

# Consultation and Co-production Facilitator Briefing



Our programme aims to produce an ambitious and transformational toolkit for the charity, statutory and commercial sector to remove barriers for women who have served and require support. Having reviewed the research on female veterans in the UK context, we produced an Evidence Review and accessible Statement of Need infographic (available via [www.fvtp.org.uk](http://www.fvtp.org.uk)). We now wish to build on this by hearing from female veterans, and those that support them, about what is needed to improve provision.

This next phase will deliver the consultation and co-production element of the programme which will run from April to September 2024. The toolkit design is motivated by the question 'What does good look like in providing services for female veterans?', a question we are seeking your input to answer. We have co- designed our approach to consultation and co-production by working with key partners in this field, asking what works and what does not.

## **Why are we doing this and what do we hope to achieve?**

Over the last few years lots of work and academic research has been conducted on the challenges female veterans face as a result of their time in the Armed Forces. However, we recognise that we need to now use this research as a basis to take action and make improvements so women get the right support at the right time and in a way that matters to them.

We are now seeking to understand:

- What are the solutions?
- How do we improve things?
- What is currently working well?
- What needs to change?
- How does it need to change?

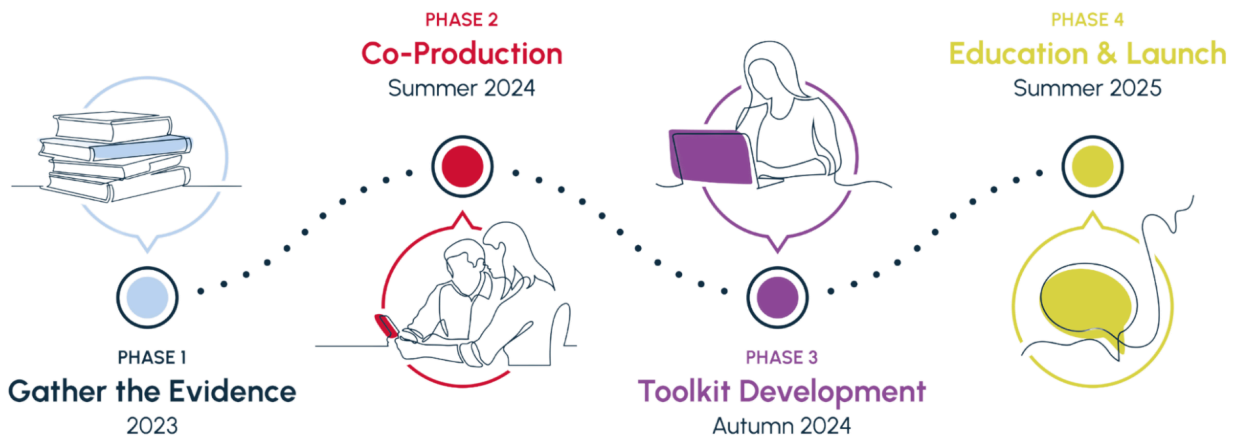
You are the experts, and we need to hear what you think needs to change.

We also need to make sure that these improvements are across ALL services, not just veteran specific organisations – how do we raise awareness and educate professionals such as GP's, social services, hospital staff, leisure services, employers etc.

But this isn't just about focusing on what's wrong, we also want to celebrate what is currently working well and where good practice exists. How can we share this and demonstrate how to do things well?

We know that you have probably been asked for your opinions and views A LOT and may feel like there is 'no point' or 'no-one ever listens', so we are committed to letting you know what we did with

your feedback. We will produce a 'you said....we did' response to the co-production which will eventually be available on our website for you to see and to check we listened.



This co-production will take place in 3 stages, firstly we are asking as many female veterans as possible and those that support them to complete our questionnaire. Once we have these back, we will then pull together the key themes and take these to a series of focus groups that we plan to hold in June and July, both face to face and online. The focus groups will help us create the main sections and criteria of the toolkit, to include a self-assessment section which identifies 'what you need to do to provide good services for women veterans'.

The final phase of the overall transformation programme will involve testing and changing the toolkit based on feedback from women veterans and those that support them, before the final version is made available to all.

Your opinion matters so any information you can provide will go a long way to helping other female veterans in the future.

Thank you

# Draft Focus Group Brief

Note - This is provided as a high level guide and is expected to change after the questionnaires are assessed.

## Focus groups to start in June 2024

The questionnaire data will inform key themes/areas of focus. These will then form the basis for the face to face and online focus groups which will identify what the key criteria should be for services who provide quality support for female veterans in the future i.e. what good looks like for services for female veterans.

We will take the findings and key themes of the Evidence Review and combine them with the elements of service improvement that are highlighted from the questionnaires and ask members of the focus group to hone in on developing criteria and essential elements of the toolkit. We will also draw evidence from focus groups that have already been completed and contain relevant input to this work. We will be aiming to start designing the toolkit, by shaping what it looks like, what sections are needed and what format the toolkit should be presented in.

We are aiming to hold approximately 8 face to face focus groups ourselves (one in each Devolved Administration and 4-5 in England) plus 2 online sessions for those that can't make the face to face sessions. We would also like to utilise existing group sessions, planned focus groups with female veterans etc and ask people if they can facilitate some of the questions on our behalf. This way we ensure we are reaching maximum involvement and building on existing relationships, especially with some people who do not want to talk to 'strangers' and prefer to talk to those they already trust.

## How can you help?

Firstly, by encouraging people to complete either of the questionnaires and register for the focus groups that we will be running.

However, as we state above we know that there are lots of groups that already exist where you might be able to run a session or ask the questions on our behalf. If you would prefer to do this then there are 3 options to choose from.

1. Facilitate a workshop that mirrors what we are doing and follows the session plan below.
2. Have a small group discussion using the questions below for each theme (see below) in a more relaxed style and recording the thoughts/opinions. The key questions are:
  - a. What good looks like for each theme? What is the service improvement criteria/checklist. What do services need to assure themselves that they are doing to meet the needs of female veterans?
  - b. What services already exist for each theme i.e. mapping of what's out there?
  - c. What is currently missing in terms of support for each theme? Services, knowledge, education etc.
  - d. What the toolkit should look like - How should it be designed? How should it be accessed? Think about style (interactive, words, videos, cartoons, links to other resources/information), how information is accessed (online/physical copies/app).

e. What are the top 3 things services need to do/know to better support female veterans.


3. Concentrate on one theme and record the feedback i.e. Mental Health

- What good looks like for each theme? What is the service improvement criteria/checklist. What do services need to assure themselves that they are doing to meet the needs of female veterans?
- What services already exist for each theme i.e. mapping of what's out there?
- What is currently missing in terms of support for each theme? Services, knowledge, education etc

The focus groups will be based on the themes from the Evidence Review and are summarised in the Statement of Need below ([www.fvtp.org.uk](http://www.fvtp.org.uk) for full size version). **Identity, Access to Services, Bullying, discrimination, harassment and sexually inappropriate behaviour, including sexual assault and rape, physical and mental health, transition, employment and finance, Reservists, Race and Faith, Criminal Justice, Care services.**


## Statement of Need

What the evidence tells us are the needs of female veterans



### IDENTITY

Women often do not identify with the term 'veteran' and face specific, complex and multi-layered issues as a result of their service.



31%


of women who have served identify as a 'veteran'

**WHAT DO FEMALE VETERANS NEED?**

- Recognition of the specific needs of female veterans
- Empowerment for women to define their military service in their own terms
- Services should inquire about military service inclusively, rather than using singular terms like "veteran"
- Special attention to the impact of Services Bans (marriage, pregnancy, and gay bans)
- Provision of support for those negatively affected, especially LGBTQ+ individuals

### ACCESS TO SERVICES

Women often don't access veteran facing services as they are seen to be male dominated and not able to meet their needs.



**WHAT DO FEMALE VETERANS NEED?**

- Women need to feel welcome, equal and able to access veteran support services
- Services should be personalised based on the individual's needs and what matters most to that person
- Professionals need to have greater awareness, understanding of the specific needs of women and respond in a way that makes a difference to them

### BULLYING, DISCRIMINATION, HARASSMENT AND SEXUALLY INAPPROPRIATE BEHAVIOURS INCLUDING ASSAULT AND RAPE

A significant percentage of women have faced or witnessed one or more of these issues during service.

85%

felt that they were treated differently to their male counterparts

73%

of women reported witnessing or experiencing sexual discrimination\*

**WHAT DO FEMALE VETERANS NEED?**

- The widespread and insidious impact of this issue needs to be acknowledged and accepted across the sector as women feel seen and heard and therefore supported in a way that reduces shame and stigma
- Where appropriate and needed, services should be female only, delivered by women

### DISTRUST AND MORAL INJURY

Women often feel betrayed and let down by the Military as they did not respond to their needs, complaints and requests for help and support.

**WHAT DO FEMALE VETERANS NEED?**

Recognition that this may affect interaction or lack thereof with services.


### TRANSITION, EMPLOYMENT AND FINANCE

60%

of women feel they had received little support or preparation for life as a 'civilian'

44%

of women report[ing] being unemployed for long periods of time\*



**WHAT DO FEMALE VETERANS NEED?**

Women need better and more targeted support during transition to find appropriate and sustainable employment taking into account caring responsibilities.

Resulting in:

- Fewer financial struggles
- Less impact on mental health due to loss of identity
- Less likely to get involved in criminal activity

### PHYSICAL AND MENTAL HEALTH

**'Women in the British Army have been found to be seven times more likely than men to suffer from musculoskeletal injuries...they are ten times more likely than men to suffer from hip and pelvic stress fractures!'**

Women are often left with long term impact on their physical and mental health as a result of service.

**WHAT DO FEMALE VETERANS NEED?**

- Women's specific health needs as veterans need recognising and professionals to have a better understanding of the potential causes
- Women need to feel confident to declare their military service and be supported into specific Armed Forces pathways where appropriate and wanted

### AREAS OF LITTLE EVIDENCE

There are many areas that still are largely under researched and therefore no practical action is being taken to improve the situation.

**WHAT DO FEMALE VETERANS NEED?**

More research and data capture is needed to better understand specific issues for female veterans such as the criminal justice system, race and faith, care services, loneliness, digital poverty and accessibility and Reservists.

Only 2%

of veteran research focuses on females\*

\*Source: Evidence Review and other sources. \*\*Source: Evidence Review and other sources. \*\*\*Source: Evidence Review and other sources. \*\*\*\*Source: Evidence Review and other sources. \*\*\*\*\*Source: Evidence Review and other sources.

To find out more visit [www.fvtp.org.uk](http://www.fvtp.org.uk)

## Focus Group Draft Session Plan

It is envisaged that the focus groups will be held in the late afternoon/early evening to allow for people working and will last approx. 2-3 hours. The session plan below is based on a 1600 start time, with refreshments being available on arrival.

Pre-session	Refreshments and every participant to sign informed consent and photography consent forms
1600	Introduction and overview of the session – ground rules of the session
1610	<p>'Dump it' section. We want the session to be solution focused and based on service improvements, but we know people may have come with issues that they need to express, but also 'park' so they don't distract from the focus on the session. We will have a number of sheets dotted around the room where people can use post it notes to 'dump their issues' by writing them up on the paper if they wish. This will not be recorded/reported upon.</p>
1625	<p>World Café. We will have a table for each theme that came out of the Evidence Review (Cross cutting - Identity, Access to services, distrust in 'in service' support, diversity of experience - LGBTQ+, BHD, sexually inappropriate behaviour including sexual assault and rape, physical and mental health, transition, employment, finance, housing, family life, Race and Faith, Criminal justice, care services, Reservists, digital poverty, carers, loneliness) and a sheet of the key comments from the questionnaire consultation. We will then ask each table to think about each subject area and record 3 key things.</p> <ol style="list-style-type: none"> <li>1. What good looks like for this topic. What is the service improvement criteria/checklist. What do services need to assure themselves that they are doing to meet the needs of female veterans.</li> <li>2. What services already exist in this topic area (housing, finance, mental health etc) i.e. mapping of what's out there?</li> <li>3. What is currently missing from this topic area? Services, knowledge, education etc.</li> </ol> <p>Each topic will be given 10- 15 minutes and we will then move people to another topic – speed dating style – each person should be able to be involved in 4 topics within the given timescale.</p>

**SAMPLE RECORDING SHEET - Notes taken by facilitator on paper/flip chart**

<b>Mental Health</b>		
What does good look like?	What Services already exist to support female veterans	What is missing, but needs to be in place
<i>GP's ask everyone 'have you ever served'</i>  <i>Choice in the type of mental health support on offer</i>  <i>Awareness of the specific mental health issues female veterans face</i>	<i>GP's</i>  <i>Op Courage</i>	<i>More information about what you can access – knowing Op Courage isn't just for men</i>  <i>Ability to ask for a female support worker</i>

1725

Refreshment break and a chance to go round the topics you haven't been involved in and add anything that you think is missing. There will also be a sheet for any topics we haven't covered but should be included.

1745

Toolkit design, 'What does the perfect toolkit look like? Group discussion on tables. What the toolkit should look like/how should it be designed/how should it be accessed. Groups to think about style (interactive, words, videos, cartoons, links to other resources/information), how information is accessed (online/physical copies/app). Who and how it can be tested, examples of good toolkits and/or resources etc.

**Recorded by a table facilitator on paper/flip chart**

1800

Prioritisation Exercise (of the topic areas). Which are the top 3 of importance and what is the key action for change needed for each and how can we make that happen?

**SAMPLE RECORDING SHEET**

<b>Topic Area</b>	<b>Key action for change</b>	<b>How do we make it happen?</b>
<i>1. Sexually Inappropriate Behaviour</i>	<i>More specific services for women who have faced these issues.</i>	<i>Build on best practice i.e. Salute Her Lobby for MOD to make change in service</i>

		<i>Awareness raising to reduce stigma and shame</i>	
	<i>2. Mental Health</i>	<i>Easier access to services Education on the needs of female veterans within mental health services</i>	<i>Campaign on the needs of female veterans across ALL services</i>
	<i>3. Identity and recognition</i>	<i>More women to understand what's available to them More women to be recognised and celebrated as veterans</i>	<i>Awareness raising campaign on female veterans – we also served'?</i>
	<i>4. Sexually Inappropriate Behaviour.....</i>	<i>More specific services for women who have faced these issues. Awareness raising to reduce stigma and shame</i>	<i>Build on best practice i.e. Salute Her Lobby for MOD to make change in service</i>
	<i>5. Mental Health</i>	<i>Easier access to services Education on the needs of female veterans within mental health services</i>	<i>Campaign on the needs of female veterans across ALL services</i>
	<i>6. Identity and recognition</i>	<i>More women to understand what's available to them More women to be recognised and celebrated as veterans</i>	<i>Awareness raising campaign on female veterans – we also served'?</i>
1820	Final summary and Q&A – what happens next?		
1830	Close		

Focus groups will ideally be approximately 15-20 people (apart from online).

### **Pulling it all together and feedback**

Once all the focus groups are completed and feedback received, we will compile a report that highlights the key messages and actions that have come out of this phase. We will make sure the report is available on the FVTP website and will also develop an infographic which simplifies the key

messages and what we will do about them i.e. a 'You said, we did' overview. It is hoped that this will ensure people trust the process and what we will do with the information they have provided us with. We want people to understand the importance of their input.