent assessment had been undertaken by a doctor. However, as above, he was unsure as to why the assessments by his own doctor and surgeon were not considered adequate:

    This one [WCA] went better... he said he was a doctor, and he was pleasant and not confrontational or sarky at all. It was a lot nicer than the last one I had, when I had a woman that was really sarky and I had a go at her. It’s still not pleasant... It’s not particularly nice talking to people you don’t know about that. I don’t like talking to people you know about stuff – I think it’s wrong that you should have to. I’ve gone to my doctor, and my doctor’s referred me to a surgeon, and these people aren’t more qualified than a surgeon, are they? A surgeon isn’t going to turn round and make it up and say my back’s knackered just for the crack, is he? (ESA WRAG claimant, Wave A)

In another example, it appeared that the assessor was understanding of issues related to Service in the Armed Forces. This was attributed to the fact that this assessor had started to work with an increasing number of veterans:

    The young girl that did it, she was really nice because she did inform me, she said, over the last couple of months she had had a lot of ex-Service personnel going in and stuff, so she was really nice, but I know in the past, they’re just blunt (ESA SG claimant, Wave A)

However, whereas some positive examples were evident, overall there appeared to be significant differences between the approaches of assessors. There were also a small number of occasions where it was alleged that an assessor had made inappropriate comments. For example, a respondent described a particularly negative experience, which had resulted in him making a formal complaint to the DWP:

    Respondent: I don’t know whether you know, but the people that do the assessments, they’re not medically trained people. I remember I had one particular incident when I went along, and I said to the guy, ‘Look, if I start to feel unwell or if we need to stop, can we stop the interview and can I walk out for five minutes?’ The guy says, ‘No’. He says, ‘I’ve got 40 minutes. It’s got to be done in 40 minutes’. He said, ‘To be honest, all you veterans that say you’ve got PTSD and everything, it’s just a crock of s***’.
Respondent: Yes, and I turned round and said, ‘Well, are you medically trained? Are you trained enough to evaluate, to tell me that what I’m telling you about my PTSD is not true?’ He said, ‘Well, no’. I said, ‘Well, how can you say that then?’… I complained to the manager before I left… Then, obviously, a week later the DWP called me and said, ‘Well, what’s this about a complaint?’ I blankly told them on the phone. They said, ‘If we send you a form, can you fill it in?’ I filled it in and I said, ‘Look, this is what he said. This is the way I felt I was treated’… but then when I spoke to them, I think it was about a month afterwards, they said that the assessor had been pulled into the office and basically given a verbal warning. That’s all that happened (ESA SG claimant, Wave A)

A number of the policy and practice stakeholders who were interviewed had considerable experience of the assessment process, under threat of a benefit sanction for non-compliance. He spent 18 months in the WRAG before seeking reassessment. This respondent felt that the fact that a doctor had undertaken the reassessment, coupled with appropriate consideration of his War Pension assessment, had resulted in the appropriate outcome when reassessed:

The ESA went to appeal. The appeal was upheld, and ESA was reinstated and backdated as well… the two-person appeals panel suggested that the person assessing me on the day was not familiar with service-related injuries. They advised the ESA, the DWP to leave my ESA alone until I think 2021… that extra documentation [Service medical information] was provided to the appeal, they took all of that on board and questioned why it wasn’t used at the assessment… I was scored zero out of 15. It went to the appeal. The Appeal Board have said that the person assessing me wasn’t qualified to assess me. There needs to be a system in place that if we do attend, as I did, these assessments, the information that we brought with us, which we felt, I felt was relevant, is looked at. It wasn’t even taken off me… I went in for an ESA assessment with both a medical record and a mental health record. Neither were looked at. Was that person qualified to score me zero without looking at the documents?… the military document? (ESA SG claimant, Wave B)

Policy and practice stakeholders also expressed frustration that medical evidence from Service did not always appear to be taken into account in the assessment of benefit claims. Referring to an appeal that they were supporting at the time of their interview, one stakeholder stated:

5.3 The inconsistent use of supporting medical information

Concerns were also raised around Service medical records and supporting documentation not being considered during social security benefit assessment processes. As the above account highlights, appropriate use of a pre-existing War Pension assessment can support a more appropriate outcome. Another respondent described how they had not had to go through a WCA because all their existing Service medical information had been sent over to the DWP.

However, only a small number of respondents explicitly mentioned that Service medical information and other relevant documentation had been used to support the assessment process. More often, respondents described difficulties in feeding this documentation into the assessment process. For example, one respondent described taking documentation with him to the assessment, but the assessor did not want to look at it. He spent 18 months in the WRAG before seeking reassessment. This respondent felt that the fact that a doctor had undertaken the reassessment, coupled with appropriate consideration of his War Pension assessment, had resulted in the appropriate outcome when reassessed:

Reflecting on his experience, this respondent described having been placed in the ESA Work Related Activity Group (WRAG), where he was expected to undertake work-related activity to move closer to the labour market and was observed that many assessments were carried out by people with very little knowledge of combat-related conditions. It was felt that Armed Forces veterans with mental health issues should be assessed by suitably qualified staff. Indeed, for some stakeholders the majority of their working week was spent in tribunals representing veterans who had – in their opinion – been wrongly assessed as ‘fit for work’.
It was evident that where Service-related medical information was available and taken into consideration respondents were more likely to have the impact of impairments on their ability to undertake paid work and/or undertake work-related activity appropriately recorded and acknowledged.

### 5.4 The role of the benefit assessment processes in exacerbating ill health

In addition to issues around the skills of assessors and the ability of the process to appropriately consider mental health, the interviews highlighted a broader issue around the process itself having a negative impact on people’s mental health. For example, at his Wave A interview the respondent below had spoken of suffering from PTSD, which had led to a previous attempt to take his own life. Supported by various veterans’ charities he was accessing suitable therapy and had been advised to apply for ESA because of his mental impairment, but had been deemed ‘fit for work’ following an assessment:

> I was advised through [Armed Forces charity], who have been fantastic actually, I would have to give a bit of praise to those guys. I was advised to apply for Support Group. I went for an assessment, went to meet some nurse, met me down in [location], asked me, ‘What’s wrong with you then, I want to know what happened in [war zone]?’ I said, ‘I don’t feel comfortable to tell you that, and he gave me zero on everything. He said, ‘Can you walk to the shop?’ I was going through this massive guilt – from the point when I couldn’t work anymore to the point of accepting that I needed benefits wasn’t an easy process for me (ESA claimant, appealing against WCA outcome, Wave A)

He decided to appeal against the outcome of his WCA, during which time he had to borrow money off family members to support himself financially. At his Wave B interview he reported that he had subsequently been placed in the WRAG and was also now receiving PIP. However, reflecting on the whole process he noted:

> The system has made me five times as worse as when I first went to the doctor for help (ESA WRAG claimant, Wave B)

In one of the joint interviews, it was evident how the WCA had affected not only the veteran but also his spouse and wider family. In their Wave A interview, he described having a number of significant health issues (both mental and physical). Reflecting on being called for a WCA, he described the length of time he had had to wait at the assessment and also a perception that the process took an approach of being suspicious of people’s claims of ill health and impairment:

> So, two days before that they were insistent that I turned up [for the WCA]. [My wife] was not able to go with me because of the kids. I drove myself across. They asked me in that interview five times how I managed to get myself to [name of town]. I said, well, I drove. I did drive. I present very well… It ended up turning into a complete farce. They kept me waiting for two hours, which… I think was deliberate. They stated on the form when it came back out that there’s nothing wrong with my hearing, because when she called my name… [I answered] yes, I was there. There was basically nobody left in the waiting room and I knew I was next because they had told me repeatedly that I was next, so it doesn’t take a rocket scientist to figure that one out (recently moved off JSA for full-time study, Wave A (moved to ESA SG by Wave B))

At the Wave B interview, his wife reflected on that experience and felt that little consideration had been given to how the assessment process would have a significant impact not only on her husband, but also on her and their children:

> [The DWP need] to maybe just comprehend the level of risk and threat that come along with that for the family. So the DWP have no concerns in having [him] waiting in an incredibly stressful environment with somebody that wasn’t qualified to manage him and then go through an appeals process. This is somebody that’s heavily medicated for a serious mental health condition, and that had repercussions within my family unit when he came home. His behaviour does sometimes become unmanageable. We have come very close to [him] having to be sectioned… I’m not asking for special treatment. I’m just asking for somebody to think, ‘Is this the most appropriate course of action with this person, and what are the possible repercussions and ramifications for that?’ (spouse of ESA SG claimant, Wave B)

For many respondents it was evident that the process was very stressful, and people were often nervous when talking about a pending assessment or fearful when awaiting the outcome. In some of the more extreme examples within our study, the process had significantly exacerbated existing conditions, with devastating consequences. For example, a participant had been called for a reassessment between the Wave A and Wave B interviews. He described how the fear of a reassessment had led him to self-harm approximately five months after our Wave A interview. When interviewed at Wave B, he described how the intervention of health professionals and an Armed Forces charity had been vital in advocating for him. It also highlighted how traumatic it can be for those who are experiencing multiple assessments relating to different types of benefits:
I had a letter come through the letterbox… [DWP] wanted me to go in for an assessment… I rang them up and I say, ‘I’m unfit to travel to an assessment’, and they said to me, ‘No, but you’ve got to come in for an assessment… You’ve got to provide evidence that you’ve got PTSD’. I said, ‘Doesn’t my War Pension evidence count?’ He says, ‘No, because you’re claiming for a different benefit’. Unfortunately, I put the phone down, and my anxiety levels were so high I tried popping a couple of diazepam and that wouldn’t work… I took a serrated knife to my arm… After I’d calmed down I spoke to my doctor surgery and they says, ‘Well, come straight down…’ A couple of days later I had another phone call from the DWP, same sort of rigmarole, ‘We’re waiting for evidence’… Unfortunately, I put the phone down and hacked at my left arm, my right arm. Same situation again… [Following the intervention of external organisations] I get a phone call from the DWP saying, ‘We’ve seen the photographs of what you’ve done to yourself… You don’t have to have an assessment, and we’re now going to leave you alone’… I had not self-harmed in 18 months, and the fact is that these people had pushed me into doing it (ESA SG claimant, Wave B)

At the time of the Wave B interview, while slightly relieved that he would not be called for a WCA for a further three years, he expressed concern that within the next 12 months he would be reassessed for PIP:

In three years’ time I have to go through this all again. It’s like I’ve got to go through, I’ve got to be reassessed for my PIP next year. I’m hoping they look at the evidence that they’ve got from my GP, my psychiatrist and my mental health nurse and they look at the evidence and say, ‘Fine, yes, there’s no need for him to be reassessed’. I’ve just got a sneaking suspicion that… they’re going to come after me (ESA SG claimant, Wave B)

Many respondents had launched appeals to challenge the initial outcomes of their assessments and the attendant decisions about fitness to work29, often with the support of their doctors, other agencies and family members. A number of respondents also talked about taking people with them to their assessments as a form of support, again referring to workers from various agencies. Having this support during an assessment was vital for many, and, indeed, some of the respondents who had gone to their assessments alone perceived that this was sometimes detrimental to the outcome.

5.5 Summary

Many of the issues raised within this chapter are consistent with a range of evidence that has highlighted the wider inadequacies of the WCA process. It has been heavily criticised for propagating an individual ‘deficit model’ of disability30 that deflects attention away from the barriers to work that disabled people face and also for focusing more on physical mobility issues, with inadequate consideration of mental ill health31. Although there was some limited evidence of the WCA and allied assessments within the benefits system leading to appropriate outcomes for the veterans who took part in our research, this was not the case for the majority, and particular concerns were raised around the ability of the process to appropriately assess Service-related impairment or provide clarity on how Service-related medical information should feed into the assessment. For many respondents it was evident that they were reliant on the support of healthcare professionals and Armed Forces charities to navigate the WCA (and other assessments). The importance of this support cannot be understated; however, it also highlights significant ‘displacement’ effects of the current system, whereby the cost of supporting people is borne by a wider range of organisations.


6. SANCTIONS AND SUPPORT

Navigating conditionality within social security

Conditionality is a long-standing feature of the UK welfare system. It embodies the principle that aspects of state support, usually financial or practical, are dependent on people meeting certain conditions, which are invariably behavioural. The application of a principle of conditionality links eligibility for continued receipt of work-related benefits to claimants’ engagement with mandatory work-focused interviews, training and support schemes and/or job search requirements under threat of sanctions for non-compliance. The contemporary UK social security system incorporates both these elements: first, a requirement to undertake up to 35 hours per week job search and/or training; and second, benefit sanctions, i.e. loss of up to 100% of benefit for between one day and three years, depending on the level and repetition of the infringement. This chapter provides a discussion and analysis of veterans’ experiences of navigating the conditionality within the system. It focuses first on respondents’ experiences and understandings of the Claimant Commitment and the extent to which appropriate ‘easements’ were enacted. It then explores the impacts of benefit sanctions before moving on to consider people’s experiences of the mandatory support offered by JCP and work programme providers. It concludes with an analysis of the effectiveness of welfare conditionality in supporting movements into paid work.

6.1 The Claimant Commitment: managing the expectations of the claim

At the time of the Wave A interviews, approximately one-third of our respondents were subject to conditionality, i.e. they were required to be ‘actively seeking work’ or undertake work-related activity to prepare for work in the future/move closer to the labour market. These included a range of respondents variously in receipt of JSA, UC or ESA in the WRAG.

The Claimant Commitment is the document that sets out people’s obligations, clarifying both what they are expected to do in return for benefits and support and exactly what happens if they fail to comply (i.e. the possibility of being sanctioned). This document is required to be accepted as a condition of entitlement at the beginning of the claim. Routinely, the Claimant Commitment is produced during the initial work-focused interview between the claimant and the JCP Work Coach, with any work-related requirements detailed in the Claimant Commitment supposed to be tailored to an individual’s circumstances, making them realistic and achievable.

35 The DWP stated that the average duration is 31 days. In May 2019, the Government announced the removal of three-year sanctions. The DWP stated that sanctions are only applied when claimants fail to meet their conditionality requirements without good reason. Claimants are given an opportunity to explain why they have failed to meet their requirements. However, until the DWP has been informed of a good reason, the normal evidence gathering and referral processes must take place.
Overall, the majority of respondents agreed with the principle of attaching job search conditions to the receipt of benefits and indeed were keen to undertake work-related activity. However, participants raised questions about the effectiveness of such conditions in facilitating movements into paid work and also how reasonable or achievable some of the specified requirements were. In particular, reference was made to the fact that an up to 35-hour-per-week job search was expected under UC, of which a number of respondents were critical. Indeed, some were honest about resisting this condition:

I think it’s fair enough, but they ask you to do a bit too much… I think people don’t actually do [35] hours looking a week, because I don’t think I’ve ever met anyone on Universal Credit that actually looked for [35] hours a week!... I handed a couple of CVs in in the shops personally, because obviously when I do my shopping I might as well just take my CV... and I’ve just told them I’ve put my CV online... and if you have proof of a few [applications], so if you just do a few and print it off and say [I] did this, then they [UC] leave you alone... I struggled to sit down and focus on a computer, so they’re expecting me to sit there for [35] hours, and that’s not going to happen (UC claimant, Wave A)

In addition to the job search expectations, there were also criticisms of the perceived expectation to take ‘any job’, which people gave no consideration to their previous work experience, preference or skill set. This was a particular concern for those who were trying to establish a specific career path post-service, who were concerned that intermittent and unrelated employment would have an impact professionally when employers looked at their CV. For example:

I work in the security industry, I’m only going to look at jobs in the security industry. No, I’m not going to look after Phyllis the old lady down at the old people’s home... ‘You’re going to go and get a job at Tesco stacking shelves.’ Well, no, sorry I’m not, because then you’re causing more harm to me than good... They see it as a job’s a job, regardless. Whereas I see a job as a career. I’m not going to ruin that... I’ve built up a very nice record of different security work and things that I’ve done, because I want to work in that industry. I’m going to try and boost my CV and all my own qualifications in that one little sector, rather than working in 30 different sectors over the past five years... it won’t make your CV look any good (UC claimant, Wave B)

They just said I couldn’t choose, I couldn’t turn down jobs, so I’d have to go with anything that was offered, if I did turn down jobs I’d get sanctions. And you’re like, I can’t, it’s not as easy as that. I’ve got to do certain types, security jobs are perfect for me because it suits my skill set from the Army (UC claimant, Wave A)

Consultations with AFCs and ‘leads’ in the DWP focus groups suggested that veterans are sometimes not prepared for the contemporary labour market and the competition for jobs within that. More specifically, when people have been used to a guaranteed role within the Armed Forces, it can be disheartening to face a situation of having to submit applications for a significant number of jobs, which are often rejected. Importantly, this has an impact on people’s job search activity, with an observable pattern of ‘frenetic’ activity, which then tapers off. This can result in the threat of a sanction, which is sometimes the point at which an AFC would intervene to provide support:

You’re looking at a list and you’re thinking, oh yes, I’ll apply for that, I’ll apply for that, I’ll apply for that, but after about ten rejections on jobs, then what you can see on journal issues or job search is that it just stops. Then they get disheartened from that, because when they’ve come from one thing, where you’re never going to be unemployed in the Army, so they will always find a job for you. Whatever rank you’re at, there will be a role in that or an interim role... You can see that on the work search or the journal application, journal records of it. It’s frenetic and then tailing off... and it’s over about a two-month period, I’d say... Normally when I’m getting involved it’s just at the point when they’re about to get sent for a decision-making. The work coach has done what they can... when speaking to veterans a lot of people take a very soft approach... Sometimes you just have to go, ‘Look fellow, if you don’t apply for jobs...’ (DWP focus group respondent)

Routinely, very few respondents felt that they had any influence over the content of their Claimant Commitment, with a perception that it was something that you were required to sign and that it was generic in content rather than a personalised agreement about job search requirements tailored to an individual’s circumstances and capacities:

I’ve got to sign this declaration that I will inform them of any change in circumstance, I will look for work, I will do this and I will do that. It’s one generalised commitment to cover everybody. It doesn’t matter if you’ve got no arms and no legs, you can still look for a job as a typist... It’s not personalised, get out of here [laughter]. The only time I’m going to swear here, what a load of bollocks [laughter]... they just said, before you get anything, this has got to be signed... There’s nothing personal about the Universal Credit system whatsoever (UC claimant, Wave B)

Another respondent indicated that he had had a ‘disagreement’ with his Work Coach over his Claimant Commitment, which related to a perceived lack of understanding on the part of the Work Coach with regard to the impact of his mental health problems:

38 The DWP stated that the ‘permitted period’ gives Work Coaches the discretion to allow claimants with specialised or strong work histories to look for specific work of their choosing for up to three months. Where a claimant has a strong work history, the Work Coach may allow the claimant to restrict their work search/availability and only look for work relating to a particular job type and location (and its associated salary).
Policy and practice stakeholders also provided a number of examples of clients who, particularly as a result of mental health issues, struggled to meet some of the requirements of their benefit claim, such as attending regular appointments at JCP or mandated training courses. The following are a couple of the examples provided from the stakeholders’ casework:

**He had to do 37½ hours a week, he had to go and sign every two weeks, and this guy had PTSD, so the underlying issue was PTSD and anxiety and nervousness around these environments, and he lost his temper when he was in those places (representative of a third-sector organisation).**

I’ve got many examples... a typical one is a young man who has two children. He’s in a stable relationship, his partner works, he was being supported by [Armed Forces charity]. He was fairly stable, he was doing quite well, he was going through the process but then found it quite demanding, the conditions that were being placed on him, and failed to achieve some of them. He did turn up for his appointment, although he struggled to do that as well, because he knew that he hadn’t achieved what he was supposed to achieve. It became quite a spiral downwards for him because he was sanctioned and he felt that he was failing even more, and that created a lot of problems, and he’s not on his own, I’ve seen quite a few similar to that (representative of an Armed Forces charity)...

However, despite the broadly negative comments there was some evidence of good practice. Within our sample, some respondents spoke of JCP Work Coaches exercising their discretionary powers to set up Claimant Commitments that reduced, suspended or removed work-related activity requirements because of the respondents’ impairments, e.g. some respondents referred to having to undertake 10 or 20 hours job search rather than the maximum 35 hours.

### 6.2 Experiences of benefit sanctions

Successive UK governments have extended conditionality so that benefit sanctions can now be applied to non-compliant recipients of JSA, ESA and, moving forward, UC. Significantly, for the first time UC rules also extend conditionality to include some of those who are in low-paid or part-time employment, who may be instructed to seek better-paid work or additional hours of employment under the threat of sanctions (i.e. those below the Administrative Earnings Threshold)⁴⁹. The enhanced sanctions regime has come under particular scrutiny, with concerns around the negative impacts on claimants’ mental health⁵⁰, increased poverty and destitution, people having to resort to ‘survival crime’ (e.g. shoplifting)⁴¹ and increased use of food banks⁴², as well as similarly harmful effects on claimants’ families and children⁵².

At Wave A, a total of 21 respondents said that they had experienced a benefit sanction at some point during their interactions with the social security system. For the majority of these respondents (14), this sanction had occurred more than 12 months prior to the Wave A interview. Seven people had been sanctioned within the 12 months before the interview, with five of these being sanctioned within the six-month period before the first interview. Reasons for being sanctioned ranged from being late for, or missing, a prearranged work-focused appointment; incorrectly completing their online job search journal; failure to undertake their specified required number of hours of job search; and, according to some respondents, administrative errors on the part of the DWP.

For example, one respondent described how he had been sanctioned for doing 27 rather than the mandated 35 hours job search specified in his Claimant Commitment and also for missing a JCP appointment. Whereas he accepted that he had not met the requirements, he explained the reasons for his non-compliance. He also perceived that, in part, the sanctions were applied owing to the absence of his regular Work Coach, who, he felt, had a better understanding of his particular circumstances:

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³⁹ The DWP stated that claimants who have individual or household earnings between the Administrative Earnings Threshold and the Conditionality Earnings Threshold fall into the ‘Light Touch’ group. Conditionality is not currently being applied for ‘Light Touch’ claimants.


⁴³ Dwyer, P. (2018) op. cit.

The DWP stated that Hardship Payments are available to eligible claimants who can demonstrate that they will face hardship as a result of a sanction.

The DWP stated that when a claimant is found ‘fit for work’ following their WCA, the Work Coach should use their discretion to tailor conditionality to ensure it is reasonable in light of the claimant’s health condition or disability. Work Coaches may limit the number of hours a claimant must be available for work, and the number of hours of work search and other work-related activity can also be reduced. Work Coaches must also take into account the claimant’s health condition or disability in agreeing the type and location of job the claimant is expected to look for.
Whereas a significant number of respondents had previous experiences of a benefit sanction, only one respondent experienced a sanction between Wave A and Wave B. This respondent described being sanctioned twice during that 12-month period, which he attributed to administrative errors on the part of the DWP. He was very accepting that these were simply ‘human errors’, which were ultimately rectified, although they had caused stress and financial hardship at the time. This experience of being sanctioned also appeared to have been compounded by him being incorrectly moved to UC as well:

Veteran: I’ve been sanctioned a couple of times and I’ve had to phone up and say, ‘Look, I don’t sign on. I don’t come into the office. Why are you sanctioning me?’ I’ve been sanctioned twice over the past twelve months for not attending interviews which I haven’t actually had. Don’t get me wrong. They have actually refunded the money back. They have sortied it out. They did try and put me on Universal Credit once, which they haven’t. They’ve changed it back. They got the dates wrong. [This area] didn’t go live onto Universal Credit... they cancelled everything, and I went through about a month of having no money. They were good enough. They did put it all back in, they did refund it all. It just took about a month of absolute stress and me going cuckoo to lose the whole lot...

Interviewer: How did you find out that you’d been sanctioned?

Veteran: They sent me a letter.

Interviewer: Because you failed to come in?

Veteran: For an appointment that didn’t exist. Twice! They did fix it. It just did cause a lot of stress in the meantime, but human errors do happen, I understand that (ESA SG claimant, Wave B)

However, we need to recognise that it is not just the experience of a sanction that has negative impacts; for a number of respondents the pervasive threat of a sanction for non-compliance created a sense of dread and fear:

I’m waiting for them [JCP] at any minute just to say, ‘No, you’ve not done enough, right, we’re sanctioning you. That’s it, you’re getting nothing’ (UC claimant, Wave A)

For one respondent, this fear had even led them to discharge themselves early from hospital to attend an appointment with a Work Programme provider:

[Work Programme provider] said, ‘Oh, what are you doing here?’, and I says, ‘Well, I’ve been told I’ve got to attend, if I miss my interview then I get sanctioned’, and they says, ‘Have you discharged yourself from hospital?’ I says, ‘Yes’, they said, ‘Well, when was your surgery?’ I says, ‘Three days ago’ (ESA SG claimant, Wave B)

Indeed, it was highlighted by some policy and practice stakeholders that there was a tendency for some veterans to accept orders from authority without question, such that veterans were less likely to challenge unfair instructions or decisions: a lot of Service people don’t question what they’re told (representative of an Armed Forces charity).

6.3 Experiences of mandatory support

As highlighted at the beginning of this chapter, conditional benefits systems combine sanctions (as discussed above) with a requirement for claimants to engage with support to search for, prepare for and enter paid work⁴⁷.

The interviews provided examples of positive experiences of interactions with the mandatory support being provided by JCP advisors and Work Coaches. Some respondents spoke positively about Work Coaches prioritising their health needs, supporting people to attend a range of appropriate training courses and helping people claim more appropriate benefits. For example:

They’ve helped us the best way they humanly possibly can... Like the first aid course, and the fork lift course, and things like that... and the food safety certificate, which I passed last week, it was through the Jobcentre... The Jobcentre were more than happy, because it was letting them see I’m willing to try and do something to get back into work (ESA SG claimant, Wave A)

I actually get Carer’s Allowance for looking after my mother-in-law... The September WCA [outcome: ESA WRAG], they basically turned around and said, ‘Well, tough. There is nothing we can do for you’... I said, ‘Well, I’m spending half my time looking after my mum-in-law anyway...’ so they said, ‘Well, quite happy, we’ll pay you Carer’s Allowance’ (Carer’s Allowance, Wave B (ESA WRAG at Wave A))⁴⁸

Another respondent described his Work Coach taking him through some of the options that might be relevant to him and also signposting him to a veteran-specific agency that could help with his training needs:

[My Work Coach] took us through a load of stuff and courses I can do career-wise, and obviously the security one stood out for me... when I asked, obviously, for the security courses, they turned round and says, ‘[Name of organisation], they’re quite good with stuff like that’, so I got in touch as soon as I left the Jobcentre and I got an interview within the same day (JSA claimant, Wave A)

However, a number of respondents had also been mandated to attend training courses⁴⁹ as part of their claims. These training courses were regularly described as being too generic or of poor quality and were often associated with benefit claim compliance rather than something that would meaningfully help people move into paid work:

⁴⁷ The DWP stated that Work Coaches can also set voluntary work-related activity, where there is no risk of sanctions.

⁴⁸ The DWP stated that where a claimant is caring for a severely disabled person for more than 35 hours per week they will have no conditionality applied. For other caring responsibilities, the Work Coach can use their discretion to limit work-related activities to be compatible with the claimant’s caring responsibilities and should tailor requirements to best support the claimant into work.

⁴⁹ The DWP stated that, in circumstances where a claimant is required to look for work, if a Work Coach sets any work preparation activity, such as attending a training course, it will be offset against the time the claimant is expected to spend looking for work.
In a small number of cases, people had booked onto courses, which they had wanted to attend, through JCP, but the courses had subsequently been cancelled owing to a lack of participants. Those who had attended courses that were more vocational had often done so through their own volition and often through voluntary engagement with Armed Forces charities or other third-sector organisations.

Positive experiences of engagement with mandatory support within the study were particularly dependent on the extent to which an individual advisor/Work Coach understood an individual’s needs and circumstances and subsequently exercised their discretionary powers to facilitate appropriate easements of the conditions attached to the claim. For example, one man described the positive relationship with his Work Coach at Wave A:

_interviewer:_ Can you remember then what was in your Claimant Commitment?

_Veteran:_ At the minute just to get mentally stable... Mine is to work with my psychologist and my occupational therapist, help out round here [referring to supported accommodation]. I do the cooking and everything in here. That’s what they classed as going to work, as it would be for me, but my main target is to get mentally stable really... [My Work Coach] said, ‘If you don’t attend certain meetings... If you’re not seen to be active on the thing, then they could stop your Universal Credit’... But he said, ‘You haven’t got to worry about that yet because I want you to get better before you start doing these things’ (UC claimant, Wave A)

Unfortunately, and demonstrating the significant difference between the approaches of Work Coaches, this positive experience had shifted to become profoundly negative when this respondent was interviewed at Wave B. This was due to the allocation of a different Work Coach with a very different approach:

_I moved on from that Work Coach... I ended up with a [different Work Coach]... there was no empathy, there was no nothing... she was very hard-faced and she couldn’t understand why I couldn’t go looking for work, because she kept on saying, ‘Well, it’s not disabling you’ [referring to his ongoing health issues] (working full-time, Wave B)

The variation in advisors/Work Coaches appeared to be the case both at a geographical level and within individual JCP offices.

Another respondent had experienced what they felt was a deterioration in the support they received when they were no longer able to access a specialist ‘disability officer’ within JCP:

_They employed these Work Coaches, and that was when the attitude changed. I went in when these Work Coaches were first there and I said, can I see the disability officer? They said, ‘You don’t need a disability officer. We’ve got work coaches now,’ and I wasn’t allowed to see the disability officer. I was forced against my will to see this nasty Work Coach, and she wasn’t pleasant, [a] most derisory woman... I’m going to be fair, that Jobcentre treated me very well until it went onto the [Work] Coaches, and it was the Work Coach who wasn’t very nice (Disengaged from ESA, Wave B)

Indeed, one respondent in the DWP focus groups highlighted the different model of working within JCP, which they suggested did not include a caseload approach any longer:

_Work Coaches_ don’t caseload customers any more like they used to. I know when I was a Work Coach years ago, and it was legacy, you had ex-Service caseloads or a mental health caseload or all different things, so you’d think, oh yes, that person would be good for that provision. They don’t do that anymore (DWP focus group respondent)

Furthermore, pre-existing perceptions of the level and type of support available through JCP often did not match the reality of the support that is commonly on offer to claimants. Indeed, there was a consensus among policy and practice stakeholders that the nature of life in the Armed Forces was fundamentally different from civilian life and that this posed particular challenges for some veterans. Stakeholders characterised an environment where most, if not all, personal business was handled by military administration:

_When you’re in the Army everything’s taken out at source and everything’s paid for, even though some of these are bright people. You must have known that you’ve got to pay Council Tax, do you not see this bill?’ ‘Yes, well I thought...’ [referring to their interactions with some of the people they had been supporting], and because everything was sort of done for them they didn’t realise that that they had to do it themselves (representative of a military charity)

This was seen to pose a number of risks for veterans, not least an expectation that there would be something ‘on offer’ when needed and that it would be relatively straightforward to obtain:

_I think they were surprised at how little money they would get [referring to benefits]; they were surprised at how they have to wait; they were surprised at the hoops they’d have to jump through to get it (representative of a criminal justice agency)

Many of those veterans with prior experience of ‘signing on’ in previous decades referred to their experience of

50 The DWP clarified that there are still Disability Employment Advisers (DEAs) within Jobcentres. The aim of the DEA team is to build the capability of DWP colleagues, employers and partners and strengthen understanding of the interactions between employment and health conditions or disability.
selecting advertised job cards on ‘the boards’ with the expectation that Jobcentre staff would then help arrange an interview with the chosen prospective employer. These respondents were unprepared for the contemporary online system of essentially self-directed job search that is used today. Consequently, a number of veterans did not equate JCP with providing employment support; rather, they viewed it as being primarily focused on the administration of benefits and compliance with the conditions attached to eligibility:

You go in there now, and it’s not a Jobcentre, it’s just a claim processing centre (ESA WRAG claimant, Wave A)

Back then [1990s]... a job board, which you don’t have now. I had a really, really good careers adviser at the Job Centre... if any jobs were coming in for my experience, he would phone me up and say, ‘Right, I’m getting you an interview, tomorrow’, he was on the phone all the time. They don’t do that now, unfortunately... They were really, really supportive in them days... but unfortunately, they don’t work like that anymore. You’ve got to research and find a job yourself... they give you these ten steps... looking for work, and obviously, when you come and sign on, speak to the adviser again, ‘What have you done about this? What have you done about that?’ All they’re worried about is, ‘Have you done your ten steps online?’ (recently moved from JSA into part-time work, Wave A)

A small number of respondents had been mandated to the Work Programme, again with mixed results. For example, one veteran, who was claiming ESA in the WRAG at Wave A, described how his ongoing health problems had prevented any progression during the course of the programme. As a result, the Work Programme provider had, in the end, recommended that his WRAG status be reassessed:

They couldn’t do anything for me, because obviously they couldn’t address my mental health issues. They couldn’t find me work, because obviously I’m on crutches... It got to a point that after I’d been seeing them for 14 months my caseworker said to me, ‘You shouldn’t be coming here’. I said, ‘What do you mean?’ He said, ‘Well, we can’t see the point of you coming here once a month, and there’s no change in your physical and mental wellbeing’... He said, ‘Well, we’re going to put a report in to the Jobcentre... we will say that you need to be reassessed’, which is the only good thing that [Work Programme provider] did for me (ESA SG claimant, Wave A)

Early access to the Work Programme (now Work and Health Programme) is one of the employment and benefit initiatives that form part of the DWP commitment to the Armed Forces Covenant. Interestingly, however, it was evident that some policy and practice stakeholders had made efforts to ensure that the veterans they were supporting did not take part in the Work Programme. For example, one third-sector organisation described having a strong partnership with their DWP AFC, which enabled them to request that clients did not have to attend:

Because the relationships that we’ve got, I’ve wrote a letter now – and this is where I’m really chuffed with what we’ve achieved – I can send one of my clients into the Jobcentre with this letter saying that they are engaged with us and we request that they don’t put them onto the Work Programme! (representative of a third-sector organisation)

Indeed, a respondent in the DWP focus groups also raised concerns around the appropriateness of the Work Programme for veterans, highlighting that this is something that should be monitored with the rollout of the new Work and Health Programme:

With the Work Programme, there was day one conditionality for veterans. That was a big problem, because what happened was they’d come into the Jobcentre, immediately get hit with stuff that you’ve got to do... the Work Programme caused quite a bit of animosity, because they’d be trying to do job search for what they want to do, and sometimes they’d be reporting five days a week to [Work Programme provider]... If someone said, ‘I’m a veteran’, they’d go straight on to that and they’d become a priority customer. Then, obviously, they’re finding out that some people that they know who are claiming benefits are going in twice a week, whereas they... They’ve got to go in every day and do [IT courses and stuff]... If they’ve got an undiagnosed health condition that could actually be one of the worst things for them... the Work and Health programme. I’ve got no feedback on that, but that’s another thing we may have to be aware of (DWP focus group respondent)

Moreover, another DWP respondent indicated that the Work and Health Programme would be the last port of call in terms of trying to identify support for veterans:

The Work and Health Programme is something you look at way down the line. The other providers... the charities, can do a lot of work with people. I always go to them first before I’ll do the Work and Health Programme (DWP focus group respondent)52

In contrast, there were a very small number of cases where respondents were enabled to find employment through engaging with the support available from JCP and Work Programme providers, but it must be emphasised that such cases were the exception rather than the norm. The standout example of this was a man who after a decade and a half of Service had recently entered civilian life. At Wave A he was unemployed and living in supported accommodation for veterans. Owing to mental health impairments and a dependency on alcohol he was initially told to apply for ESA but was moved onto UC within a month when he moved to another JCP office. By wave B he was working in a temporary job and looking to establish long-term employment moving forward. Significantly, because of his impairments he was not

51 This comment presents a negative view of the Work Programme, which is interesting, given that early access to the Work Programme was listed as an ‘employment and benefit initiative’ that formed part of the DWP commitment to the Covenant. The Work Programme has now been replaced by the Work and Health Programme. As above, Service leavers are given early access to this programme.

52 The DWP stated that they had been working with JCP Work Coaches to ensure that those who would benefit most from the Work and Health Programme are identified and contacted quickly to bring them onto the programme.
required to ‘actively seek work’. However, he wanted to work and had approached JCP to explore his options. His Work Coach put him in touch with an external employment support provider, who enabled him to find full-time temporary employment:

I was pretty bad, because I’m an alcoholic, I don’t mind mentioning that, and I only managed to stop myself drinking probably about three months ago, four months ago. Apart from that, I suffer from PTSD through the [Armed] Forces, and I take medication for depression and anxiety as well… I originally had to look for work, but then I went for a WCA, and they signed me off because of my PTSD… Because I didn’t have to fill out any commitments, I actually approached the Jobcentre at that point and said, ‘Look, I still want to look for work. What are my options?’… They set me up with a company called [name]. They actually helped me find this job that I’ve got now, they basically helped me find this temporary job (working full-time, temporary employment, Wave B)

However, as highlighted elsewhere\(^{54}\), ironically, among some of those assigned to the SG within ESA/UC equivalent there was sometimes a sense of ‘abandonment’ because of the unavailability of employment support for this group of claimants. Although this suited some respondents who, owing to the severity of their impairments, believed they would be unable to work for the foreseeable future and wanted to be ‘left alone’, others who believed they would be capable of work in the future criticised the lack of support available:

Because I’m on the sick, so they can’t really do much with me, but there doesn’t seem much structure when I go into my appointments, like I just feel like I’m turning up, signing on and getting my next appointments, that’s pretty much it. Like there’s no follow-on or, ‘What’s your next plans? What’s your next steps? How are you getting on with your help?… Even if you’re not looking for jobs at the moment, even if they could say, ‘Right, well, we know you’re off sick at the moment but there’s this course that could help you’ (UC claimant, Wave A)\(^{54}\)

It was clear from the interviews that experiences of support within the social security system differed significantly; however, what was overwhelmingly evident was the broader and significant role the social security system played in relation to the provision of basic financial support during periods of need or when ill health prevented people from working:

I was a fit fighting man at one time; I worked on scaffolding – different jobs when I came out [of the Armed Forces]. The battering to my body… Inevitably, it’s going to catch up with you as you get that bit older; it’s just wear and tear on a car; my body’s just running out of MOTs… I’d be completely kaput without the benefit system (respondent unsure of which benefit they were claiming)

Going from something that I didn’t know was available in the first place. To have it advised by Veterans UK that I could possibly access benefit and ESA, I wouldn’t have known about it until that point… It has enabled us to get to where we are now without severely struggling. Enabled me to get into part-time work, which I would like to expand on, and enabled me to carry on studies (ESA SG claimant, Wave B)

\[6.4\] The effectiveness of conditionality in triggering movements into work

In line with recent research focused on the impacts and effectiveness of welfare conditionality\(^{55}\), the routine application of compulsory work search/training requirements under the threat of benefit sanctions sometimes led to a counterproductive ‘culture of compliance’ that got in the way of more meaningful and effective attempts to secure employment.

For example, one respondent had secured full-time employment between Waves A and B, which he had found through his own social networks. He had subsequently ‘signed off’ UC and was hoping that he would never have to come into contact with the system again. Although he had found UC supportive earlier in his claim, particularly at a time when he was experiencing mental health issues, when he was allocated a new Work Coach his experience had changed to interactions that were more compliance-focused. More broadly, he was frustrated that the routine appointments and their focus on compliance with the conditions attached to his claim got in the way of him trying to find work. However, he also expressed frustration at what he perceived to be the counterintuitive nature of sanctioning when he was threatened with a sanction for not attending his JCP interview while he had instead been attending a job interview:


\[54\] The DWP stated that claimants with no work-related requirements are still able to volunteer for support.

I had this argument with them umpteen times. I said, ‘Well, how are you expecting me to go looking for a job, but then expect to come and see you every other week and then explain what I’m doing?’... I got [threatened with being] sanctioned for one of my payments, when they weren’t going to pay us because I missed a Work Coach interview. I was actually at a job interview, which they were, like, ‘Well, you should have informed us’, and I said, ‘Well, to be fair, I only found out in the morning that I had a last-minute interview’. I said, ‘That’s a lot more priority than coming to see you’... they accepted it in the long run, but they were going to sanction us to start off with (working full-time, Wave B (UC claimant at Wave A))

There were also examples within the interviews where Work Coaches appeared to be complicit in this cycle of counterproductive compliance, with respondents referring to instances where they had been told to apply for a specified job, even though it was evident that they did not have the requisite skills or qualifications. As one respondent highlighted:

You have to jump through hoops to – you’ve got to have this CV, you’ve got to apply for X amount of jobs even if you’re not qualified. They sanctioned me for not applying for a job, where it distinctly said that I had to have a particular ticket – I said, ‘I haven’t got that ticket’; and they said, ‘Apply anyway in case you don’t need it’. I said, ‘Well, if you didn’t need it, they wouldn’t say so there, would they?’ You know what I mean, it’s like talking to a plank of wood – I really struggle with them (ESA WRAG claimant, Wave A (respondent moved to ESA SG by Wave B))

In the more extreme examples, it was suggested that there had been occasions where health issues were ignored and people were still expected to pursue a job vacancy. One respondent, for example, had been told to apply for a security position, but when he spoke to the employer, the employer could not consider his application because of his ongoing mental health impairment:

Security. Then they say, ‘Okay, there’s this job. Are you fit for work?’ ‘No’... but I’ve still got to fill out the whole application form. The first thing they say... ‘Oh, we’ll set you up for a job. If you refuse to do this we’ll sanction you’. Okay, brilliant. Give me the telephone, ‘This employer wants to talk to you’. ‘Hello?’ ‘Hello. Blah, blah, blah. Your CV is fantastic. Come and work for us. Blah, blah, blah. Are you okay to drive?’ ‘Well, no, because I’m on lithium.’ ‘Bye’, and put the phone down. Not a chance in hell (UC claimant, Wave A)

Some respondents also questioned the usefulness of Universal Jobmatch56, which people were routinely expected to use to demonstrate that they were searching and applying for work. One person referred to the demoralisation of applying for around 300 jobs without success, whereas others suggested that the jobs that were listed on that site were often not available or not appropriate for their skills/qualifications. Some respondents also indicated that they only used Universal Jobmatch to comply with the conditions attached to continued receipt of their benefits and that they then used other sites that were more likely to help them find an appropriate job:

Every day logging on to Universal Jobmatch, which to me isn’t appropriate for me because there’s a lot of recruitment companies out there that do ex-Forces, which is better for me. So Universal Jobmatch is a bit of a pain in the backside, because sometimes you log on to apply for a job just so it covers you to show them in the Jobcentre you’ve been looking for work. You have to log on to Universal Jobmatch even though it’s no good to you (JSA claimant, Wave A)

It was evident that for some veterans – running counter to the central purpose of conditionality – the removal of conditionality was perceived to have had a more positive impact on people’s ability to prepare for, and find, employment. More specifically, the absence of compulsory job searching had given people not only some space to address their health issues but also time to engage in education and training activities that were more meaningful in terms of their future return to the labour market. For example, a veteran with a respiratory impairment caused by employment after leaving the Armed Forces had initially been placed in the ESA WRAG. His ex-wife had helped to challenge this decision because of his deteriorating health. Following the provision of additional medical evidence, he was subsequently reassigned to the ESA SG. In addition to his physical health condition, he stated that he also had PTSD as a result of his time in Service. The removal of the expectation of having to go to JCP and engage in compulsory work-related activity had enabled him to focus on his health and also to take steps towards returning to the labour market: It gives me time to retrain for going back to work (ESA SG claimant, Wave A). Similarly, another respondent felt that the only way he had been able to further his education to secure future employment was by being assessed as not capable of undertaking paid work:

I would rather not be on benefits; I would rather have a good job and be earning good money, which is what I’m working to and why I’m doing a degree, at the end of the day. The only way I’ve been able to basically do this degree and better myself is by having health problems, and I think that is, in itself, a bit of inequality going on there. The only reason I’ve been able to further my education and better myself is through having a debilitating illness (ESA SG claimant, Wave B)

As highlighted in Chapter 4, a number of respondents had transitioned from ESA to UC (either prior to or during the research), and, although they remained ‘off sick’, for some this transition had brought new requirements to attend regular appointments at JCP. When

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56 Universal Jobmatch was the website that benefit claimants could use to find job vacancies. It enabled the DWP to monitor a person’s job search activities if the individual claimant granted their Work Coach access to their personal Universal Jobmatch account. In May 2018 Universal Jobmatch was replaced by the ‘Find a job’ website. The DWP stated that Work Coaches would encourage the use of other job search sites, depending on the types of jobs people were looking for. Instead of using Universal Jobmatch to record job search activity, claimants now use their UC account to record this information, which allows them to include other job search activity (such as speculative approaches to businesses or reading vacancies in publications).
interviewed at Wave A, for example, one respondent described an expectation that he would attend fortnightly appointments. Although he did not overtly object to this condition, at the same time he questioned its value and purpose:

Veteran: When I was on ESA I didn’t have to go in, I just had to give them proof that I was signed off sick by the doctor… But with Universal Credit I’ve basically got to go to these appointments every two weeks, and I’m literally just turning up to the appointment, they’re saying, ‘Oh, you’re still signed off sick’… ‘Right, we’ll book your next appointment…’ They basically say, ‘Oh, it’s down to the assessor’s decision whether you go to your appointments every two weeks, and if you miss an appointment it’s the same as anyone else who’s given the job searches’ [implying the possibility of a sanction]… They basically just said, ‘Well, it’s in our interest to see you every two weeks just because, to check your welfare basically’, that’s the way they make it sound.

Interviewer: Do you get a sense that they’re checking your welfare?

Veteran: Well, no, because isn’t that the doctor’s remit? Do you know what I mean? If the doctor’s signed me off sick, the doctor’s signed me off sick… I don’t mind going in and signing on, I just think it’s a bit of a, it’s a non-event really… you’re just going in, showing your face and then walking out basically, getting another appointment, ‘see you in two weeks’, that’s pretty much it (UC claimant, Wave A)57

This respondent had moved into temporary full-time work by Wave B. This move had been facilitated by engagement with a Work Programme provider. However, what is significant to note from his experience is that this was voluntary engagement instigated by the respondent, rather than being mandated by JCP (see case study of ‘Peter’ in Chapter 8).

Significantly, for a small number of respondents the application and experience of conditionality had led to disengagement from the social security system. One respondent, for example, referred to a previous experience of JSA, where he had opted to disengage from the benefits system for a period as he could not cope with the conditions attached to his claim, during which time he relied on informal familial support:

‘Right, we’ve got to do this for you, we’ve got to do a CV for you, we’ve got to do this for you, we’ve got to do that… you can’t get this unless you’ve done that… I thought I’ve had enough of that. I mean, my mind was going totally, and I thought, I’ve had enough of this crap, and I just didn’t sign on again. I went for nearly six months without a penny… because of all the hassle and the crap, I came off it and I was living off my sister, my daughters… I wouldn’t take a penny off them [DWP] because I couldn’t handle all the aggravation I was getting (ESA claimant, assessment phase, Wave A)58

At the time of Wave A, he was living in veteran-specific supported accommodation and had re-engaged with the social security system. Shortly after Wave A, he was placed in the ESA SG. However, upon leaving his supported accommodation and moving to a new area, he had subsequently been moved onto UC (see case study of “David” in Chapter 8).

Another respondent, who experienced serious episodic illness, chose to walk away from the benefits system following a sanction, rather than continuing to search for or undertake work that he was incapable of sustaining. However, although he was initially able to live on some savings, once these had gone he had to re-engage with the benefits system:

One respondent disengaged from the benefits system between their Wave A and Wave B interviews. This respondent had a visual impairment and, when interviewed at Wave A, described her experience over the last couple of years as a JSA claimant. After feeling pressure to take ‘any job’, she had started working but experienced difficulties due to her impairment, including a subsequent panic attack. The intervention of her doctor and a charity had enabled her to then make an application for ESA, which she was claiming at Wave A:

I tried working at a nursing home round the corner… I got really stressed out, I had a few near misses, tripping over things, struggling to find things… I mean all the things that you would expect with a visual impairment… I think it must have been a panic attack that I had one morning, I said I wanted to go home and I just broke down… I went to visit a GP and I was in a bit of a state. I did actually then get a note to say that I was anxious and depressed, and my sight impairment officer came round and she said, ‘Enough’s enough’, she took me back to see the disability advisor [at JCP]; and then he said, ‘Right, make a claim for ESA, and I recommend that [she] takes some time out’ (ESA SG claimant, Wave A)

This respondent’s mental and physical impairments were not a result of her time in Service, and she had not previously experienced any mental health issues (beyond describing herself as being ‘on the anxious side’). However, she stated that her interaction with the social security system had exacerbated her anxiety to the level that it required treatment:

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57 The DWP stated that Work Coaches are able to use their discretion to decide the frequency and method of contact in light of a claimant’s health condition or disability, but that most would not be expected to attend weekly or fortnightly appointments. This was also confirmed by respondents in the DWP focus groups, who talked about their ability to ‘relax conditionality’ on a case-by-case basis.
My mistake was going into the Jobcentre in 2015, and they were supposed to be helping me and they actually, it was more of a hindrance... I've always been on the anxious side, but since, and it was absolutely to the day that I walked into the Jobcentre that this anxiety's becoming a real problem, and I'm currently seeing a counsellor (ESA SG claimant, Wave A)

When interviewed at Wave B, she had decided to come off ESA and was supporting herself through her PIP and her husband’s pension. When asked why she had left ESA, she stated the following:

I did because it was basically – the Jobcentre were no help... I just felt so stressed out with them, it was actually making me ill, being signed on. So I decided to sign off... I was seeing a counsellor and they just referred me to see, and he said it was the frustration with the Department of Work and Pensions that was making me paranoid and he said it’s not uncommon with them (Disengaged from ESA, Wave B)

Indeed, when considering the role of JCP it is important to remember that it is tasked with fulfilling two roles, i.e. helping working-age people find paid employment and delivering social security benefits for those who are out of work for various reasons (including disability and ill health). In recent decades, as welfare conditionality has been extended and intensified within the UK social security system, there has been an emphasis on moving increasing numbers of people off welfare benefits and into work. Although supporting people into work is an appropriate policy aim for any government-funded employment service, providing an adequate level of social security to those, including a substantial number of the veterans who took part in this study, who cannot work as a result of various impairments is also an essential function of JCP. It was evident that work remained the long-term ambition of many of the veterans who were interviewed; however, enforcing work inappropriately appeared to serve neither the individual claimant nor wider society:

I got told by the psychiatrist and told by the GP, ‘Don’t do – you’re signed off’. You go to Universal Credit, ‘No, there’s no such thing as signed off. You have got to come in, and you’ve got to do this, and you’ve got to continue doing your journal’... I’m on literally every nutty drug you can get, as well as other stuff, because I’ve got anger issues and PTSD, so I try to keep the lid on it, and it doesn’t help. They say I have to go for job interviews, and I’m like, ‘Who the hell is going to employ me at the minute?’ (UC claimant, Wave A)

It just seems like a dream at the moment to be in full-time employment... if I take that step to full-time employment and fall flat on my face... that is not going to be good for me mentally. I’ve got to make sure that I am capable of keeping full-time employment before I actually take that step. It could take a year, it might take longer. I might never be able to take that step, I can’t really answer that question. I’d like to be in full-time employment with no worries... I know I’m nowhere near that. I’ve just had to fight tears back five minutes ago. You can’t go to work when you have to run off to the toilets because you’re convulsing with crying (ESA claimant, unsure whether SG or WRAG, Wave A)

6.5 Summary

Conditionality is a long-standing feature of the benefits system in the UK. The Claimant Commitment plays an important role in setting out the work-related responsibilities that each claimant must fulfil in order to retain eligibility for benefits. Although the guidance on Claimant Commitments suggests that they need to be personalised, realistic and achievable, the majority of respondents felt they had little choice about the content of their Claimant Commitment. Furthermore, the application – and also the threat – of benefit sanctions for non-compliance with the work-related conditions attached to a benefit claim routinely had profoundly negative impacts on veterans. Although there were examples of good practice in relation to the mandatory support offered by JCP and external employment support and training providers, there were significant differences, with much of the support on offer being experienced as inappropriate and/or inadequate. Overall, for many respondents the conditional ‘work first’ benefits system had been ineffective in moving them closer to or into paid employment.

58 The DWP stated that UC removes the distinction between ‘in-work’ and ‘out-of-work’ benefits. The structure of UC, with the ‘taper’ and ‘work allowance’, enables claimants to ‘try out’ work at no risk of losing their benefit. Temporary, short-term and part-time work can be seen as a ‘stepping stone’ to more sustainable work. They stated that UC makes it easier for claimants to take on extra hours or an additional job, even if it is only short-term.

59 DWP (2016) op. cit.
7. HONOURING THE COVENANT
Honouring the Armed Forces Covenant and questions of ethics

‘An important feature of civil-military relations is the way in which states recognize the sacrifices that the men and women of the armed forces give to their country and provide care and support for them and their families once they leave the military’\(^{60}\). Indeed, the need to ensure that members of the Armed Forces community are not disadvantaged informs the Armed Forces Covenant and the new Strategy for our Veterans. Before looking at the findings from our interviews, we provide a brief overview of some of the key Covenant commitments in relation to social security. Subsequent sections of this chapter then consider how disclosure of a Service history was perceived to affect the service offered by the DWP, the role of DWP AFCs and respondents’ opinions on whether or not those who have previously served in the Armed Forces should receive an element of preferential service in relation to the support provided through the social security system.

7.1 The Armed Forces Covenant and existing social security provisions for veterans

The Covenant asserts that no member of ‘the Armed Forces Community’ should face disadvantage when accessing public or commercial services, with ‘special consideration’ deemed appropriate in some cases. Accompanying guidance reflects the importance of veterans’ families, identifying them as deserving of both ‘recognition and gratitude’ and ‘positive measures to prevent disadvantage’. The core principles of the Covenant are enshrined in law in the Armed Forces Act 2011; nonetheless, it does not create legally enforceable rights, with the most support reserved for those who are injured or bereaved. In relation to the social security system specifically, the Covenant states that ‘Members of the Armed Forces Community should have the same access to benefits as any UK citizen, except where tailored alternative schemes are in place’\(^{61}\).

As highlighted in Chapter 1, as part of a commitment to the Covenant, the DWP has made a series of adjustments to JCP and other services to support current and former Service personnel and their families\(^{62}\). These include locating an AFC in every JCP district, as well as a number of specific ‘employment and benefits initiatives’, including certain exemptions and easements. For example, those receiving Armed Forces Compensation Scheme (AFCS) (Guaranteed Income Payment [GIP]) or War Pension Scheme payments (these include War Widow’s/Widower’s Pension and War Disablement Pension) are exempt from the Benefit Cap (a limit on the total amount of benefits that people aged 16–64 can claim, which was introduced in 2013), and those looking to claim income-based JSA who have served overseas are exempt from the three-month residency requirement of the Habitual Residency Test (HRT) (exemption extended to cover spouses/partners and children in 2015)\(^{63}\). Also, specific easement rules on voluntary

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\(^{63}\) In addition to the HRT criteria, there is a three-month residence requirement for entitlement to JSA (income-based). The DWP stated that this requirement does not exist for UC, but claimants still have to meet the HRT criteria. However, there are a wide range of circumstances under which returning UK nationals will be able to satisfy the HRT and be immediately eligible to access UC. The DWP stated that decision-makers will carefully consider each individual application and take all the available evidence into account to ensure that UK nationals receive the benefits that they are entitled to.
unemployment conditionality apply, which allow veterans’ spouses/partners to claim JSA if voluntary unemployment has arisen as a result of them moving to follow their serving partner. For those injured in Service resulting in severe disablement, it is suggested that evidence from the Service Medical Board may be used to determine their eligibility for ESA and UC, instead of requiring them to undergo a WCA, as required for other claimants.

Furthermore, those who have served in the Armed Forces at any point (for however long) within the past three years are entitled to early access to the new Work and Health Programme (previously Work Programme), a ‘welfare to work’ programme that is delivered by a range of private, public and voluntary sector organisations.

Since the publication of the initial Covenant, more detailed commitments around welfare have been developed by a range of government departments. The Government issues annual reports assessing the progress made against the original pledges in the Covenant. In one report it was stated that the DWP had worked with the Royal British Legion, Atos and Capita (who undertake PIP assessments) and other stakeholders ‘to enhance the service provided to injured Service veterans, particularly those with Post Traumatic Stress Disorder (PTSD)’ and that tailored advice was in production for those veterans claiming (or wanting to claim) PIP or ESA. Indeed, in 2013 the Ministry of Defence (MoD) in conjunction with the DWP introduced Armed Forces Independence Payment (AFIP) as an alternative to PIP for those entitled to a GIP of 50% or higher through the AFCS. In contrast to PIP, individuals eligible for AFIP are not required to undergo an initial, or any future, functional assessment, and payments continue throughout their life.

Across the sample of policy and practice stakeholders who were interviewed, the level of knowledge and understanding of the specific adjustments, easements and exemptions within the Armed Forces Covenant relating to veterans within the social security system was mixed, with some unaware of any specific exemptions or easements or only familiar with a few of the measures. There was evidence that some policy and practice stakeholders had supported people in using the exemptions/easements that related to the Covenant, e.g. exempting compensation for injuries during Service from the UC means tests and exemption from the voluntary employment conditionality rules for spouses/families. However, it was felt that JCP staff were not always themselves aware of these exemptions and easements: we have to point them out to the Jobcentres on a regular basis, that this person’s entitled (representative of an Armed Forces charity). This included the circumstances of veterans in receipt of lump sums or ongoing payments specific to their Service (e.g. War Pension or the AFCS), which could also pose particular challenges when attempts were made to establish benefit entitlements, and a number of stakeholders stated that incorrect decisions were being made: ‘You’re not entitled to anything’ or ‘You’re only entitled to this’. When in actual fact they are entitled to more (representative of a housing provider for ex-Service personnel).

Several examples were also provided where it was felt that exemptions and easements were not working or had created ‘grey areas’. For example, one policy and practice stakeholder had found that divorced spouses were often regarded as outside the Covenant’s remit as they were no longer partnered with a veteran. Another noted that exemption from the HRT worked if you returned immediately to the UK following an overseas posting, but if there was a subsequent period of non-UK residency (e.g. working overseas) the Test would still have to be applied. Furthermore, very few policy and practice stakeholders felt that relevant Service medical information was being used consistently within social security benefit assessments (e.g. WCs).

7.2 Does disclosure have an impact on the support provided by JCP?

Armed Forces Service leavers and their families appear in the DWP Vulnerability Guidance on a designated list of ‘life events and personal circumstances’ that may indicate that an individual requires additional support. However, the provision of additional support requires a claimant to disclose their circumstances to JCP. More broadly, many of the policy and practice stakeholders were aware that JCP (and other mainstream services) had introduced an option for clients to disclose if they had been in the military, and policy and practice respondents advocated that this should be a gateway question completed as part of any initial assessment by any service. However, there was sometimes uncertainty...
about exactly what happened once the disclosure was made, even among government officials:

Would the Jobcentre staff know why they’re asking it? Is it just a requisite? I don’t know. That’s just a kind of example where, yes, we want to know and we’re doing it for very good reasons, to ask, ‘Okay, you’ve served in the military’, but I just wonder, if we don’t explain, and I say ‘we’ as the government, don’t explain why we’re asking. That can put them off (policy official 1)

Some policy and practice stakeholders suggested that there may be a reluctance on the part of veterans to disclose that they were ex-Forces, which was attributed to pride, shame, or a fear that it might affect their eligibility or that they would be ‘pigeonholed’ into certain types of careers. However, stakeholders were concerned that non-disclosure of a Service history could have negative implications in relation to assessments of ill health and capability for work, an understanding of reasons for non-compliance with work-related conditions, or access to additional support or easements offered through the Armed Forces Covenant, which were dependent upon this disclosure.

With regard to our veteran participants, the majority had disclosed their ex-Forces status to JCP, and in a number of cases this was discussed as part of a broader conversation about work history. There appeared to be significant differences between responses to this disclosure. In some geographical areas participants described accessing staff within JCP who appeared to act as ‘leads’ with regard to veterans. In these cases, it was evident that the Jobcentre was located in an area where significant populations of veterans lived or where there was a Garrison:

She [Work Coach] [is] actually very sympathetic to military causes and stuff, and she gets a lot of the guys with PTSD, and I think that’s a step forward. That’s what I think a lot of the Jobcentres should do... Once she started getting people from the Army hostel, she actually gives – as I say, she empathises. She’ll go the extra mile to explain stuff, and she’ll say, ‘Look, I know you’re under stress and all that, but I’ve got to tell you you’ve got to do this (UC claimant, Wave A)

In some cases, people referred to Work Coaches using their discretionary powers appropriately to meet the needs of individual Service leavers. For example, when interviewed at Wave A, one man referred to being allowed to have telephone appointments, rather than having to go into the Jobcentre, which they had found difficult because of their ongoing mental health issues:

I explained everything about what was going on, like in my head and all this sort of stuff, and so she was good in the way of not piling too much onto us. She used to ring us and say, ‘...you’ve got an appointment today, would you prefer to come into the office or would you prefer to do a telephone appointment?’ She was good like that... I spoke to her about everything, I really trusted her (UC claimant, Wave A)

When interviewed again at Wave B, this man was subsequently going into the Jobcentre for appointments, and he reflected on how his Work Coach had responded when, on one occasion, he was late. He had been fearful that this would result in a sanction, but the Work Coach had instead provided reassurance that a sanction would not be imposed. Just prior to taking part in the research, he had been living in another area of the UK, and he compared the support he had previously received with his current experience. As above, he attributed his ongoing positive experience to the proximity to a Garrison, with a perception that JCP staff had received training on working with veterans and had therefore developed a more nuanced understanding of the issues, particularly in relation to mental health impairments:

I was worried about it [being sanctioned]. When I got there, they were like, ‘Don’t worry. This happens’. Some places would sanction you straightaway, wouldn’t they?... ‘Don’t worry, Don’t stress about it.’ I think what it is with the Jobcentres – especially this one – they’ve got their staff training. They’ve been trained to understand veterans’ thinking and understand what PTSD is – they’ve been made aware of it and they’ve done staff training. Where up in the [previous area], it’s not military garrison area and they don’t deal with [it]... I think it comes down to staff training (UC claimant, Wave B)

A small number of participants also indicated that the disclosure of their Armed Forces background had led to JCP signposting them to Armed Forces charities in order for them to access further non-statutory support.

However, in some cases the disclosure of having been in the Armed Forces and subsequent discussions of issues related to that time were perceived to have elicited an inappropriate or negative response:

With him [advisor] I didn’t [feel comfortable], because of certain things he was saying. I says, ‘Look, I’m not willing to say what I’ve got PTSD for’, and I was in the process of getting transferred over or applying for ESA, and he said, ‘Well, can I ask when it was?’, and I said ‘1988’, and he turned round and he says, ‘Well, I think you should be over it by now...’ no one’s got a right to make a comment like that on it, and people like that shouldn’t be working for the likes of Jobcentre Plus (recently moved from JSA into paid work, Wave A)

71 The DWP stated that JCP staff have access to the District Provision Tool, which contains local and national signposting information.
Overall, the majority of respondents felt that the disclosure of their Armed Forces background had made little or no difference to the nature of the support they received. Furthermore, as highlighted in Chapter 4, the quality of the support being provided by advisors/Work Coaches appeared to be highly variable across the fieldwork areas, and it was evident that the majority of respondents were receiving support from organisations outside the DWP (e.g., Armed Forces charities, other third-sector agencies, housing providers and healthcare professionals). This support was sometimes employment-related but also focused on wider issues ranging from health to housing. In many cases, these organisations had been vital in terms of advocating for respondents in relation to their benefit claims or when they had experienced difficulties outside receiving support from organisations outside the DWP (e.g., Armed Forces charities, other third-sector agencies, housing providers and healthcare professionals). This support was sometimes employment-related but also focused on wider issues ranging from health to housing. In many cases, these organisations had been vital in terms of advocating for respondents in relation to their benefit claims or when they had experienced difficulties within the benefits system. Similarly, they often played a key role in offering diagnosis and therapeutic treatment for PTSD, depression and other mental illnesses among Service leavers. This external support was regularly described as being the most beneficial, as it was often tailored to the individual and provided by those who had an understanding of the complex needs that can emerge for some of those who have served in the Armed Forces.

For example:

[For housing] I was in a kind of half-squat... eventually we were all evicted. If it wasn't for [Armed Forces charity] helping me out and advising me, I think the stress would have been too much for me... I had a support worker, she's been absolutely fantastic. They just had a chat with me, looked at every aspect of where I'm at with things and advised me and signposted me... [For benefits] I was advised through [another Armed Forces charity], who have been fantastic actually, I would have to give a bit of praise to those guys. I was advised to apply for Support Group... They helped me fill in the forms, they were fantastic, helped me fill in all the forms, sent them off. There's a chap there, he's very much on the ball, and he's really good, ringing me back and stuff like that (ESA claimant, appealing assessment outcome, Wave A)

Discussions with DWP AFCs and ‘leads’ in the focus groups suggested that more training in relation to understanding the needs of the Armed Forces community would be useful. There were mixed views on whether training was relevant to all JCP staff or just those who had regular contact with members of the Armed Forces community. However, one DWP respondent suggested that some of the issues related to those areas of service where there were no Armed Forces commitments:

We are such a big business as well. We’re working age and pension age, but the commitment to have the Armed Forces Champion, the Armed Forces lead is in the Jobcentres. A lot of our customers deal with people on the phone, deal with other benefits where there isn’t that commitment to have an Armed Forces lead... it’s wider than Jobcentres. If you’re dealing with somebody who’s got [a] PIP claim, or a Universal Credit case manager, or somebody is claiming Disability Living Allowance, they’re dealing with a processor who hasn’t had the opportunity to have the exposure that we’ve had (DWP focus group respondent)

7.3 Interactions with DWP AFCs

The AFC role was introduced in early 2010. It was not designed as a ‘customer-facing’ role; rather, the AFCs aim to provide advice and guidance to JCP advisors on issues of relevance when working with the Armed Forces community. More specifically, they are responsible for facilitating ‘joint working’ between JCP and the Armed Forces community in their district; informing JCP staff about specific Armed Forces initiatives; providing an understanding of the issues faced by the Armed Forces community that can present barriers to employment and identifying ways to overcome these; and promoting the skills, knowledge and experience of the Armed Forces community.

For many policy and practice stakeholders who had regular, direct contact with JCP there appeared to be an awareness of the role, but often people described having received limited information about their AFC. For example, one policy and practice stakeholder commented that: I heard that mentioned some time ago, but I’ve not had any further information (representative of
a third-sector organisation), whereas another indicated that they had struggled to identify who the AFC was for their area despite asking at a Jobcentre; and nobody could help me with it (representative of an Armed Forces charity). Furthermore, although policy and practice stakeholders welcomed the role of the AFCs, some questioned whether they consistently had appropriate knowledge and understanding of the Armed Forces community. As such, there were felt to be huge geographical differences with regard to the quality of the service provided by AFCs: the best Armed Forces Champions do a fantastic job, really fantastic job… but on the other side of that is [those with] absolutely no interest whatsoever (representative of a third-sector organisation). It was suggested that this may have been because the role was assigned in addition to existing duties, meaning that the DWP AFCs were ‘double/triple-hatted’ (representative of an Armed Forces charity). Variability was also linked, as highlighted above, to proximity to military bases.

As highlighted above, the AFC role is not designed necessarily as ‘customer-facing’; rather, the AFCs liaise with JCP advisors/Work Coaches with regard to Armed Forces issues. However, across our sample of veterans, there appeared to be inconsistency in how the role was operationalised and also with regard to whether it was customer-facing or not.

Indeed, consultations with AFCs and ‘leads’ in the DWP focus groups flagged up that some of them felt that there remained a lack of clarity about their role, suggesting that more work could be done around defining the role and its objectives:

- There’s no real, no objectives or anything written down on it, or we haven’t got a target or anything like that or a very specific pattern that we follow (DWP focus group respondent)
- It was just passed over to me from a colleague… I think, in honesty, the handover, the understanding of the role wasn’t very clear. So I think there may be a piece of work, broadly speaking, that could be looked at in terms of a greater definition or clarity as to what the role is and what the expectations are (DWP focus group respondent)
- I was just told, ‘You’re going to be the Armed Forces worker officer for our office, and someone will let you know what you’re doing’. A lot of it, I’ve self-researched and I’ve asked these guys here [referring to the other AFCs in the focus group] as to what’s expected of me (DWP focus group respondent)

The lack of clarity and understanding around the purpose of the AFC role meant that some veterans had tried to contact their AFC and had been unsuccessful. For example, one person had tried to contact their AFC with the help of an intermediary but had been unable to make contact:

I went in [to the Jobcentre] with somebody from [Armed Forces Charity] to see the employment advisor… the one that I was seeing all along, the disability advisor, and he was mentioning about the Armed Forces Champion and he wanted to get in touch with him, obviously business-wise, but he never heard anything from him. This person didn’t get back to him. So that seems to me uncooperative (ESA SG claimant, Wave A)

Another veteran described variously being told firstly that the Jobcentre did not have an AFC but then on another occasion being told they did have one, but that the AFC could not be directly contacted:

- Never got to see one [AFC]… ‘We don’t have one here’ [advisor’s response], and I said, ‘I’ve been told you’ve got to have one at this Jobcentre’; and that was from the DWP. That’s from going to an Armed Forces event… this year, what happened was I went for another interview with the DWP… I asked this lady [at the Jobcentre], ‘Do you have an Armed Forces Champion?’, and she said, ‘Yes, he’s just there on the next table’, so I said, ‘Can I arrange an interview?’, and she said, ‘No, whatever you tell me, I’ll pass on to him’; and I said, ‘Well, you’re not an Armed Forces Champion. You won’t understand’ (recently moved from JSA into paid work, Wave A)

This differed significantly from other areas, where the role appeared to be more customer-facing. For example, the spouse in one of the joint interviews talked about her experience. She had been supporting her partner but was also a veteran herself. Having suffered from mental health issues, she had had to claim benefits and had experienced difficulties in navigating the system. When it emerged that she was ex-Forces, she had been transferred to a Work Coach who was also the AFC in that area. She talked positively about the support she received, which included the AFC walking her over to one of the local Armed Forces charities, who were able to provide more specialist support:

I got diagnosed with anxiety and depression a few months ago. I had to go to the Jobcentre to claim benefits. I had an absolute nightmare… I’d been put on antidepressants and everything. Then I went into the Jobcentre, still took a little bit of time with the asking what I need to get and stuff. Then they said, ‘You’re ex-Forces, aren’t you?’ They said, ‘You need [Armed Forces Champion], and then [he] took over from there and it was all right… my Work Coach, as they’re called – he’s an Arm[ed Forces] Champion… It’s only because I said, ‘Well, I did administration in the Army for seven and a half years’, and then that’s when he said, ‘I’m glad you told me that, because now you come up a level’. He walked me over to [Armed Forces charity] because of the anxiety thing and stuff like that. He physically walked me over and introduced me to everyone (ESA SG claimant, Wave B)

There was another striking example of an AFC actively assisting a veteran and his spouse by visiting them in their home when they were concerned about an upcoming assessment, accompanying the veteran to a PIP assessment as well as signposting the veteran’s wife towards claiming Carer’s Allowance (see case study of ‘Paul and Helen’ in Chapter 8).
There were also detailed examples within the focus groups of DWP AFCs and ‘leads’, which also highlighted the significant support that they were providing, sometimes above and beyond their remit. For example, some DWP respondents were the first point of contact for veterans and were responsible for then bringing in the other relevant statutory and specialist organisations to provide support:

I’m the first point of contact. Very often, they [veterans] come in, they’ve got no idea. They just get told to go to the Jobcentre… Basically, you pick up the pieces, trying to put a support network round them. I work very, very closely with [local authority]. I also work very closely with [specialist third-sector organisation]. We usually try and tackle everything within that first interview. It’s an awful lot to take on. It usually means finding out about their health, their housing, family. I get heavily involved in that… bring the Work Coach into it. It could even mean taking the person over to the provider to try and tackle their housing and then trying to get the person from the council to come in as well, and try and put everything in place… It’s a lot of working together really (DWP focus group respondent)

I can literally sit with someone for ten minutes and go, ‘Well, okay, you need this, this and this. I’ll book you in with this person, this person and this person’… I’ve got a really good relationship with an agency that do good work. We work together… I think the more we join up with specialists… the better the outcomes for everyone (DWP focus group respondent)

In another area, where good practice was evident, a DWP respondent had established links with a Garrison and was providing regular support to the welfare officers:

I was asked to do a presentation to the Army Welfare Officers, basically, talking about DWP service and the benefits. It was identified very quickly that there was a lack of awareness of the benefits from the welfare officers… we’ve worked in partnership. I’m involved in the Garrison. Every quarter there is a partnership strategic planning meeting. We’re talking about, obviously, what’s happening within the Garrison, but also in the community and the welfare side of it… We do an awareness session… Basically, we’re talking about the benefits, what they may be entitled to… after the presentation, [we] will help people on a one-to-one basis to make a claim online for benefits. In this area we’ve been Universal Credit for two years (DWP focus group respondent)

The discussions within the DWP focus groups highlighted the significance of the AFC role. A number of those who took part in the focus groups had a sense of pride in the role and often held the view that the role should be delivered properly by those tasked with undertaking it and also that it needed to be appropriately resourced given its significance:

I think, to be an Armed Forces Champion, my own personal opinion is… you should be passionate about it, otherwise you’re just going to pay it lip service. Then, that’s at the detriment of the poor soul in front of you (DWP focus group respondent)

I think it would be nice if you recognised it from senior level that we do really good work with this particular group. If we had some resources saying, ‘There’s your resource for it. This is your allocation’, instead of just an add-on (DWP focus group respondent)

7.4 Do veterans want differential treatment within the social security system?

There were a range of views from respondents with regard to whether they felt there should be different treatment for veterans within the social security system. These ranged across a spectrum from those who felt that veterans should be treated advantageously within the social security system because of their prior Service through to those who felt that they were ‘no different to anybody else’. Those who advocated preferential treatment referred to the contribution they had made by ‘serving their country’, as well as highlighting the adjustment issues that people faced when transitioning from military to civilian life:

We have taken time out of our own lives to defend our country. Our employer was the Government, so the Government should do more for us. It’s not a case of, ‘Oh, okay. Thank you very much. You’ve done your seven, ten, 12, 15 years. Thank you very much and goodbye’. They should show a little bit more consideration towards veterans… The thing is there’s no signposts out there. There’s no booklet saying, ‘This is what you’re entitled to or this is how you claim for it, blah, blah, blah’. Most of the stuff that I’ve claimed for, I’ve got it from word of mouth from other veterans or when I’ve engaged with people like [Armed Forces charity]… when you apply for benefits, and you tell them you’re an ex-serviceman, there is nothing extra offered. There’s no extra service to say, ‘Okay, right, yes. You’re applying for the benefit, maybe you should liaise with [Armed Forces charity]’… the DWP need to recognise that as a veteran we should be provided with help with navigating benefits, because applying for benefits is not simple. I’ve looked at the DWP’s website on numerous occasions. I’m thinking, my God, look at this (ESA SG claimant, Wave A)

Some also expressed complex views on how contributions should differentiate between experience of conflict or trauma during time in Service and length of Service as factors determining whether or not preferential treatment should be provided:
Maybe it should just depend on what people have done in the military, because you get people that have come in here [supported accommodation] that have only done four weeks, but then you get people that come in here that have done 22 years. I reckon it depends on Service and time spent, like, 24 years in the military serving the country they should get more rights, but then for four weeks and they call themselves veterans and stuff like that, it’s not acceptable, is it? (UC claimant, Wave A)

Interestingly, it was often the spouses who took part in the joint interviews and were responsible for helping their partners navigate the benefits system who held the strongest views on the need for differential treatment:

These guys and girls, they signed a piece of paper, basically signing over their life. Yes, I do think they should get – not financially, necessarily – more, as in get more help... With things like benefits and stuff, they should be given more grace to adjust back within the civilian population. Sorry. It’s really, really hard. People do not understand how difficult it is and the adjustment you have to make, and I do think it should be different for the Armed Forces (ESA SG claimant, Wave B).

A small number of respondents used their perceptions of the ‘American system’ as a comparison point (the American veterans’ system is vastly better than the British (ESA SG claimant, Wave B)). This was sometimes used to initiate a broader discussion beyond social security to consider preferential treatment of veterans in relation to transitions into employment post-Service:

It was just a job [referring to being in the Army], just like anybody else goes to work, but ours resulted in violence. That’s the only difference, it seems, but I don’t think, on a whole, the company as a whole support the troops like they should. I think it should be a guarantee, like there is in America. They leave the Army and they’re walking into any job that they’re qualified for, or if you’re not qualified for it, you get qualifications to do it. Instead, you do your time and then it’s just, ‘Oh, well, thank you’, and that’s it (working full-time, Wave B (UC claimant at Wave A)).

I think there should be jobs. If you’re in the Forces, there should be some sort of civilian jobs where you can transfer to them, so you don’t have to leave with nothing. If you serve for ten years, you come out and you’ve got nothing (working full-time, Wave B (ESA assessment phase at Wave A)).

With the exception of one person who felt that there needs to be a separate channel for Service leavers (recently signed off JSA for full-time study, Wave A), no one advocated the development of a separate social security system for veterans in the UK, and some respondents highlighted that they should be treated the same, talking about the Armed Forces as being the ‘same as any other job’. However, the majority of respondents strongly asserted that additional support and consideration should be given to veterans as they navigate the mainstream social security system. This was predicated on the view, as highlighted above, that they had contributed through their Service in a way that civilians had not. Therefore, some felt that a period of grace should be allowed to enable people to retrain and find their place within the civilian world:

I think 11 operational tours and three of them war zones, I think I’ve earnt a couple of years to actually learn a new trade... maybe you should be given a little bit of extra support, maybe a little bit of extra help, maybe a different avenue to go down. I don’t think we should be treated differently, no, because that implies we’re better than someone else and we’re not (ESA SG claimant, Wave A).

For others, as mentioned above, it was more about making allowances for the disadvantages that some Service leavers could encounter when trying to find civilian employment:

I don’t think you should, at the point of going to sign on, have separate rules for somebody that’s been in the Forces and somebody that hasn’t, because that just breeds animosity, doesn’t it?... but recognise the fact that you might get lads go in at 16, 17, 18, spend three, four, five, six years in the Army. When they come out, what they did in the Army might not be any use whatsoever in civilian street... they’re five, six, seven, eight years behind. You’ve got people their age have done something for a while and possibly lost their job, but they’ve got five or six years’ experience that these Army people aren’t going to have. So you need to put everybody on a level footing, don’t you? So I think there should be something in place to give them some skills that they need to compete in the open market, especially if they’ve just gone in as a foot soldier and all they’ve done is learn how to square-bash, make their bed and shoot things. Then they come out six years behind people that have had a job (ESA SG claimant, Wave B (ESA WRAG at Wave A)).

7.5 Summary

Overall, the substantive impact of some of the provisions outlined in the Armed Forces Covenant appeared to differ greatly depending on the geographical location and/or the particular individuals with whom veterans engaged within JCP and the wider welfare system. On certain occasions specific DWP AFCs and leads proactively assisted veterans in accessing not only their social security entitlements, but also the wider specialist support available through non-statutory organisations (e.g. Armed Forces charities). More routinely, however, disclosure of a history of Service in the Armed Forces was perceived to have had little or no impact on the support offered by JCP. In a small minority of cases respondents felt they were inappropriately and inadequately supported. Although this is not the focus of this study, it is clear that the support offered by the range of Armed Forces charities and other third-sector organisations was a significant factor in enabling veterans to access appropriate social security benefits and wider housing and welfare support. The majority of veterans did not believe that they should receive preferential treatment within the social security benefits system because of their prior Service; however, they did feel that additional support should be provided on the basis of a recognition that they may be disadvantaged owing to the distinctive features of active Service.
8. LIVES IN TRANSITION

Qualitative longitudinal research is a valuable methodological approach that moves away from providing a ‘snapshot’ of experiences to explore and understand changes in people’s lives, consider how they arise, and explain how and why there may be diverse outcomes for different members of a sampled population. Following people forward over time also provides an opportunity to understand the ways in which people respond to and use the welfare services available to them. The analysis of the qualitative longitudinal data generated in this study allowed an in-depth understanding of the issues and barriers that veterans face, both at the point of transition into civilian life and in the longer term over ensuing decades as people grow older. In order to demonstrate how existing policy and practice can combine and operate to both help and hinder people over time, this chapter offers a discussion of the changes (or lack of change) that occurred in respondents’ lives in respect of social security benefits and paid work over the 12-month period of the fieldwork. More specifically, it sets out the following three anonymised case studies to illustrate how, for whom and why interactions with the various statutory and non-statutory services available may lead to various outcomes:

- Case study 1: ‘Peter’: supported into paid work (page 50)
- Case study 2: ‘Paul and Helen’: supported within the social security system (page 51)
- Case study 3: ‘David’: navigating the transition to UC (page 52)

Case study 1: ‘Peter’: supported into paid work

Only a relatively small number of respondents (seven) reported that they had moved from out-of-work social security benefits at Wave A into paid employment at Wave B. Of these, five were working full-time, one part-time and another was employed for variable hours. Those who had moved into work had routinely found employment through their own networks, rather than mandated job searching. The case study below provides an example of someone who was not mandated to engage in work-related activities but was able to move into paid work as his health and housing situation improved.

It should be noted that, despite leaving the Armed Forces relatively recently, Peter did not feel that he had received any effective transitional support. This may have been in part due to him being preoccupied with the ongoing serious mental health issues that he was facing and perhaps not proactively seeking out the support to which he was entitled. Regardless, Peter’s case illustrates that more needs to be done to support certain Service personnel to manage the transition from Service to civilian life. More positively, this case clearly illustrates the substantive value of Armed Forces charities in providing supported accommodation for those who leave the Armed Forces who have complex needs and need help in getting their lives back on track. Furthermore, Peter’s case is also indicative of the positive use of Armed Forces Covenant commitments in relation to housing, with prior Service triggering ‘priority need’ status. Finally, this case provides an example of good practice on the part of frontline JCP staff reacting to a request for help.

75 Pseudonyms have been used in the case studies to ensure anonymity.
76 As noted in Chapter 2, a longitudinal analysis was possible in the 52 cases where both Wave A and Wave B interviews had been undertaken.
in finding work and connecting a claimant to an appropriate employment support programme. It is also interesting to note that welfare conditionality played no role in Peter looking for or finding work.

**Case study 2: ‘Paul and Helen’: supported within the social security system**

As noted in Chapter 5, assessments used to categorise disabled claimants’ fitness to work or search for work and the level of conditionality subsequently attached to people’s claims were extensive concerns amongst not only the veterans but also the policy and practice stakeholders in this study. Paul and Helen’s case study below is indicative of the problems faced by veterans who are trying to access incapacity benefits and also demonstrates how these issues can be successfully overcome with the provision of appropriate support.

Paul and Helen’s story is significant for several reasons. First, it is indicative of the problems that many respondents with long-term impairments faced with the assessment process and the often inappropriate outcome of being deemed ‘fit for work’. Second, it illustrates once again the key role of the support offered by Armed Forces charities in treating Service-related impairments and also in helping veterans (and their partners) to successfully appeal against incorrect benefit decisions in order to access their appropriate social security benefit entitlements. Third, it clearly illustrates the substantive value that the AFC role can have in effectively supporting veterans and their families to navigate the complexities of the contemporary social security system. Arguably, this could be seen as a case of good practice within JCP and the Armed Forces Covenant working as originally intended.

**Case study 3: ‘David’: navigating the transition to UC**

The discussion in Chapter 4 highlighted the experiences and issues faced by those respondents in receipt of UC at both Wave A and Wave B interviews. In addition, a small number of respondents (four) transitioned onto UC from legacy benefits in the period between the Wave A and Wave B interviews. In many ways, it was a little too early to explore in depth how those who had transitioned onto UC from legacy benefits will fare in the long term. However, David’s case study below is indicative of some of the issues of confusion and worry that the ongoing implementation of UC has generated for the veterans in this study, for example, confusion about the level of benefit paid; reductions in payments; a heightened focus on fitness for work, regardless of the prior verification of serious impairments of functional capability at a WCA; and the difficulty of managing a ‘digital by default’ system for claimants with impairments and/or other complex needs.

**Summary**

These three case studies offer a deeper understanding of the challenges, barriers and opportunities that veterans experienced as they navigated both the civilian labour market and the social security system. It is clear that MoD pre-exit resettlement and transitional support, the social security benefits system, the Armed Forces Covenant and non-statutory veteran-specific organisations all play a part in variously helping, but also in some cases hindering, the transitions of Service leavers as their civilian lives unfold. Alongside the data and analysis presented in the preceding chapters, the case studies highlight the variability in the ways in which services respond to the needs of Service leavers, identifying how people can be both supported and not supported in their pathways through the twin worlds of paid work and social security provision. Two of the case studies provide examples of good practice from JCP, but it must be noted that overall these are the exception rather than the norm. However, they demonstrate the difference that can be made when Work Coaches and AFCs are able to provide appropriate support.

What we also need to acknowledge when talking about transitions and social security is that, in actual fact, a significant proportion of our respondents did not experience any change in relation to their benefit status; that is, they were claiming social security at Wave A and continued to do so at Wave B (although they may have moved within the benefits system). This reiterates findings from existing research that describes ‘stasis’ (i.e. a lack of significant or sustained movement off out-of-work social security benefits and into paid work) as often a common outcome. This lack of change is often linked to issues of impairment and disability, which prevent people from being able to undertake and sustain paid work, as was the case for significant numbers of the veterans in this study. Although some policy-makers may view this ‘inertia’ as problematic, it could be argued that it is an indication of a social security system functioning appropriately to provide basic financial support for those who are unable to work. Indeed, within our sample there were a number of respondents in the ESA SG whose impairments were highly likely to prevent them from working at any time in the future, and in some cases there were those who may never return to the paid labour market.

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77 Dwyer, P. et al. (2018) op. cit.
‘Peter’

Peter had left the Armed Forces within the 12 months prior to the Wave A interview after completing over 15 years’ Service. Active Service had triggered anxiety, depression and PTSD, and this had led to Peter developing a dependency on alcohol. Having separated from his wife and children, he was single and had moved into supported accommodation for veterans:

Yes, I suffer from anxiety, depression... I was doing tours out in [location] and it was impacting my family and stuff like that, and I was just finding it hard to cope really. More when I came home than when I was away, if that makes sense... it kind of just cascaded from there... and then I established the drink problem... I was using it as a coping mechanism. Self-medicating, basically... I ended up getting discharged from the Forces... I just couldn’t cope being in the Armed Forces anymore, basically... (Wave A)

Peter stated that he had been unaware of the availability of resettlement and transition support prior to leaving the Armed Forces. In a state of poor mental health, he made contact with an Armed Forces charity, primarily because he had heard of them when serving. They had subsequently helped him to access his supported accommodation, where he was able to access a range of veteran-specific services:

Rabbit in headlights when I came out, basically... I knew the bog-standard bills and stuff like that, but with the likes of Housing Benefit and stuff like that when I came out, when I had no job anymore I had no idea... There was no package when I was leaving the Forces that I had access to where they said these services are available. I like I had to go out and find it out for myself... I basically found my own way really... [the Armed Forces charities], they all seemed to come into place when I moved into [veterans' supported accommodation]... They’ve provided us with financial support, housing, furthering my career, career transition and stuff like that (Wave A)

At Wave A he was not working and was originally placed on ESA before being moved onto UC within a month, when he moved to supported accommodation in a different area. This proved to be a difficult experience, as he had to wait the standard six weeks before his first payment, which necessitated getting an advance loan from JCP, which he struggled to pay back:

I had to get out – a loan for £150 or whatever it is from Universal Credit, and I pay it back £30 a month... It had a massive impact, because obviously I had my bills and stuff. I still had service charges at my previous addresses and stuff. Obviously, because I’ve got my mum and sister in [location] I had to rely on them for support really (Wave A)

He was also confused as to why he was required to attend meetings at JCP when he was ‘signed off on the sick’ (see also the case study of ‘David’ below):

On ESA I didn’t have to go in, I just had to give them proof that I was signed off sick by the doctor... But with Universal Credit I’ve basically got to go to these appointments every two weeks... They basically just said, ‘Well, it’s in our interest to see you every two weeks...to check your welfare basically’, that’s the way they make it sound... [I said] Well, no, because isn’t that the doctor’s remit? Do you know what I mean? If the doctor’s signed me off sick, the doctor’s signed me off sick (Wave A)

When revisited at Wave B, Peter reported that he was being supported with regard to his PTSD and that he had not had alcohol for three months. He was also now living with a new partner in a local authority property. His application for social housing had been prioritised because he had served in the Armed Forces for over five years:

Because I’d served more than five years’ service, I got a B-plus on the council list, so, basically, they bumped us up the list, and, basically, the first property that I chose, I got. I was bidding, I would say, about two and a half months I was in here within three months of being on the council list (Wave B)

Although he was signed off as having limited capability for work, he was motivated to find work, particularly as his health and housing situation improved. Therefore, he had returned to the Jobcentre and asked for help and had been signposted to an employment support provider. At Wave B, Peter was still on UC, but as an ‘in-work’ claimant as he had recently found full-time employment on a temporary contract. He was no longer required to attend JCP appointments on a regular basis:

I’ve just got a job. It’s only temporary at the moment. It’s just warehouse work, but it’s going to see me through until Christmas, and, in the interim, I’m trying to get myself an apprenticeship... because I didn’t have to fill out any commitments, I actually approached the Jobcentre at that point and said, ‘Look, I still want to look for work. What are my options?’... They set me up with a company called [employment support company]. They actually helped me find this job that I’ve got now (Wave B)
Paul and Helen, who were married, took part in repeat joint interviews. Paul had served for over ten years and was medically discharged in the mid-2000s. At his Wave A interview, he disclosed that he had been diagnosed with PTSD from his time in Service and also had another serious long-term neurological disorder. On leaving the Armed Forces he had been unaware of his mental health issues and had entered paid work, but Paul and Helen both realised that something was clearly wrong as his impairments were starting to have a negative impact on their relationship and his ability to sustain employment. He had therefore begun claiming social security benefits, but the situation had escalated when he had attended a WCA and was deemed ‘fit for work’:

Paul: I worked for a few years after, tried to deal with what was going on. Didn’t really understand what it was or what was happening, and then... We’ve only been married three years. She basically turned round and said she’d had enough, and then that’s when she basically went and found people like [Armed Forces charities] – but how they got involved was a little bit different – they only got involved because we woke up one morning with a letter basically saying I was no longer entitled to any benefits, any payments, I should be working...

Helen: He had to go for a – what’s it called? Work Capability Assessment? Medical, yes, and because he could look the doctor in the eye is why they failed him, because he looks physically fit. That’s why they stopped the monies.

Paul: We challenged every decision that they made, because – paperwork is literally the only thing we have to put me to the military, and – I know it sounds really stupid, but I had all that, I had doctors’ letters from [hospital] in [location], we had one from [second hospital], where I had to have a scan. We had absolutely every bit of documentation they could have ever wanted... Which is where [Armed Forces charity] came in... I owe [them] everything... It was about three, four weeks after that that I actually got put back on benefits (Wave A)

At Wave B, Paul spoke of how, owing to his impairments, it remained the case that he was not working and was still in receipt of ESA in the SG. He was still receiving therapy for PTSD and felt things had improved a little, but he still could not engage in paid work. However, both Paul and Helen were engaged in voluntary work. Helen also discussed how she herself was attending a group set up by an Armed Forces charity to help partners caring for veterans with PTSD.

What was striking about the discussions in the Wave B interview, however, was the change in their experience in relation to JCP. More specifically, since their Wave A interview they had been introduced to a DWP AFC, who had supported them in a number of substantive ways:

Helen: [AFC] came out and seen us... [they] said, ‘Can I come to the house?... about the time of the appointment my husband was getting really anxious, so the [Armed Forces] Champion basically rang them and said, ‘Look, he’s not going to be able to do it’ and rearranged the appointment for us. I get the odd email every now and then, he’s just checking in, basically. Seeing how things are and making sure everything’s all right (Wave B)

The couple also described how the AFC had subsequently accompanied them to Paul’s PIP assessment, which, given his previous experiences of the WCA, Paul was worried about, as well as signposting Helen towards claiming Carer’s Allowance:

Helen: Yes, came with us.

Paul: [AFC] basically said, ‘I’m a friendly face, you’ve worked with me since the year, let me come with you’. Don’t get me wrong, [the AFC] didn’t influence the assessment in any way.

Helen: [the AFC] did help me. [They] asked me, ‘Was I on Carer’s Allowance?’ I said no... I said, obviously, I was just plugging on in life, I didn’t think, well, anything like that. [They] said, ‘Well, maybe we could go through the forms and what not’, I said, ‘Yes, okay’, and I ended up becoming the carer for my husband (Wave B)

With the help of an Armed Forces charity, Paul was able to successfully appeal against the ‘fit for work’ decision from the WCA and was placed in the ESA SG. He also revealed how he received therapy and support from both the Armed Forces charity and the NHS for his ongoing mental health issues.
‘David’

David was in his late 50s. He had served in the Armed Forces for over 10 years and had left Service a significant time previously (30 years earlier) after several tours of active Service. He had worked in various jobs (construction, driving, retail) after leaving the Armed Forces but experienced a deterioration in his physical health, including having a heart attack a couple of years before the Wave A interview. Simultaneously, his personal relationship broke down, and he found himself ‘sofa surfing’ for two years, moving between different family members and friends. Additionally, he was suffering from Service-related mental health issues. During that time, he also entered the social security system, making a claim for ESA but being found ‘fit for work’ following his WCA:

I went onto Jobseeker’s Allowance because I was on ESA, and ESA said, ‘You can lift your arm up. You’re fine’... I just had the heart attack. I was falling asleep under the trees and things like that because I couldn’t control my diabetes! I was in a cuckoo land anyway, and then of course my kidneys were playing up and all that as well (Wave A)

Owing to being homeless, but also because of his deteriorating mental health, he was referred to veteran-specific supported accommodation in a different geographical area. At the time of the Wave A interview, he had been living in his accommodation for less than two weeks and was waiting for a new assessment for ESA. Shortly after his Wave A interview, he had a WCA in the new area and was placed in the SG, which was a significant relief to him. However, he was also confused because, although his health status had not changed, in one area of the country he had previously been deemed ‘fit for work’, whereas in another area he was placed in the SG:

I’d done my assessments down in [location]... I got zero points for anything... Up here [new location], they said you’re completely logy... and then I was getting the severe disability as well (Wave B)

Shortly after his Wave A interview, he had also been granted PIP and experienced some stability in relation to his social security claims. Around six months prior to his Wave B interview, David moved out of supported accommodation, moving into his own accommodation in an area where UC was in operation, and he was subsequently moved from the ESA SG. For David, the move to UC had returned him to a situation of confusion, relating specifically to how much money he was now entitled to and where it came from. He found this stressful to deal with because of his ongoing mental health issues:

I lost £240 a month because I went onto Universal Credit. It’s a lot of money to lose... Because Universal Credit covers, I think it’s five subjects or something like that, but it doesn’t cover the sixth subject, which is severe disability... What I get now, which is really annoying, I get PIP, then I get ESA, so they’re giving me some ESA, and then they give me Universal Credit, so I’m getting it coming from all directions. I get a little bit from each one, and it’s really hard to manage... It is confusing. I know that I didn’t get any money last week, but I got whatever it was before that... I don’t know where it’s coming from. I just look at my bank, oh, they’ve put that in. Which one that’s from, I don’t know because I’m technically mad, aren’t I? [referring to his mental health issues] They don’t realise how much – it’s a little thing to them, but it’s actually big for me (Wave B)

David was also concerned about what appeared to be a shift in emphasis around his fitness for work under the UC system. He felt that there had been a change in emphasis and in the language used in the communication he received, whereby this appeared to suggest that he had personally declared himself unfit for work rather than this being the outcome of the WCA process:

On ESA, I had no hassle whatsoever. They paid me, left me alone... Went onto Universal Credit, Jesus, that was it. I was freaking out big time... I get their notes, ‘Please read your Universal account. You haven’t done this, you haven’t done this, you haven’t done that. Tell us why you think you are unfit for work’. Hang on, you told me I’m unfit for work... the statements that they write, ‘You consider yourself unfit’. No, you’ve told me I’m unfit. We’ve had the medicals... You have decreed that I’m unfit (Wave B)

David was also critical that much of this communication occurred online with a Work Coach who he had never met and who he felt knew nothing about him:

She isn’t my Work Coach. I haven’t got a clue who she is. It’s like talking to a robot. It’s not my personal coach. I’ve got nothing to do with her. She doesn’t know me whatsoever... don’t know her, never seen her... They’ve got to make it personal (Wave B)
9. CONCLUSIONS & RECOMMENDATIONS

Improving the social security system for veterans

This report has presented the findings of a two-year qualitative longitudinal project that represents the first substantive research focusing on the experiences of veterans as they navigate the UK social security benefits system. The specific focus of this project (i.e. veterans’ interactions with the social security system) means that our research does not claim to be representative of the entire veteran population. Indeed, it is widely acknowledged that resettlement and subsequent transitions are often relatively unproblematic for the majority of those who leave the Armed Forces. Rather, we believe our sample is reflective of the diversity of those veterans who engage with the benefits system during their life course. This includes those who claim for relatively short periods of time, but also those individuals with complex needs who require intensive and ongoing support beyond any initial post-Service transition period.

The first wave of interviews acted as a baseline for the project, allowing us to build up a picture of people’s experiences of the social security benefits system up to that point and also providing important contextual information about participants’ lives with regard to education and employment experiences, health, housing and relationships. The second wave of interviews, undertaken 12 months later, enabled us to understand how the lives of participants had progressed over that period, with a specific focus on the role of the social security system during that time. A total of 120 interviews were undertaken (68 at Wave A; 52 at Wave B). The veterans were a diverse cohort, including those with a long Service history, early Service leavers and those who left the Armed Forces relatively recently, but also those who had left many years previously and may have been working for a number of years before experiencing a point of crisis or deterioration in their physical or mental health. In addition to speaking to veterans, we were also able to talk to some spouses, who were often the primary carers for their partners. The interviews with veterans and spouses were supplemented with insights from a range of policy-maker and practitioner stakeholders, including consultations with some DWP AFCs and ‘leads’.

As such, this research represents a substantive dataset from which to understand how veterans are experiencing social security, particularly during a time of significant welfare reform. This chapter provides some concluding comments from our research and also, more importantly, our policy and practice recommendations.

9.1 Ensuring information on social security benefits is provided with resettlement information

Overwhelmingly, participants found the social security system complex and difficult to navigate, with the ongoing rollout of UC adding a further layer of complexity. People routinely struggled to comprehend the benefits that may be available, the contemporary conditions attached to continued eligibility, and how to apply for and manage their ongoing claims. For many, it was the first time they had interacted with the social security system since leaving the Armed Forces, or their prior experience had been many years (or even decades) previously, when a different system had been in operation. When reflecting on resettlement information and support, although respondents accepted that focusing on employment was important, they stated that information about the social security system and their eligibility for benefits was largely absent from the information provided.

Recommendation: for the MoD and DWP to work collaboratively to ensure that guidance on the UK social security system clearly sets out eligibility and how to apply, but also an individual’s responsibilities, is included as a routine part of the resettlement support provided to those leaving the Armed Forces.
It is important to acknowledge that at the point of exiting the Armed Forces it was evident that some respondents were not interested in the transitional information that was provided or were selective about the take-up of resettlement support. This suggests that the provision of social security information needs to be done in such a way as to engender an understanding that, although it may not seem immediately relevant, the benefits system is a support system that may become relevant to veterans or their families in the future. Following the publication of our interim findings in April 2018, the MoD committed to working closely with the DWP around the provision of information, including DWP staff undertaking awareness sessions on MoD bases. Indeed, it was evident from our consultations with DWP AFCs that this had happened in one of the fieldwork areas. This is a collaborative approach that we would endorse, and we believe that this should be rolled out on a consistent basis.

9.2 Ensuring appropriate support for veterans at the point of disclosure

If you are disclosing that you are a veteran maybe you should be signposted at that point to someone that can help you fill out the forms... So maybe an immediate signpost to a veterans’ charity that will help you...if they catch you at that point, they may catch you for other things as well. (ESA SG claimant, Wave A)

The majority of our respondents had disclosed their status as a member of the Armed Forces community. Whereas good practice was evident in terms of how Work Coaches had responded to this disclosure, overall there was a sense that it made little difference to the support provided.

Recommendation: for the DWP to ensure that Armed Forces background is consistently recorded by Work Coaches to ensure appropriate tracking of the needs of individual veterans and their progress through the system.

Recommendation: for the DWP to ensure that disclosure of an Armed Forces background triggers immediate consideration of how best to support the individual veteran, including any additional support requirements for navigating through the application process, but also with regard to the ongoing management of their claim.

It was apparent that much of the support that people were receiving often came from outside the DWP (i.e. Armed Forces charities, other third-sector organisations, housing providers, etc.), and we believe that the DWP has an important role to play in signposting veterans to relevant local and national agencies that can provide specialist support.

Recommendation: for the DWP to ensure consistency in signposting veterans to organisations that can provide support with transition issues, including the translation of military skills and qualifications to the civilian labour market and also broader issues relating to health, housing, etc.

It is important to note, however, that more needs to be done to encourage the disclosure of people’s Armed Forces background or any other issues that may affect people’s ability to manage their ongoing social security claim. Without this disclosure, they may not get the support that is available.

9.3 Ensuring appropriate support in the assessment of capability for work

Across our sample, it was evident that physical and/or mental impairment was a significant factor affecting the ability of people to sustain paid work. As a result, a large proportion of respondents had, at some point, undergone an assessment of capability to ascertain eligibility for benefits related to incapacity. Our interviews with both veterans and a wider range of stakeholders illustrated that experiences of WCAs and some other assessments (e.g. for PIP) had often been negative. Although there were cases where the assessment process had been unproblematic, there were significant concerns about the ability of the process and those undertaking the assessments to appropriately consider the specific mental and physical health impairments that may result from Service in the Armed Forces.

Recommendation: for the DWP to urgently review the assessment process applied to those claiming working-age incapacity benefits to ensure that assessors are suitably qualified to assess the specific mental and physical health issues related to Service in the Armed Forces.

Furthermore, concerns were raised that Service medical records and other relevant supporting medical information were not routinely being included within the benefit-related assessment processes. This omission was often only rectified when a third party, such as a GP or Armed Forces charity, advocated on behalf of a claimant when appealing against an assessment that had deemed them ‘fit for work’.

Recommendation: for the DWP to ensure that Service medical records and other relevant supporting medical information are consistently included within any work capability or impairment assessment process.

9.4 Ensuring consistency in the support provided to veterans

I think it would be useful if we were able to access an e-learning product... Having something that’s hosted on an external website that we can promote. People can have that as a short course, so they can just go in and do bite-size learning (DWP focus group respondent).

Our research has illustrated significant variations in the support provided to veterans within the social security system. These variations appeared to be manifested in two key ways: (1) geographical variations, in that the support provided in one area was vastly different from that experienced in a previous location or when moving to a new location; and (2) variations within Jobcentres, in that respondents could experience varying and inconsistent levels of support when interacting with more than one Work Coach or when allocated a new Work Coach.

Furthermore, as highlighted in Chapter 7, as part of its commitment to the Armed Forces Covenant the DWP has made a series of adjustments and easements to JCP services to support current and former Service personnel and their families. Although such commitments are welcome, there appeared to be differences in the understanding of JCP staff in relation to these adjustments and easements and also in relation to issues that may have an impact on veterans as they transition to civilian life (e.g. mental and physical impairments, difficulties in translating qualifications and skills to the civilian labour market, etc.).

The variations and inconsistencies in approaches and understanding were attributed to staff training and also the proximity to substantial populations of veterans or serving personnel. However, we believe that members of the Armed Forces community should be able to expect appropriate and consistent support within any Jobcentre.

Recommendation: for the DWP to ensure that all JCP staff are provided with guidance and/or training on the specific adjustments and easements applicable to the Armed Forces community and also, more broadly, around the mental and physical health impairments that may affect some veterans’ ability to engage in work-related activity.

Recommendation: that each Jobcentre should have at least one designated individual who takes a leading role in supporting the Armed Forces community in their interactions with the social security system.

The issue of variations also related to the support currently provided through the AFC network. Although good practice was evident, there were inconsistencies in relation to the delivery of the role as ‘frontline’ or ‘backroom’ and also in relation to the degree to which different Champions engaged with the role. Following the publication of our interim findings in April 2018, the DWP indicated a commitment to a review of the AFC role, which we would advocate, to ensure that those undertaking the role are provided with clear objectives, are committed to the role and are also appropriately resourced.

Recommendation: for the DWP to undertake a comprehensive review of the AFC role. This should include: reviewing the different models currently being used across the UK to map areas of good practice and identify areas requiring improvement; the development of a job description to ensure consistency in the delivery of the role; consistent training of AFCs; and a commitment to appropriately resource those undertaking the role.

9.5 Ensuring the provision of personalised support for veterans

They should address the issue you’ve got first and then help you find work. (ESA SG claimant, Wave A)

Linking in with the issue of consistency of support, our research evidences that respondents were often critical of the mandatory support provided by JCP. Good practice was evident in some cases; however, on the whole, the support was seen as rather generic and focused more on compliance than on sustainable employment outcomes or addressing health and wellbeing issues. Furthermore, it was apparent that many veterans did not believe that the conditions of their claims were reasonable or achievable. In some cases, compliance with the conditions attached to continued receipt of benefits had been counterproductive to respondents’ chances of securing future employment. Therefore, the Claimant Commitment and allied support need to be personalised to each individual, with particular consideration of their specific needs as an Armed Forces veteran.

Recommendation: for the DWP to ensure that the conditions set out in Claimant Commitments for veterans reflect their individual needs and capabilities, including appropriate consideration of mental and physical health issues relating to Service in the Armed Forces.

Linking in with the issue of more personalised support, respondents raised a broader issue around wanting to be treated with dignity and respect during their interactions with JCP. It was evident that people were aware of the stigmatisation of benefit claimants and felt that such narratives can have an impact on how people are treated within the social security system. The application of sanctions is one element of this. It was evident that the application of benefit sanctions had profoundly negative consequences and also that such sanctions had sometimes occurred as a result of difficulties in navigating the social security system or difficulties arising from ongoing mental health issues. In previous research, we have called for a widespread review of benefit sanctions.

Our research focuses specifically on the social security system. As such, our recommendations relate primarily to DWP services. However, the Armed Forces Covenant aims to ensure that members of the Armed Forces community are appropriately supported in relation to all public and commercial services.
with a recommendation to ensure that sanctions are not applied to vulnerable people\textsuperscript{80}. We believe that this recommendation should also apply to relevant members of the Armed Forces community and is in line with the Covenant commitment of special consideration for those injured and bereaved.

**Recommendation:** for the DWP to review the sanctioning of members of the Armed Forces community to ensure that benefit sanctions are not applied to those experiencing mental and physical health impairments resulting from Service in the Armed Forces.

Finally, we need to recognise that the social security system is in a period of significant transition, with the ‘managed migration’ of claimants of legacy benefits to UC until December 2023. Over the course of our fieldwork, a small number of respondents transitioned from legacy benefits to UC. It was evident that this transition had been problematic for those people, who reiterated already widely acknowledged issues around the waiting period for the first payment and also highlighted issues around reductions in their benefit entitlements and new requirements to engage more regularly with JCP.

However, a significant number of our respondents are still claiming legacy benefits (see Table 1) and will eventually transition to UC as part of the managed migration process. Some respondents expressed concerns about what would happen when they moved to UC, including concerns around impacts on other benefits and War Pensions and their ability to manage variable monthly payments and a ‘digital by default’ system. Indeed, consultations with DWP AFCs and ‘leads’ suggested some of the more complex cases (e.g. the ESA SG) may experience difficulties with this change. Hence, more needs to be done to explain the implications of transitioning to UC and to support people through the managed migration process.

**Recommendation:** for the DWP to provide additional support to veterans as they transition from legacy benefits to UC. This support should be tailored and/or enhanced to reflect the unique circumstances of those who have served in the Armed Forces.

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\textsuperscript{80} Dwyer, P. et al. (2018) op. cit.
‘Sanctions, Support and Service Leavers: Welfare Conditionality and Transitions from Military to Civilian Life’ has been funded by the Forces in Mind Trust (FiMT), a £35 million funding scheme run by the FiMT using an endowment awarded by the Big Lottery Fund.