

2019.10.08

10 Deputy S.M. Ahier of St. Helier of the Minister for Health and Social Services regarding the facilities available to ex-servicemen and women suffering from Post-Traumatic Stress Disorder: (OQ.232/2019)

Will the Minister advise the Assembly what facilities, if any, are available to ex-servicemen and women who are suffering from post-traumatic stress disorder, or who have sustained injuries in the course of undertaking their duties?

The Deputy of St. Ouen (The Minister for Health and Social Services):

I thank the Deputy for his question. Trauma can occur as a result of exposure to an extremely threatening, or horrific, event, or series of events, such as threats to life, serious injury, death or sexual violence, to oneself, or others. Most people have symptoms that subside naturally in time after a traumatic event and will recover without the need for any professional intervention. However, for a proportion of people, the symptoms persist, causing significant distress and/or interference with day-to-day functioning to the point of meeting the criteria of a diagnosis of post-traumatic stress disorder. It is known that the risk of developing P.T.S.D. (post-traumatic stress disorder) is higher in certain groups, such as military veterans. Military veterans experiencing symptoms of trauma and P.T.S.D. can access the same psychological support offered by Government to civilians. All psychological therapists in Jersey Talking Therapies and all clinical and counselling psychologists in the psychology service are appropriately trained and competent in delivering evidence-based psychological interventions for trauma symptoms and P.T.S.D. Such interventions might be trauma-focused C.B.T. (cognitive behavioural therapy) and eye-movement desensitisation and reprocessing. Several of these clinicians are also trained to deliver psychological interventions that are appropriate for complex post-traumatic stress disorder, such as cognitive analytic therapy and dialectical behavioural therapy.

4.10.1 Deputy S.M. Ahier:

There have been previous failures to afford appropriate after-care for returning soldiers from conflict zones. What help can now be provided to veterans, who are suffering physical and psychological needs, to enable them to return to full-time employment and to reintegrate into society?

The Deputy of St. Ouen:

I believe my answer outlined the help available within health services. The Deputy speaks of reintegration within society and, of course, there are services available in Customer and Local Services, which will help those veterans. I am also aware that the Jersey branch of the Royal British Legion can, through its charity the Royal British Legion, offer assistance and I have been on their webpage to see the sort of assistance that they do offer and support they give and, of course, every effort will be made within the resources and services available to help these people as we do try to help everyone in such a situation.

4.10.2 Deputy L.M.C. Doublet:

Is the Minister aware that victims of abuse and indeed women who have experienced traumatic births also frequently experience P.T.S.D. and what are the care pathways available for these groups?

The Deputy of St. Ouen:

I am aware of those persons and that P.T.S.D. can strike any person who might be exposed to a traumatic event, even such happy events as childbirth can turn such a way. I have set out, in my first answer, the psychological treatments available for P.T.S.D. and for complex P.T.S.D.; I have not specifically asked officers about the class of persons the Deputy referred to, as it is outside the ambit of the question, but I imagine those services are also appropriate.

4.10.3 Deputy L.M.C. Doublet:

Is the Minister aware that between 25 and 34 per cent of all births are classed as traumatic births and between 1½ per cent and 9 per cent of births annually, women giving birth annually, will develop P.T.S.D.? Would the Minister commit to checking with his department whether the care pathways are in place for women experiencing these symptoms and whether any improvements might need to be made?

The Bailiff:

Deputy, I was generous with your last question, but the question is about ex-servicemen, it is not about post-traumatic stress, in my judgment. It is ex-servicemen suffering from post-traumatic stress disorder and that is the focus. You cannot expect the Minister to be entirely up to speed with other types of post-traumatic stress disorder, which is the subject of your question.

Deputy L.M.C. Doublet:

It is the same illness, it is just different reasons, so I would expect the care pathways to be the same.

The Bailiff:

The question is about ex-servicemen, Deputy.

4.10.4 Senator K.L. Moore:

Will the Minister commit to opening a dialogue with the Armed Forces Steering Group, which is chaired by his colleague, the Minister for Home Affairs, in order to better understand the need for joined-up thinking and joined-up practices in this important area?

The Deputy of St. Ouen:

I would certainly want to engage in any dialogue that might assist the recovery of people in this position. The Senator talks of joined-up pathways and I am not aware that pathways are broken, but I will certainly undertake to speak with the Minister for Home Affairs about liaison with the ex-servicemen charities and support.

4.10.5 Deputy M. Tadier:

Does the Minister acknowledge that if ex-servicemen and women had a physical injury, which was obviously visible, then they would get treated with a great deal of urgency, but often when it comes to mental health issues they are left to their own devices? With that in mind, would he ensure that the full range of services, that are available to these people, be proactively offered, rather than just expecting them to self-refer, given the fact that there is a general reluctance and a general taboo still around these issues today?

The Deputy of St. Ouen:

The Deputy asked if I asked if I would accept the proposition he put. I do not accept that we would ignore, as he seems to be suggesting, mental health problems that occur. The services are available

to all members of society, none are refused access to psychological support and the normal pathways are to approach a G.P., who can direct their patient into the care pathways.

4.10.6 Deputy M. Tadier:

May I have a supplementary? I did not say that these issues were ignored, but does the Minister clearly accept that if a serviceman, or woman, has a leg blown off, they do not need to attend their G.P.; they will be given emergency treatment, whether, or not, they ask for it. But, if they have P.T.S.D., maybe the Minister can say how long does it take to get an appointment for mental health issues, whether, or not, you are an ex-serviceman, or woman, compared to how long it would take you to get treated for a leg that has been blown off; is there a difference?

[11:00]

The Deputy of St. Ouen:

Having a leg blown off, clearly, is a threat to life and is treated accordingly. We all know that there are pressures in mental health services and long waiting lists. We are doing all we can to address those waiting lists. I refer the Deputy to our response to the recent Scrutiny report and statements I have made. We are working to put together a team that can respond to a crisis and deal with levels of mental health before they reach a stage where they become acute and patients need to be brought into an inpatient facility.

The Bailiff:

I am going to say to Senator Ferguson and Deputy Ward: we have already had 9 minutes on this question, the Minister is up for questions without notice, you will be able to come back to him later.

4.10.7 Deputy S.M. Ahier:

P.T.S.D. is a threat to life. **[Approbation]** Last year in the U.K. (United Kingdom) 80 servicemen committed suicide and this year, up until September, 50 have already committed suicide, so I question the Minister's comments. Many veterans feel forgotten on their return from duty; Help for Heroes assist where they can, as does the charity Rock to Recovery. Veterans have been failed in the past. What measures will the Minister put in place to ensure that they receive the medical care, which they deserve?

The Deputy of St. Ouen:

Our ex-veterans are not forgotten by the Health Department. We do not fail them. We offer them the services that we do offer and I hope that they will all feel able to take up those services. We do not draw distinctions between ex-veterans and exclude them from anything that is available to others. I will commit, as I have done, to working with the Minister for Home Affairs with the charities concerned and always to try to enhance care pathways.