Recent research on outcomes for junior armed forces entrants: A response

Two studies investigating mental health outcomes of ‘junior entrants’ to the armed forces (those who enlist under the age of 17.5) were published in the British Medical Journal in April 2021. The studies, by King’s Centre for Military Health Research (KCMHR) and the University of Glasgow, have been reported in the press as having found ‘little evidence that early recruitment to the armed forces is associated with an adverse impact on long-term mental health’. CRIN will be submitting a formal response to these studies to the BMJ, and writing to the authors.

The findings

The KCMHR study was based on a sample of military personnel and veterans who started service between 1960 and 2012. Across the cohort as a whole, the study found that junior entrants were no more likely than older entrants to suffer from stress-related mental health problems such as PTSD and anxiety/depression. However, junior entrants who began their adult service in 2003 or later were significantly more likely than older entrants to suffer from certain stress-related mental health problems. Specifically, this group had ‘twice the odds of alcohol misuse and twice the odds of reporting episodes of lifetime self-harm’. The study’s data also suggest that PTSD and anxiety/depression were more common among this group, but this finding fell short of statistical significance.

The Glasgow study was based on a large cohort of veterans born between 1945 and 1995, matched with non-veterans of the same age, sex and postcode district. While the study found that junior entrants were at a slightly lower risk of a mental health disorder than older entrants, it also found that they were at a higher risk than non-veterans of the same demographic. This disparity has widened in recent times. For the most recent period examined by the study – corresponding approximately with major deployments in Bosnia, Kosovo, Afghanistan, and Iraq – the study found that junior entrants were substantially more likely than non-veterans of the same age and socio-economic background to develop a mental health disorder, and had between two and three times the odds of PTSD in particular.

Between them, the two studies found that junior entrants who began their service in the last two to three decades were substantially more likely than older entrants (KCMHR study) and non-veterans (Glasgow study) to suffer negative mental health outcomes. These personnel were enlisted during an era of multiple major deployments to war zones. The studies’ findings for this recent period have clear relevance for an assessment of the current recruitment policy.

Methodological issues

Personnel who have longer than average careers and personnel who have been promoted to higher ranks appear to be overrepresented in sample of the KCMHR study. Given that other work by KCMHR has found that personnel who leave in their first four years (‘early service leavers’) face a substantially elevated risk of stress-related mental health problems, their apparent underrepresentation in the sample is likely to skew the findings of the study. Around one in three junior entrants to the army, compared to one in four adult entrants, leave before completing their basic training.

Conclusion

- Contrary to the authors’ conclusions and subsequent media reporting, these studies support concerns that early enlistment to the armed forces in recent decades is associated with a marked, adverse impact on mental health.
- Of particular concern is KCMHR’s finding that junior entrants since 2003 have been around twice as likely as older entrants to suffer from alcohol misuse and self-harm, and the Glasgow study’s finding that junior entrants around the same time have been between two and three times as likely as non-veterans to present at hospital with PTSD.
- Methodological limitations of the KCMHR study are likely to have led to an underestimation of the prevalence of adverse mental health outcomes, especially among junior entrants.
Appendix

The following two charts reproduce data from the two studies to show the mental health risks of joining the armed as a junior entrant (yellow) in recent times, relative to non-veterans and older entrants.

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1 M Jones et al., ‘Do Junior Entrants to the UK Armed Forces have worse outcomes than Standard Entrants’, BMJ Military Health (Early Epub release 20 April 2021); BP Bergman et al., ‘Age at entry to UK military service and long-term mental health’, BMH Military Health (Early Epub release 20 April 2021).

2 Lucinda Cameron, ‘Joining the army before turning 18 “does not increase the risk of PTSD”’, The Times, 21 April 2021, https://www.thetimes.co.uk/article/joining-army-before-turning-18-does-not-increase-the-risk-of-ptsd-l0wttfzq5


4 The most recent group of veterans for which statistically significant data were presented were those born between 1975 and 1984. Veterans born between 1985 and 1994 were also included in the sample, but there were insufficient numbers to present a statistically significant finding about this group.


6 In the three-year period 2015–16 to 2017–18, the army enlisted 5,280 recruits aged under 18, of whom 1,580 (30.0%) dropped out before completing their Phase 2 training, and 16,880 adult recruits, of whom 3,820 (22.6%) dropped out. Calculated from MoD, Biannual diversity statistics, 2020, https://www.gov.uk/government/statistics//uk-armed-forces-biannual-diversity-statistics-2020; and Ministerial answer to Parliamentary Question no. 103588, 14 October 2020, https://questions-statements.parliament.uk/written-questions/detail/2020-10-14/103588. (Note: figures from 2018–19 have been excluded since some recruits who enlisted during that year had not completed their training at the time the drop-out statistics were generated.)