



SALUTE HER UK & FORWARD ASSIST

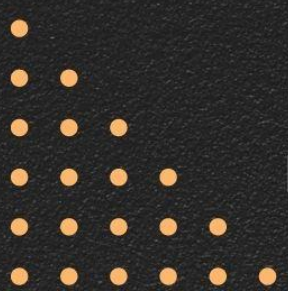
FORGOTTEN WOMEN VETERANS

HIDDEN NARRATIVES FROM THE UK CRIMINAL JUSTICE
SYSTEM

2023

PREPARED BY

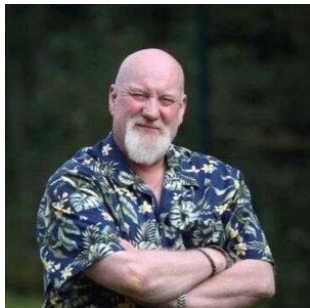
PAULA EDWARDS & TONY WRIGHT



About the Authors



Paula Edwards joined Forward Assist in November 2017. Paula has over 18 years' experience of working in a variety of clinical mental health settings. These include inpatient, crisis intervention teams, large voluntary organisations, and private practice. Paula is qualified as a Clinical and Pastoral Counsellor, Cognitive Behavioural Therapist and is a Dialectical Behaviour Therapy practitioner. She is currently enrolled on a Psychology MSc at Northumbria University. Paula is the CEO of Salute Her UK and has engaged with over 2500 women veterans in the last three years including a significant number of currently serving women service personnel. Salute Her UK, utilise a stepped care model to prioritise service delivery and provide women with a safe space to access confidential, one-to-one, in-person, and virtual support. Paula also sits on the All-Party Parliamentary Group (APPG) on suicide prevention.



Tony Wright, Founder & Chief Executive of Forward Assist joined the Royal Marines in 1978, He was medically discharged after a brief and uneventful career in 1981, after incurring a career ending injury during basic training. A qualified and registered Social Worker, Former Probation Officer and Home Office Adviser. Tony established registered charities Forward Assist & Salute Her UK, following a Winston Churchill Memorial Trust Travelling Fellowship in 2011. As an Early Service Leaver (ESL) he has first-hand knowledge of how difficult it is for many former servicemen and women to adjust and transition back into the civilian life after an unexpected discharge from the Armed Forces. He is particularly supportive of those veterans that have survived Military Sexual Trauma (MST) and those that suffer from Moral Injury, Post Traumatic Stress, CPTSD or other difficulties relating to service-related trauma and/or adjustment and assimilation.

Foreword – Toby Dickinson, Co-Chair Labour Friends of the Forces

Labour Friends of the Forces thanks Forward Assist and Salute Her UK for producing the Forgotten Women Veterans report, and Community for funding it. We also thank all the women veterans who gave their time to share their experiences with the research team at Salute Her UK; your contributions will help improve the lives of other women veterans across the UK. Conducting the research and analysis that went into this report has highlighted a shortage of existing UK specific research into the experiences of women veterans, particularly when compared to the research picture in North America. This is a gap we hope future projects will address. Notwithstanding these gaps, this report contains useful and important lessons for, among others, UK and devolved administrations, police forces and the criminal justice system. We hope it is widely read.

"As we know women veterans in the UK remain a hidden, marginalised and invisible population. As a woman veteran and Member of Parliament who sits on the Defence Select Committee I am working hard to change that situation. Yet very little, if any research exists on the reasons why women become involved in the UK Criminal Justice System, so I welcome this research by Salute Her UK which will hopefully act as a springboard for further academic research into this disenfranchised sub-population of the women veteran community."

Sarah Atherton MP

Section One: Introduction, Background and Methodology

1.1 Who We Are

Salute Her UK is a registered charity based in the North East of England with a national and international geographical footprint.

<https://www.saluteheruk.co.uk/>

The charity is women 'centric' by design and staffed by women working for women. Paula Edwards is the Chief Executive Officer of the charity and is a highly experienced and qualified Mental Health Therapist specialising in providing care and treatment to those with complex mental health disorders and those most at risk of suicide. She has identified and engaged with over 2500 women veterans and 500 currently serving female service personnel. Salute Her UK is a strong voice advocating for a holistic, compassionate continuum of trauma informed services, treatment and care for; women veterans, service personnel, families, care givers and care providers. Salute Her UK aims to improve the lives of UK women veterans by addressing the distinct and intersectional physical and psychological health needs of the currently invisible, women veteran community. The organisation has highlighted the unique and often unrecognised challenges faced by women veterans both during and after service.

Forward Assist is a registered charity that has been serving the veteran community for 10 years. It is recognised as a 'thought leader' within the service charity sector, offering practical support and guidance to former service personnel of all ages as they adjust to civilian life. Forward Assist promotes community involvement, outreach and engagement in 'civic service' projects that benefit both the individual and the wider community. The charity offers mental health support, life coaching, and volunteering activities that foster post traumatic growth. All activities are designed to improve mental

wellbeing, physical health and reduce social isolation and loneliness. Forward Assist has two full-time staff, two part-time and 30 active volunteers, each of whom brings a wealth of experience to the team. Many years ago, Forward Assist recognised that women veterans were a marginalised, disenfranchised, hidden population with unique and distinct unmet needs. Forward Assist actively campaigned to raise the profile of women veterans and in 2021, CEO Tony Wright, with the support of the Churchill Fellowship and Sage Foundation founded Salute Her UK, as a registered charity in England & Wales.

www.forward-assist.com

1.2 Background

Approximately, 11% of the serving population in the United Kingdom are female and it is anticipated that this will rise to 13% by the end of 2028. However, there are no accurate statistics on how many women veterans live in the UK, or indeed what the issues are and what difficulties they face when transitioning back into civilian life. Similarly, intersectional data on women serving in the military and veteran populations is limited, making statistically significant data extremely difficult to obtain.

Both the 20th and the 21st centuries have seen the continuation of conflict, although to a lesser degree than previous years. War zones often expose military personnel to trauma, conflict and death. This creates unique challenges for service personnel as they transition into civilian life. There has been a realisation in recent years that small cohorts of veterans struggle when they leave military service. Women veterans involved in the Criminal Justice System (CJS) are both a hidden and under researched subset of the veteran population.

There is however, a growing amount of international literature regarding women veterans and their involvement in the CJS originating from Canada and the USA. Although the legal systems and data collection mechanisms may differ in each country, we do know that it is international research that is driving forward interest and emerging best practice, whilst also giving us an insight into the specific issues that women veterans face in the UK Criminal Justice System.

Engaging women veterans hasn't been easy, Forward Assist initiated several projects to support women veterans over an eight-year period before eventually establishing Salute Her UK in September 2021. During that time the charity made several attempts to ascertain the needs of women veterans involved with the UK Criminal Justice System. Funding in 2016, from the former Northumbria Police & Crime Commissioner, Dame Vera Baird QC, enabled the charity to initiate a small research study into the number of women veterans incarcerated and/or subject to community-based sentences in the Northumbria area. During the course of a meeting with the Governor at HMP Low Newton in Durham, we were advised that out of 444 prisoners incarcerated at that time, only five female inmates had been identified as veterans within the last 3 years. Unfortunately, none of those identified were currently serving a prison sentence at the establishment. We asked about the nature of their offending and were told that these ranged from animal cruelty offences, domestic abuse and drug & alcohol offences. It was also noted that women veterans had to identify themselves as veterans rather than the prison having this on record at point of entry into the Prison system. It is highly possible that many more women veterans serving custodial sentences had chosen not to disclose their military past and had slipped through the net. Similarly, a meeting was arranged with the then Deputy Chief Executive at Northumbria Community Rehabilitation Company and he was unable to identify any female veterans that were subject to Community Rehabilitation Orders. However, in hindsight this was probably due to the fact that most welfare services failed to recognise women as belonging to the CJS

Veteran cohort. More recently, it has been estimated that up to 1% of all incarcerated women are veterans ¹.

Many psychologists and researchers have studied criminology. Although each individual who commits a crime has their own reasons and life stressors for doing so, there are a few overarching factors that may contribute to criminal behaviour. These include, but are not limited to, factors such as low educational attainment, adverse childhood experiences (ACEs), poor life chances, drug and alcohol misuse and the physical and social environment in which offenders are brought up.

John Blosnich (2014), et al acknowledged in: Disparities in adverse childhood experiences among individuals with a history of military service, that for some individuals, joining the military was a “calling” often arising from patriotic family values or the desire to do something meaningful ². For veterans the act of enlisting was based on the need to escape abusive household. Similarly, there was also a strong correlation between adverse childhood experiences and criminal behaviour. This is thought to be because adverse childhood experiences (ACEs) can often lead to problems with mental health, substance abuse, and impulsivity, which can all contribute to criminal behaviour.

The sad fact is, women veterans are an invisible population in the UK. Women veterans in the CJS are hidden, forgotten and disenfranchised from military charities. Their needs are neither understood or valued. Women veterans in the CJS do not seem to matter or have a voice. With so little knowledge of the factors impacting women veterans after service or the issues influencing their offending behaviour, its imperative that more research into this cohort is carried out so that women veterans can be given the support they need to both divert them away from the CJS and/or facilitate a successful transition to civilian life when released from a custodial setting and/or when subject to community-based court orders. Currently, it our view that the CJS is failing women veterans.

Many of the narratives about male veterans are, in our opinion overly focussed on PTSD and its long-term impact on veterans’ lives both during and after service. The much hackneyed, ‘mad bad and sad’ mantra isn’t helpful and the fact that services have been developed in recent years that are clinical in nature has led many to think that the only issue impacting a veteran’s life is PTSD. In fact, there are many factors impacting the lives of veterans as they transition back to civilian life which are socio economic in nature.

“Veterans are told they’re broken, and that they have a disorder: PTSD. But this language invites pity over understanding.” Christopher D. Kolenda, PhD ³.

Yet, the UK military pro-actively recruit from areas of multiple deprivation targeting households with a mean income of less than 10K per Annum. Research conducted by Childs Rights International Network (CRIN) ‘Conscription by poverty? Deprivation and Army recruitment in the UK’ (2019), states that the UK is the only country in Europe to recruit from age 16. Unsurprisingly, for those recruits that come from socially and economically disadvantaged backgrounds many may have low educational attainment, poor mental health, limited life chances and may be more likely to have come into contact with risk-taking behaviours such as alcohol/drug misuse ⁴.

The Right Honourable, The Lord (James) Arbuthnot whilst serving as the Chairman of the Defence Select Committee from 2005 to 2014, found that almost two-fifths (39%) of recruits to the Army had the reading ability of an eleven-year-old or lower. The committee also raised concerns that the Army is dependent on recruiting 16 and 17-year-olds. More than one in four (28 per cent) of Army recruits at that time were under the age of 18 when they joined, compared with 5 per cent for the Naval Service and 8 per cent for the RAF ⁵.

Other researchers argue that those in the armed forces are more likely to have risk factors for offending. Post Traumatic Stress Disorder (PTSD) has been cited as a factor that may increase the likelihood of veterans becoming involved in the Criminal Justice System (Backhouse et al, 2015) ⁶. Similarly, MacManus, found that the more someone is exposed to traumatic incidents in the military the more likely it is for that veteran to commit a violent crime ⁷. In the UK, PTSD presentation has also been linked with interpersonal violence (Barrett EL, Mills KL, Teesson M)⁸.

In a recent report, published in 2021, by the Ministry of Defence (MOD) UK Armed Forces Mental Health: Annual Summary & Trends Over Time, it was estimated that 1 in 10 serving personnel had a mental health problem. Women were more likely to report mental health concerns and have it used against them by being medically downgraded or diagnosed with a mental health disorder which ultimately rendered them unfit for military service ⁹.

Research conducted in the USA suggests that alcohol misuse during military service is an accepted part of US military culture. In 2013, Jeremiah Schumm: Alcohol and Stress in the Military, showed that sixty-five per cent of military personnel were considered in the 'high risk' category for excessive drinking ¹⁰. There is very little research looking at the impact of alcohol misuse by women in the military other than it is used against them if intoxication is a factor in any alleged sexual assault victim's testimony.

“Victim blaming arises from the belief that a victim of rape ‘wanted, asked for, enjoyed, or deserved to be raped due to her behaviour or appearance’. Research provides clear evidence that intoxicated female victims of rape are more likely to be blamed or assigned responsibility for the rape than sober victims, while intoxicated male perpetrators tend to be assigned less responsibility than sober perpetrators ¹¹.”

Despite the sociological predisposing factors that increase the chances of veterans committing a crime, military veterans remain less likely than the general population to offend. That said, in 2014, Andrea Macdonald's study: Offending Characteristics in Ex – Service Veterans, yielded important statistics and themes including that male veterans are more likely to be in prison for violent, sexual and public order offences, and they make up the largest single occupational group in prison ¹². This may be the reason that women Veterans in the CJS have been overlooked. Similarly, service related injuries incurred during service such as mild traumatic brain injury (MTBI), traumatic brain injury (TBI) and/or acquired brain injury (ABI) may be linked to criminal behaviour but are not currently taken into consideration at any point in the CJS assessment journey.

“The effects of brain injury, which typically include poorer memory and impulsivity, make it harder to navigate criminal justice processes, including contact with the police, probation services and prisons, to engage well with them and to get appropriate support. Research has shown how practices of criminal justice agencies can be adapted to be effective for people with ABI and help them to understand and better manage their behaviour; however, such practices are not common place.” Professor Nathan Hughes. (2023) University of Sheffield ¹³.

However, what many researchers do not consider are the internal and external factors that are associated with offending and the impact gender has on post service life trajectories. Instead, there seems to be an unchallenged assumption that veterans are involved in the CJS because of combat related PTSD, when in fact, it is a much more complicated scenario.

“Post-traumatic stress, midlife crises, and an absence of purpose and belonging are deadly combinations for far too many combat heroes.” Christopher D. Kolenda, Ph.D ¹⁴.

The question that remains unanswered is, what can be done to prevent or divert women veterans from entering the CJS in the first place?

It's not surprising that any time spent in a custodial setting will have a disproportionate impact on women veterans. Many are incarcerated for low level offending but subsequently receive a custodial sentence even though, it could be argued that they did not reach the custody threshold. This may be explained by the theory of 'double deviance' where women are punished for breaking societal norms and expectations on how women should behave as well as breaking the law ¹⁵. This patriarchal judgemental viewpoint, may also be exacerbated, if the woman veteran is viewed as having also disgraced the reputation of His Majesty Armed Forces by becoming involved with the CJS post service. A 'triple deviance' perhaps?

"It has long been acknowledged that our criminal justice system was originally designed by men, for men and that it is still largely dominated by men. As a result, women get slotted in to a framework that treats them like men, and fails to recognise some key differences and complexities." Professor Jackie Turton ¹⁶.

As indicated earlier, there is clearly a lack of research, data and information about the lived experience of women veterans within the UK judicial system. This report aims to give justice involved women veterans a voice, a perspective that is currently missing in the UK service charity sector. Much of the assumptions and prejudices associated with this cohort need to be challenged and explored in minute detail, so that we can increase our knowledge on how best to serve those women veterans that have clearly slipped through the welfare safety net.

This report gives a voice to incarcerated and justice system involved women veterans which will hopefully give practitioners an insight into how we can improve engagement and if possible find an 'upstream fix' that stops women veterans entering the CJS in the first place. This report aims to raise awareness of the unmet needs of women veterans and help ensure that the services in the Criminal Justice System are both women veteran centric and fit for purpose.

Research Methodology

The methodology employed in this research was designed specifically to access those with complex life histories and those most hidden in society. Phenomenological research (aka, the study of phenomena) is qualitative research that enables us to learn more about people's lived experiences.

Like other concepts in social theory, phenomenology is a broad term and is hundreds of years old. This tradition and later research, is often seen as being rooted in the work of the German philosopher Edmund Husserl in 1859 – 1938 though of course Husserl was himself influenced by earlier thinkers ¹⁷

If there is one unifying idea behind the idea of phenomenology it is an intense concern about the way the world appears to the person experiencing the world (Moran, 2000) ¹⁸. Phenomenologists seek to describe that experience, and this goal sets it apart from more causal /positivist approaches to social research, particularly behavioural psychology, and from explanatory general theory such as Marxism and Functionalism.

This narrative style inquiry aims to explore the multiple reasons why women veterans may find themselves involved with the UK CJS. Rather than patronise and infantilise women veterans and perpetuate the wrong message that women can't cope after service we decided that consultation and understanding were the key goals of this inquiry.

The interviewers were all women and members of the Salute Her UK staff team. The research team used the methods below to gather data. The interviews took place between January and December 2022 and the report was completed in February 2023 utilising the following research techniques;

- *In depth surveys.*
- *Focus groups.*
- *Interviews.*
- *Case studies.*

As phenomenological research is a people-focused method, wrap around care was provided to participants throughout the process and access to a trauma informed therapist was made available to the women before, during and after the study. The interviews were guided by a semi-structured questionnaire, utilising a flexible approach with open-ended questions that were designed to elicit a spontaneous response. The transcripts of these interviews were then subjected to a thematic analysis utilising an interpretative phenomenological approach.

Thematic Analysis means analysing any patterns in the data gathered. Thematic analysis is an approach that enables researchers to create categories and perform statistical tests without having to set up any rules or procedures in advance.

The team adopted a trans-theoretical mixed research approach that included narrative theory and life story research to explore the limitations of formal hierarchy structures within both the military and prison setting.

Strengths & Weaknesses

Research using ethnographic and phenomenological methods often utilise long interviews drawing on the cultural context of the interview subject. Long interviews provide deep and incisive interrogation of the cultural context of the subject matter. The interviews describe the associated circumstances and factors surrounding the lived experience and the institutional responses to the criminal behaviours. This is important for higher risk research areas where accessing the population is difficult and disclosure is a significant barrier to research participation. It is also an environment where robust safety and care processes must be in place. A smaller sample of in-depth interviews breaks new ground in a poorly understood research area and tills the environment for future wider research design options. A strength of this research design is that it is not institutional, therefore presenting an element of safety for the interview participants to speak freely, especially given the finding that speaking out brings significant opprobrium for female military personnel involved with the CJS. The limitation of this approach is that the findings are indicative but not representative or generalisable in this context. They don't seek to be, but by understanding women veterans' criminogenic needs, the dynamic risk factors that are directly linked to criminal behaviour. I.e. Accommodation, Employability, Relationships, Lifestyle and Associates, Drug Misuse, Alcohol Misuse, Thinking & Behaviour and Attitudes can inform our thinking on this under researched subject matter. However extensive research designs are needed to widen our understanding of both the incidents and their context and applicability to a wider cohort. Another limitation is that the interviews only describe self-reported events and thus our understanding of where, when, and how is limited.

1.5 The Process

In recent years both Salute Her UK and Forward Assist, adopted an action research approach to help design needs led services for marginalised and sometimes, disenfranchised veterans. Together we developed an on-line survey asking women veterans five questions about their offending histories

which included; how long and in which service they had served in during their time in the UK Armed Forces? The survey was advertised and sent throughout our Armed Forces networks and included those women veterans registered with Salute Her UK. The questions were a mix of open and closed questions aimed at eliciting quantitative as well as qualitative data. The responses garnered through this privileged access interview approach allowed us to tailor targeted questions during two virtual focus groups and semi structured interviews.

The final data analysis adopted an inductive method where literature drove the codes and themes rather than any predefined concepts of researchers. We then coded the emerging themes by annotating the text to avoid bias and improve reliability (Guest, MacQueen and Namey 2012) ¹⁹. This then enabled us to determine similarities between participants' responses which would support an accurate representation of the data.

Section Two: Findings

2.1 Demographics

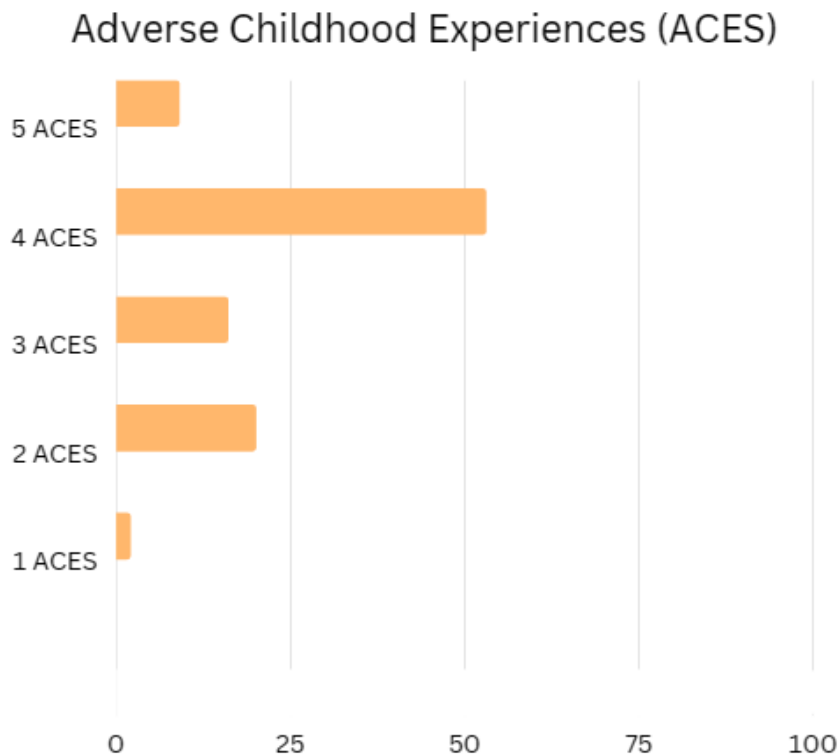
Thirty women veterans participated in this research and gave consent for us to share their lived experience in the hope, that the evidence would inform future service provision. Our research examined the health and social needs of CJS involved women veterans reported through a lived experience lens. We take this opportunity to thank all those that gave their time to speak with us so that in the future, better services could be designed to meet their unique needs and hopefully divert women away from the criminal justice system at the earliest opportunity.

Shame, stigma, vulnerability, lost identities, negative labelling as both failed mothers and veterans exacerbate their feelings of despair. Given that many women feel that a military identity for women veterans just doesn't exist, it's not surprising that CJS involved women veterans feel that they have nowhere to go for help or expect to get help when they need it most.

"Reality denied comes back to haunt." Philip K. Dick ²⁰

Demographics	
Age Range	The youngest participant was 38 and the oldest was 67 years old.
Marital Status	9 of the participants were married. 11 of the participants were single. 10 of the participants were divorced.
Employment Status	12 of the women veterans were in long term employment.
Military Rank	Commissioned and non-commissioned ranks.
Housing	15 of the participants had a local authority tenancy. 2 of the participants were homeless. 11 of the participants had privately rented accommodation 2 of the participants owned their own home.
Income	Many of women were in low paid employment jobs working for minimum wage and/or accessing long term benefits and entitlements.

Life Before Military Service



We carried out an ACE scoring assessment with participants to determine whether ACE scores had had an impact on their offending behaviour. Over 50 % of the participants experienced four or more ACE's. An ACE score is a tally of different types of disadvantage such as poverty, physical and/or sexual abuse, neglect, poor educational attainment etc.

Adverse childhood experiences, or ACEs, are potentially traumatic events that occur in childhood (0-17 years). For example:

- Experiencing violence, abuse, or neglect.
- Witnessing violence in the home.
- Having a family member attempt or die by suicide.

This also includes aspects of the child's environment that can undermine their sense of safety, stability, and bonding, such as growing up in a household with:

- Substance misuse problems.
- Mental health difficulties.
- Instability due to parental separation or household members being involved with the CJS.

A higher ACE score may indicate a higher risk for mental and physical health problems later in life.

Toxic stress from ACEs can change brain development and affect how the body responds to stress. ACEs are linked to chronic health problems, mental illness, and substance misuse in adulthood ²⁰.

“I joined the military because I felt like I had to do it for me, I had a fear that life was going to go downhill for me. My parents were both addicted to heroin and prescription medication. I was hanging round with the wrong crowd, getting into fights, stealing medication from family members. One day I thought if I didn’t do something I would end up in prison. The Army seemed like the best option. “

“I don’t think I have an excuse for my behaviour or why I was arrested. I was brought up by two parents who are still together and have good careers – very middle class. I joined the Royal Air Force at age 22 and served eight years.”

“My parents were extremely critical. I am sure they loved me in their own way, but I never felt good enough. I was sexually assaulted in a park on my way home from school. I was 11 at the time, I told my parents but they didn’t believe me at all. At 14, I started smoking cannabis to cope with life. “

“I hated school and truanted all the time. I didn’t want to learn, I didn’t fit in and had no friends. My Mum would take the mick out of me all the time and call me ‘Billy no mates.’”

“My Dad was a bully and hit me and my Mum all the time. I never had the power to stop it “

“My Mother lived on prescribed anti-depressants and frequently overdosed and when that happened I would be farmed out to neighbours. I could never make her happy.”

“My Father was a violent drunk and my childhood was spent growing up in a home filled with terror and domestic violence. I was always on edge waiting for him to kick off.”

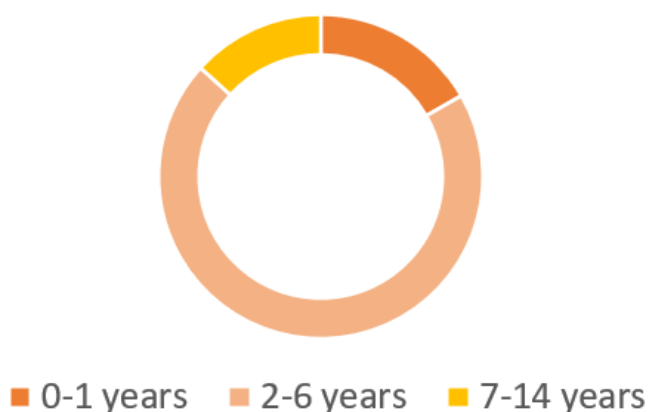
“My Dad was in Prison throughout my childhood. Everyone who visited our house was involved in crime in some way or another. I couldn’t get away quick enough!”

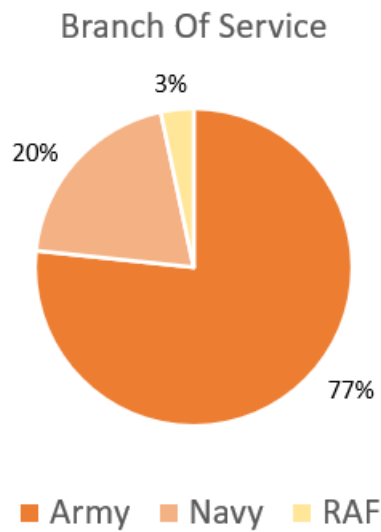
“I was brought up by my Grandmother and when she died I was 13 years old. I went into care and joined the Army in my late teens.”

Whilst we do not condone any criminal activity, researchers at the University of Edinburgh tracked more than 4300 people to examine their involvement in crime and anti-social behaviour and found that childhood trauma may be linked to an increased risk of adult crime. Childhood experiences such as poverty, maltreatment, school exclusion and police contact are associated with serious offending and frequent criminal convictions in adulthood.²¹

Military Service

Length Of Military Service





The women interviewed in this research had very different experiences of service life. Some members of this cohort found military service to have been a very positive experience and their difficulties only started when they left, due to a lack of 'women only' support services. Yet others, reported that sexual assault, bullying, harassment and 'name calling' during military service caused them long term psychological damage, to both their sense of wellbeing and self-identity. Examples of a lack of empathy for any biological issues relating woman's health were frequently discussed. Several of the women said their gender specific health needs were frequently dismissed, minimised or trivialised. The women veterans also said that they felt humiliated degraded and dehumanised by sexual objectification and abuse from male colleagues or when they needed to remove clothing to urinate on field exercises or overseas operations. This so called 'banter' did nothing to recognise their professionalism, contribution or dedication to duty.

Name calling included terms such as:

- *Split Arse*
- *Spunk Bucket*
- *Lumpy Jumper*
- *Ground Sheet*
- *Camp Bike*
- *Weekly Ration of Army Cunt (WRAC)*

"There are only two types of women who join the Army those that love cock and those that don't."

"I was told that in this Army that the women need to be men and the men are animals. It's true!"

"I used to laugh when the guys said horrible things about me as it was the only way I could get them to leave me alone. If you showed you were upset it was relentless."

"As far as the men were concerned I was just a walking vagina."

"I don't trust men and I never will. I try and get jobs where I only work with women."

"I have no self-esteem or confidence. I am angry, bitter, frustrated, lonely and isolated. I use alcohol on a daily basis to numb the pain."

"It is easier to admit to a physical health problem than admit you are struggling mentally"

"I have been bullied and called names my entire life. It started at home when my Dad used to tell me that I was useless and should never have been born. At school I was called 'stupid' and 'thick' When I joined the Army I was constantly told that I was dead weight and holding back the other recruits. When I passed out, I was told that I must have slept with one of the instructors. Every day I was called a different name. In the end I could take it anymore. In the end I started to believe what they said."

"I was deployed, in a hot country with very little sanitation. Washing was a luxury. I had to stop using tampons as I couldn't change them often enough. I was terrified of toxic shock syndrome. I had to use sanitary towels instead. Men in my unit constantly humiliated me and told me that I smelled. It was a joke in the camp. I couldn't go to anyone or complain that would have made things worse."

"I am only 5ft 2 I was constantly made fun of and ridiculed. If I was reaching for something on a shelf, men would use it as an excuse to sneak behind me, lift me up and touch my breasts at the same time. Even though I have been out of the military for 20 years, I still check behind my back"

"The Royal Air Force became the family I never had and when I left I cried for a week non stop. When I went to Prison I just kept quiet as I didn't want anyone to know I was ex-services. I've never asked for help from a charity before"

"Joining the military is the only happy memory I have. I loved being in my unit. When I left things started to go wrong. I had no help, nowhere to turn "

"My bedroom door wouldn't lock. I was waiting for it to get fixed. One day I was getting changed in my room after a shower. I bumped into a shelf when I was drying myself and a mobile phone fell onto the floor, it was recording the entire time. I was shaking and took it to my CO. He took the phone from me, promising he would sort it out. Three hours later I was being laughed at. A woman in my unit told me that everyone had seen the footage. I was horrified and felt violated. "

"My life in the Army was made an utter misery due to being bullied by a female Corporal who found fault with everything I did. She destroyed me."

" The military was my safe space, I was injured and, in the end, I was medically discharged. I was shell-shocked when I came home. I couldn't cope with the outside world. I couldn't adjust to the new me. I was completely lost and bewildered "

"In the military, men always sexualise you. They do it whether you like it or not. So, you have to put up with it if you want a long career, sacrificing your dignity. They say you have to have a thick skin to have a career in the military if you are a woman".

The Criminal Justice System

Being in police custody can be a frightening place for many people, but even more so for those with mental health illnesses such as Post Traumatic Stress Disorder, where the psychological triggers can be considerable. Often such cells have harsh lighting and smell strongly and can be loud, noisy and distressing.

Many of the women interviewed suffered from adverse mental health outcomes such as Complex Post Traumatic Stress Disorder (CPTSD), anxiety, depression, and substance abuse.

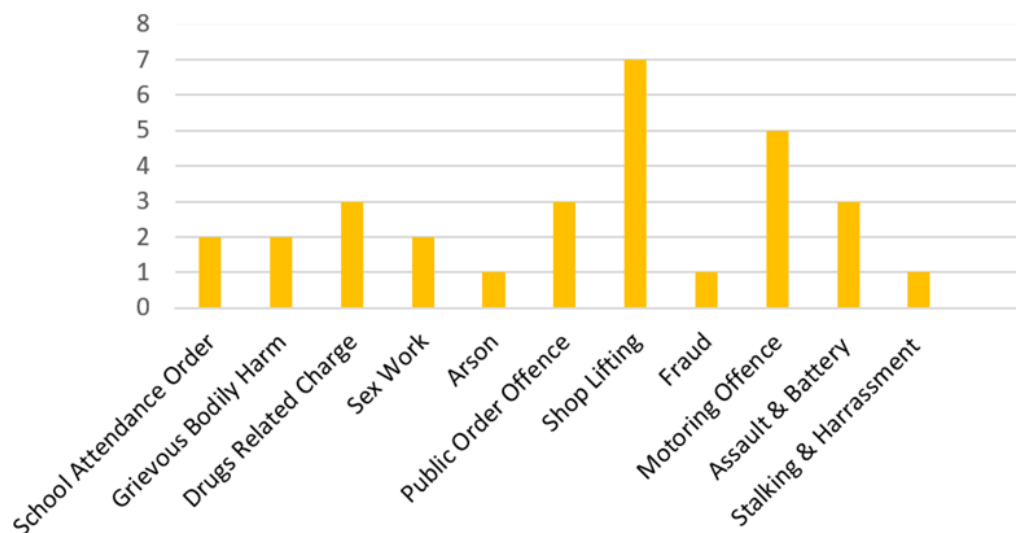
“Being arrested was the lowest point in my life. It couldn’t get any worse. I was scared, ashamed and didn’t know who to turn to.”

“I have flashback’s all the time. The officers who arrested me threw me up against my cell wall and really hurt me. They then left me alone for hours. I sat and cried and screamed but no one came to help me”.

“I was a single Mum and struggled financially. I would feed my daughter before myself. I turned to a certain Facebook group for women officers and told them I had been arrested. I was castigated and ridiculed, one person said I was an embarrassment to Sandhurst and that I had wasted my officer's training.”

“I left the military and struggled to trust anyone. I isolated myself from everyone. I eventually found someone that I thought I would spend the rest of life with but she told me that I was too clingy and intense and ended it. I couldn’t let go, I started ringing her and hanging around her house every day. I was eventually arrested for stalking.”

Offence Analysis



“I told them when I was arrested that I had PTSD from the military service-no one cared. I got told we are here to do a job not be your counsellor”.

“When I was first arrested it was by two male officers, they mocked me the entire time and they clearly wanted me to know that they were in charge. It was incredibly threatening”.

“Hygiene is not seen as a necessity for women. I told the custody sergeant that I needed sanitary wear and he just laughed at me. I had to wait six hours for a change in shift. I was left covered in blood and humiliated”.

“When I first entered prison, I was issued with sanitary wear which was more than I got from the army when I served in Iraq”.

“My child was being bullied at school, she was 14 years old. Have you ever tried to force a teenager into a car and drag them into school, against their will? It is impossible. Fine after fine arrived at home. The debt ran into £1000’s. Then the legal letters started, parenting contracts, children services then a court date with a possible prison sentence. My solicitor told me to prepare for the worst. It has been the most terrifying experience of my life. No mother should have to say goodbye to their children.”

“I don’t know what a ‘normal’ relationship is anymore. I was used so much in the military and I guess it followed on when I left. I find myself bouncing from one abusive relationship to another. I eventually snapped and retaliated against my then husband. He punched me in the face and I picked up the nearest object and couldn’t stop hitting him.”

“I had really bad mental health issues when I left the military. I couldn't cope with the sense of betrayal, after the sexual assault, he was my friend and no one believed me. I wanted to finish my degree but I knew I wouldn't be able to. I just stopped, stopped being me. I had no money and couldn't get a job so I resorted to crime”

The majority of women said that after their military service ended they had, overall, a poor quality of life. Many factors impacted on quality of life like physical illness, chronic pain, a criminal record, or a whole host of complex mental health conditions. The main theme running throughout the participants responses was that the CJS system could not meet their needs and their complex needs were missed at every stage through the lack of appropriate referrals. They viewed the system as broken, not fit for purpose and out dated.

“Too often criminal justice policy is derived from theory, not practice. Without an understanding of the world of the practitioner and those offenders they work with, we can’t hope to create a criminal justice system which reflects the knowledge and experience of those who are directly involved with reducing re-offending. Practitioner-led research should always inform policy. Only then can criminal justice policies hope to have a genuine and lasting impact.” Roma Hooper OBE ²²

A typical yearlong custodial sentence can cost in the region of 48,000 per prisoner. (Ministry of Justice 2022) ²³. Even a highly intensive two-year community order, involving twice weekly contact with a probation officer, 80 hours of unpaid work and mandatory completion of accredited anti-offending programmes, costs less than 6 weeks in prison, at £4,200 (NICE 2017) ²⁴. There are a number of research papers that demonstrate that well-designed interventions can reduce reoffending by 30% or more. The use of prison has major implications for both mental health and physical health. The vast majority of people on remand or serving sentences in prison have at least one mental health difficulty (Gunn J, et al) ²⁵. Complex need is sadly a reality, and rates of self-harm and suicide in prisons remain at an all-time high.

For five of the nine women who were sentenced to a custodial sentence, receiving adequate mental health treatment without long waiting lists was viewed as a bonus. They reported feeling safe and for the first time didn't feel like they were judged as they had been in the community. They also liked the structure and security that prison offered, they didn't have to worry about paying bills or how to afford food.

"It was hell, on earth and an abuser's playground".

"No one ever asked me if I was a veteran".

"There is not enough staff to support us, I felt completely on my own and left to deal with my mental health problems. This resulted in me trying to take my own life on three separate occasions".

"I told the staff I was feeling anxious and I got told to "suck it up buttercup, if you can't do the time don't do the crime"

"I didn't feel safe, I would prefer to be locked in my cell all day. I was triggered on a daily basis because of all the violence I witnessed".

"Being in prison probably saved my life. Most of the Prison Officers had been in the Army. I felt like I was in my old unit, not prison. I became attached to them, I wanted to be friends with them when I left prison. I realized quickly that they were doing a job. That's it. Back to not mattering again. "

"It was just like being in the military, keep your mouth shut, follow orders and suck it up. No one cares who you are or your background".

"Nothing is fair, it depends on who you are and whether you are liked by prison staff, some of the prisoners are given perks i.e. allowed to smoke or take drugs".

"Sexual harassment is rampant, prison officers have so much power and control. They can literally do what they want and it's your word against theirs".

"One of the girls in prison was an escort and she arranged for me to meet the boss of an Escort Agency when I got out. So, I did. I needed the money."

"Everyone in prison self-harmed, but there was one woman who got off on physically hurting other women. "

"I was on suicide watch as it was the only way I could get any attention. How fucked up is that?"

"I loved being in Prison it was great I dreaded getting released as the loan sharks were waiting for me to get out."

"It's a blessing and a curse being ex-military in a prison. The Prison Officers that are ex-forces look after you, but you know they wouldn't give you the time of day if they met you on the outside as I am one of life's failures."

"I didn't share that I was Lesbian when I went into prison. I saw too many sexual assaults so decided to keep my mouth shut "

"It kills me not being able to see my kids. It's not an environment I want them to come to. "

"I deliberately kept a low profile and watched what I said in front of the Prison Officers that were clearly ex-forces. I don't trust men and especially those that were in positions of power and control"

Despite the numerous campaigns that aim to raise awareness of mental health, the stigma of being diagnosed with a mental health condition stops meaningful conversations on the subject matter, and for many, negatively impacts employment opportunities and career progression; despite one in four adults in the UK being diagnosed with a mental illness during their lifetime.

There is a plethora of research in the UK that indicates there is a prevalence of mental health problems among prisoners serving custodial sentences in the UK CJS. The data also suggests that mental health problems in prison are considerably higher than the general population.

“The criminal justice system is failing people with a mental illness. At every stage, their needs are being missed and they face unacceptable delays in getting support. Not enough progress has been made since our last joint inspection 12 years ago to put right these critical shortfalls. “Justin Russell 2019 ²⁶.

Research published by Nadia Campaniello suggests that more women are committing crimes than ever before. However, the arrest rate is still lower than that of the male population ²⁷. Many of the crimes committed by the participants in our research can be linked to poverty and an economic crisis. A large proportion of people in contact with the CJS experience significant health inequalities and present with a wide range of predisposing vulnerabilities. Such as, undiagnosed mental health problems, low emotional intelligence and lived experience of multiple traumas. As mentioned earlier, for some, being in the military had protective characteristics e.g. somewhere to live, food, a regular income, structure and career development opportunities.

“I did a stupid thing which cost me an excellent career in the Criminal Justice System. I started selling cannabis and got caught. I thought I could get away it. My husband left me and I wanted to buy him out so that we could stay in our family home.”

“We all love our children, I am sure you would do anything for your kids – wouldn’t you? That’s what I did. I don’t enjoy having sex with men or being hurt. But it is what I have to do to survive. “

“I put a new claim in for Universal Credit and I had to wait five weeks for my first payment. I couldn’t feed myself and went shoplifting. I did that five or six times before I got caught”.

“I have never had a decent job since I came out of prison.”

“I loved been in the Royal Navy. I’m so ashamed I ended up on Probation. I check out what my old friends are doing on Facebook and their lives seem so much better than mine.”

According to the Government, the Probation Service is a statutory Criminal Justice Service in England & Wales, that supervises high-risk offenders released into the community ²⁸. In Sentence management their focus is on strengthening the Probation practitioner’s relationship with people on Probation, using the right key skills, activities and behaviours to achieve the most effective outcomes and enable offenders to make positive changes to their lives.

Several interviewees reported that they felt the Probation Service was there to punish them rather than support them. Others had a positive relationship, yet, felt they had limited options or choice in relation to the services commissioned by the Probation Service to address areas such as Employment, Training & Education, Accommodation, Personal Wellbeing and/or Women specific services. The development of a ‘Women Veteran’ specific ‘Custody Diversion and Trauma Recovery Service could allow the unique needs of women veterans to be both addressed, understood and researched. We believe this could be achieved if the CJS were to pilot a UK version of Veteran Treatment Courts. The USA has demonstrated that low level offenders respond favourably to the support provided by multi-disciplinary teams connected to Veteran Treatment Courts. (Wright T. 2021 Saints and Sinners. ²⁹

Sadly, many of the participants in this UK research, cited feeling that few of the commissioned organisations understood their unique needs or were aware of the multiple, military service, -related traumas that they had experienced which continued to cause anxiety and stress years after service.

“My probation officer did try to help me. Yet, she couldn’t control what other services did or more to the point, didn’t do and I was let down.”

“I was working with a women only registered charity before I went to Prison and they kept in touch throughout my sentence and helped me get a roof over my head when I was released. Yet, I was told that I was going to be referred to another women’s organisation despite my wanting to work with people who had helped me before. It all seemed a bit silly.”

“I haven’t been able to build a relationship with my Probation Officer as he was always off work and I had to see different people. I feel like I’ve been passed from pillar to post and don’t have a choice in which organisations I work with, I feels like pass the veteran.”

“I feel really vulnerable waiting in the Probation Office waiting room with men. To survive financially, I joined an escort agency. I hate myself, I am not the person I have become. My Probation Officer is very judgemental of my choice of employment and I don’t trust her, I always feel worse when I come out of a meeting with her and she seems to be obsessed with my sexuality, always asking if I’m gay.”

“I was medically discharged, drank a lot, and took lots of different drugs. I used up all my savings and stole from my family. I was eventually thrown out of my flat because I hadn’t paid my rent. I spiralled out of control. I stole from shops and the money I earned I spent on drugs. It was a vicious circle. My Probation Officer is really kind and has tried to help me by searching for organisations that are near where I live.”

“My probation worker is amazing and has really helped me to move forward in life.”

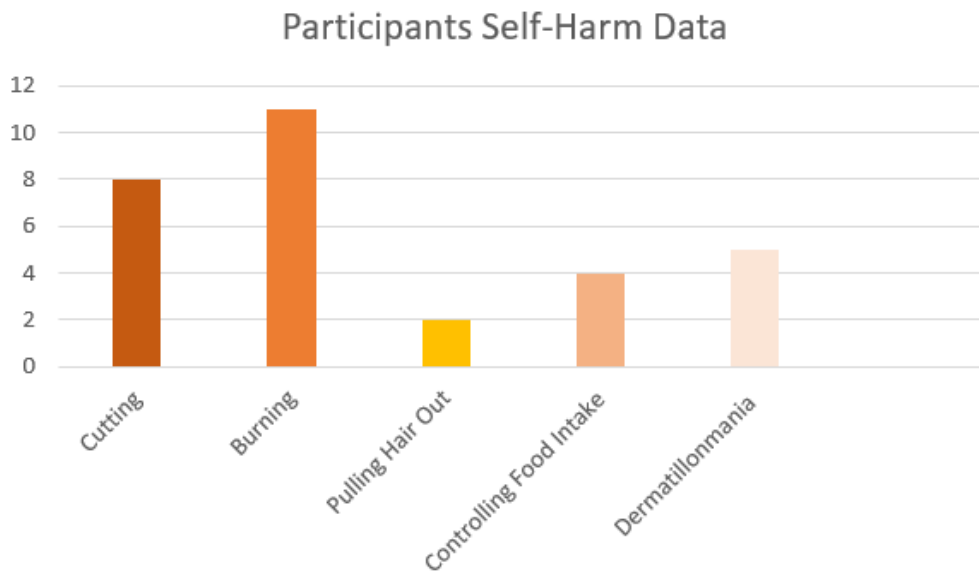
“I can only apply for jobs where I know they won’t do a background check or I avoid answering the question and pray for the best. “

“I feel like I am judged because of my criminal record. As soon as someone finds out, I am put to the bottom of the list, like a piece of scum. “

“I have given up trying to find a job. I was earning 120K pa. My criminal record has meant that no pharmaceutical company will touch me. There’s nothing the Probation Service can do about that, is there?”

Over a third of the women also disclosed that they regularly self-harmed both in prison and whilst subject to community-based court orders.

The US National Alliance on Mental Illness describes self-harm or self-injury as an action that intentionally damages or injures the body²⁸. Self-harm is in most cases a way to express or cope with emotional distress. There are many possible causes of emotional distress. It's often a build-up of many smaller things that leads people to think about self-harm. Self-harm may be linked to bad experiences that are happening now, or in the past.



Some of the reasons that people may self-harm include:

- Expressing or coping with emotional distress.
- Trying to feel in control.
- A way of punishing themselves.
- Relieving unbearable tension.
- A way to ask for help.
- A response to intrusive thoughts.

" I'm not one of life's great success stories, I was abused as a child, joined the military to have a better life, raped there. Leave the military with nothing. I am nothing, where are my brothers and their sisters in arms now? I cut myself to feel better".

" I want to feel alive ... That's why I cut myself. It's addictive and I can't stop. "

" I burn myself with lighters. I have scars all over myself. I don't care what it looks like. I don't want men to find me attractive. "

" It's a release. I feel pressure building up inside me. I hate myself, cutting is the only way I know how to cope."

"What is the point of talking to someone about all your mental health difficulties when they clearly don't care and they are not trained to deal with it."

"My probation officer was ex services and he told me I had let my Regiment down. I would cut myself after appointments with him."

Case Study

Julie (pseudonym) is 40 years old. She served nine years in the Army, during an operational tour of Afghanistan the vehicle she was travelling in was in close proximity to an improvised explosive device (IED) Julie was later diagnosed with Post Traumatic Stress Disorder and a scan revealed a Traumatic Brain Injury (TBI). Julie recovered after twelve months of rehabilitation and was medically discharged. She moved back to her family home without an identified care pathway or practical support on how to transition back into the civilian world successfully.

“I was left broken, I couldn’t close my eyes without seeing bodies. I couldn’t forget what happened but I wanted to. How did the Army think I was going to be able to be a member of society again? “

Julie was referred to Forward Assist’s women veterans project (Salute Her UK), by her Mother Karen three years ago. Karen expressed concern that things had started to spiral out of control many years before when she returned from Afghanistan and prior to her Post Traumatic Stress Disorder (PTSD) diagnosis. Her behaviour at that time was characterised by flashbacks, depression, insomnia, hypervigilance, aggression, avoidance, mood swings, hallucinations, nightmares, risk-taking behaviours and chronic suicidal thoughts. Julie describes this period as;

“Everything was too much; I didn’t fit in anywhere. Every service I went to eventually said the same thing...we don’t know what to do to help and I would be passed on from service to service”.

The family reported that they had experienced multiple problems trying to access help and support for their daughter. The family had reached breaking point due to Julie attempting to end her life on several separate occasions and she was referred to the Emergency Duty Mental Health team on numerous occasions for assessment, but she didn’t meet the criteria to be detained. It wasn’t long after this that she started self-medicating with drugs and alcohol which resulted in her living a chaotic lifestyle and becoming involved in criminal activities. This eventually, led to her serving a 12 Month Custodial Sentence. Karen also reported that it was around this time that her daughter disclosed that she had experienced sexual abuse as a child. After her release from Prison, Julie spent months self-isolating away from the family home choosing to live alone in a tent pitched in local woods rather than live in the family home.

“I felt completely out of control. I was scared, all of the time. I didn’t want to engage in services. I was triggered all the time and for some reason I was given male support workers repeatedly. I don’t want to work with men”.

In 2021, Julie inherited a significant amount of money from a deceased relative. During this period, she started to re-associate with a criminal gang and started to abuse ‘Benzodiazepines’ recreationally. Due to her predisposing vulnerability, she was exploited both financially and sexually. Her behaviour became extremely aggressive. Her life started to spiral out of control again and she was charged with taking a vehicle without the owners’ consent and having no driver’s licence or insurance. She was also charged with an additional offence of Grievous Bodily Harm. She was then sentenced to another custodial sentence.

“Prison has always been a safe space for me. I get the care that I need. I’m not judged, I’m not triggered and I learn skills that I need to cope with my mental health”.

She was released from prison in September 2022, with no accommodation or care plan. Since her release from Prison she has attempted to end her life on over thirty separate occasions and has been passed from service to service. During her period of incarceration, she was also diagnosed with a learning disability

“It all starts again. In a system that is broken and that doesn’t recognise that I am a female veteran. I will be passed from pillar to post, it has already started. I keep getting told that I don’t engage. How can I? “

Julie called Salute Her UK and asked for help. When Julie was picked up, she was wearing prison-issue shoes, no coat, and a phone without a charger, she was scared and didn’t know where to go or what to do.

“Have I hit rock bottom? Probably. I have nothing to live for, I feel like every waking day is torture. I can’t cope with it anymore. I’m a waste of space and a disappointment “

A member of staff from Salute Her UK requested to attend Julie’s first appointment with the Probation Service as an advocate. Worryingly the Probation Service were not keen to accommodate this arrangement and would only work in partnership with services that they had already commissioned. Julie was informed that they had spoken to the four Local Authority housing providers and they had said they would not rehouse or provide any emergency accommodation due to Julie being assessed as high risk. The local authority housing providers were under the impression that she had a prior offence of Arson, which when investigated further was untrue. Similarly, the Probation Service chose not to make a referral to the Adult Safeguarding Team, despite well-documented vulnerabilities and did not challenge the local authority on their decision not to accommodate. Julie advised that she would be rough sleeping. The Probation Officer advised that housing was not their responsibility. Despite objections, Julie was referred to several veterans’ charities that did not have the experience or specialism to support a woman veteran with multiple and complex mental health presentations.

“I have been set up to fail, no one cares that I served, no one cares that I was injured on patrol, no one cares that I have PTSD, no one cares that I am homeless and so very alone, no one cares that I am scared. No one cares at all. The system that is meant to help me is broken and beyond repair.”

Forward Assist stepped in and paid for hotel accommodation for three nights. The local housing authority then agreed to cover the cost of an additional four-night stay. Sadly, Julie had a PTSD episode in the Hotel and was evicted as she was deemed a high risk by hotel staff. This was followed by a further period of rough sleeping and sofa surfing before she negotiated a return to the family home. It was at this point that Salute Her UK were able to step back into her life and help Julie access entitlements and benefits and restart payments of her War Pension which had been suspended during her time of incarceration. Clothes, shoes, and sanitary items were purchased for Julie by Forward Assist and Salute Her UK were able to assist Julie and her family with information and advice and acted as the first point of contact in an emergency. Julie was able to meet daily with the teams Mental Health Therapist and transport was provided to probation appointments and safeguarding issues were raised with the Probation Service, Adult Services, the Police & Crime Commissioner and the complex treatment and mental health services. A referral was made to the Royal British Legion to access funding to cover the cost of emergency accommodation if it was ever needed. In the weeks following her release from prison Julie was assessed by multiple agencies with which she had little previous contact and this resulted her being emotionally triggered and depressed. There has been little in the way of strategic, multi-agency partnership work which has resulted in the replication and duplication of services provided to her. Sadly, agencies are not working together or sharing information.

Challenges:

It's clear that the issues impacting on the lives of women veterans involved with the CJS are complex and multiple. This report highlights more of what is not happening, rather than what is happening.

Since 2016, women service personnel in the UK have been allowed to serve in 'frontline' combat roles and experience the brutality of combat just like their male counterparts and it is little wonder that we are already seeing an increase in the number of women veterans referred to Salute Her UK with combat related PTSD. Unresolved/untreated trauma both during and after service life negatively impacts on employment careers and stable home lives. It is clear from the case study above that the case management and care coordination of women veteran offenders when released from custody is far from ideal and their understanding of the unique issues experienced by women veterans is limited.

"There's clearly more that we can do to meet the needs of former service personnel when they become involved in the Criminal Justice System." Probation Service Regional Manager

The veteran population is diverse and not every veteran has PTSD and if they do, it's not always due to being in combat. In fact, research in America and beyond indicates that victims/survivors of MST are just as likely to have Post Traumatic Stress than combat veterans.

In this research study cohort, homelessness, chaotic lifestyles, unemployment, poor self-esteem, relationship difficulties, Adverse Childhood Experiences, drug and alcohol misuse, all negatively impacted on a successful transition back to civilian life. Multiple complex problems require a multiple disciplinary collaborative response, and a collective responsibility to help women veterans do better. To ignore women veterans and not try to understand or be aware of the unique problem's women veterans face is not acceptable if the UK Office for Veterans Affairs really wants to be the best place in the world to be a Veteran. The transition back to civilian life can be difficult for all veterans and many express feelings of unhappiness for a considerable amount of time after discharge from military service.

"In discussing veterans' challenges, many psychologists point to what's known as the U-shaped happiness curve. The top of the U, the happiest and highest points in your life, take place in your early twenties and later in your sixties. The bottom of the U comes at age 47. Most people in combat are in their twenties, predisposed to happiness and feeling intense purpose, belonging, and support. But 15 years later, veterans slide down to the bottom of the U, with many feelings empty." Christopher D. Kolenda, PhD²⁹.

We know from talking to numerous women veterans accessing services from Salute Her UK, that trying to fit into a toxic masculine culture in the military comes at a high cost. Women are expected to lose their biological identity, they must deny their femininity and act 'manly' in order to fit in and be accepted. This, indoctrination process however comes at a cost to the authentic self and operational requirements do not facilitate or indeed encourage, those that may feel they need to access services to help them adjust or indeed deal with their mental or biological health problems.

Women veterans transitioning to the civilian employment market may, initially struggle to adjust/assimilate due to sexual discrimination, employers not valuing military service, and/or viewing all service personnel as mad bad or sad. Maintaining employment is particularly difficult for single mothers with childcare responsibilities and those with lived experience of military sexual trauma or/and PTSD. Finding suitable housing after service life has always been difficult and it is exacerbated by the current economic downturn. There is no data in the UK in relation to homeless women veterans. We have found that there are limited, if any housing projects that offer gender specific

housing for women veterans. They remain invisible when trying to access either emergency direct homeless accommodation or permanent tenancies via social housing providers. Emergency homeless providers usually only offer mixed -gender accommodation and in our experience the staff are unaware of the unique needs of women veterans with past traumatic experiences and the risk of sexual assault/harassment and other safety issues are not risk assessed adequately. When it was pointed out to one emergency housing provider that placing a woman veteran in an all-male housing project was not acceptable given her past experiences of trauma they said, “She’s a veteran she should be able to look after herself.” She absconded an hour later choosing to sleep rough in a local woodland.

Homeless women veterans are an invisible population in the UK and as such, may be more vulnerable to exploitation. We have women veterans on our case load who report that they resorted to survival sex in order to get a bed for the night rather than risk sleeping on the streets. Many of the women veterans in this report had histories of self-medicating with drugs and alcohol in the absence of therapeutic trauma informed interventions. Similarly, those with pre-existing co-morbid presentation. For example, PTSD/ MST /Moral Injury/Survivor Guilt/ Adjustment Disorder—and substance misuse issues continue to slip through the mental health/ housing provider safety net as they are classed as too difficult and resistant to treatment options.

“We are what we are because we have been what we have been, and what is needed for solving the problems of human life and motives is not moral estimates but more knowledge.” Sigmund Freud ²⁹ .

Many women veterans report using alcohol to deal with everyday day stressors, such as worries about debt, unemployment, housing tenancies, ‘heating & eating’ costs and childcare bills. (a habit that was a cultural norm during military service) Not surprisingly, anxiety, depression, self-harming behaviours, PTSD and suicidal ideation feature predominately with this cohort of women veterans. There is a plethora of research that makes a correlation between poor mental health and substance misuse. Many of the women in this report reported prolonged exposure to traumatic events both before military service (childhood neglect/abuse) during (harassment, bullying, discrimination, MI MST PTSD) and after leaving military service. (Intimate partner violence, victimisation, exploitation, despair, prejudice and wrongly diagnosed mental health conditions.)

“A hurt is at the centre of all addictive behaviours.... The wound may not be as deep and the ache not as excruciating, and it may even be entirely hidden—but it’s there. As we’ll see, the effects of early stress or adverse experiences directly shape both the psychology and the neurobiology of addiction in the brain.” Gabor Mate ³¹ .

We know from our other research studies, i.e. No Man’s Land 1 & 2 and those we interviewed in this research that many of the women joined the military to escape poverty, dysfunctional, abusive and violent parents and/or households.

As highlighted in all our previous reports the UK Ministry of Defence and Office for Veterans Affairs will not adopt the term Military Sexual Trauma (MST) despite its widespread use by allied armed forces. MST for both male & female veterans should be a significant concern for all the UK Armed Forces.

MST is defined by the American USA Department for Veterans Affairs as:

Military sexual trauma (MST) refers to sexual assault or sexual harassment experienced during military service. Veterans of all genders and from all types of backgrounds have experienced MST ³² .

As with all sexual assaults, such offences are rarely reported which makes collecting of data on the true scale of the problem caused by sexual harm in the UK Armed Forces extremely difficult to assess. In Canada, members of the Canadian Armed Forces (CAF) were surveyed to assess prevalence.

The survey received over 43,000 responses from active members of the CAF. The results of the survey indicated that **27.3%** of women and 3.8% of men reported having been victims of sexual assault at least once since joining the CF. Half of the female respondents identified the perpetrator as a superior.³³

In the USA, (2022) 8.4 percent of female service members and 1.5 percent of male service members experienced unwanted sexual contact, according to their research³⁴.

The Atherton Report (2021) Protecting Those Who Protect Us: Women in the Armed Forces from Recruitment to Civilian Life³⁵. found that;

“64 percent of female veterans and 58 percent of currently-serving women reported experiencing BHD during their careers. The MoD’s representative statistics show that Bullying Harassment & Discrimination (BHD) are gendered. The inquiry heard truly shocking evidence of the bullying, sexual harassment, sexual assault and rape experienced by servicewomen. At the same time, the majority of the survey respondents did not believe the military does enough to address BHD.”

Adverse Childhood Experiences and in-service sexual assault are currently being researched in the USA and Canada. However, we can confidently assume that sexual trauma and particularly in-service sexual trauma in the UK military could lead to poor mental health such as PTSD, moral injury, survivor guilt, depression, anxiety, self-harm, loss of confidence, poor self-esteem and suicidal ideation amongst other presentations.

Research in the USA and elsewhere has indicated that women veterans who have experienced sexual assault /rape in the military are nine times more likely to develop PTSD than women veterans without such experiences³⁶. Worryingly, other research in the US indicates survivors are 2-3 times more likely to attempt suicide or engage in self-harming risky lifestyles or behaviours³⁷. Combine this with their involvement in front line combat roles then the possibility of being re-traumatised can lead to long term psychological damage which will impact on operational effectiveness. As such, timely trauma informed interventions to address mental health concerns should be prioritised to prevent lifestyles that are characterised by drug and alcohol misuse, homelessness, unemployment and eventual involvement in the UK Criminal Justice System.

The reluctance of the Ministry of Defence to accept the harm caused by in service sexual assault or adopt the term MST means that there are no services currently operating in the UK other than Salute Her UK and Forward Assist, where confidential, specialist support for tri-service, serving and veteran survivors is available.

Challenges to Supporting Women Veterans in the CJS

The key barrier to understanding the needs of women veterans involved with the CJS or indeed engaging with women veterans to create effective pathways to both, divert women away from the CJS, and/or support those imprisoned or subject to Community Based Court Orders or post custodial release licence conditions. Currently it is impossible to assess how many women veterans are involved with the CJS. Attempts were made quantify actual numbers of serving personnel back in 2009 and 2010 by the Probation Service but these numbers almost exclusively focussed on male justice system involved veterans and the figures were both estimates and based on anecdotal evidence provided by Probation Officers from 35 Regional Trusts. Subsequent research by Defence Analytical Services and

Advice (DASA) arm of the MOD, compared records on approximately 1.3m Service leavers with a database of all remand and sentenced prisoners in England and Wales aged 18 and over. It found that former service personnel make up just under 3 percent of offenders in prison³⁸. The research has its limitations as the majority of Probation Trusts and Prisons did not screen inmates to establish if any offenders came from a military background and veteran status relied on self-report with little if any attempt to check service history.

Research by the Howard League: Report of the Inquiry into Former Armed Service Personnel in Prison (2011)³⁹.

“The same figures suggest that 25 per cent of ex-servicemen are in prison for sexual offences, compared to 11 per cent of the civilian prison population. Ex-servicemen are also over-represented in offences categorised under the heading ‘violence against the person’, with some 32.9 per cent being in prison for such offences, compared to 28.6 per cent of the non-veteran prison population. This broad pattern of offending was borne out in the prison-based interviews we conducted with ex-servicemen.”

Research carried out by Probation Officer Andrea Macdonald⁴⁰ (2014) interviews with 141 male veterans revealed that;

“More than 70% of the interviewees said they had experienced problems adjusting to civilian life. Of these, 41% had been convicted of a violent offence and a quarter of them had been found guilty of a sexual offence. More than half of the interviewees said they did not feel part of their civilian community and 47% did not feel part of the military community either.”

It’s clear that there are some similarities between male and female veterans at the point of transition from military service and civilian life. Women are a minority group within the UK Armed Forces but they are never the less, whilst serving, highly visible. Yet, after service women veterans seem to metaphorically speaking, disappear and become invisible. Women that become involved in the Criminal Justice System are further disadvantaged by the barriers they face in accessing to help them on release from prison, as most service charities are designed for male veterans. Gender discrimination, stigma, isolation, shame and unmet, multiple complex needs all negatively impact on the possibility of a successful transition back to the community after serving a prison or community-based sentences. Sadly, their lived experiences are unrecorded so there is a real need for further research to look at the nature of their offending, which appears to be less serious than their male counterparts but nevertheless life defining. The lack of services for women with multiple traumas should be a cause for concern for service charities and service commissioners across the UK.

- *Women service personnel make up approximately 11% of the British Armed Forces.*
- *Women Veterans are an invisible, hidden population. They often feel like they don’t matter.*
- *It can be argued that due to the difficulties of balancing service life and family life, serving mothers, often the primary caregivers, make the greatest career sacrifices and sometimes leave the military altogether to care for their children.*
- *Being female and a member of an intersectional minority group can lead to difficulty in accessing support both during and post military service.*
- *There is very little research in the UK looking at the needs of women Veterans in the Criminal Justice System.*

- *The Secretary of State for Justice stated that as of 30th June 2021, there were 13 females serving a custodial sentence in England and Wales who had declared former military service*⁴¹.
- *As of 30 September 2021, The Secretary of State for Justice reported that the number of female veteran's subject to community-based court orders and probation supervision was as follows: 11 women were subject to 11 Court Orders (Court orders includes all community sentences, deferred sentences and suspended sentence orders with requirements*²¹.
- *The England & Wales Census (2021) indicated that 1,853,112 people in England and Wales reported that they had previously served in the UK armed forces (3.8% of usual residents aged 16 years and over). The gender breakdown of responses to the census indicated 13.6 % were women*⁴³.

Part of the research for this report we asked Stephanie Peacock MP to ask the Secretary of State for Justice, how many female veterans were serving custodial sentences? She was told that that in June 2021, thirteen females were a serving a custodial sentence in England and Wales (self-declared) Paul Sweeney MSP asked the same question of the Scottish Government's Cabinet Secretary for Justice and Veterans and was told that "there are currently less than five female individuals in our care who have identified themselves as having served in the armed forces."⁴⁴ Neither, the Ministry of Justice nor the Scottish Government distinguish between those who have served in the British Armed Forces or foreign armed forces. As such, it's clear that, women veterans' needs are not prioritised and there is little understanding of offending patterns and behaviours. All of which, is essential information if we are to design specific interventions that might reduce the risk offending and increase engagement with women centric support services.

Over the last five years we have seen numerous examples of women veterans who first accessed our services in crisis, to then go on and volunteer for other service charities once they had accessed trauma informed therapy.

At the launch of Salute Her UK and Women Veterans Debate event in the House of Parliament in May 2022. A group of women veterans debated whether UK Armed Forces charities were doing enough for women veterans? Interestingly, after to listening to the debate the invited audience voted emphatically, that they were not.

The above notwithstanding, it is clear that women veteran centric services such as Salute Her UK can have a significant impact in furthering and advancing delivery of gender-sensitive comprehensive care that can be tailored to meet the needs of women veterans. During the course of this research project, the women participants involved were able to access additional support from the Salute Her UK team and reported better quality of life outcomes after accessing 'needs led' and 'person centred' trauma informed support.

Conclusion

“When it comes to women veterans involved with the UK Criminal Justice System, the lack of knowledge and research into the needs of this invisible cohort of the veteran population is simply unacceptable. We have neither evidence-based practice or practice-based evidence on how best to develop and provide a trauma informed approach that effectively supports women before during and after they enter the Criminal Justice System”.

Paul Edwards CEO Salute Her UK

- As indicated earlier in this report, women veterans involved with the Criminal Justice System remain an invisible population both inside custodial settings and when subject to community-based probation orders.
- All of the women involved in this research had ACE's and a significant number had a diagnosed mental health disorder, and/or had experienced childhood abuse, domestic violence and/or substance misuse issues.
- All the women veterans interviewed indicated that they would engage with services if they felt they could trust staff, were confidential in nature and could provide 'gender specific' physically safe spaces both in custodial settings and on release.
- The success of Salute Her UK has been based upon creating women only environments by facilitating 'women only' therapy sessions, holistic interventions and activities that are led by women.
- Only nine of the women had been formally diagnosed with Post Traumatic Stress Disorder (PTSD) prior to their involvement with the CJS and four others described the associated symptoms and believed that they should have been diagnosed.
- Twenty of the women involved in this report said they had been raped at some point in their lives and three of the women had been victims of in-service gang rape.
- Two of the women had experienced the death of a parent during their childhood (one by murder.)
- Several of the women veterans admitted to resorting to survival sex in order to get a place to sleep and several had experienced lengthy periods of rough sleeping, homelessness and/or sofa surfing, which they felt had contributed to their drug and alcohol misuse and offending behaviour.
- One of the women reported horrendous childhood abuse where her parents had allegedly sold her to others for sex. during which time she was medicated with drugs and alcohol.
- Sadly, like their male veteran counterparts, several of the women said they liked the regime of the prison system as it added much needed structure and a level of safety compared to the chaotic lives that they were living on the outside.
- Childhood trauma (ACE's) followed by re-traumatisation during military service (combat) and/or in-service sexual assault was both debilitating and insurmountable. Several felt that they had been wrongly diagnosed when medically discharged from service. For example, Personality Disorder, Emotionally Unstable Personality Disorder (EUDP) may cause a lifelong negative sense of self, engender discrimination from employers when disclosed and/or limit the opportunity for post service career development.
- All the women involved displayed symptoms of both PTSD, CPTSD Survivor and Moral Injury.
- Chronic self-destructive behaviours including self-harm and substance misuse were common presentations.

- All the women reported a loss of identity after leaving the military and felt labelled after their involvement with CJS.
- A gender based, false narrative that only male veterans get PTSD failed to recognise that women also experience a multitude of traumas both inside and outside the wire during postings in the UK and abroad.
- Opportunities to identify women as military veterans at any stage of the CJS process was an inherent weakness in the system.
- Referral to appropriate and properly trained support agencies, designed specifically for women with multiple and complex needs would help reduce rates of recidivism and improve engagement.
- Our conversations with CJS staff would indicate that they would struggle to refer a woman veteran with both lived experience of ACE's, MST and CPTSD to an appropriate service. At this juncture, only Salute Her UK and Forward Assist were able to offer intersectional trauma informed support to male and female MST survivors.
- In No Man's Land 2 we pointed out that victims of in-service sexual assault are reluctant to go to '*traditional military charities*' in case they meet their former abuser⁴⁴.
- Traumatized women veterans with multiple complex needs require considerable assistance and support to access timely therapeutic interventions and confidential services.
- We have found that women veterans, when identified as a veteran lose military benefits and entitlement's when serving custodial sentences.
- Given the lack of understanding of women veteran's needs, service charities offer a 'one size fits all' service or worse still, refer only to those services commissioned by Probation Services to support women. As our case study shows women need considerable practical and emotional support to facilitate a successful transition from custody to community and restore benefits, entitlements and access to appropriate housing providers.
- It is to be expected that women veterans may refuse to accept, or take advantage of support from services that are primarily designed for, or run by male veterans. As mentioned earlier this relates to concerns about confidentiality, a lack of understanding and a fear of meeting a past perpetrator of abuse.
- We must not lose sight of the fact that many of the women involved in this research do not currently identify with the term 'veteran'.

Recommendations

- The recent development of a women specific 'service personnel' pathway to civilian life and strategy is a positive. However, at the moment it is still predominantly male centric by design.
- Service charities should focus on the intersection and interaction of social, cultural, and environmental influences on women veterans as they transition back to civilian life from either military service or custody. Far too often, those that report difficulties trying to adjust are either pathologised or ignored.
- Women veterans with lived experience of the CJS are by default 'experts by experience.' They should be consulted on future service design and the systemic changes.
- The needs of women veterans should be prioritised alongside a fundamental rethink on how best to divert low level women veteran offenders away from custodial sentences (if possible) to community-based support services.
- Women Veterans who have experienced multiple and complex trauma report that they are passed around different services in the absence of dedicated support services. Woman Veteran 'Pinball' results in women having to relive their trauma without adequate care and support or access to qualified therapists.
- 'Women Veterans Awareness Training' should be mandatory for all CJS staff, including Judges and Magistrates so that they can begin to understand the long-term impact of Military Sexual Trauma. There is also an urgent need to develop and cascade training to all CJS staff on the different experiences and needs of women veterans.
- Neurodivergent women veterans are another example of an underserved group in the Criminal Justice System.
- Women veterans face unique challenges when trying to access intersectional and gender specific support services. More gender focussed research is needed if we are to understand the lived experience of those with experience of military service and CJS involvement.
- Salute Her UK has designed a safe, female veteran only trauma informed environment that is non-judgemental and accessible anywhere in the UK and beyond. This service includes practical help with information advice and guidance and timely access to therapy, coupled with holistic interventions and specialist treatment for multiple traumas. This model could be upscaled over the next three years.
- The Ministry of Justice should commission training on the needs of women veterans in prison, to eliminate discrimination and promote gender equality. This will require policy reform, specialist training and innovative resettlement programmes.
- Create a Women Veterans Department within the UK Office for Veteran Affairs.

Thematical Analysis

Theme	Sub-theme	Description
Personal History	Education	Poor education with little or no qualifications upon leaving school.
	Poor Job Prospects	Living in areas of multiple depravation. Many people are on low income or benefits.
	Family History	Joined the armed forces to escape abusive family members or domestic violence.
	No Options	Feeling trapped and left behind in life. Participants feel like they have no choices in life.
	Low Level Disruptive Behaviour	Fighting at school, anti-social behaviour, underage drinking, and low-level offending.
Military Service Experience	Drinking Culture	There is a high prevalence of hazardous drinking including binge and excessive drinking of alcohol.
	Gender Bias	Male-dominated culture that encourages gender bias toward women.
	Military Judicial System	Women in the military justice system have different needs than men, in part, due to the higher rate at which they are victims of abuse.
	Degradation	Cruel sexualised innuendos based on gender devalued many women's sense of self and ultimately a military career.
	Access to Confidential Mental Health Care	The mental health consequences of childhood and military trauma are often distressing, disabling and persistent unless there are timely and effective interventions. Those who do access mental health support report they feel punished by the military and viewed as weak.
	Premature Voluntary Release	Women choose to leave services early because they don't feel safe and/or are wrongly diagnosed with a life impacting mental disorders.

Theme	Sub Theme	Description
Trauma	Institutional Betrayal	Wrongdoings perpetrated by an organisation, including failure to prevent or respond supportively to victims needs under safeguarding guidelines within the context of the institution.
	Bullying	Being ridiculed, belittled and humiliated as a consequence of sexuality or status.
	Rape	Intentional penetration of an anus or mouth with a penis without consent.
	Substance Misuse	Using drugs/alcohol and prescribed medication to self-medicate.
	Moral Injury	Moral injury refers to an injury to an individual's moral conscience and values resulting from an act of perceived moral transgression.
Barriers to seeking help	Hate-motivated violence.	A hate crime (also known as a bias-motivated crime or bias crime) is a prejudice-motivated crime which occurs when a perpetrator targets a victim because of their membership (or perceived membership) to an intersectional minority.
	Shame	Shame is a painful emotion that involves feelings of worthlessness, self-loathing, self-condemnation, and failure.
	Guilt	Wrongly held assumption that they were to blame for the sexual assault.
	Fear	Reluctance to report a sexual assault due to fear of not being believed, repercussions for career development, being ostracised and lack of confidentiality.
	Victim Blaming	Victim blaming occurs when the victim of a crime or any wrongful act is held entirely or partially at fault for the harm that befell them.

Theme	Sub Theme	Description
Transition & Adjustment to Civilian Life	Reason for Discharge	A military discharge is given when a member of the armed forces is released from their obligation to serve.
	Low Income	Many women veterans faced. loss of status, unemployment, limited career options and poverty after service.
	Mental Illness	Mental illness refers to a wide range of mental health conditions - disorders that affect mood, thinking and behaviour. Examples of mental illness include depression, anxiety disorders, schizophrenia, eating disorders, addictive behaviours and PTSD.
	Authentic Self	Authenticity is the daily practice of letting go of who we think we are supposed to be and embracing who we are. Being your true authentic self means that what you say in life aligns with what your actions. This means, you are being your true self through your thoughts, words, and actions.
	Childcare	Women Veterans with children were less likely to have the same support networks as military men. For instance, single mothers and women veterans whose husbands are still serving immediately began caring for their children with little or no time to transition or adjust.
	Poverty	Living in deprivation often led to high levels of stress that in turn led to some women committing crime. Some reported that they started to work for Escort Agencies to survive financially.
	Domestic Violence	Domestic violence occurred when a current or former intimate partner (e.g., boyfriend, girlfriend, spouse) Harmed, threatened to harm, or stalk their partner. This may have been emotional, physical, social, or sexual in nature.
	Unemployment	Skills learned in the military may not be transferable or marketable. Many women felt they were not able to secure the employment they thought they could without retraining or going back into the further education system.

Theme	Sub Theme	Description
Criminal Justice System	Dysfunctional Custody System	The women veterans held in custody had multiple and complex needs, such as past trauma, self-harm, substance misuse, neuro-divergency and mental ill-health. The custodial environment was often incapable of providing the care needed.
	Identifying Veteran Status	Criminal justice professionals do not necessarily ask women about their military experience or understand levels of trauma exposure.
	Institutionalised behaviour	Once released from prison, the freedom and lack of structure can lead to overwhelming emotions and a strong desire to return to a prison environment.
	Desire for self-improvement	Cutting ties with criminal activity and hoping for a better future.
	The Criminalisation of Women Veterans.	Offending comes because of victimisation from both the ongoing impact of trauma and the impact of military service and lack of access to adequate mental health services.

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