

# Cruse Armed Forces Project

Jenny Green



# About the project

## What does it hope to achieve

- ◆ The half way point - what has been achieved
- ◆ What do we plan to do in the next 18 months

# How can Cruse give the best possible support?

Web site

Develop podcasts

Film for all volunteers

Training programme

Training pilots - 6 now completed

Special help line?

Virtual branch - link to data base of volunteers

Recruit more volunteers from the service and ex-service community



**Cruse has been there  
for bereaved people...  
for the last 50 years**

**For children  
For young people  
For adults  
For Everyone  
For you**



**Behind Every Headline is Heartache**



# **Behind Every Headline is Heartache**

*Supporting the Military Family*



Registered Charity no. 208078  
Registered office Unit 0.1, One Victoria Villas,  
Richmond, Surrey TW9 2GW

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# Group work - a little quiz!

What is the main cause of death in the Armed Forces ?

What does JCCC stand for?

Do all three services handle a death in the same way?

What is the role of a Visiting Officer?

What bereavement support is available through the services?

Do parents of the deceased get support from the Services?

Are girl friends and partners treated in the same way as widows?

Who qualifies as a recognised dependent?

What is a "Service Inquiry"?

Why might a death in service cause complications in coping with bereavement?

## CHAPTER 3 - HEALTH

### DEATHS IN THE UK REGULAR ARMED FORCES

**Table 3.2** Deaths in the UK Regular Armed Forces: by year of occurrence and cause<sup>1</sup>, numbers, 1999-2008

Numbers	1999 <sup>2</sup>	2000	2001	2002	2003 <sup>3</sup>	2004 <sup>3</sup>	2005 <sup>3</sup>	2006 <sup>3</sup>	2007 <sup>3</sup>	2008
<b>Total</b>	<b>142<sup>1</sup></b>	<b>147</b>	<b>142</b>	<b>147</b>	<b>177<sup>1</sup></b>	<b>176<sup>1</sup></b>	<b>180<sup>1</sup></b>	<b>191<sup>1</sup></b>	<b>204<sup>1</sup></b>	<b>157</b>
<b>Disease-related conditions</b>	<b>40</b>	<b>35</b>	<b>41</b>	<b>40</b>	<b>45</b>	<b>43</b>	<b>44<sup>1</sup></b>	<b>41<sup>1</sup></b>	<b>37</b>	<b>34</b>
Cancers	25	16	24	19	16	21	23	25	27	23
Diseases of the circulatory system	12	16	9	16	14	16	16	15 <sup>1</sup>	6	7
Other	3	3	8	5	8	4 <sup>1</sup>	5 <sup>1</sup>	1	4	4
<b>External causes of injury and poisoning</b>	<b>100<sup>1</sup></b>	<b>111</b>	<b>100</b>	<b>107</b>	<b>137<sup>1</sup></b>	<b>126<sup>1</sup></b>	<b>115<sup>1</sup></b>	<b>143<sup>1</sup></b>	<b>163<sup>1</sup></b>	<b>100</b>
<b>Deaths due to accidents</b>	<b>71<sup>1</sup></b>	<b>71</b>	<b>80</b>	<b>85</b>	<b>70<sup>1</sup></b>	<b>69<sup>1</sup></b>	<b>71</b>	<b>88</b>	<b>80</b>	<b>46</b>
Land Transport Accidents	43	45	50	65	49	61	53	61	51 <sup>1</sup>	27
Other	28 <sup>1</sup>	26	30	24	21 <sup>1</sup>	28	18	27	29 <sup>1</sup>	19
<b>Deaths due to violence</b>	<b>2</b>	<b>4</b>	<b>5</b>	<b>3</b>	<b>41<sup>1</sup></b>	<b>17<sup>1</sup></b>	<b>22</b>	<b>50<sup>1</sup></b>	<b>76<sup>1</sup></b>	<b>52</b>
Killed in Action <sup>3</sup>	1	1	2	-	39 <sup>1</sup>	11	21	41	61 <sup>1</sup>	45
Died of Wounds <sup>3</sup>	-	-	-	-	1	-	-	7 <sup>1</sup>	12	3
Other	1	3	3	3	1	6	1	2	3 <sup>1</sup>	-
<b>Suicide and Open verdicts</b>	<b>27</b>	<b>36</b>	<b>15</b>	<b>16</b>	<b>26<sup>1</sup></b>	<b>28<sup>1</sup></b>	<b>22<sup>1</sup></b>	<b>10</b>	<b>7</b>	<b>2</b>
<b>Cause not currently available</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>-</b>	<b>-</b>	<b>1</b>	<b>1<sup>1</sup></b>	<b>2<sup>1</sup></b>	<b>4</b>	<b>3</b>

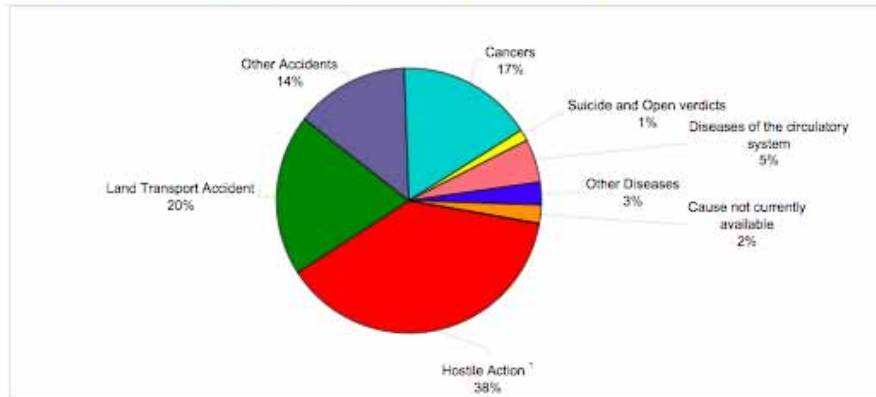
Source: DASA (Health Information)

1. DASA code all cause of death information to the World Health Organisation's International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD-10).

2. Changes to data previously published in UKDS. 11 deaths on operations among non-regular members of the UK Armed Forces have been included: 1 in 1999 (other accident), 4 in 2003 (2 killed in action and 2 other accidents), 1 in 2004 (killed in action), 1 in 2006 (suicide), 1 in 2006 (died of wounds) and 3 in 2007 (2 killed in action and 1 land transport accident). There have also been 7 amendments to the classifications given to the cause of death: 3 records have been amended from other accident to suicide (1 in 2003, 1 in 2004 and 1 in 2005), 1 record has been amended from cancer to other disease (2004), 1 record has been amended from other disease to cause unavailable (2005), 1 record has been amended from cause unavailable to disease of the circulatory system (2006) and 1 record has been amended from other accident to other violent (2007).

3. DASA have included the Joint Casualty and Compassionate Cell (JCCC) categories of killed in action and died of wounds which together provide information on the number of Service personnel who have died as a result of hostile action. The term 'killed in action' is used when a battle casualty has died outright or as a result of injuries before reaching a medical facility, whilst 'died of wounds' refers to battle casualties who died of wounds or other injuries after reaching a medical facility.

### Deaths in the UK Regular Armed Forces: by cause, percentages, 2008



1. Hostile action is a combination of the categories killed in action and died of wounds.

- Training courses : What do they cover?
- How can we roll out training to more people?
- Spreading the word within Cruse and within the services.
- Problems we face?
- information and leaflets produced to date.
- Working with other agencies.



### Coping with loss

How people respond to bereavement will be very individual and personal. These are some of the things people often say when someone dies. They may help you to feel that you are not completely alone, or to understand what someone who has been bereaved is going through.

**'I can't believe it.'**

It may take you a long time to grasp what has happened. Some people carry on as if nothing has happened. It is hard to believe that someone important in your life is not coming back.

**'I feel nothing.'**

The shock can make you feel numb. You may feel you're in a different world.

**'Why did it have to happen?'**

Death can seem cruel and unfair, especially when you feel someone has died before their time or when you had plans for the future together.

**'I feel such pain.'**

You may feel physical and mental pain, which can be overwhelming and very frightening.

**'I feel so depressed.'**

**'Life has no meaning. I feel I can't go on.'**

Many people say there are times after a death when they feel there is nothing worth living for and they feel like ending it all.

**'One minute I'm angry and the next minute I can't stop crying.'**

People often experience extreme mood swings, which can feel very frightening.



For over 50 years Cruse has, through its network of trained and skilled volunteers, helped children, families and individuals to cope with bereavement. People we have supported tell us:

*"I realised that this was one time I couldn't cope on my own and I learned to accept help."*

*"When I felt I needed more than my family and friends could manage I talked to a Cruse volunteer"*

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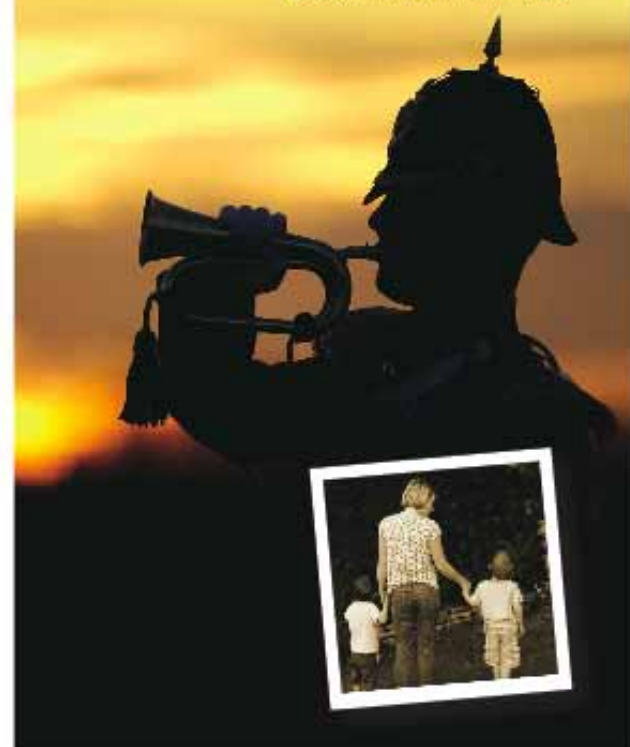


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7/22/2010

# Factors complicating the grieving process

- Deaths - young people in prime of life
- Often happens far from home
- Can't be with or see body
- ? no body
- Long wait for repatriation/ Post mortem, Service Inquiry /Inquest
- Families have had fragmented lives so few long term sustained relationships/friendships
- Families may well have to relocate during the grieving process

# What are we at Cruse planning, so that we can give the best possible support?

- Web site
- Develop podcasts
- Dvd for all volunteers
- Training programme
- Training pilots - 6 now completed
- Special help line ?
- Virtual branch - link to data base of volunteers
- Recruit more volunteers from the service and ex service community



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# The website!

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# WELCOME TO CRUSE BEREAVEMENT CARE



Daytime Helpline: 0844 477 9400

Email: [helpline@cruse.org.uk](mailto:helpline@cruse.org.uk)

Our website is [www.cruse.org.uk](http://www.cruse.org.uk)

It contains a lot of helpful information for bereaved people. For those of you in the Services, there is a special section which you will find on the front page of the website when you click the artwork shown below. This icon is always there on the front page to help you find the section relevant to military families.





- All web pages on [cruse.org.uk](http://cruse.org.uk) written specifically for bereaved people in the Services are headed up with the artwork banner above.
- They have been written to help you find the information you most need quickly and easily. There are also links to other organisations which can help you. The idea is that you will be able to find what you're looking for all in one place on the Cruse Bereavement Care website.



- On each web page in the section Supporting the Military Family, there is a list of all relevant page titles - see below - to help you find the information you are looking for and to ensure you don't get lost.

The Grieving Process | Traumatic Losses | Coping in a Crisis |

What happens when a Service Person dies

How do People hear the News?

Repatriation of the Body | Help and Support

Entitlement to stay in Service

Accommodation | Working with the Media | Return of Personal Effects

Funerals | Inquests and Service Inquiries | Supporting Young People

Children and Siblings | Veterans Welfare Service

TA and Reservist Families | Foreign and Commonwealth Families

Financial Matters and Wills | Recognition | Letters of Condolence

Jargon Buster



- **If you have access to a computer that is online, or if you go to your local library where they will have online computer terminals, and staff trained to help, as part of the People's Network, you can explore the "Supporting the Military Family" section of [cruse.org.uk](http://cruse.org.uk) at any time.**
- **The website also has an online bookshop with many titles to help and interest bereaved people of all ages.**
- **We here to help you through a difficult time. Cruse exists to promote the well-being of bereaved people and to enable anyone bereaved by death to understand their grief and cope with their loss. Services are free to bereaved people, but we rely on donations to fund our work.**



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