

Research into the needs of the bereaved Armed Forces community

Prepared for The Armed Forces
Covenant Fund Trust

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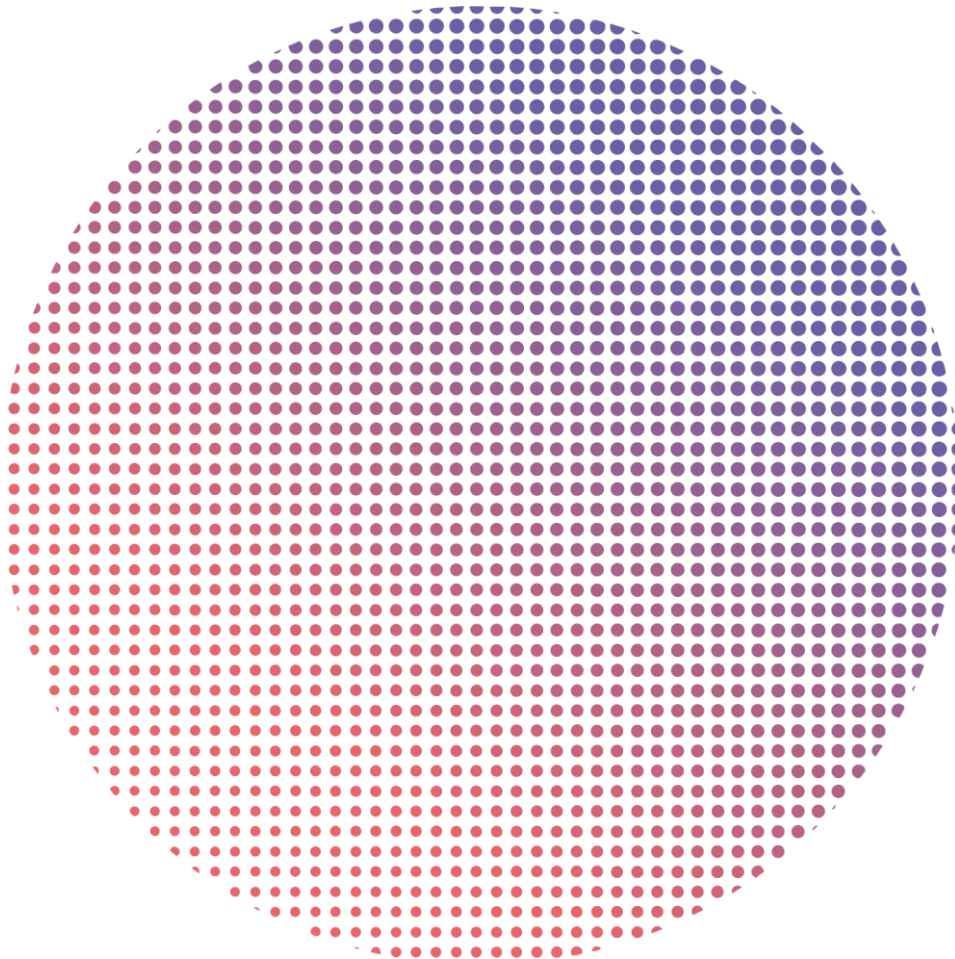


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Executive Summary

Context and methodology

While bereavement is a universal and difficult experience, families face unique challenges when losing a family member who is serving, or has served, in the Armed Forces. The literature highlights that accessing support is instrumental to ensuring positive grief outcomes but there is limited research on the experiences of bereaved families' use of support services. A recent consultation run by the Armed Forces Covenant Fund Trust (the Trust) showed continued unmet and specific needs for this cohort. As a result, the Trust has committed to designing a grant programme aimed at increasing provision to meet these needs as part of its 3-year Covenant Funding Framework 2024-2027.

Alma Economics was commissioned by the Trust to explore the needs, experiences, and priorities of the bereaved Armed Forces community, as well as to map the scope of support currently available. The findings from this research will be used by the Trust to determine the scope and scale of the grant programme. To achieve this, Alma Economics conducted an exploratory literature review alongside focus groups with sector professionals and one-to-one interviews with members of the bereaved Armed Forces community. Our research took an inclusive and participant-led approach to capture the voices of those most affected by military bereavement, focusing on a range of different individuals whose family members have died during or after military service.

Our findings are based on a combination of reviewing 36 academic papers and grey literature, five focus groups with 20 not-for-profit sector professionals (from 16 different organisations) and 20 interviews with the bereaved Armed Forces community. The latter included 15 bereaved spouses or co-parents and 5 bereaved parents, with the majority having been bereaved between 1 to 5 years. While we did not collect formal data on the cause of death, the anecdotal data shared in interviews indicated that at least 14 of the 20 people who participated had been bereaved by suicide. Our sample reflects those who came forward to take part in the research and represents a disproportionate number of those who are bereaved by suicide. The findings and recommendations should be considered in the context of this sample. Further details on our sampling and recruitment approach can be found in the next section.

The report first outlines the unique needs of the bereaved Armed Forces community and then maps current statutory and third sector support, including discussing best practices, limitations and barriers. Finally, the report sets out recommendations for the Trust's grant programme and provides insights on future research and lived experiences of statutory support.

Needs assessment

Research in the UK has identified that families bereaved by the death of a family member in military service require a bespoke response which is sensitive to their specific circumstances (Lester, 2019; Hewison et al., 2020). Across the stakeholder engagement with professionals and bereaved families, it was highlighted that lived experiences of grief are highly personal to the individual. As a result of generalising the needs of bereaved military families, there is a perceived 'one-size-fits-all' approach to support provision, which does not adequately serve the needs of the whole community. Nevertheless, there are several key similarities in the experiences of bereaved military families and the subsequent impacts these experiences can have.

The bereaved Armed Forces community often experience multiple compounding challenges over time losing, not only their family member but also their home (when leaving Armed Forces accommodation),¹ military community, and associated stability. Bereaved families described that leaving their home and the wider military community as “additional layers of vulnerability that are put on families at their most broken time”. This can be further exacerbated by the experience of social isolation and the negative impact of media interest, which was worsened by the perceived lack of adequate protection, or support.

Although some families shared positive instances of support, such as some positive experiences with Visiting Officers (VOs) and not-for-profit organisations as outlined below, most families in this research described feeling widely “let down” by the Armed Forces. They highlighted quickly feeling “forgotten” from their experience of lack of follow-up contact from the Armed Forces following the funeral. Families bereaved by suicide described feelings of “discard, humiliation, shame and stigma”, which families felt were perpetrated by the culture within the Armed Forces. Overall, negative experiences with the Armed Forces were shown to hinder the grieving process as families focus on fighting for justice and recognition.

Statutory support

The academic literature noted some steady improvements in family satisfaction with the support offered to bereaved military families and developments in terms of financial, administrative and general support (Kiernan et al., 2021; Fadeeva et al., 2022). However, extensive findings from both academic literature and our fieldwork underscore limitations and barriers to statutory support.

Visiting Officers (VOs) play a key role in supporting bereaved families if the family member died while still serving in the military, providing practical support, such as helping with funeral arrangements and signposting to relevant third sector support. However, experiences of VOs are “so varied they are almost unpredictable”. Some highlighted positive experiences, while others noted VOs missing crucial information (due to human error), sharing incorrect guidance and being inadequately prepared for such a critical position. It was widely suggested that bereaved Armed Forces families should receive more specialist support with further training for VOs across each branch of the Armed Forces.

Another important resource made available to bereaved military families is the ‘Purple Pack’. Previous research has highlighted sensitivities surrounding when to share this document with families, as some felt it was ‘too much, too soon’ when it was offered to them (McGill et al., 2023). Several bereaved Armed Forces community members noted recent improvements to the Purple Pack. However, families reflected that it was still a long document which was challenging to navigate for bereaved families who were already overwhelmed.

Overall, there were several overarching limitations highlighted by practitioners and families regarding current statutory support. Most significantly, the lack of standardisation across the support provided, with the package of support being inconsistent across services. Although there is the need to capture the nuances of each branch of the Armed Forces within the training, it was felt the standard of training for VOs depended on the single service. For example, the Army and Royal Air Force (RAF) VO's undertake a two to three-day training course, whereas the Royal Navy training is longer due to being a full-time commitment rather than an additional duty. Furthermore, one Army spouse referenced receiving trauma therapy paid for by the Army, whereas others expressed they were not offered psychological support or grief counselling. Participants also noted that it was challenging to access all the relevant guidance on policies and procedures, and there is limited statutory support available for children and

¹ Current policy states that bereaved spouses may stay in military accommodation for up to two years following the death of their family member in the Armed Forces (with possibility of extension).

young people through the Armed Forces or other statutory services other than the Armed Forces Bereavement Scholarship Scheme and pension entitlements. Finally, there is limited centralised data captured on bereaved families to inform the design and distribution of support.

Third sector support

Following immediate statutory support and official proceedings, bereavement support is predominantly provided by the third sector. The importance of this sector in supporting bereaved military families was highlighted throughout the research. The bereaved Armed Forces community shared positive experiences with not-for-profit organisations, with some describing the support provided as “incredible” and “life-changing”.

Several charities were discussed, including those catering to children and young people specifically, as well as some examples of support outside of the UK. Professional stakeholders highlighted the importance of a nuanced understanding of the Armed Forces in providing support to bereaved military families, while members of the bereaved Armed Forces community similarly noted that military-specific support provided an opportunity to find a military community, for both children and adults.

Peer networks were widely beneficial for bereaved families (Bartone et al., 2019). In particular, single service widow associations provide key support in the form of formal peer networks and support for bereaved partners. However, there were various barriers to accessing this support, such as perceived hierarchies relating to their partner’s rank, the nature of death, and stereotypical assumptions of who constituted a ‘war widow’.

Another fundamental support for those suffering from traumatic bereavement is counselling or other professional psychological support options. However, bereaved families reported struggling to source appropriate professional support, with long waiting lists and high costs of private care.

While it was widely reported that the third sector is providing essential support which is perceived as aiming to “fill the gap” left by a lack of statutory provision, there were nonetheless multiple challenges identified in providing and accessing this support. For sector professionals, these challenges included a perceived lack of joint-up working within the sector, a lack of available data on bereaved families to inform evidence-based provision, and challenges in reaching the entirety of the bereaved Armed Forces community (e.g. Foreign and Commonwealth bereaved families). For bereaved families, challenges concerned their experience of lack of clarity on what is available and how to access it, misconceptions surrounding the extent of support available (for example, long wait times or geographical disparities), and limited support for wider family members beyond the next-of-kin.

Barriers to accessing support

A number of structural, geographical, and social barriers faced by bereaved families were identified across both statutory and third sector support provision. For example, while bereaved military families often have positive experiences of support when services are available (Wilson-Menzfeld et al., 2024), the literature review and stakeholder engagement identified geographical disparities in the availability of support services (McGill et al., 2023; Wilson-Menzfeld et al., 2024). An additional barrier for bereaved military family members to access services was the stigma relating to the nature of their family member’s death, for example, when the cause of death is suicide (Hewison et al., 2020; McGill et al., 2023). Others described confusion surrounding language and eligibility for support services (Wilson-Menzfeld et al., 2024), particularly when the bereaved family have lost their connection to the Armed Forces through bereavement. Finally, families with more complex structures often faced greater barriers to access, particularly for statutory support and entitlements.

Recommendations for AFCFT grant funding

Recommendations for the focus of a future grant programme

- 1. The programme should facilitate partnerships across the bereavement sector:** This includes establishing direct partnerships and referral pathways between charities – rather than signposting – to support families' move between services, remove the burden placed on them to proactively access support, and enable providers to expand their reach and better accommodate individual needs. While this primarily refers to the third sector, improved partnerships with wider organisations, including the statutory and civilian bereavement organisations, were also supported to share best practices more widely.
- 2. The programme should create a centralised list of all bereavement support available:** A centralised list or “directory” of all support available – including third sector organisations and initiatives, statutory support and entitlements, as well as eligibility criteria and up-to-date contact information – accessible to bereaved families, third sector stakeholders, and statutory stakeholders was suggested. This would help families to identify the support and information they need all in one place, as well as enable third sector and statutory stakeholders to better guide the families they support, understand where they fit within the wider sector, and avoid becoming overburdened due to being the only known service in any given area.
- 3. The programme should support the development of a long-term bereavement strategy:** The current provision of third sector bereavement support was described as “fragmented”, “piece meal”, and in need of a long-term and joined-up strategy which supported bereaved families to thrive.
- 4. The programme should increase the provision of mental health support for adults and children:** In addition to peer-led support, mental health provision was considered particularly important due to the uniqueness of military bereavement, including the experience of multiple compounding losses, the higher likelihood of traumatic death, increased bureaucratic burdens, and potential stigma based on type of death. Difficulties accessing bereavement counselling were expressed most strongly for children and young people.
- 5. The programme should expand the support available to all family members:** A gap in support for wider family members and family members, such as grandparents and siblings, was noted. This was considered particularly important for non-traditional families, as well as for Foreign and Commonwealth families. Moreover, some stakeholders raised concerns around gaps in provision for both young children (under age 5) and adult children (over age 25) who do not qualify for standard children's bereavement services.
- 6. The programme should widen the scope of support for adults:** In addition to increased access to professional mental health support, there were calls for more third sector organisations to deliver holistic packages of support combining both peer-led and professional offerings, peer-support models that are not dependent on association membership, and increased employment-specific support.

Recommendations for the design of a future grant programme

1. **Lived experience should be embedded within the programme:** The voices of the military bereaved should be at the centre of any design in the provision of support, ensuring it adequately responds to the needs of the community.
2. **The programme should use appropriate language and terminology:** Inclusive and appropriate language and terminology were considered important to ensure support is accessed and promoted more widely amongst bereaved military families. The grant programme should also take care to use inclusive language which will capture harder-to-reach groups within the bereaved Armed Forces community and ensure they are sufficiently considered within any support provision.
3. **The programme should prioritise the provision of more long-term support:** The complexity of bereavement for each family means that it is particularly important that support is available across the life course, reflecting these highly unique and personal experiences. To deliver long-term support successfully, providers should maintain continual contact with bereaved families to establish a trusted connection so they feel comfortable to reach out when they need to access support.
4. **The design and focus of the programme should be inclusive and accessible:** Inclusivity should shape both the design and focus of the grant programme, and should consider a variety of factors to ensure that the support provided is accessible and appropriate to the whole bereaved Armed Forces community. Particular examples included ensuring that support was available regardless of military status or rank, type of death, or geographical location, with some families noting that face-to-face support was typically centred around large cities or military hubs.
5. **The impact of the programme should be evaluated:** Any future grant programme should embed a thorough evaluation of its impact and value to the bereaved Armed Forces community, and findings should be embedded within new and existing service provision across the sector.
6. **The programme should accommodate constraints faced by volunteer-led organisations:** The grant programme may need to adapt its model to accommodate key challenges faced by volunteer-led organisations – such as resource constraints – to ensure that they do not lose out on grant-funded opportunities.

Recommendations for further research

There were a number of key areas for further research highlighted across both the literature and stakeholder engagement to inform future work in this field. This included growing the evidence base on which interventions work best to support families and the long-term impacts of military bereavement. Moreover, it was noted that most existing research focuses on widows (often female, white, heterosexual participants), and that future work should ensure to capture a wider variety of voices and experiences within the community.

Other findings relating to statutory support provision

While the overall objective of this research was to provide recommendations to the Trust to design its future grant programme aimed at the third sector, several key insights for potential improvements to statutory support were identified. This reflected the fact that it is common for families to move in and out of receiving support from statutory and third sector services over time, and that third sector support provision often reflected key gaps in statutory provision. In particular, the priorities highlighted by participants included:

- **Structural considerations** – such as ensuring consistency across provision, providing a long-term point of contact for all families, and improving sector partnerships.
- **Extending the scope of support** – such as increasing provision for children and young people, enhancing the scope and process of accessing financial entitlements, and improving pre-bereavement support.
- **Improving the quality of existing support** – such as enforcing formal military bereavement training, providing clearer guidance, using clear language concerning eligibility, and ensuring support provision is equitable, regardless of the circumstances of death.

Finally, a full review of statutory support provision was recommended to ensure future support is targeted to key areas of need. A full assessment of other findings related to statutory support provision can be found in Chapter 7.

1. Introduction

While bereavement is a universal and difficult experience, families face unique challenges when losing a family member who is serving, or has served, in the Armed Forces. Research in the UK has shown that there are additional hurdles specific to Armed Forces bereavement, such as repatriation, military administration, and increased media attention, which require a bespoke package of support sensitive to these circumstances (McGill et al., 2023).

At present, there is growing literature and a range of guidance and support targeted at the bereaved Armed Forces community. This literature highlights that accessing support is instrumental in ensuring positive grief outcomes (Cozza et al., 2017). However, there is limited research on the experiences of bereaved families' use of support services (Fadeeva et al., 2022). A recent consultation run by the Armed Forces Covenant Fund Trust (the Trust) between June to July 2023 showed continued unmet and specific needs for this cohort. As a result, the Trust have committed to designing a grant programme aimed at increasing provision to meet these needs as part of its 3-year Covenant Funding Framework, with the first grants scheduled to be awarded in 2025/6.

To support the Trust in designing this programme, Alma Economics was commissioned to explore the needs, experiences, and priorities of the Armed Forces bereaved community, as well as to map the scope of support currently available, including best practice, challenges, and limitations. The findings from this research will add to the growing literature on the needs of this community and will be used by the Trust to determine the scope and scale of the future grant programme.

This research addressed five core areas of interest, outlined below:

1. **Needs assessment:** understanding the range of circumstances and needs experienced by the bereaved Armed Forces community.
2. **Service mapping:** identifying the scope of support provided by both the statutory and not-for-profit sectors.
3. **Limitations, barriers and challenges:** assessing whether current support provision adequately meets the complex needs of the whole bereaved Armed Forces community, as well as any examples of restrictions, limitations, barriers, challenges, or wider concerns faced by both the community and not-for-profit sector professionals, also accounting for any additional barriers faced by the community due to disability or other protected characteristics.
4. **Best practice:** understanding what type of support is considered most inclusive to reach and support as much of the community as possible.
5. **Recommendations for future support:** identifying what the community would like to see by way of support, how the not-for-profit can achieve greater sustainability, and the scope for specialist not-for-profit organisations external to the Armed Forces sector to play a larger role in supporting the community.

To address these core questions, we conducted an exploratory literature review as well as in-depth qualitative engagement with the bereaved Armed Forces community and sector professionals.

Our research took an inclusive approach to capture the voices of those most affected by military bereavement, focusing on a range of different individuals whose family members have died during or after military service. Throughout this report we will be using the terms 'military bereaved' (Wilson-Menzfeld et al., 2024) or 'bereaved Armed Forces community' to encompass the different individuals impacted by the death of a family member.

Our inclusion criteria are outlined in full in the methodology section; however, the broad criteria reflect the profound impacts of bereavement expanding beyond spouses to an entire network of individuals. As Park reflected, “When one person joins, the whole family serves” (2011: 65).

Recent estimates² from charity Scotty’s Little Soldiers of the bereaved Armed Forces community highlight the far-reaching impacts of military bereavement. Their figures suggest around 95 serving personnel die each year, leaving behind over 250 siblings, children, spouses or partners and parents. Scotty’s figures roughly align with Ministry of Defence statistics that show that in 2023, 73 people died whilst in service (18 of these were due to cancer, 16 due to other accidents and 7 due to suicide) The latter figures are subject to change and is likely an underestimate due to ongoing coroner’s inquest into the mechanisms of injury for 12 deaths classified as ‘other accidents’³ (Ministry of Defence, 2024). Scotty’s also estimates that approximately 3,160 veterans aged under 65 die each year leaving behind over 11,000 family members.

The report is structured as follows. Section 2 provides a thorough overview of our methodology. Section 3 presents our findings on the unique needs of the bereaved Armed Forces community. Sections 4-6 summarise best practice, limitations and barriers in accessing current statutory and third-sector support. Finally, Section 7 presents our recommendations for the AFCFT grant programme and future research and insights for potential improvements to statutory support.

² These estimates draw on multiple datasets, namely: Census, ONS Labour Market, UNICEF Child Mortality, ONS Mortality, MoD FamCas, and MoD Mortality.

³ In 2023, there were 12 deaths (16%) currently shown as Other Accidents, where the mechanism of injury suggests possible suicide and are awaiting a Coroner’s Inquest.

2. Methodology

Our methodology involved extensive qualitative engagement, incorporating wide-ranging perspectives to better understand the needs, experiences and priorities of the bereaved Armed Forces community, as well as the scope of the bereavement support currently available. This includes any barriers, limitations or examples of best practice associated with this support. To do so, we conducted:

- A scoping phase, incorporating an exploratory literature review and three discussions with Ministry of Defence personnel.
- Five focus groups with not-for-profit sector professionals.
- 20 interviews with the bereaved Armed Forces community.

The findings from these activities are summarised in this report, including clear, actionable recommendations to inform the development of the Trust's future grant programme.

Scoping

We started the project by conducting **an exploratory literature review**, gathering and rapidly assessing a selection of relevant academic papers and grey literature that address the research questions. We ran a high-level search of keywords in academic databases such as ScienceDirect and searched the websites of relevant organisations, such as The British Army and key charities. The review included 36 papers, with the majority being UK-based (24), in addition to a small number of US-based papers (12). Publication years ranged from 2008 to 2024, with the majority (22) dated between 2020 and 2024 to ensure that our review covered the most up-to-date literature. The weight of more recent literature also reflects the growing interest in understanding the unique experience of the bereaved Armed Forces community. Papers focused on a variety of relevant groups within this community, including bereaved families, spouses, children, parents, and military veterans. Each paper addressed at least one of the five core areas of interest for this research and served to further our understanding of important issues and gaps to cover in stakeholder engagement.

To supplement the literature review, we also conducted **three factual scoping conversations with relevant Armed Forces and Ministry of Defence personnel** to better understand the relevant statutory support currently available to bereaved Armed Forces families.

Stakeholder engagement

Next, we conducted in-depth qualitative engagement with both sector professionals and members of the bereaved Armed Forces community through focus groups and one-to-one interviews respectively.

To ensure we captured a variety of perspectives, multiple recruitment channels were used:

- To reach sector professionals, the Trust shared the research with key not-for-profit and statutory stakeholders. We also conducted outreach directly with selected organisations based on findings from the service mapping.
- To reach the bereaved Armed Forces community, three not-for-profit providers – SSAFA the Armed Forces charity, Beyond the Wire and Scotty's Little Soldiers – shared our research and sign-up form directly with their members. These organisations support a considerable breadth of the bereaved Armed Forces community within the UK.

It is important to consider that the findings from our stakeholder engagement represent only the views of those who voluntarily chose to participate in this research. This may contribute to a degree of self-

selection bias wherein participants are more likely to express interest as a result of particularly strong positive or negative experiences. This should be kept in mind when reading the findings in the following chapters.

For this research, we have split engagement between sector professionals and bereaved military families to enable us to link insights with either service providers, service users, or both; however, it should be noted that several sector professionals also have lived experience of military bereavement.

Focus groups with sector professionals

In total, we conducted **five focus groups with not-for-profit sector professionals, totalling 20 sector stakeholders across 16 different organisations**. To participate in this research, participants must be not-for-profit stakeholders. We imposed no requirements on the type or scope of service they deliver. While most provided bereavement support targeted at the Armed Forces community, some participants delivered general bereavement support (not military-specific) or general Armed Forces support (not bereavement-specific). The organisations we spoke with are listed below.

Organisation

Army Families Federation (AFF)

Army Widows Association

Beyond the Wire

Cornwall Hospice Care

Defence Bereaved Families Group (and former chair of Army Widows Association)

Forces Employment Charity

Naval Children's Charity

PTSD Resolution

Royal British Legion

Royal Navy & Royal Marines Charity

Royal Navy and Royal Marines Widows Association

Scotty's Little Soldiers

SSAFA, the Armed Forces charity

Survivors of Bereavement by Suicide

Turn to Starboard

War Widows Association

We chose focus groups as they allowed discussion between stakeholders who share similar expertise and experiences – for example, non-specialist and more general bereavement support providers could prompt each other and explore shared challenges in addressing the needs of those bereaved by the Armed Forces. This generates deeper insights and nuances than could be achieved in a one-to-one interview. We engaged with people in different roles (e.g. practitioners, senior leadership) to examine whether different groups have different perspectives on the quality or sustainability of current provision.

Focus groups lasted up to 90 minutes and were held over Microsoft Teams to reduce participant burden and engage practitioners working across the UK. Question guides were semi-structured, enabling

research questions to be covered but maintaining flexibility to probe further on topics of interest. Research participants were also provided with a Participant Information Sheet and consent form, containing key information to gain their informed consent, such as the purpose of the research, terms of participation and rights to withdraw, our data storage and protection policy, and contact details for the research team. The consent form also included agreeing to not name other participants or share their views outside the focus group in an identifying manner.

In response to the high interest from sector professionals in this research, we also accepted written submissions from participants who were not able to attend the focus groups or had follow-up information to share following their participation in a focus group discussion. In total, we received **3 written submissions** which were analysed alongside the focus groups and embedded within the findings presented in the remaining chapters of this report.

Interviews with the bereaved Armed Forces community

In total, we conducted **20 interviews with members of the bereaved Armed Forces community**. We took a trauma-informed and participant-led approach, offering every interested person the option of participating in an interview or a focus group. We also gave participants the option of inviting someone to attend interviews with them for additional support (such as a family member or support worker) or of attending a focus group with a particular group of people (such as other family members or members of a support group).

To be included in this research, we required participants to confirm they were:

- Not currently employed by the Ministry of Defence (including as serving personnel), as receiving Ministry of Defence Research Ethics Committee (MODREC) clearance was not feasible due to the short timeframe (discussed further in 'Research ethics' below).
- Over the age of 18 years old and that there had been at least 12 months since bereavement. While the experiences of every member of the bereaved community are highly important, the 12-month threshold was set in line with industry best practice to avoid early intense grief and to allow participants enough time to engage with statutory and not-for-profit support.
- Part of the bereaved Armed Forces community. Our sample encompassed family members of individuals who died while in service, family members of individuals who died while out of service, as well as a small number of veterans who were in service themselves when losing a family member.

As outlined above, to reach the bereaved Armed Forces community, three not-for-profit providers who represent a considerable breadth of the bereaved Armed Forces community within the UK shared our sign-up form directly with their members. Our sample reflects those who came forward to take part in the research.

Our sample included 15 bereaved spouses and co-parents as well as 5 bereaved parents. Women accounted for 16 of our participants (2 chose not to disclose gender). In total, all but one of our participants had children. The majority of participants (15) had been bereaved between 1 to 5 years. We also spoke with 1 person who had been bereaved between 5 to 10 years prior, 3 people who had been bereaved between 10 to 20 years prior, and 1 person who had been bereaved over 20 years ago. It should be noted that, given the wide range of times since bereavement, some individual experiences with statutory support provision may reflect outdated policies and practices. This consideration is accounted for in our analysis, and our findings should be read with the understanding that mapping the exact provision of current statutory support is out of the scope of this research.

While we did not collect formal data on the cause of death, the anecdotal data shared in interviews indicated that at least 14 of the 20 people who participated had been bereaved by suicide. As such, our sample represents a disproportionate number of those who are bereaved by suicide. It should be noted

that one of the multiple support groups that received a link to our sign-up form was specifically for families bereaved by suicide. This may have contributed to this high representation; however, not all participants bereaved by suicide originated from this group. An additional contributing factor supported by the literature – as well as findings from this research – may be that Armed Forces families bereaved by suicide face particular challenges, including an increased risk of further suicide, complex grief, stigma, and additional demands of military inquests and media interest (McDonnell et al., 2024). This may contribute to increased need and is supported by data shared by Scotty's Little Soldiers, showing that a disproportionate number of children who seek their support had a parent die by suicide (both whilst serving and as veterans). Further work exploring the causes, impacts, and outcomes of those bereaved by suicide is needed but goes beyond the scope of this research.

All participants who signed up within the timeframe of the engagement and met the eligibility criteria were invited to participate. Interviews lasted up to 45 minutes and were held over Microsoft Teams to reduce participant burden and allow for engaging military bereaved across the UK. Possible questions were shared in advance with individuals so they could consider what they wished to discuss and allow participants to share experiences in their own ways. Participants were encouraged to share whatever they felt comfortable about the support they have received. Alongside gaining informed consent, we reiterated the right to withdraw consent at any time and not answer questions if they do not want to at the start of each interview. Following the interview, we also provided a Participant Debrief Form which included details of available supports.

Research ethics

Bereavement is a complex and sensitive subject. Although this research focused on needs in relation to support, rather than the bereavement itself, conversations naturally covered difficult and traumatic experiences. In all our work, we prioritise the safety of participants and researchers, following the Government Social Research (GSR) Professional Guidance. In relation to this project, we incorporated specific considerations in line with established bereavement research (e.g. Butler et al., 2017, Sque et al., 2014), including sensitive recruitment practices and avoidance of distress during engagements. Our expert partner, Dr Gill McGill, is highly experienced in engaging with this group and advised on sensitivities such as language. Furthermore, all discussion guides and recruitment materials were reviewed by our Ethics & Safeguarding Lead to ensure they adhered closely to Alma's own ethical guidelines.

Given the tight timeframe for this research in order to deliver the grant programme in early 2025, it was not feasible to gain MODREC clearance. As a result, we were not able to include Ministry of Defence staff (including serving personnel) as research participants in our fieldwork (focus groups or interviews).

Analysis and reporting

We analysed qualitative data using four iterative steps of thematic analysis, i.e. familiarisation, coding, theme development, and write-up, paying close attention to patterns and any differences or similarities between or within stakeholder groups.

Findings are discussed in the remainder of the report to support the Armed Forces Covenant Fund Trust in delivering a grant programme aimed at supporting the Armed Forces bereaved community. These findings are drawn from a combination of the scoping phase and stakeholder engagement.

3. Needs assessment

This section summarises insights on the unique context of military bereavement as well as the range of circumstances and complex needs experienced by the bereaved Armed Forces community. Key themes relating to these experiences, raised by stakeholders and within the academic literature, include certain events, practices, and outcomes which contribute most significantly to the specific needs of the community.

Context of military bereavement

Research in the UK has identified that families bereaved by the death of a family member in military service require a bespoke response that is sensitive to their specific circumstances (Lester, 2019; Hewison et al., 2020). A core reason for this is that military deaths can cause instances of ‘traumatic bereavement’ in surviving family members, which is when an unexpected death leads to negative grief outcomes (Cozza et al., 2017). A US study on the mental health of military widows highlighted that bereavement was associated with a two to fivefold increase in the prominence of depression and Post Traumatic Stress Disorder (PTSD) in comparison to nonbereaved military wives (Cozza et al., 2020). During interviews with members of the bereaved Armed Forces community for this research, some participants shared being diagnosed with complex PTSD as a result of traumatic bereavement.

Across the stakeholder engagement with professionals and bereaved families, it was also highlighted that lived experiences of grief are highly personal to the individual. This point was reiterated by sector professionals who emphasised that the bereaved Armed Forces community is not a homogenous group, with each individual and family having varying needs and experiences. Although the military bereaved share a common bond of losing a family member who served, every death is unique and brings about an individualised set of needs. As a result, grief triggers differ widely, although anniversaries can prove challenging year on year. Anniversaries can also be public in nature, for example, Remembrance Sunday, which can lead to further difficulties for families during these periods.

As a result of generalising the needs of bereaved military families, there is a perceived widespread ‘one-size-fits-all’ approach to support provision, which does not adequately serve the needs of the whole community. Bereaved families within this research emphasised the need to take the time to understand and respect each family’s unique set of needs, specifically within statutory support provision. An individual’s needs can further differ depending on the cause of death, time since bereavement, prior experiences with military and statutory support, relationship to the bereaved, age and experiences of previous bereavements, among many others. For example, several spouses who were bereaved at a younger age felt that they did not fit in with several support organisations targeted at widows because they did not “feel like a widow” due to their age. Younger spouses did not identify with this term, which impacted their willingness to engage with services using such language.

Furthermore, stakeholders highlighted that grief is not linear and continues in different forms across a lifetime, particularly in cases of traumatic bereavement. Therefore, the military bereaved will likely require support at various points in their life, particularly for children whose grieving journey can be delayed. As a result, it is important that support is bespoke and context-specific (Villarreal-Davis et al., 2021), needs-led (McGill et al., 2023) and long-term (McGill et al., 2023; Wilson-Menzfeld et al., 2024) to respond to changing needs of the military bereaved across a life course.

Specific and complex needs of the bereaved Armed Forces community

Nevertheless, there are several key similarities in the experiences of bereaved military families and the subsequent impacts these experiences can have. For example, several members of the bereaved Armed Forces community shared experiencing multiple compounding losses over time, losing not only their family member but also their home (when they left Armed Forces accommodation),⁴ military community as well as associated stability. These were described as unique needs of the military, specifically when their family member was serving when they died. One bereaved spouse stated, “I didn't just lose my husband. I lost my home. I lost my friends. I lost my community. I lost everything.” The following key themes on the specific and complex needs of the bereaved military community identified across the literature, focus groups with sector professionals and interviews with bereaved families are outlined below.

Key themes

1. Impact of the casualty notification

A significant theme across much of the literature was the experiences of family members receiving the casualty notification, which is commonly referred to as ‘the knock on the door’. Following a military death, a Casualty Notification Officer (CNO) is tasked with notifying the deceased’s next of kin as soon as possible. The literature highlights that proper handling of casualty notification is critical in helping families begin the grieving process and access relevant support services (Kiernan et al., 2021; Fadeeva et al., 2022; McGill et al., 2022a).

A study by the Northern Hub for Veterans and Military Families Research on bereaved military families’ experiences of casualty notifications highlighted that a third of participants were given the casualty notification while alone and half of participants were then not given all the information they needed (Kiernan et al., 2021). It was suggested that a mental health professional should also be included in the team who delivers the casualty notification to provide initial psychological support (McCullough et al., 2023).

2. Media interest

The Northern Hub for Veterans and Military Families Research’s study on the experiences of family members receiving the casualty notification highlighted challenges experienced with media interest. Research in the US has highlighted that families often experience interest from the media and social media, which is particularly challenging when the nature of the death is disclosed without familial consent. This can be especially difficult for families in cases of death by suicide (Harrington-LaMorie et al., 2018). Only 29% of participants in a UK study believed they received adequate guidance and support to handle the media interest (Kiernan et al., 2021).

Across the interviews with the bereaved Armed Forces community for this research, the negative impact of media interest was emphasised, with various instances of reported inappropriate conduct by journalists having taken place. For example, individuals waiting outside family homes and calling extended families repeatedly. Some bereaved families described their experience of the press as being “intrusive, hurtful and morally wrong.” Many participants highlighted the detrimental impact this had on their attempts to privately grieve for their family member.

⁴ Current policy states that bereaved spouses may stay in military accommodation for up to two years following the death of their family member in the Armed Forces (with possibility of extension).

The impact of media interest was made worse when families did not receive adequate protection from the Armed Forces. For example, a widow spoke of a newspaper printing personal information on herself and her children as well as graphic details on her partner's injuries when he died four years ago. When she reached out for support from the relevant Press Office within the Armed Forces, she was told there was nothing they could do. She expressed her hurt at this as well as concern that the press had published information about where she lived, stating, "They need to protect me." It was not until a support group contacted the press that the information was taken down. However, there were other experiences shared by families where the relevant Press Office did work closely with the family to limit media interest, with participants sharing the benefit this had on reducing additional stress for the family. The Armed Forces also can signpost to [relevant guidance](#) from the Samaritans.

3. Social isolation and loneliness

Another key theme highlighted by focus groups with sector professionals was that challenges, such as media attention, were exacerbated for the military bereaved in comparison to civilians. This was due to military families often not having established ties within the local community due to regularly moving and often not living close to extended family. Stakeholders reflected that without this foundational support, it was harder for families to navigate grief, leading to feelings of social isolation and loneliness (e.g., Johnson et al., 2023).

A research study by the Northern Hub for Veterans and Military Families Research on military widows' experiences of social isolation and loneliness highlighted that 41% of military widows reported being both lonely and/or socially isolated (McGill et al., 2023). A key factor was the negative impact of grief on their relationships with families and friends (McGill et al., 2022a; Wilson-Menzfeld et al., 2024).

Social isolation can also be compounded by a lack of cultural support, as research has found a shift in public attitudes to military intervention since the Second World War. The literature has indicated there is now less social value placed on serving in the Armed Forces by the public in comparison to other countries involved in similar conflicts such as the US (Rolls & Harper, 2016).

4. Administrative tasks, financial concerns and geographical relocation

A further challenge experienced by bereaved military families is related to the practical matters following a military death, such as administrative tasks related to the funeral which the VO should support with. It was noted in the literature that bereaved military families have additional administrative tasks in comparison to civilian deaths, including applying for a military-specific pension and/or compensation as well as paperwork related to their military housing (Fadeeva et al., 2022).

It was highlighted in interviews with the bereaved Armed Forces community that the needs of the military bereaved differ depending on whether their family member was still serving in the military at the time of bereavement. For those who had experienced bereavement while their family member was still serving, many of the initial challenges were more practical, for example, concerns related to housing. For the death of a veteran, some families expressed more pressing issues related to loneliness and mental health.

Furthermore, immediate challenges can differ depending on the age of the bereaved, for example, younger widows shared immediate concerns related to childcare and finances. This is exacerbated by high rates of underemployment amongst widows, highlighting the challenge of bereaved spouses gaining employment while grieving as well as juggling family commitments.

Research participants in a study on social isolation also noted a significant change in annual household income following a bereavement (McGill et al., 2023), which led to financial concerns among the family.

This could be exacerbated by additional costs incurred by bereaved military families related to post-death formalities and, for some, moving out of Service Families Accommodation (SFA) (Fadeeva et al., 2022).

Bereaved families in the interviews for this research described the loss of their home and the wider military community over time as “additional layers of vulnerability that are put on families at their most broken time”. Although current policy states that bereaved spouses may stay in military accommodation for up to two years following the death of their family member in the Armed Forces (with possibility of extension), moving still comes with the loss of military friendships and identity (Wilson-Menzfeld et al., 2024), which is addressed in further depth later in this section.

Another key challenge for bereaved military families was surrounding compassionate leave and returning to work, with them experiencing a lack of clear processes in place for bereavement. One individual was using their annual leave in the immediate aftermath of their family member’s death until a friend recommended getting sign-offed from work by their GP, stating it was “really helpful to know that is available in a crisis.” Several individuals highlighted that the lack of clear processes and support resulted in leaving their jobs, further destabilising families both emotionally as well as financially.

Experiences of a lack of robust policies surrounding compassionate leave were often connected with a lack of understanding of grief, with participants sharing that there was an expectation that after the funeral, “life should go back to normal”, which can alienate bereaved families further.

5. Loss of military community and identity

Another key theme across interviews and focus groups was the loss of military community for bereaved families who have lost their connection to the military through bereavement. Stakeholders reflected that the military bereaved would share that – “your life goes with that person” – including access to military life and Armed Forces support networks. Bereaved military families reflected on the loss of a sense of belonging, with many highlighting they had also contributed to the wider Armed Forces community. One bereaved military spouse reflected, “You marry into the army... although you’re not in the army, it becomes your life and suddenly it’s gone.” Professionals reflected on the detrimental impact this can have on families, referencing work conducted in the US that maintaining or rebuilding a connection with the military community can have positive long-term outcomes for bereaved military families.

The loss of the military community is tied closely to the challenge of transitioning from military spouse to military widow/er and the impact this has on a partner’s sense of self (Wehrman, 2021; Wilson-Menzfeld et al., 2024; McGill et al., 2022b). These challenges were exacerbated for several younger spouses in the interviews, sharing they did not relate to the language surrounding ‘widow/er’, due to its association with older bereaved women. Many bereaved military families reflected on the complexity of navigating a new identity outside of the military, with partners of those who died while serving reflecting the struggle of transitioning into civilian life without their partner. Research has also indicated that identity reconstruction can make grief more complex for bereaved military partners, leading them to become further isolated (Wehrman, 2021). Particularly, the language used to describe the military bereaved – including widow/er – can inadvertently exclude bereaved individuals and families who do not identify with these labels. The alienating role of language is discussed further in the section on barriers to accessing support.

These challenges were further aggravated by a perceived lack of adequate support to assist the transition to civilian life. Bereaved military spouses described being neither serving military personnel nor veterans, so they described falling into a “grey area”. Families noted this meant not being in receipt of the same [transition support](#) as veterans when leaving the Armed Forces. They further described feeling like an “outsider” and not feeling recognised as a legitimate part of the Armed Forces community, which in turn led to feelings of rejection. Moreover, feelings of losing their military identity led to confusion over their eligibility for support services.

6. Impact of service inquires and inquests

Across most of the participants, families described two of the most challenging processes related to bereavement proceedings being the service inquiry and inquest. Participants reflected on highly negative experiences of inquests, describing them as “old-fashioned”, “hugely retraumatising” and “brutal”, with one individual sharing it “nearly destroyed me”. Despite the intensity of the process, participants shared there was no formal support for families at the inquest, as well as inadequate preparation for what the process involved. Although some VOs attended the inquest, several participants indicated that they could not provide the level of support required.

Due to the intrusive nature of the proceedings, several participants called for more closed inquests, with one participant sharing they are worried about the impact that having such personal and traumatic information publicly available will have on their children. Many questioned what the public interest is in having the information widely available.

Similarly, participants shared traumatic experiences of service inquiries, with one sharing that it was “the most horrific experience I've ever experienced [...] they should not put people through that.” For an individual who was bereaved by suicide, they described a complete lack of understanding of the complexity of suicide specifically around questions of “why?”. They described how the Army was “treating it like an operation which had gone wrong.”

Moreover, participants described being completely ill-prepared for what to expect at the service inquiry, not realising they would have to swear on the Bible, there would be a solicitor, microphones and a high number of people there. They described thinking they would be going in the room for a chat; however, it was three hours long and caused re-traumatisation. They reflected, “outside the Army you would not get treated like that.”

As one participant reflected, “I've lost my husband. My daughter's lost her dad. I'm in my mid 30s like I could live for another 30 years. Like I've just got this shit life ahead of me like it's shit. So, the focus should be on the grieving and the support, not on the stupid service inquiries, which really shouldn't have anything to do with me because if they're looking into what was going on at work, I don't see why that's got anything to do with me.”

Participants further highlighted their experience of lack of support following the service inquiry.

7. Feelings of disappointment, rejection, and betrayal towards the Armed Forces

Although there were some positive instances of statutory support, more widely across the interviews families described feeling “let down” by the Armed Forces. For families bereaved by suicide, many families described feelings of “discard, humiliation, shame [and] stigma” which they felt were perpetrated by the culture within the Armed Forces. There were examples of other military families purposefully excluding those bereaved by suicide from the community, as well as children being bullied by other military children at school.

Feelings of rejection were exacerbated for families of veterans who were not contacted by the military following the death of their family member. This was also experienced by families of serving personnel who highlighted quickly feeling forgotten from the lack of follow-up contact from the Armed Forces following the funeral. The impact of feelings of rejection were intense, with one family member whose partner was serving when they died sharing that “once you are out of the club, they do not care”.

For many families, this led to feelings of betrayal. For example, participants described committing their lives to the Armed Forces in the belief they would be adequately supported should something happen to their family member, before being “completely dropped” by the military following their death. For one participant, this “destroys your belief in the system” that they had invested in as a family. Tied to this, it was widely acknowledged that families of serving personnel also served, as “when one person serves,

the whole family serves". Many spouses shared the sacrifices they and their families had made, including giving up their careers and frequently relocating to follow their serving partner, with children often having to move schools and leave friends. Families described feeling embedded within the military community prior to bereavement, which exacerbated feelings of betrayal when their treatment from the Armed Forces following bereavement did not align with their expectations.

Feelings towards the Armed Forces were particularly complex for families bereaved by suicide, noting that the stigma associated with suicide was further exacerbated by the Armed Forces through language use, policies, and practices. For example, it was widely noted by families that the support and recognition given to them by the Armed Forces was underpinned by institutional attitudes to the cause of death. By providing different financial entitlements when a death is attributable to service and not attributable, participants suggested that the Armed Forces appear to be perpetuating a perceived 'hierarchy of death'. For families bereaved by suicide, a sense of injustice was felt most acutely when hearing about people receiving better support and recognition from the Armed Forces compared to their own family, highlighting that "the focus is on the type of death, [...] not on the loss."

In addition to this, several bereaved families shared various negative experiences when challenging the Armed Forces over the perceived lack of support they had received, with one participant describing being dismissed as "just an angry widow". This was highly challenging for bereaved families as they could not justify the sacrifices their partner and their family made after feeling dismissed by the military. Overall, negative experiences with the Armed Forces were shown to hinder the grieving process as families are then focusing on fighting for justice or recognition.

8. Impact on children and young people

A final theme outlined in the literature related to the impact of bereavement on children and their development. Recent statistics highlight that the average age of army personnel is currently 31 years old (Kirk-Wade & Mansfield, 2023); therefore, there is an increased likelihood that serving military parents will be leaving behind young children (McGill, 2022a). Research also highlighted high numbers of bereaved children suffering from long-term mental health issues which continued into adulthood (McGill et al., 2022b). As mentioned by one sector professional, perceived lack of access to adequate support also impacts on children and young people's immediate and long-term relationships, education, development and attainment.

Yet, interviews with bereaved parents highlighted challenges in finding face-to-face support for children and young people, with one parent sharing that by the time they found support for their daughter her grief had turned to anger, and she did not want to engage.

Interviews with bereaved families further highlighted concerns about the aftermath of bereavement on children and young people. For example, it was noted moving schools meant losing friendships, especially those with other children living on base who had a shared understanding of what it was like for a parent to serve in the military. Teenagers, for example, are also facing further challenges such as their GCSEs and A Levels, with parents highlighting "You can't just take a year off to grieve because you get left behind." Yet, it is more challenging for children as they cannot seek out support themselves, often relying on parents to find support and refer them.

It was also noted that bereavement can be increasingly challenging for military families, as many military service parents may have been deployed for extended periods of time before their death. Therefore, there may be very few initial changes to the child's daily life, which can make it challenging to accept the permanence of the parent's absence (The National Child Traumatic Stress Network, 2008). Furthermore, research conducted in the US has noted that bereavement is compounded by other military-related stressors associated with parental deployment that have been found to have a significant impact on a child's mental health, behaviour and academic performance (Villarreal-Davis et al., 2021).

The care of children may also be disrupted as the surviving caregivers will likely be facing their own grief (Cozza et al., 2017). Moreover, a key theme highlighted amongst those who had children with the bereaved, as well as parents of the bereaved (particularly when they had other children), was that their priority was always their children whilst grieving. Parents pushed back their grief to support their families. For example, a participant was diagnosed with complex PTSD but did not have time to organise their own bereavement support due to prioritising their children's care. Those who had lost their partner or co-parent shared having to "learn to be a parent again" without the support of the other parent, dealing with everything on their own. Pressure to "hold it together" had a great impact on their mental health.

Finally, the political nature of war can impact children and young people due to a possible lack of cultural support in a war effort (The National Child Traumatic Stress Network, 2008).

4. Support provision – statutory support

This section summarises the statutory support available to the bereaved Armed Forces community, covering support provided by the Armed Forces, the UK Government, and wider statutory bodies (such as the NHS). It is important to note that bereaved families often move in and out of receiving support from statutory and third-sector services; while this section focuses on statutory support exclusively, the next chapter summarises insights on third-sector support, and both should be considered in combination. Moreover, as discussed in the methodology, systematically mapping the exact provision of current statutory support is out of the scope of this research, and the insights presented in this section build on findings from the scoping phase and stakeholder engagement.

Armed Forces

The academic literature highlighted steady improvements in family satisfaction with the support offered to bereaved military families since the introduction of VOs, the Purple Pack, and support from the Armed Forces Covenant and military charities (Fadeeva et al., 2022). Research has also highlighted positive developments in terms of financial, administrative support and general support provided to bereaved families (Kiernan et al., 2021). However, extensive findings from both academic literature and our fieldwork underscore limitations and barriers to delivering and accessing statutory support. Further details regarding particular aspects of support are discussed below.

Armed Forces Covenant

The Military Covenant was introduced in 2000 to set out the mutual obligations between the UK Government and its Armed Forces, which led to the [Armed Forces Covenant](#) being formally enshrined in law as part of the Armed Forces Act 2011, as an obligation on the Secretary of State to publish an annual Covenant report. The Covenant aims to support British military personnel and their families by removing disadvantages when accessing goods and services, and offering special provision to the Armed Forces community, including bereaved families. To support this, the [Covenant Legal Duty](#) was introduced in November 2022 to ensure public bodies (including Local Authorities, governing bodies of certain state schools, various NHS bodies, and other organisations) are legally obliged to take into account the principles of the Armed Forces Covenant when delivering healthcare, education and housing.

Visiting Officers

Visiting Officers (VOs) play a key role in supporting bereaved families of service personnel. VOs are assigned to bereaved families immediately after they are notified of a service member's death by the Casualty Notification Officer (CNO). The role of the VO is to provide initial support to bereaved families, including providing support with administrative tasks, such as registration of death and funeral arrangements, while referring to resources such as the Purple Pack and other organisations available to offer psychological support (Ministry of Defence, 2024). Multiple VOs can be assigned to one family to account for different dynamics within a familial unit. The VOs are serving Armed Forces members and therefore cannot provide psychological support to military families (Fadeeva et al., 2022).

Sector professionals reflected that their members' experiences of VOs are "so varied they are almost unpredictable". Some highlighted positive experiences where the VO had been described as becoming part of the bereaved family, while others had extremely negative experiences. These differed across the branches of the Armed Forces reflecting a lack of standardisation across the wider institution.

Professionals noted that negative experiences with VOs can have a detrimental impact on the individual's bereavement. However, families' experiences of the VO often came down to the individual, specifically their experience and capacity.

These varied experiences of VOs are substantiated across the interviews with bereaved families of those who died while still serving, reflecting differing experiences with assigned VOs. Some participants had a positive experience, where individuals shared that the VO attended the inquest with them, arranged funding to help with moving out of army accommodation, signposted them to additional support and showed care at every step of the process. One individual spoke positively of how the support provided by the VO had been joined-up, as they worked closely with the Royal Marines Charity to ensure all their needs were met. Some participants benefited greatly when VOs signposted them to other specialist organisations such as Scotty's Little Soldiers and Families' Activity Breaks (FAB). One participant shared, "I am very fortunate that my Visiting Officer has been outstanding", noting they were "easy to talk to" and "compassionate". Another participant understood that their VO's role was to "translate" the Army to them, which was considered highly beneficial.

Others noted miscommunications with their VOs that meant they did not receive crucial information or were given incorrect information, which caused additional stress while grieving. It has been highlighted in the literature that the shock of the news stopped many family members from fully comprehending the officer's role (McGill et al., 2022a). Some individuals described their VO as being unprofessional and insensitive, often as a result of their age. When people have negative experiences, they report that it significantly compounds the trauma and damages their relationship with the Armed Forces.

Bereaved families' experiences differed across the branches of the Armed Forces, as well as being dependent on the individual they were assigned. Participants called for more uniform and consistent training for VOs, as a participant reflected that it appeared to be "luck of the draw."

One professional reflected that as well as supporting bereaved military families, they have also supported VOs who have been traumatised as a result of their role from being inadequately prepared and/or trained for such a critical position. Therefore, it was widely suggested that bereaved Armed Forces families should receive more specialist support with further training for VOs across each branch of the Armed Forces. However, some stakeholders did note that enhancements to training have led to some improvements as well as the need to acknowledge the perimeters of the role.

It was noted in previous literature on support provided to bereaved military families that longer-term support was required from the VO, with findings indicating a mismatch between the capacity of the VO and the support families required (Fadeeva et al., 2022). Furthermore, half of the participants involved in a study on bereaved families' experiences of military inquests reflected a sense of betrayal following the conclusion of an inquest due to no longer being contacted by the military (Lester, 2019). These experiences highlight the importance of managing transitions and expectations to avoid further harm caused to families (Lester, 2019). A beneficial addition is that VOs can also be supported by a Welfare Support Manager (now called a Case Manager) from Veterans Services who can provide continued and longer-term support; however, there is no research yet on the level of availability and take up of this support and the efficiency of this role.

Joint Casualty and Compassion Policy and Procedures

Other important resources include the 'JSP 751 Joint Casualty and Compassionate Policy and Procedures, Part 1 Volume 2: Management of the Deceased' (updated version not available online) which outlines the procedures in place following the sudden death of a member of the Armed Forces. Current policy states this document should be made available to bereaved families as it outlines the support package families can expect to receive.

Financial support is a key element of the support provided to bereaved families, as they are entitled to a series of financial payments, including access to the [War Pension Scheme](#) and compensations. Within the JSP 751 document is also information on the initial support offered to bereaved families to pay for their family member's funeral and further information on entitlements for the funeral.

Participants of a research study on the casualty notification process highlighted the relief of having support to arrange and pay for the funeral (McGill et al., 2022a). It should also be noted that although more recently bereaved family members reported receiving financial support following the casualty notification, many participants of Fadeeva's research study on the support provided to bereaved families experienced challenges with claiming and receiving death in service payments and navigating applications for military pensions (Fadeeva et al., 2022).

Purple Pack

Another important resource made available to bereaved military families is the 'Purple Pack', which is a resource produced by the Joint Casualty and Compassionate Centre to provide information on practical arrangements such as registering the death, funeral arrangements as well as further signposting bereaved family members to tailored support services. It was first published in 2017, with more details on the British Army's [Bereavement and Aftercare](#) webpage as well as the Royal Air Forces' [Family Federation's Bereavement and Loss](#) information.

Previous research has highlighted sensitivities surrounding when to share this document with families, as some felt it was 'too much, too soon' when it was offered to them during the casualty notification (McGill et al., 2023). The literature has also noted areas where the Purple Pack could be expanded upon and updated, such as providing resources and support with handling media interest and further information for families to support open and honest communication on bereavement with their children (Kiernan et al., 2021). It was noted that the Purple Pack would benefit from a review, including the input of bereaved military families to ensure the resource is fit for purpose. The Ministry of Defence is currently updating the Purple Pack due for publication in 2025.

The Purple Pack is designed by the Ministry of Defence specifically for those bereaved during service. As such, it is only shared with families when their family member dies whilst in service. Previous work has highlighted the value of families who are bereaved while no longer serving having access to something like a Purple Pack, along with further information for those who are bereaved by suicide (McGill et al., 2023).

Within this research, sector professionals reflected on the Purple Pack as "misunderstood" as one stakeholder noted that it was only meant to be used for death in service but was often referred to more widely. It should be noted that the [booklet](#) available online is only part of the information provided in the Purple Pack as key information is tailored for the individual.

Several bereaved Armed Forces community members noted recent improvements to the Purple Pack. However, bereaved families reflected that it was still a long document which was challenging to navigate especially while already overwhelmed. One member of the bereaved Armed Forces community highlighted they never opened the Purple Pack because it was too overwhelming at first and now represents the death so it is too traumatic to open. There were many examples of bereaved families not reading it due to its inaccessibility, size, and language. As one participant reflected, "You've just gone through the worst thing and people are giving you pieces of paper."

For those who did use it more widely, this was because of the VO's support in navigating key pieces of information, including where there was a list of further support resources.

Additional support provided

Although support offered by some regiments in the Armed Forces was described as comprehensive, this was inconsistent across the Armed Forces (Fadeeva et al., 2022). Research by McGill and colleagues (2023) highlights the need for all psychological support to be long-term as grief can fluctuate across a life course.

One Army spouse in this research spoke of being given access to weekly sessions with Amparo (trauma therapy) paid for by the Army. They also received support through the Army Welfare Service, which ended due to resourcing restrictions despite acknowledgement that it was needed.

For children, there is also the [Armed Forces Bereavement Scholarship Scheme](#) which is administered by Veterans UK. However, the scholarship scheme is for children whose parent died while serving in the Armed Forces and the parent's death was deemed to be attributable to their service, and for which the child or surviving parent is receiving benefits under an MoD-attributable benefits scheme. A participant highlighted the challenge of this in cases of death by suicide and the complexity of having the death listed as attributable to service.

Several bereaved families also referenced receiving financial grants for specific support through organisations, such as [The Royal Logistics Corps](#), with others sharing that their applications were denied. However, several participants highlighted that the perceived intrusiveness of the financial checks discouraged them from making further applications.

Health and education

For psychological support, it was highlighted that the NHS often refers the military bereaved to Cruse Bereavement Care, despite it being widely reported to have a long waiting list. It is important to note that Cruse Bereavement Care is a third sector organisation, with referrals being made due to a perceived lack of alternative options within the statutory sector.

More generally, professionals noted that individuals often get lost in the system when they move to a different Local Authority and get removed from waiting lists. This is a common occurrence for bereaved military families when they move out of military accommodation, often to an area closer to their immediate family.

Despite the emergence of NHS services, such as Op COURAGE, which specifically targets mental health support for veterans, serving personnel, reservists and their families, professionals noted they had not seen additional support provided for bereaved military families as a result of this.

Similarly, in relation to the UK Armed Forces Covenant and the pledge to give special consideration to injured service personnel and the bereaved, sector professionals highlighted that they had not seen any prioritisation of bereaved families because of the Covenant. Several stakeholders highlighted the Covenant needs to be enforced, with a guaranteed minimum standard of service that can be relied on. For example, a family shared that no consideration was made to them by the Local Authority in relation to counselling housing despite disclosing they were a member of the bereaved Armed Forces community.

Similarly, stakeholders highlighted there was a lack of specialist support for bereaved military children in the school system. Although there were instances of schools providing excellent support for children, this was not consistent across the UK. For example, parents highlighted challenges with the implementation of the Armed Forces Pupil Premium, which is provided to state schools with children whose parent is in the military. One parent highlighted that the payment was currently only used for attending a general military club, which was inappropriate for her children due to focusing on challenges of deployment and military life.

Overarching challenges experienced in statutory support

1. Inconsistencies in the provision of statutory support

The lack of standardisation across the support provided was a key theme across the engagement with sector professionals. Many professionals highlighted the package of support was inconsistent across services; for example, the training provided to VOs depended on which branch of the Armed Forces they were in. For instance, the Royal Navy gained an equivalent qualification in social work to train to be a VO, whereas others undertook just a few days of training. This was a key area highlighted as being challenging to navigate, as standards of professionalism have a knock-on effect on the depth and breadth of care that families might expect. Stakeholders reflected that gaps in statutory support provision can cause lifelong impacts for bereaved families and can compound their trauma.

For the military bereaved, there was widespread frustration about compounding failures in the statutory support provided despite continual calls for improvements by families. Many participants recognised that the system was failing them rather than individuals, noting, “I am not blaming the individual; I am blaming the process.” Examples of these failings are particularly related to families’ experience around military inquests and service enquiries, often describing the perceived lack of support, clarity, or guidance from the Ministry of Defence on this process.

2. Challenges interpreting policies and procedures for statutory provision

Additionally, sector professionals noted it is challenging to access official guidance on policies and procedures for families. For example, a charity shared it took them up to six weeks to reach the right person within HMRC to answer a question regarding their pension. This was noted as a key “tension point” with families and reflects the opportunity for more training on statutory rights and entitlement across staff in statutory bodies to ensure correct information can be quickly shared with bereaved families.

3. Lack of statutory support for children

Another key theme in the interviews with the bereaved Armed Forces community was the perceived lack of statutory support available for children through the Armed Forces or other statutory services. One sector professional described them as the “forgotten mourners”. It was highlighted that there were long waiting lists for CAMHS within the NHS, while acknowledging it no longer provided specialist bereavement support. Although the third sector offers a bereavement programme for children and young people, they do not offer professional counselling or psychotherapy. Furthermore, although there were examples of schools providing excellent bereavement support, these were individual cases with no comprehensive policy in place across the UK.

4. Lack of data captured on bereaved families

Bereaved families also acknowledged there was limited centralised data captured on them, so they questioned how support could be provided without it being informed by relevant data (e.g. on the long-term impacts for children and young people when bereaved in service). For some participants, this represented a perceived lack of interest and recognition of bereaved families and their experiences, which contributed to feelings of rejection by the Armed Forces.

5. Support provision – third sector

This section summarises the scope of support currently provided by the third sector, including Armed Forces bereavement organisations, non-specific bereavement organisations, and non-bereavement Armed Forces organisations. It then presents insights on best practices and limitations within the third sector, informed by the literature review and stakeholder engagement, focusing on certain types of support (such as counselling and psychological support) as well as particular organisations.

Third sector mapping

Following official proceedings, such as inquests, support is predominantly provided by the third sector. Below is a list of organisations currently offering support for bereaved families:

Sub-Sector	Examples	
Specific Armed Forces bereavement support	Beyond the Wire	Widows' Associations
	Scotty's Little Soldiers (for children and young people)	(i.e. War Widows , Royal Navy and Marines Widows , Army Widows' Association and Royal Air Force Widows)
General bereavement support	Armed Forces and Veterans Samaritans	Sue Ryder
	AtaLoss	Suicide&Co
	Bereavement Advice Centre	Suicide Bereavement UK
	Childhood Bereavement Network	Survivors of Bereavement by Suicide
	Cruse Bereavement Care	The Compassionate Friends
	Every Life Matters	The Good Grief Trust
	Marie Curie	Widowed and Young
	National Bereavement Service	Winston's Wish (for children and young people)
General Armed Forces and veterans support	Army Benevolent Fund	RAF Benevolent Fund
	Army Families Federation	RAF Community Support
	Army Welfare Service	Royal Airforce Families Federation
	Combat Stress	Royal British Legion
	Defence Medical Welfare Service	Royal British Legion Industries
	Family Activity Breaks	Royal Navy & Royal Marines Charity
	Fighting with Pride	Salute Her
	Forces Employment Charity	SSAFA, the Armed Forces charity

Forward Assist	The Veterans Charity
Give Us Time	Turn to Starboard
Help for Heroes	Veterans Aid
The Military Wives Choirs Foundation	Veterans' Gateway
Naval Children's Charity	Walking with the Wounded
Naval Families Federation	
PTSD Resolution	

Best practices and limitations

Across the literature and stakeholder engagement with sector professionals and the military bereaved, various instances of best practices and limitations with third-sector support were noted.

Single service widow associations and peer networks

The War Widows' Association of Great Britain and the respective individual single service Widow Associations (Royal Navy and Royal Marine Widows' Association, Army Widows' Association, and the Royal Air Force Widows' Association) provide key support for bereaved spouses.

One example is the Army Widows' Association which was set up in 2004 'for widows by widows' as a peer support network for army spouses, civil partners, or recognised partners. They are now a registered charity that sits within the Ministry of Defence's Bereaved Families Group.

The Army Widows' Association's engagement strategy involves sending a letter alongside the VO and following up six months after the bereavement. This was corroborated by some military spouses in the interviews, with participants sharing how they appreciated receiving personalised letters from the relevant organisation (including names of spouses and children).

All associated members are provided with events and respite breaks alongside activities many members miss from their military lives. The Army Widows' Association also offer access to counselling via funding and guides for statutory entitlements, such as benefits and pensions. They emphasise providing whole life care, acknowledging needs differ at different points in life.

Research conducted by McGill and colleagues (2023) noted that the associations provided beneficial formal peer networks and support for bereaved partners. Specifically, connections were formed due to the group's shared understanding of traumatic bereavement and military life (McCullough et al., 2023; Wilson-Menzfeld et al., 2024). It was reflected that bereaved military families experience grief differently, with their experiences being difficult to understand to other non-military bereaved individuals (Wilson-Menzfeld et al., 2024).

The importance of peer support was also highlighted across the focus groups and interviews, as the groups provided opportunities for the military bereaved to meet with other individuals who had a specialised understanding of what they were going through. A widow reflected that the last thing she wanted to do was attend a meeting; however, she went, and it was the best thing she ever had done as she met people in the same situation as herself. Participants described "lifelong bonds" made through various peer networks, which were essential as "when you're not alone, the darkness is not as heavy... and the darkness can be very heavy." The act of peer support was highlighted as significant for spouses as it provides a sense of belonging and a community of people who understand you.

For others, such support is not appropriate as they find it triggering to hear other people's stories due to the tendency for the community to "share their war wounds" (stories of how their family member died). As highlighted earlier in this report, stakeholders noted that not all spouses wished to, or felt comfortable, joining a widows' organisation. For example, a stakeholder noted when talking to RAF Widows, only around 50% of them wanted to join their association. There were assumptions that the associations are only for older people, with activities such as coffee mornings not being appealing to all bereaved spouses. Professional stakeholders reflected that widows were aged from their twenties to nineties; however, the membership demographics were not reflective of the general population. A lack of diversity can create further barriers for all bereaved spouses to feel comfortable accessing this support.

There were also other barriers to accessing this support highlighted, such as perceived hierarchies relating to their partner's rank, the nature of death and stereotypical assumptions of who constituted a 'war widow' (McGill et al., 2023). These challenges were also raised in the interviews as some individuals shared that they did not relate to the names of the organisations due to reasons including not identifying as a widow (if widowed young), and specifically for the War Widows' Association, not identifying with 'war' if their family member was not KIA. One participant shared, "They have more people dying now through suicide, illness and accidents rather than war, so the War Widows don't represent the modern-day military widow." Although most members have lost spouses while serving, there is now a growing number of veteran spouses who have been bereaved in other circumstances.

For some, it was hard to associate with such labels as they tied closely to their grief; for example, one individual shared, "I'm not ready to be a widow."

Professional stakeholders within the focus groups highlighted the associations' support of a large number of individuals, noting examples of groups going above and beyond for their members. However, there were also multiple instances in the interviews where bereaved spouses contacted their relevant association yet never heard back.

Other peer networks

In addition to the above formalised single service widow associations, the literature highlighted the core benefit of other peer networks, particularly reducing grief symptoms and supporting personal growth (Bartone et al., 2019).

The growing trend of Internet-based peer support programmes was reflected upon, with benefits including easy accessibility to support (Bartone et al., 2019). However, further research is needed on the effectiveness of Internet-based programmes compared to forging in-person connections.

Research conducted by Fadeeva and colleagues (2022) also noted that both formal and informal groups helped widows develop coping strategies, reduce isolation and forge connections, as well as offer long-term support. However, this provision is not always available for other family members and would benefit from further expansion (ibid).

Significantly, the value of peer support relates to the shared experience between the bereaved and peer supporter (Bartone et al., 2019; Johnson et al., 2023). A study by Bartone and colleagues also found benefits for peer supporters in providing support (Bartone et al., 2019).

An example of peer support offered in the US is suicide postvention, which is an intervention employed following a military suicide to help the deceased's close community (Harrington-LaMorie et al., 2018). The support is provided by peer mentors, due to the stigma of seeking help in the military community, therefore providing a safe environment for family members to share feelings. A specific example in the US context is the support provided by Tragedy Assistance Program for Survivors (TAPS), which provides a military suicide postvention programme that provides 24/7 peer-based support including one-to-one peer mentoring, online support groups, suicide loss specific workshops as well as camps for children (ibid).

Suggestions for improvements in peer support include enabling the development of a Peer Support Model (McGill, 2024) that is not wholly reliant on association membership but seeks to foster collaboration between peer support groups and advocates association membership.

Counselling and psychological support

Another fundamental support for those suffering from traumatic bereavement is counselling or other professional psychological support options. In the research, it was noted that many bereaved family members subsequently sought ongoing counselling through the NHS, privately or through bereavement charities. Yet, bereaved family members in the literature reported struggling to source appropriate bereavement support, particularly for children and parents of the deceased (Fadeeva et al., 2022 McGill et al., 2022a). This was further emphasised in the interviews for this research, with family members referencing long waiting lists and the high costs of private care.

Additionally, research in the US has highlighted the benefits of family-based and attachment-based play therapy to respond to the unique nature of traumatic bereavement and repair disruptions in parental attachment (Villarreal-Davis et al., 2021). The study highlighted that attachment and family-based approaches are crucial in supporting military-connected children (ibid).

Bereavement charities

The importance of not-for-profit organisations in supporting bereaved military families was highlighted throughout the literature. For example, Cruse developed a bereavement support service dedicated to the needs of serving and ex-services personnel and their families, taking into account their special needs, which involved training their volunteers and setting up a [dedicated webpage](#) on their website (Cawkill, 2009; Green & Cawkill, 2012).

There was discussion amongst interview and focus group participants over the need for military-specific vs. civilian support. Professional stakeholders highlighted the importance of a nuanced understanding of the Armed Forces in providing support to bereaved military families. Members of the bereaved Armed Forces community similarly noted that military-specific support provided an opportunity to find a military community for both children and adults. Parents sought out military-specific support so their children could continue to have a relationship with the military (and therefore their bereaved parent). For example, one parent said the link was important because it tied their child to their partner so he could understand how the “experience in the military made him who he is.” Civilian charities were also noted as not understanding the “military admin” as well as the nuances that come with military bereavement.

Contrastingly, one participant initially preferred civilian bereavement as was too upset at the military to have any further connection with them. Although many individuals noted the need for tailored support, stakeholders reflected that some families shared they would rather go to a civilian organisation which is Armed Forces friendly. For example, **Widowed and Young**, a charity for those who lose a partner aged 50 or under, has a military support group; however, it is not delivered by a military organisation. These organisations provide further support for families; however, professionals reflected there is “not a lot of guidance” for service providers who are not specialist Armed Forces charities.

Other organisations, such as the **Royal British Legion** do not focus specifically on the bereaved community but do try to capture them within wider activities such as grants. Other charities, such as the **Forces Employment Charity**, who provide support, jobs and training opportunities to Service leavers, veterans, reservists and their families, are attempting to expand their support to reach bereaved families. Stakeholders highlighted challenges with accessing bereaved families, noting the benefits of working with other charities, such as Scotty’s Little Soldiers, to gain referrals.

SSAFA the Armed Forces charity

SSAFA the Armed Forces charity provide two support groups for bereaved families, with one specifically for family members bereaved by suicide (Military Families Affected by Suicide). This group was set up due to the specific needs and challenges faced by this group within the bereaved Armed Forces community. For example, members described challenges surrounding the stigma when the death is by suicide as well as issues such as not being recognised by some military events. A perceived lack of recognition was emphasised as having a detrimental impact on these families and their sense of belonging within the military community, with SSAFA the Armed Forces charity attempting to rebuild these links.

Bereaved families also shared positive experiences of attending SSAFA the Armed Forces charity groups, providing a community as well as informative sessions to support families in their grieving journey. Participants shared finding a group that understands them and supports them without judgement, specifically highlighting the impact of the Military Families Affected by Suicide for those bereaved by suicide.

Beyond the Wire

Beyond the Wire is a newly formed group that works to recognise and support all Armed Forces families as they cope with the grief and loss of the person who served and the subsequent removal/departure from military life. It was set up as a response to the lived experience of various needs not being met within the current provision provided for bereaved military families. They are currently developing a bereavement 'hub' to ensure better joining up of service provision through having all the information and organisations in one place. The hub is responding to key difficulties in finding the right support. They are also working to strengthen the current evidence base to inform policy and best practice to meet identified needs of the bereaved Armed Forces community as well as advising how best to provide support provision.

Families' Activity Breaks

Another organisation referenced by interviewees was Families' Activity Breaks (FAB) who offer paid activity camps around the UK for bereaved Armed Forces families. Parents highlighted how they encouraged children to step outside of their comfort zone and as part of that, provided an opportunity for them to discuss how they were feeling with experienced mentors. One parent shared looking forward to these trips each year and the positive impact they had on their family.

Other support services highlighted were **Royal Marines Charity** and **Icarus** as well as more informal support provided by private groups on social media.

Children and young people

For children, the **Naval Children's Charity** was highlighted as supporting the wellbeing and development of children and young people from the Royal Navy, Royal Marine and Royal Fleet Auxiliary families, serving, reserves and veterans. However, in relation to bereavement support they often refer children and young people to Scotty's Little Soldiers who specialise in supporting bereaved military children. Other non-military specialised charities for children were reported to have long waitlists; for example, one parent had to wait two years before being able to seek support. Despite the support provided by children's charities, it was highlighted there was an absence of psychological support for children navigating grief.

Scotty's Little Soldiers

Scotty's Little Soldiers was reported as the only military-specific charity which offers support specifically for children. All children are eligible for Scotty's if a bereaved parent served in the military, with the type

of death (while serving or not) being emphasised as irrelevant to their eligibility. Many parents shared that they were grateful that Scotty's had inclusive messaging, which made it clear it was available for all families, regardless of relationship to the bereaved, the rank of the bereaved in the military and the cause of death. Scotty's made it clear they were all part of the same community. However, it should be acknowledged that support from Scotty's may not be appropriate for all children, as some may want to leave the Service connection and seek support from non-military specific charities.

It was noted that Scotty's faces challenges in identifying bereaved families. If they were not bereaved in service, they would not be provided information of further support by a VO, so Scotty's relies on word of mouth, advertising and working with funeral directors, hospitals and hospices to reach people quickly. Additionally, Scotty's has received press attention from ambassadors within the Royal Family to broaden its reach.

Many participants spoke fondly about Scotty's and the support their family are continuing to receive, describing it as "incredible." Parents spoke positively of how quickly Scotty reached out to them after their initial inquiry before offering them long-term, holistic support, which was embedded within an understanding of the Armed Forces. Families accessed Scotty's through various routes, primarily relying on word-of-mouth recommendations from their VO, members of other support groups, and wider family, friends, or contacts.

Support ranged from one-to-one support and activities to support with Remembrance Day, vouchers and paid holidays, with one family member sharing, "It is everything". Scotty's provides support for children and young people aged between 5- 25 years old, with one parent noting a gap in support for children before the age of five within the current support provision.

Like other peer support networks, they provide an opportunity for families to meet others who have gone through the same experiences, supporting parents "so that they can better support their children". Parents shared that it gave them companionship, specifically something to do in the evenings, so they were not sat on their own.

Crucially, Scotty's provides a space for children to build a community, which parents noted would become highly important as they get older. It also offered a connection to the Armed Forces, as a parent shared their child recognises Scotty's as "daddy's friend", with another sharing that Scotty shows her daughter the part of the Army "that her daddy loved." In the interviews, most parents who spoke of Scotty's services highlighted it provided a community to both parents and children.

Scotty's also provided support for parents to understand bereavement in children and how to support them through the different stages, such as responding to children not being able to sleep after bereavement, how to explain suicide in an age-appropriate manner and more generally supporting with their mental health. One session was on suicide, which was highlighted as beneficial, with one parent commenting that within the group, there were families later on down the line from them whom they could seek advice from, such as 'What did you say to your child?' They noted it was "not the kind of conversation you can have at the nursery school gate."

One of the most beneficial offers by Scotty's highlighted by participants was the paid holidays, which one parent described as "life-changing." They spoke of their gratitude to Scotty's both organising and paying for a caravan holiday for a week by the seaside, removing all logistical and financial pressures usually involved in going on holiday. They described it as an opportunity to build lasting family memories and support them to rebuild their confidence. A parent shared, "It makes you think 'we can do this. We can go out, and we can be a family.'" The same parent reflected that they never would have booked a holiday otherwise, but it had a lasting impression, giving them the "confidence to get through the next bit, whatever bit that is."

General bereavement charities

In relation to general bereavement charities, multiple bereaved military families also highlighted accessing **Cruse Bereavement Care**, with some family members finding it useful and others having negative experiences (e.g. feeling like they had to support the volunteer rather than the other way around). A key issue raised by family members was that Cruse had a long waitlist for support, as well as not being able to provide support until at least three months following bereavement. Although families understood the reasons why, many shared they had simply wanted a listening ear in the early days of their grief, with being initially turned away leading them to not reach out for support again.

Other support services highlighted were the **Samaritans**, **Survivors of Bereavement by Suicide (SoBs)**, **Every Life Matters** and **Suicide&Co.**

Practical support

Other not-for-profit sector support services included practical support to bereaved families. Rolls and Harper (2016) discussed how a UK charity helped bereaved parents with everyday activities which the bereaved may struggle with, often tasks which the deceased may have performed such as gardening or household maintenance. However, the study also highlighted how the team would additionally support the development of 'sites of remembrance' if families so wished. It was found that the practical support offered to parents had a highly significant impact on them, which went beyond the practical elements, helping parents forge new bonds, remembering the deceased, and supporting restoration-focused coping (Rolls and Harper, 2016). Parents noted specifically appreciating the charity's sensitivity, with it being highly beneficial that they knew about their child's circumstances and their role in the Armed Forces.

Non-UK bereavement support

Although acknowledging the contexts between the UK and US differ widely, many sector professionals and bereaved families discussed bereavement support outside of the UK as examples of good practice that could be adapted to a UK context. Examples centred around US support services, particularly their comprehensive scope of bereavement support and inclusivity.

Tragedy Assistance Program for Survivors (TAPS)

One example was TAPS, a US non-profit organisation that collaborates with SSAFA the Armed Forces charity. Multiple participants highlighted their inclusive approach to supporting families bereaved by suicide within the US. Through the inclusive language used in the organisation, a family bereaved by suicide described feeling like it was the first time their bereaved family member had been acknowledged, respected and commemorated officially. One parent highlighted there is "Nothing like that here". The difference in cultural attitudes toward the Armed Forces in the US in comparison to the UK was noted as a key difference which influenced the support provided, with one participant bereaved by suicide emphasising the profound impact of being thanked for their own service.

A key example of comprehensive support was highlighted by a family member who participated in a residential clinic in the US as part of the [Intensive Clinical Program for Families of the Fallen](#) partnered with **Homebase**. The programme was fully paid for, with the individual highlighting its life-changing impact. As part of the programme, they underwent professional psychotherapy as well as participating in various group sessions and activities (e.g., cooking, crafts). The programme also provided an opportunity to develop a community of support, which is still being utilised on their return to the UK.

Other forms of support - Family, friends and community

Although the support of broader family and friends was noted as highly significant in the initial stages of the grieving process, Johnson and colleagues' (2023) scoping review highlighted social support often declined over time. It was felt that many families experienced distance from coworkers, church members, and neighbours due to their perceived lack of understanding of the nature of military loss (Wilson & Supiano, 2011; Wehrman, 2021). Family dynamics can also become altered due to grief, with common instances of increased tension and fracturing of relations (Breen & O'Connor, 2011; McGill et al., 2022b). This was further challenging for bereaved military families by suicide, who, due to experiences of or perceived stigma, may avoid family and friends (Villarreal-Davis et al., 2021).

Bereaved military families discussed both how families and friends had been essential support networks in their grief journey, as well as some instances of bereavement fracturing relationships.

Overarching insights experienced in third sector support

There were comments amongst many sector professionals that charities provide a significant level of support, recognising the inconsistencies and reported challenges in navigating statutory provision. One stakeholder noted, "charities wouldn't exist if organisations were doing their job properly". However, there were still challenges identified in providing and accessing this support, for example:

1. Lack of awareness of third sector support available

Many sector professionals who participated in this research recognised that there was substantial support available across sectors; however, they were unclear on everything that is currently available, which made it challenging to refer and signpost to other organisations. Although awareness has grown in recent years and recognising that families may not want to know about provision until it is needed, there is still more that could be done to improve awareness-raising across the sector. This was crucial as one stakeholder noted the "biggest battle is getting their service out to people that need them." Currently, the system is reliant on a bereaved person conducting extensive research to identify relevant support whilst in the midst of grief.

Bereaved military families also highlighted a key challenge to accessing support was not being aware of what was available and having to undertake extensive research, which was described as highly burdensome. There were many examples of families sourcing support themselves as opposed to being signposted by a VO.

2. Lack of joint-up working within third sector organisations

Many stakeholders highlighted the need to work collaboratively to support the bereaved Armed Forces community more widely. Despite the benefits of the Ministry of Defence's Bereaved Families Group, it currently meets biannually which has not allowed for a focus on collaborative working. It was also noted that only larger military charities have the resources to facilitate collaboration and build networks, with the need for further resources for smaller organisations. Opportunities for joined-up working should include both military and civilian charities to ensure the resources provided are being utilised effectively.

3. Misconception surrounding the extent of support available

For the military bereaved, a key theme was the level of support available from the military charities and third sector not being aligned with expectations due to resource constraints. Some families believe there

is a misconception surrounding what support is available on the ground, such as their experiences of lack of availability of paid psychological support. There were particular challenges also with finding face-to-face support with the availability dependent on your geographical location, with most support being concentrated by military hubs or big cities.

4. Challenges in reaching the entirety of the bereaved Armed Forces community

Ensuring support is accessible to a wide range of individuals was also highlighted as a key challenge by several stakeholders. Although there are active efforts to widen support to capture the entirety of the community, it was acknowledged that small charities do not have adequate resources to undertake diversity awareness training to reach out to wider communities and break down associated barriers. It was also noted that Black and minority ethnic individuals may not see themselves reflected in the charity's work on social media. Furthermore, several sector professionals highlighted the challenge of engaging with Foreign and Commonwealth families due to language barriers and concerns by families to engage in support outside of their community. Stakeholders acknowledged there were fears of discrimination they may receive as a knock-on effect of accessing support, with the need to build trust that the support is open and available. One organisation highlighted they were planning on launching an LGBTQ+ group, due to higher rates of suicide experienced by the LGBTQ+ community reflected anecdotally.

5. Lack of support for wider family members

Although there are some supports available for spouses, stakeholders emphasised their experiences of lack of support services available for the wider family. Several organisations that do have expansive eligibility criteria noted that members would say, "I'm not a widow, I'm a Dad, I'm a Mum, I'm a child, I'm a sibling. I'm a comrade. What about me?" Practitioners reflected there is very little available for them, with support needing to expand to support the whole family.

6. Lack of available data to provide evidence-based support

Stakeholders also highlighted there is a lack of standardised data captured on the bereaved Armed Forces community, with some non-military specific charities not capturing whether the individual had any military connections. A key challenge was also sharing available data between organisations to ensure the support responds to the needs of the community.

6. Barriers to accessing support

This section summarises the main structural, geographical, and social barriers bereaved Armed Forces families face when accessing existing support. These barriers extend across both statutory and third sector support provision, and are informed by insights from both the literature and stakeholder engagement. These include:

1. Geographical disparities

Although it has been indicated that bereaved military families often have positive experiences of support when services are available (Wilson-Menzfeld et al., 2024), research has identified geographical disparities in the availability of support services (McGill et al., 2023; Wilson-Menzfeld et al., 2024). A study on military widows' experiences of social isolation has highlighted bereaved families in certain areas of the UK have been unable to gain reasonable access to in-person support (Wilson-Menzfeld et al., 2024). Moreover, further barriers noted in the literature related to transportation as research on veterans' experiences of loneliness identified a key challenge to accessing services is the lack of transportation available to in-person programmes (Wilson-Menzfeld et al., 2019). Practical barriers should, therefore, be considered when organising in-person events and activities, as well as a wider spread of locations.

2. Stigma

A further barrier for bereaved military family members to access services was the stigma relating to the nature of their family member's death, for example, when the cause of death is suicide (Hewison et al., 2020; McGill et al., 2023). Although research commissioned by the Ministry of Defence and National Health Service England reflected the rates of suicide amongst the Armed Forces were no more significant than the general population, there are further nuances to note within these statistics, as there is in fact a higher risk of suicide amongst male and female veterans aged under 25 years than in the same age groups in the general population (2-3 times higher) (Rodway et al., 2022).

Research conducted in the USA highlighted feelings of shame and responsibility among military family members who were bereaved by suicide, which led families to self-isolate (Harrington-LaMorie et al., 2018). It was also noted that military culture glorifies traits such as strength and stoicism, often extending to families, which makes it harder for them to reach out for support (ibid).

These feelings were emphasised in the interviews with the military bereaved as many individuals whose family members had not been KIA were uncertain whether they were eligible for support from military charities. This was compounded for families who were bereaved by suicide due to societal stigma associated with this cause of death.

Several stakeholders explained that there was a perceived 'hierarchy of death' within the Armed Forces community, where those who had been KIA were viewed above those who had died by illness, car accidents or suicide. It is recognised that there have been positive steps to rectify this, by recently removing the obligation to have your name on the wall at the National Memorial Arboretum (NMA) to take part in the walk at the Festival for Remembrance,⁵ which previously barred families who were

⁵ An annual event held by the Royal British Legion which honours the service of, and the sacrifices made by, the British and Commonwealth Armed Forces community.

bereaved by suicide. The recent change allows families who have lost family members to suicide to participate fully in remembrance activities.

As a result of the perceived hierarchy of death, families often lost their connection to the military community and were described as falling into a gap when it came to support. It was commented that historically, the sector had to do some work on improving inclusivity within peer networks to remove the stigma associated with suicide, which highlights a more systematic societal problem.

3. Confusion surrounding eligibility and language

Another barrier to accessing support is related to confusion surrounding language and a family member's eligibility for support services (Wilson-Menzfeld et al., 2024). McGill and colleagues' research (2023) on social isolation experienced by bereaved wives highlighted the use of terms such as 'war widow' or 'military widow' led partners to question their eligibility to access service provisions. Many partners were unsure of what constituted a 'war widow' and whether the term was only used for spouses whose partner was killed as a result of conflict.

Wilson-Menzfeld and colleagues (2024) also reflect on labels used for military bereaved in their study, as well as highlighting some spouses' discomfort at being referred to as a 'war widow'. Not being able to identify with the 'labels', inadvertently excludes bereaved individuals and families from feeling that they belong anywhere within the current support system. When support groups and organisations use terms such as 'widow' and 'war widow', both as an organisational name and when referring to beneficiaries, it can reinforce expectations and stereotypes of a widow being a married spouse whose partner was KIA.

4. Complex family structures

Although it was acknowledged that statutory services need to identify the next of kin following bereavement to provide a package of support, it was highlighted some families have more complex situations. For example, when the bereaved may have children from different relationships, it can lead to challenges in eligibility of support for ex-partners. Stakeholders highlighted that a pension gets "really messy really fast" when considering stepparents, multiple partners and so on. For example, within Commonwealth families, the person most in need of support (or 'next of kin') might not be a spouse or parent but instead be an aunt or a grandmother, with there being a need to take time to understand the family's dynamics before providing support.

7. Recommendations and insights

This section presents a range of recommendations and insights informed by the research findings. Recommendations for the AFCFT grant funding are discussed first, including practical insights for both the focus and the design of a future grant programme. While the scope of this research was to provide recommendations to the Trust aimed at the third sector, a number of additional areas for further research and findings that may be of interest for statutory support provision are also presented later in this section.

Recommendations for AFCFT grant funding

A number of recommendations for the AFCFT grant funding emerged across interviews and focus groups, shaped by the insights on needs, services, best practice, and challenges discussed above. These recommendations can be used to inform the future grant programme, and are divided into two distinct sections: (i) recommendations for the focus of a future grant programme, summarising particular areas of interest or practical ideas; and (ii) recommendations for the design of a future grant programme, presenting key considerations for the overall configuration and principles which should underpin support provision for the bereaved Armed Forces community.

Recommendations for the focus of a future grant programme

1. The programme should facilitate partnerships across the bereavement sector

It was acknowledged that collaboration at a managerial level was positive (e.g., Ministry of Defence's Bereaved Families Group); however, on-the-ground collaboration was more challenging. Sector professionals emphasised the need for establishing direct partnerships and referral pathways between charities – rather than signposting – to support families' move between services and remove the burden placed on them to proactively access support. A suggestion discussed was the development of a case management system which allows organisations to refer individuals onward, ensuring they do not need to repeatedly tell their story to each new organisation and facilitating secure data sharing between organisations. Increased collaboration would also enable service providers to expand their reach and better accommodate personal circumstances and preferences. Moreover, some stakeholders also supported improved partnerships with wider statutory and third sector organisations, including the Ministry of Defence, the NHS, schools, and civilian bereavement charities, to share best practice more widely and identify key trends within the sector.

2. The programme should create a centralised list of all bereavement support available

One key challenge expressed by both sector professionals and bereaved families concerned difficulties in locating statutory and third sector support. Stakeholders spoke of the unnecessary burden this placed on families at an already traumatic time, often taking multiple calls for an individual to get the information they need. Moreover, smaller charities spoke of difficulties raising awareness of their own services, with limited resources to build connections with other organisations and advertise their services. To address this, multiple stakeholders suggested a centralised list or “directory” of all support available – including third sector organisations and initiatives, statutory support and entitlements, as well as eligibility criteria and up-to-date contact information – accessible to bereaved families, third sector stakeholders, and

statutory stakeholders. A “bereavement hub” is similarly suggested by McGill and colleagues (2023), as a means of ensuring awareness of the services available to the community. This would help families to identify the support and information they need all in one place, and would also enable third sector and statutory stakeholders to better guide the families they support and to understand where they fit within the wider sector. Additionally, this will avoid a small number of organisations becoming overburdened due to being the only known services in any given area. A directory of online resources was favoured for its accessibility and ease with which it could be kept up-to-date as support provision evolved. Some sector stakeholders suggested that this list could be managed by one central organisation which coordinates the overall provision of both statutory and third sector support.

3. The programme should support the development of a long-term bereavement strategy

While it was widely agreed that support was available for the bereaved Armed Forces community, it was described as “fragmented”, “piece meal”, and in need of a long-term and joined-up strategy which supported bereaved families to thrive. This should be research-led and evidence-based, responding to the short-, medium-, and long-term impacts of military bereavement on outcomes for families. Importantly, any strategy should embed a variety of approaches to support – including both professional and peer-led models – and ensure that the vision goes beyond temporary, “quick-fix” solutions so bereaved families are holistically supported over the longer term. Moreover, it should assess the formal pathways into support available to families across their lifetime, acknowledging that not all support or information will be useful or needed immediately or at once, and that clear pathways should be established for families when they need them.

4. The programme should increase the provision of mental health support for adults and children

Across the focus groups and interviews, the growing demand for professional mental health support was highlighted, acknowledging the long waitlists and high financial costs to access such support. While peer-led models were consistently highly praised, a need for more professional trauma-informed support was also called for to sit alongside this. Mental health provision was considered particularly important for bereaved Armed Forces families due to the uniqueness of military bereavement, including the experience of multiple compounding losses, the higher likelihood of traumatic death, increased bureaucratic burdens, and potential stigma based on type of death. Difficulties accessing bereavement counselling were expressed most strongly for children and young people, describing their experience of a lack of bereavement counsellors qualified to support children, lack of professional pathways into mental health support for children and young people, and high waiting lists for both CAMHS and private counselling. Delays in accessing appropriate mental health support were described as having severe negative consequences on grief and trauma. The literature supports the need for the prioritisation of greater emotional and psychological support for bereaved children (McGill et al., 2022a), as well as extending this support to other family members (Fadeeva et al., 2022).

5. The programme should expand the support available to all family members

Stakeholders noted that support provision was primarily aimed at next of kin, noting a gap in support for wider family members and loved ones, such as grandparents and siblings. This was noted as particularly important for non-traditional families, as well as for Foreign and Commonwealth families. Moreover, some stakeholders raised concerns around gaps in provision for both young children (under age 5) and adult children (over age 25) who do not qualify for standard children’s bereavement services. For adult

children in particular, while adult services do exist, they were said to be inappropriate as they typically focus on supporting spouses.

6. The programme should widen the scope of support for adults

Some bereaved families noted the need for a wider offering of support for adults. In addition to increased access to professional mental health support (point 4 above), others also called for more third sector organisations to deliver holistic packages of support combining both peer-led and professional offerings. This approach would facilitate continuity in care and support provision, and reduce the burden placed on adults to access multiple organisations to meet their needs. An alternative suggestion for adults could also include a peer-support model that is not dependent on association membership, in order to appeal to members of the community that may struggle to identify with the term ‘widow/er’. Finally, some participants also noted the higher levels of unemployment faced by military spouses, as well as challenges maintaining employment after bereavement, suggesting more employment-specific support.

Recommendations for the design of a future grant programme

1. Lived experience should be embedded within the programme

The voices of the military bereaved should be at the centre of any design in the provision of support, ensuring it adequately responds to the needs of the community. This suggestion came through strongly across all engagements. For bereaved families in particular, it was important that support was shaped by others who know and understand the lived experience of military bereavement. As one participant noted, the grant programme “must be for bereaved families, by bereaved families”; ensuring that families – rather than policy – are kept at its heart. Importantly, the programme should take a person-centred approach to capture the lived experience of the whole bereaved community, recognising that while needs and experiences are largely individualised across the community, they are most likely to differ based on certain key factors, such as type of death, previous bereavements, and relationship to the bereaved.

2. The programme should use appropriate language and terminology

Appropriate terminology and targeted language should be a key consideration for the grant programme. It should be clear to both sector professionals and bereaved families that they are eligible for support, as families reported often having to enquire to check eligibility which caused unnecessary confusion and disappointment. This was particularly important for families who had lost their connection to the military through the bereavement, with doubts around whether they are still eligible for military support. The importance of more inclusive language, such as military bereaved, is further emphasised in the literature, to ensure support is accessed and promoted more widely amongst bereaved military families (Wilson-Menzfeld et al., 2024). The grant programme should also take care to use inclusive language which will capture harder-to-reach groups within the bereaved Armed Forces community and ensure they are sufficiently considered within any support provision.

3. The programme should prioritise the provision of more long-term support

The complexity of bereavement for each family means that it is particularly important that support is available continuously and across the life course, reflecting these highly unique and personal experiences. This individuality was evident in our research; for example, various stakeholders noted that reaching bereaved families soon after bereavement should be prioritised, as timely support can help to

avoid aggravating an already traumatic experience and maintain a sense of belonging with the military community. While it was widely recognised that families would access support at their own pace, stakeholders emphasised that it should be made available as early as possible so families are aware of the full scope of support regardless of whether this is accessed immediately. This was highlighted as significant by multiple interviewees, who described bereavement support only being provided at least three months following the initial bereavement. Conversely, other stakeholders noted that families may need delayed support due to their lifestyle within the Armed Forces, with serving personnel often leaving their families for long periods. This meant that the full realisation of a permanent loss may not be immediate for some families and could prolong the grieving process. To deliver long-term support successfully, providers should maintain continual contact with bereaved families to establish a trusted connection, so they feel comfortable to reach out when they need to access support. This was considered particularly important for those where the relationship with the deceased was not necessarily positive, for example due to domestic violence or abuse.

4. The design and focus of the programme should be inclusive and accessible

Inclusivity in support provision was an important consideration for both sector stakeholders and bereaved families. This should shape both the design and focus of the grant programme, and should consider a variety of factors to ensure that the support provided is accessible and appropriate to the whole bereaved Armed Forces community. Particular examples included ensuring that support was available regardless of military status or rank, type of death, or geographical location, with some families noting that face-to-face support was typically centred around large cities or military hubs. The lack of local in-person support was noted as particularly impactful for children. Accessibility considerations also include reducing bureaucratic hurdles to access support, such as lengthy and involved forms.

Many families spoke of the benefits of offering targeted support – such as for those bereaved by suicide – to capture the unique set of challenges faced by certain groups, but emphasised that being grouped in this way should be a choice based on what feels most appropriate to the family. Time since bereavement should also be considered, with some families later in their bereavement journey reportedly stopping support as it felt more appropriate to those recently bereaved and therefore became unrelatable. Participants spoke highly of support provision that was flexible and allowed for families to access it when they were ready. Moreover, taster sessions were described positively as a means for individuals who may feel less comfortable accessing support to “dip their toe in”.

5. The impact of the programme should be evaluated

Any future grant programme should embed a thorough evaluation of its impact and value to the bereaved Armed Forces community. Importantly, this should look at the extent to which the support provided has helped a bereaved family (such as impact on wellbeing) rather than focusing only on outputs (such as number of families reached). Any evaluation findings – as well as wider emerging research – should be used as a robust evidence base for best practice shaping both new and existing service provision across the sector.

6. The programme should accommodate constraints faced by volunteer-led organisations

The grant programme may need to adapt its model to accommodate key challenges faced by volunteer-led organisations – such as resource constraints – to ensure that they do not lose out on grant-funded opportunities to larger or well-established organisations. This may include granting more time to deliver any grant-funded activities.

Recommendations for further research

It was reiterated across the literature that research should centre on the lived experience of the bereaved military community. It was noted, however, that there has been over-reliance on widows in past research (often female, white, heterosexual participants) due to access through their membership to widows' associations, with further research benefiting from more widespread recruitment strategies to amplify the voices of other family members or those who currently do not have association membership (McGill et al., 2023; Wilson-Menzfeld et al., 2024). At the centre of this study is Fadeeva and colleagues' recommendation (2022) that further research be conducted to identify which bereavement interventions best support bereaved military families.

Additionally, there were a number of key areas for further research highlighted by stakeholders to inform future work in this field, including:

- Understanding the needs of children and young people, particularly where bereavement might impact education and attainment outcomes.
- Assessing the long-term impacts of being both bereaved and part of the Armed Forces community.
- Exploring the needs, priorities, and experiences of the pre-bereaved Armed Forces community, for example families facing terminal illness.
- Expanding research to include serving personnel, where MODREC clearance is feasible and attainable.
- Mapping the specific needs, priorities, and experiences of bereaved Foreign and Commonwealth families who experience a loss within the Armed Forces.
- Understanding the unique challenges faced by families bereaved by suicide.
- Quantitatively assessing the bereavement support provided to better capture capacity and unmet need.
- Ensuring that research and support capture the needs of those bereaved by a variety of death types, not limited to those who have died in service or where death is service-related.

Other findings related to statutory support provision

While the overall objective of this research was to provide recommendations to the Trust to design its future grant programme aimed at the third sector, other findings related to statutory support were identified which may be useful to relevant statutory organisations. This section summarises the most discussed areas for potential improvements to statutory support, including:

1. There is an opportunity to break down the stigma associated with death by suicide within the military community

Stakeholders reflected that those bereaved by suicide have very different experiences from other causes of death. This is compounded by perceptions of hierarchy amongst the bereaved community, which is further exacerbated by differing financial entitlements for families when the death is attributable to service or not. It was noted as particularly challenging to prove a link to service when death was by suicide. Stakeholders highlighted there is an opportunity for the UK Armed Forces to review its current policy and process regarding financial compensation so as not to create division within the bereaved community.

The community would benefit from further work to break down the stigma surrounding suicide, with participants noting the need for those in senior positions of the Armed Forces to acknowledge all members of the bereaved Armed Forces community. It is important that no member of the bereaved Armed Forces community experiences any feelings of judgement, which could lead to re-traumatisation.

2. There is an opportunity for a dedicated point of contact for all families in the bereaved Armed Forces Community

Following the last contact with the VO, bereaved families shared that they did not know where to go for further information or support. The availability of an individual to support them in navigating any questions regarding pensions, as well as referring individuals to appropriate support both within the statutory and third sectors, was highlighted throughout the interviews. One participant noted, “You get a lot of support early doors but then months or years down the line you are just kind of left to fend for yourself.”

These points of contact should receive up-to-date training as bereaved families highlighted the Armed Forces was often not aware of the support available and referred them to civilian support as a result. One participant was shocked that so much support was available, yet they were not informed about it. For example, a bereaved spouse was not told about available support groups despite asking the Regiment multiple times. Regular training on support available would be highly beneficial for VOs and other key contacts within the military so they can signpost families when asked. This avoids the additional burden placed on the military bereaved to “trawl the internet” themselves.

Availability of a point of contact was described as crucial as often questions might arise years later, for example, questions regarding eligibility for service premiums, military pensions and school scholarships. It was highlighted as being highly beneficial to have someone to “navigate these ambiguities with.” Examples of statutory workers “passing you from pillar to post” were common, with one individual reflecting “it broke me a few times.”

3. There is an opportunity for consistency and standardisation across statutory support provision

Stakeholders also emphasised the need for standardisation across each branch of the Armed Forces. For example, the Royal Navy and Royal Marines Widows Association is the only widows’ association that is not automatically informed when there is a bereavement, so it cannot easily reach out to a spouse. Furthermore, the training for VOs differed across the Armed Forces contributing to families having highly variable experiences. Further standardising the military’s response to bereaved families was also highlighted in the literature, as the interpretation of guidelines by military institutions can lead to a diverse range of experiences (Fadeeva et al., 2022).

4. There is an opportunity for formal military bereavement training in statutory organisations

As well as the opportunity for more formalised and standardised training for all VOs across the Armed Forces, it was also suggested that training on military bereavement could expand to military chaplains, wider staff at military bases, and within relevant statutory organisations to raise awareness and ensure bereaved families receive the best possible support. Training is important to establish trust with families, particularly concerning the use of appropriate terminology and inclusive language.

For example, many families spoke of a need for improved awareness and understanding of military bereavement in schools by both staff and other pupils. Their experience of a lack of appropriate training resulted in staff misunderstanding how grief might impact behaviour and potential military-specific triggers (such as dates or topics within the curriculum), as well as not having the skills to adequately support bereaved children.

5. There is an opportunity for better partnerships and joined-up working between statutory organisations

Another key challenge for families was the perceived lack of communication between statutory organisations, specifically the Ministry of Defence and the NHS. It was highlighted that a department could take the lead on co-ordinating provision and creating the structures for joined-up working across all statutory services, most specifically health, education and housing (areas already covered in the Armed Forces Covenant). Better joined-up working would reduce the burden for bereaved military families to receive support provisions as services would be able to share relevant information between organisations.

6. There is an opportunity for clarity over eligibility of bereaved Armed Forces community in schemes

Bereaved families shared they often were not clear if they were eligible for support targeted at serving military personnel or the veteran community. Therefore, schemes which include families must have clearer eligibility requirements to encourage families to seek support without ambiguity. For example, GPs have various veteran schemes, but bereaved families were not clear if they were included within these.

7. There is an opportunity for further consideration of bereaved children and young people within policy

A key theme across the interviews was the call for further statutory support for children and young people until the age of 25, with the only support provided within the third sector. One key area is regarding Armed Forces Pupil Premium, which is provided to state schools with children whose parent is in the military. Parents called for an enhanced payment available for bereaved children to give schools the correct resources and guidelines to better support bereaved military children as well as ensuring this is consistently applied across the UK.

Furthermore, bereaved young people applying for university with UCAS are asked, “Do you have a parent serving in the military?” One parent shared that their child did not know how to respond, with no question asking whether they were a child in the bereaved Armed Forces community. It was highlighted that bereaved young people should be included in this question as they were raised with a parent serving in the military as well as facing further challenges with bereavement. Therefore, bereaved military children are also deserving of the consideration that universities may provide.

8. There is an opportunity to address gaps in support pre-bereavement, including improvements to suicide prevention strategies

The majority of those who contributed to this research were bereaved by suicide, with many failures in the support provided to the bereaved prior to their death. There was a call for the Armed Forces to recognise and take accountability for the long-term impact of service on physical and mental health by enhancing support and training for those serving. This should include providing information to families on the structure of the Armed Forces so that they can support their family member if they are struggling, as well as educating themselves on any signs of mental health difficulties. Support should also be tied to each stage in the military life cycle (e.g. joining the army, receiving training, assignments, deployments as well as leaving the Army) as one family member stated, “different stages of military life bring different stresses”.

Crucially, families called for a more robust and transparent **suicide prevention strategy** for the Armed Forces (for current strategy see [here](#); also see Kiernan et al., 2024 for further research on this), which is

in part informed by the experiences of bereaved military families. Families highlighted there are always learnings brought out from inquests so policy needs updating to ensure that the Armed Forces learn from any mistakes to better support their employees. Furthermore, there needs to be clear communication on actions taken and measures in place.

In addition to enhanced pre-bereavement mental health support, some sector professionals and bereaved families also called for more pre-bereavement support for those facing terminal illness. This was considered a particularly important time for families to receive comprehensive support, ensuring that they are able to spend quality time as a whole family whilst keeping their family member comfortable and preserving their own emotional wellbeing.

9. There is an opportunity for more comprehensive financial entitlements

Participants highlighted the significant benefits of funding in supporting them navigate bereavement, both in supporting counselling and therapy as well as taking away initial financial concerns.

A key theme highlighted by several bereaved family members was the lack of grace period for paying for military accommodation, resulting in losing their partner's wages as well as now being liable for house payments. Although current policy indicates that bereaved spouses may stay in military accommodation for up to two years following the death of their family member in the Armed Forces, bereaved families highlighted challenges with covering housing costs under the current provision⁶. One widow reflected, "it is the worst day of your life and now you're paying the MoD." Although there is an immediate support payment provided, families highlighted that many couples have joint loans and other payments, as well as not always having appropriate compassionate and/or sick pay. Additional support was also noted to be needed for family members to travel to be close to their family (for example, Foreign and Commonwealth soldiers).

Many bereaved families also discussed challenges with receiving compensation, specifically for families who were bereaved by suicide. The processes were described as onerous and difficult to navigate, particularly while grieving. It was emphasised that financial entitlements should not be impacted by the cause of the death, and that processes for gaining financial support could be better explained to families.

10. There is an opportunity for further guidance on inquests and service inquiries

There were many examples of families left to navigate highly challenging and intrusive processes without any support provided by Armed Forces. Some participants shared that their VO attended the inquest with them but had no experience with the processes themselves. Many families were not aware of what the process involved, with no-one taking the time to explain it to them. Furthermore, it was noted in cases where families requested legal representation, it was "really helpful", but often, there was no awareness that this was available.

11. There is an opportunity for more comprehensive guidelines on media interest

Families shared that Armed Forces' Press Offices recommended that families release the name of their family member; however, several participants felt this to be a private matter, and those who took this step highlighted how this increased the media interest they experienced. Therefore, there is a need for clearer guidance on what releasing a statement to the press involves and the possible repercussions.

⁶ Bereaved families remaining in service family accommodation continue to be charged the same rate as their partner was paying. Rent is subject to any annual increases as directed by the Armed Forces Pay Review Body, which usually increases by a small percentage annually. A 25% single person discount is also applied to "charge in lieu of council tax" (CILOCT).

12. There is an opportunity for clearer guidance on pre-bereavement measures (e.g. life insurance etc.)

There was a call from families for there to be official guidance on the available insurances and schemes serving personnel can participate in to support their family in the event of bereavement. It was highlighted this is often not considered due to ineligibility during military operations, but families called for the need for protection outside of war (e.g., for suicide, illness, accident).

13. There is an opportunity for further support for families whose death occurs while not in service

Another suggestion for consideration was the Armed Forces also reaching out to families of veterans to make them aware of their entitlements as well as available support provision. Stakeholders also noted that the guidance available would benefit from being more comprehensive and accessible, for example, there is interest in the development of a 'Grey Pack' for those whose family member is a veteran when they are bereaved to provide more appropriate support.

14. There is an opportunity to gather further data on bereaved Armed Forces families

Several bereaved families highlighted gathering data as crucial to direct the expansion of existing support, to map the existing referral pathways within the sector, as well as to better understand the long-term impact of military bereavement on outcomes for military families. It is particularly important that any data collected should capture diverse demographic characteristics to understand nuances in need and outcomes within the community, for example gender, ethnicity, relationship to the bereaved, or death type.

15. There is an opportunity for an appropriate forum to gather feedback on bereaved Armed Forces community

Although there is some representation through Defence Bereaved Families Group, participants highlighted for those families who feel able to share their experiences, there should be a regular forum so the Armed Forces can better understand how they are supporting families and implement adaptations and improvements where needed.

16. There is an opportunity for a full review of the support provided to ensure a targeted response

Some stakeholders noted the need for a comprehensive review of all the support across the sector, including current financing for each strand of support within the statutory and third sector. This would provide an adequate baseline to tailor future support and ensure they are targeted to key areas of need.

It was also noted that there does not appear to be any bereavement expertise in the current Government, which could pose challenges representing the needs of the bereaved military community.

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