



Ministry
of Defence

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Reference: FOI [REDACTED] correspondence dated: 30 September 2013

request-[REDACTED]

Date: 28 October 2013

Dear [REDACTED],

Thank you for your email of 30 September 2013 where you requested information;

"I would like to be informed of the statistics for the number of Ex or still serving Armed forces personnel diagnosed for post traumatic stress disorder (PTSD) years: Jan 2010-Jan 2011, Jan 2011-Jan 2012, Jan 2012-Jan 2013, Jan 2013-Sep 2013."

I am treating your correspondence as a request for information under the Freedom of Information Act 2000.

A search for the information has now been completed within the Ministry of Defence, and I can confirm that some of the information in scope of your request is held. This information is enclosed.

Information on the total number of Armed Forces personnel diagnosed with PTSD once they have left the Armed Forces is not held by the Ministry of Defence. Under section 16 of the Act (Advice and Assistance) I can advise you that although we do not hold data on ex-Service personnel diagnosed with PTSD, Defence Statistics (DS) hold some information and if this is of interest to you we could consider providing the following:

- The number of Disablement Pensioners awarded a War Pension under the War Pension Scheme for Post Traumatic Stress Disorder (PTSD) in 2010, 2011, 2012 and Jan 2013 to 31 March 2013, the latest date for which figures are available.
- The number of ex-Service Armed Forces Personnel between 6 April 2005 and 31 March 2013 who have been awarded compensation under the Armed Forces Compensation Scheme for PTSD in 2010, 2011, 2012 and Jan 2013 to 31 March 2013, the latest date for which figures are available.

These two pieces of information will not answer your question entirely as not all ex-Service personnel claim for PTSD, so this figure should be considered a minimum. If this information is of interest to you, please submit another freedom of information request.

Defence Statistics hold data on personnel serving at the time of their initial assessment for PTSD at a MOD Department for Community Mental Health (DCMH) or in-patient provider, up to 30 June 2013. Data for July 2013 to September 2013 will be available on 9 January 2014.

Table 1 presents the number of UK Service personnel serving at the time of their initial assessment, for an episode of care at a MOD DCMH and/or in-patient provider for PTSD between 1 January 2010 and 30 June 2013 (latest date published data is available).

Table 1. UK Service personnel, PTSD episodes of care at a MOD DCMH or in-patient provider between 1 January 2010 and 30 June 2013. Number, Rate per 1,000 strength and 95% CI.

PTSD	number	rate	95% CI
2010	258	1.3	(1.1 - 1.4)
2011	267	1.4	(1.2 - 1.5)
2012	334	1.8	(1.6 - 2.0)
2013 ²	183	1.0	(0.9 - 1.2)

Source:

DCMH: January 2010 - March 2012 DS database, April 2012 - June 2013 DS database and DMICP¹.

In-patient: January 2010 - March 2013 SSSFT and Guys and St Thomas' Hospital, April 2013 - June 2013 SSSFT and Gilhead IV Hospital

1. From April 2012 methodology change (see background notes)

2. Data from 1 January 2013 to 30 June 2013.

Table 1 shows PTSD remains a rare condition at 1.8 per 1,000 strength in 2012. There was a significant increase in the rate of personnel assessed with PTSD in 2012 compared to 2011, (1.8 per 1,000 strength compared to 1.4 per 1,000 strength respectively). It should be noted in April 2012 a new data source was included in the compilation of mental health data. Based on numbers previously published by Defence Statistics², there was a 18% increase in the number of PTSD episodes of care between 2011 (n=267) and 2012 (n=316). The inclusion of DMICP as a data source in April 2012 resulted in an increase of 6% (n=334) in the number of PTSD. Taking both changes into account, there was an overall increase in PTSD of 25% in 2012 compared to the previous year. (See background notes).

The increase of PTSD rates over time may also be due to the success of campaigns run by the MOD to reduce stigma concerning mental health issues.

Please note. these statistics are for UK Service personnel who were serving at the time of their episode of care, some of these personnel may have since left the Service.

Between 1 January 2010 and 30 June 2013, 294 Armed Forces personnel who were admitted an MOD in-patient facility had no diagnosis recorded at the time of their admission. Therefore the numbers presented for UK Armed Forces personnel with PTSD should be regarded as a minimum.

DS (Health) routinely release UK Armed Forces mental health statistics including PTSD and these can be found of the DS website at; www.dasa.mod.uk

Would you like to be added to our contact list, so that we can inform you about updates to our statistical publications covering mental health in the UK Armed Forces and consult you if we are thinking of making changes? You can subscribe to updates by emailing: DefStrat-Stat-Health-PQ-FOI@mod.uk

Background notes.

DCMHs are specialised psychiatric services based on community mental health teams closely located with primary care services at sites in the UK and abroad.

DCMH staff record the initial mental health assessment during a patient's first appointment, based on presenting complaints. The information is provisional and final diagnoses may differ as some patients do not present the full range of symptoms, signs or clinical history during their first appointment. The mental health assessment of condition data were categorised according to the World Health Organisation's International Statistical Classification of Diseases and Health-Related Disorders 10th edition (ICD-10). A

¹ Defence Medical Information Capability Programme

² UK Armed Forces mental health quarterly report published 4 July 2013.

number of patients present to DCMH with symptoms that require the treatment skills of DCMH staff, whilst not necessarily having a specific and identifiable mental disorder.

The data in this response include regular UK Armed Forces personnel (including Gurkhas and Military Provost Guard Staff), mobilised reservists, Full Time Reserve Service personnel and Non-regular Permanent Staff as all of these individuals are eligible for assessment at a DCMH.

Since 2007 DCMH staff record episodes of care using the Defence Statistics (DS) Database and submit these data electronically. In April 2012, system developments enabled the DCMH to begin recording episodes of care in mental health templates on the MOD's electronic patient record system, DMICP³, providing Defence Statistics with the same pseudo-anonymised information sourced from the legal patient record and these data have been used to produce this response. Full details of the data sources used in this response and the changes of methodology are available in our annual and quarterly mental health statistics published on the Defence Statistics website at www.dasa.mod.uk

War Pension Scheme and Armed Forces Compensation Scheme Data

There are currently two compensation schemes in operation regarding UK Veterans. The War Pensions Scheme (WPS) provides no-fault compensation for all ex-Service personnel where illness, injury or death is caused by Service from the start of the First World War in 1914 up until 5 April 2005. The Armed Forces and Reserve Forces Compensation Scheme (AFCS) came into force on 6 April 2005 to pay compensation for injury, illness or death caused by Service on or after that date.

Mental health conditions awarded under the AFCS have been identified by using the mental disorders grouping within the tariff of injury tables.

There is also a claimed condition field on the AFCS data that contains a free-text description of the condition claimed for. This field varies greatly in detail and is not used in DASA's regular reporting as it is not possible to summarise and group data using this field. However, this field does in some cases contain a more specific description of the claimed condition and has therefore been used to provide some more detail for this response. Records where the claimed condition specified 'PTSD', 'post traumatic stress', or 'post-traumatic stress' were included. Please note that due to the free-text nature of this field, figures should be treated as a minimum as some records may have been missed.

Mental health conditions awarded under the WPS are recorded in both a free-text field and as a medical diagnosis code. Records with a medical diagnosis code 4000 to 4008, indicating a mental disorder, were identified. The free-text field was also searched for terms such as 'PTSD', 'psych', 'phobia', 'depression', 'adjustment', 'anxiety', 'panic', 'dysthymic', 'schizo', 'disorder' and 'mania', as well as any probable misspellings or alternate spellings. As conditions are sometimes spelt incorrectly it is possible that some records with reference to mental health have not been identified.

Records with a condition code of '4006' (PTSD) were included in the figures, along with records where the free text condition field contained 'PTSD', 'post traumatic stress', or 'post-traumatic stress'. Please note that due to the free text nature of this data it is possible that some records with reference to PTSD have not been identified, and therefore the figures supplied should be used as an estimation only.

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³ Defence Medical Information Capability Programme

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If you are not satisfied with this response or you wish to complain about any aspect of the handling of your request, then you should contact me in the first instance. If informal resolution is not possible and you are still dissatisfied then you may apply for an independent internal review by contacting the Deputy Chief Information Officer, 2nd Floor, MOD Main Building, Whitehall, SW1A 2HB (e-mail CIO-FOI-IR@mod.uk). Please note that any request for an internal review must be made within 40 working days of the date on which the attempt to reach informal resolution has come to an end. CN 56: Standard response template: Providing the applicant with all the information requested.

If you remain dissatisfied following an internal review, you may take your complaint to the Information Commissioner under the provisions of Section 50 of the Freedom of Information Act. Please note that the Information Commissioner will not investigate your case until the MOD internal review process has been completed. Further details of the role and powers of the Information Commissioner can be found on the Commissioner's website, <http://www.ico.gov.uk>.

Yours sincerely,

DASA Health Information Head (B1)