Office for National Statistics

Article

# UK armed forces veterans, health and unpaid care, England and Wales: Census 2021

UK armed forces veterans and their family members, from Census 2021. Data include self-reported general health, disability and unpaid care by personal characteristics.

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# 1 . Main points

- The proportion of disabled veterans was larger than the proportion of non-veterans (32.1% compared with 19.6%), this difference became smaller but remained when we took age, sex and regional differences between the two groups into account (32.1% compared with 30.0%).

- Among those born in "Ireland", "other Commonwealth countries" or "British Overseas Territories", the percentage of disabled veterans became notably lower than disabled non-veterans after accounting for differences in age, sex and regional distribution between veterans and non-veterans.

- The proportion of disabled veterans was smaller than the proportion of non-veterans in all except the "White" and "Mixed or Multiple" ethnic groups, after accounting for differences in age, sex and regional distribution between veterans and non-veterans.

- A greater proportion of veterans than non-veterans who identified as gay or lesbian, bisexual, or another minority sexual orientation said their health was bad or very bad and were disabled; these differences could only be partly accounted for by age, sex or location factors, but did become smaller once these factors had been accounted for.

- A higher proportion of veterans than non-veterans aged 70 years and over provided unpaid care, and the greatest difference was between veterans and non-veterans aged 85 to 89 years (12.8% compared with 7.2%, or 10.2% after adjustments).

- Among spouses or partners who lived with a veteran, 26.1% were disabled and 18.9% provided unpaid care; 11.4% of children or stepchildren (of any age) who lived with a veteran were disabled and 8.0% provided unpaid care.

# 2 . Veterans and non-veterans

People who have previously served in the regular or reserve UK armed forces are often known as veterans. In this article we refer to usual residents aged 16 years and over who have served in the UK armed forces as the veteran population. The non-veteran population in this article refers to usual residents in England and Wales aged 16 years and over who have not previously served, or are still currently serving, in the UK armed forces.

We have not directly measured uncertainty of the estimates as part of this analysis. We would expect uncertainty to be small given the nature of the census and associated published confidence intervals for Census 2021. However, some caution is advised in inferring genuine differences in estimates based on small variations in proportions. Unless otherwise stated, patterns for England and Wales are similar to that for England and Wales together.

# 3 . Statistical adjustments: comparing the health, disability and unpaid carer status of veterans with non-veterans

Census 2021 asked people about their general health. As reported in our Characteristics of UK armed forces veterans, England and Wales: Census 2021 article, 64.4% of veterans reported their general health to be good or very good, 24.2% fair, and 11.4% bad or very bad. As expected, this varied by age.

**Figure 1: Within the veteran population, very good health decreased and bad or very bad health increased with age**

**Percentage of UK armed forces veterans by general health and age group, England and Wales, Census 2021**

Given that almost one-third of veterans were aged 80 years and over, compared with 5.1% in the non-veteran population (as reported in our [Characteristics of UK armed forces veterans, England and Wales: Census 2021 article](#)), we use statistical adjustments throughout this article when comparing veterans and non-veterans.

We only publish non-adjusted estimates for the veteran population. This is because unadjusted information about armed forces veterans is important for government, local authorities, the NHS and organisations in the voluntary sector that provide services for veterans.

Veterans identified in Census 2021 were not only older than non-veterans, but a higher proportion were also male, and veterans were more likely to live in certain areas. Health is associated with age and is also known to be connected with other factors such as sex and levels of deprivation. It is important to take this into account when comparing veterans with non-veterans.

For the remainder of this article, we provide both unadjusted and adjusted estimates for the non-veteran population.

## Unadjusted estimates

These estimates show what differences exist between veterans and non-veterans.

## Adjusted estimates

The adjusted estimates make the non-veteran population comparable with the veteran population by age, sex and region. These estimates show what, if any, difference would exist between veterans and non-veterans if the two populations had the same age, sex and regional distribution. This helps us to understand where differences between veterans and non-veterans are likely to be attributable to age and sex or location.

Read about our adjusted estimates and the differing structure of the UK armed forces veterans and non-veteran population in our [Characteristics of UK armed forces veterans England and Wales: Census 2021 article](#).

The adjustments provided throughout this article are for comparing veterans and non-veterans. Since veteran numbers are unadjusted these data cannot be used to compare the health and disability of veterans across geographies or between personal characteristics; age standardisation (applied to the veteran population) would be required to support these types of comparisons. Factors such as length of service or operational deployment may be related to health and the prevalence of disability within the veteran population, however these data were not collected in Census 2021.

Read more about general health in [Section 10: Glossary](#).

# 4 . Self-reported general health: veterans compared with non-veterans by personal characteristics

## Ethnic group

This analysis considers five high-level ethnic groups, more detailed analysis by ethnicity and health is not feasible because of small numbers of veterans in some groups. However, we know there is interesting variability within these high-level ethnic groups. More information can be found in our [Protected characteristics by disability status, England and Wales: Census 2021 article](#).

Veterans were more likely than non-veterans to report bad or very bad general health within all ethnic group categories. Following adjustments to account for differences between veterans and non-veterans in relation to age, sex and location, we see similar values for veterans and non-veterans in the "White" and "Mixed or Multiple" ethnic groups. This suggests the differences observed in these ethnic groups could be explained by age, sex and location.

**Figure 2: After adjustments, veterans identifying as "Asian, Asian British or Asian Welsh", "Black, Black British, Black Welsh, Caribbean or African" or "Other ethnic group" were less likely to report bad or very bad health than non-veterans**

**Percentage of UK armed forces veterans and non-veterans by high-level ethnic group who reported their general health as bad or very bad, with adjusted estimates for the non-veteran population, Census 2021**

Health is related to age, but other factors associated with age may also account for differences between the reported health of veterans and non-veterans within ethnic groups. These may include UK armed forces health and fitness recruitment standards, service length and experience, the propensity of different groups to join the UK armed forces and how that may relate to socio-economic backgrounds.

## Country of birth

The census asked people in which country they were born. This is different from nationality, for example, some British citizens are born in other parts of the world. However, we would still expect certain patterns for veterans in country of birth data based on entry requirements to join the UK armed forces. Over time these have included a requirement to be a British, Irish or Commonwealth citizen, with people from Nepal able to serve as Gurkhas under special and historical arrangements. We have grouped countries accordingly.

**Figure 3: After adjustments, a smaller proportion of veterans than non-veterans born in different countries reported bad or very bad health, except for those born in a UK country or Nepal**

**Percentage of UK armed forces veterans and non-veterans by country of birth who reported their general health as bad or very bad, with adjusted estimates for the non-veteran population, England and Wales, Census 2021**

The proportion of veterans who reported bad or very bad health was higher than non-veterans for all country of birth groupings. Following adjustments, these findings were reversed for most groupings, as shown in Figure 3, with two exceptions. Similar proportions of veterans and non-veterans born in the UK reported bad or very bad health after adjustments.

Differences between veterans and non-veterans born in Nepal who reported bad or very bad health decreased but remained after accounting for differences in age, sex and location between veterans and non-veterans (4.5% compared with 2.4%). We would not expect differences between veterans and non-veterans born in Nepal to be fully accounted for by our adjustments because the non-veteran population that were born in Nepal have a different age profile to other non-veteran populations. They may also have unique properties we cannot measure with this analysis.

Census data do not enable us to understand length of service, experiences in service or the propensity of non-UK born personnel to remain in England and Wales by health status.

## Sexual orientation

Following adjustments to account for differences in age, sex and regional distribution, there were no notable differences in general health between veterans and non-veterans who identified as straight or heterosexual. A higher proportion of veterans than non-veterans reported bad or very bad health when considering all other sexual orientation categories; 10.6% compared with 8.6% among those identifying as gay or lesbian, 11.9% compared with 10.5% among those identifying as bisexual, and 16.3% compared with 12.6% among those who identified as another minority sexual orientation.

Read more about countries of birth and sexual orientation in Section 10: Glossary.

# 5 . Disability: veterans compared with non-veterans by personal characteristics

Census 2021 asked:

"Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?"

If they answered "yes", a further question was asked:

"Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?"

The response options were:

- "yes, a lot"; referred to here as limited a lot

- "yes, a little"; referred to here as limited a little

- "not at all"

In line with the Equality Act (2010), people who assessed their day-to-day activities as limited by long-term physical or mental health conditions or illnesses were considered disabled. Those who stated that they had a condition that did not limit their day-to-day activities or had no condition, were considered non-disabled.

The proportion of disabled veterans was larger than the proportion of non-veterans. This difference became smaller but remained when we took age, sex and location differences between the two groups into account (32.1% compared with 30.0%).

## Figure 4: Age, sex and regional differences between veterans and non-veterans partly explained their differences in disability status

**Percentage of UK armed forces veterans and non-veterans by disability, with adjusted estimates for the non-veteran population, England and Wales, Census 2021**

## Ethnic group

Within each high-level ethnic group, the proportion of disabled veterans was greater than disabled non-veterans. When we took differences in sex, age and region between veterans and non-veterans into account, findings were consistent with those on general health.

## Figure 5: Following adjustments, the proportion of disabled veterans became smaller than the proportion of disabled non-veterans in all but the "White" and "Mixed or Multiple" ethnic groups

**Percentage of disabled UK armed forces veterans and disabled non-veterans by high-level ethnic group, with adjusted estimates for the non-veteran population, England and Wales, Census 2021**

Though there were similar patterns for Wales as for England and Wales combined for other personal characteristics by disability, it was only among those who identified in the high-level "Asian, Asian Welsh" ethnic group that veterans were less likely to be disabled. The reverse was true for those identifying in each of the other four high-level ethnic groups. This may reflect the fact that there were a very small number of disabled veterans in some ethnic groups. Data are available in our accompanying dataset.

## Country of birth

When we explored disability by country of birth, for each country grouping, the proportion of disabled veterans was higher than the proportion of disabled non-veterans until we assumed the same sex, age and regional profile for veterans and non-veterans. Following these adjustments:

- among those born in the UK or "all other countries", proportions of disabled people in veteran and non-veteran populations were similar, suggesting some differences could be explained by age, sex and location

- among those born in Ireland, "other Commonwealth countries", or British Overseas Territories, the percentage of disabled veterans was lower than disabled non-veterans

- among those born in Nepal, differences remained, and a higher proportion of veterans were disabled than non-veterans (12.5% compared with 7.4%)

This is similar to our findings for reported bad health. We would not expect differences between veterans and non-veterans born in Nepal to be fully accounted for by our adjustments, because the non-veteran population that were born in Nepal have a different age profile to other non-veteran populations. They may also have unique properties which we cannot measure with this analysis. Census data do not enable us to understand length of service, experiences in service or the propensity of non-UK born personnel to remain in England and Wales with and without disability.

**Figure 6: After adjustments, the proportions of disabled veterans became similar to, or lower than, disabled non-veterans in most country of birth groupings**

**Percentage of disabled UK armed forces veterans and disabled non-veterans by country of birth, with adjusted estimates for the non-veteran population, England and Wales, Census 2021**

## Sexual orientation

When we accounted for age, sex and regional differences between veterans and non-veterans, veterans and non-veterans that identified as straight or heterosexual were similar in relation to disability status. A higher proportion of veterans than non-veterans were disabled when considering all other sexual orientations; 30.2% compared with 26.6% among those identifying as gay or lesbian, 36.3% compared with 34.7% among those identifying as bisexual, and 37.3% compared with 34.7% among those who identified as another minority sexual orientation.

# 6 . Unpaid care: veterans compared with non-veterans by personal characteristics

Census 2021 included questions to understand if someone was an unpaid carer. The census was conducted during the coronavirus (COVID-19) pandemic, and this may affect unpaid care data as outlined in our Unpaid care by age, sex and deprivation, England and Wales: Census 2021 article.

Following adjustments, veterans and non-veterans were similar regarding provision of unpaid care (11.6% compared with 10.6%). This suggests some, but not all, of the differences between the two groups could be accounted for by age, sex and location differences.

Within age groups, differences in the provision of unpaid care between the two populations generally became smaller following adjustments to the non-veteran data, although some differences remained or increased. The greatest differences were between veterans and non-veterans aged 70 years and over.

**Figure 7: Before and after adjustments, veterans aged 70 years and over were more likely than non-veterans to provide unpaid care**

**Percentage of UK armed forces veterans and non-veterans who provided unpaid care by age group, with adjusted estimates for the non-veteran population, England and Wales, Census 2021**

## Ethnic group

Within each high-level ethnic group, overall, a slightly higher proportion of veterans than non-veterans provided unpaid care. When we accounted for age, sex and regional differences between veterans and non-veterans, some differences remained. The greatest difference was within the "Mixed or Multiple ethnic groups" category, where 11.3% of veterans and 9.6% of non-veterans provided unpaid care.

For most ethnic groups, findings varied when we considered the number of hours of unpaid care provided, as can be seen in Figure 8.

**Figure 8: Following adjustments, a higher proportion of veterans identifying within the "Mixed or Multiple" ethnic group provided 19 hours or less and 20 hours or more unpaid care than non-veterans**

**Percentage of UK armed forces veterans and non-veterans who provided unpaid care by high-level ethnic group and number of unpaid care hours provided per week, with adjusted estimates for the non-veteran population, England and Wales, Census 2021**

## Country of birth

When we explored unpaid carer status by country of birth, we found that after adjustments, the proportions of veterans and non-veterans providing unpaid care were typically similar. A notable difference remained within the "all other countries" group, in which veterans were more likely than non-veterans to provide unpaid care (9.0% compared with 6.3%).

## Sexual orientation

In England and Wales, a higher proportion of veterans than non-veterans provided unpaid care within each of the sexual orientation categories. Following adjustments, these differences became smaller but remained in each category.

Country and NHS region-level data for general health, disability and unpaid care by personal characteristics are available in our accompanying datasets. We also publish country-level data which relate to how veterans and non-veterans compare on the health and disability dimension of the English Index of Multiple Deprivation (IMD) 2019 and the health dimension of the Welsh Index of Multiple Deprivation (WIMD) 2019 for those veterans and non-veterans where data were available. The data can be used to compare veteran and non-veteran populations within geographies but cannot be used to compare across countries or regions.

Read more about unpaid carers in Section 10: Glossary.

# 7 . Spouses, partners, children and stepchildren that lived with veterans by general health, disability and unpaid carer status

The analysis of spouses or partners and children or stepchildren includes only usual residents that lived in the same household as a veteran. Information on the personal characteristics of spouses or partners and children or stepchildren of veterans can be found in our Living arrangements of UK armed forces veterans article.

Here we consider health, disability and unpaid carer status, factors known to be related to age. This analysis allows us to understand the overall health, disability and unpaid carer status of these populations in England and Wales. These data are not age standardised and should not be used to compare spouses or partners and children or stepchildren by different geographies or countries, without considering the age distributions of these populations within those geographies. Age breakdowns are available in our accompanying datasets.

## Health and disability

The majority of the just over 1.2 million spouses or partners reported very good (31.6%) or good (40.1%) health. One fifth of spouses or partners reported fair health (20.3%), and 6.3% reported bad health, with the remaining 1.8% reporting very bad health.

Of the children or stepchildren (just over 750,000) of veterans, 72.0% reported their health as very good, 21.1% as good, and 5.1% as fair. Of the remainder, 1.4% described their health as bad and 0.4% as very bad.

The proportion of disabled spouses or partners of veterans was 26.1%. Of the children and stepchildren of veterans identified, 11.4% were disabled.

As expected both health and disability for spouses or partners and children or stepchildren varied by age.

**Figure 9: Almost 1 in 4 children or stepchildren aged 45 years or older and 3 in 10 spouses or partners aged 45 years or older were disabled**

**Percentage of disabled spouses or partners and disabled children or stepchildren of a UK armed forces veteran and who lived in the same household as a veteran by age groups, England and Wales, Census 2021**

## Unpaid care

Overall, 18.9% of spouses or partners provided unpaid care. While these were spouses or partners of veterans who lived in the same household, we do not know if the unpaid care was provided for the veteran in the household, another person within the household, or for someone outside of the household.

The Census 2021 question about unpaid care was not asked of children aged 4 years and under, analysis considering children and stepchildren included those aged 5 years and over.

Of the children and stepchildren who lived in the same household as a veteran, 8.0% provided unpaid care.

The proportion of spouses or partners and children or stepchildren that lived with a veteran and provided unpaid care increased with age.

**Figure 10: 7 in 10 children or stepchildren aged 65 years or over that lived with a veteran parent provided unpaid care, as did 2 in 10 spouses or partners aged 65 years or over**

**Percentage of spouses or partners and children or stepchildren of a UK armed forces veteran and who lived in the same household as a veteran, who provided unpaid care by age groups, England and Wales, Census 2021**

Our datasets provide information about the general health, disability and unpaid carer status of spouses or partners and children or stepchildren that lived in a household with a veteran. These data are provided by age and sex.

# 8 . Future publications

You can find out more information on our [UK armed forces veterans analysis plans](#) and the [release plans for Census 2021](#) more generally on our website.

# 9 . UK armed forces veterans, England and Wales data

[UK armed forces veterans: health and unpaid care, England and Wales](#)
Dataset | Released 9 November 2023
Health, disability and unpaid care by veteran status and personal characteristics, with adjusted estimates for the non-veteran population, usual residents aged 16 years and over, Census 2021.

[Spouses and children or stepchildren of UK armed forces veterans: health and unpaid care, England and Wales](#)
Dataset | Released 9 November 2023
Spouses or partners and children or stepchildren who lived in the same household as a veteran by health, disability and unpaid care, household residents, Census 2021.

[UK armed forces veterans: health and unpaid care, NHS regions of England and Wales](#)
Dataset | Released 9 November 2023
Health, disability and unpaid care by veteran status and personal characteristics, with adjusted estimates for the non-veteran population, usual residents aged 16 years and over, Census 2021.

[Spouses and children or stepchildren of UK armed forces veterans: health and unpaid care, NHS regions of England and Wales](#)
Dataset | Released 9 November 2023
Spouses or partners and children or stepchildren who lived in the same household as a veteran by health, disability and unpaid care, household residents, Census 2021.

[Create a custom dataset](#)
Interactive content | Released 28 March 2023
Flexible datasets where you can choose and change the area type, coverage and variables for Census 2021, and create custom datasets yourself.

# 10 . Glossary

## Country of birth

The country in which a person was born. For people not born in one of the four parts of the UK, there was an option to select "elsewhere". People who selected "elsewhere" were asked to write in the current name for their country of birth.

For this analysis on veterans and in relation to entry requirements to the UK armed forces, we have grouped countries into the following categories: "UK countries", "Ireland", "other Commonwealth countries", "Nepal", "British Overseas Territories" and "all other countries".

## Disability

People who assessed their day-to-day activities as limited by long-term physical or mental health conditions or illnesses are considered disabled.

This definition of a disabled person meets the harmonised standard for measuring disability and is in line with the [Equality Act (2010)](#).

Census 2021 asked the question "Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?" If respondents answered yes, a further question was asked to identify the extent to which any conditions or illnesses reduced a person's ability to carry out day-to-day activities.

## Ethnic group and high-level ethnic group

The ethnic group that the person completing the census feels they belong to. This could be based on their culture, family background, identity or physical appearance.

Respondents could choose 1 out of 19 tick-box response categories, including write-in response options. High-level ethnic group refers to the first stage of the two-stage ethnic group question.

High-level groups refer to the first stage where the respondent identifies through one of the following options:

- "Asian, Asian British, Asian Welsh"

- "Black, Black British, Black Welsh, Caribbean or African"

- "Mixed or Multiple"

- "White"

- "Other ethnic group"

## General health

On Census Day (21 March 2021), people were asked "How is your health in general?" The response options were "very good", "good", "fair", "bad", or "very bad". This assessment is not based on a person's health over any specified period of time.

## Provision of unpaid care

An unpaid carer may look after, give help or support to anyone who has long-term physical or mental ill-health conditions, illness or problems related to old age. This help can be within or outside of the carer's household.

This does not include any activities as part of paid employment.

To identify people who provided unpaid care, Census 2021 asked the question "Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?"

## Sexual orientation

Sexual orientation is a term covering sexual identity, attraction, and behaviour. For an individual respondent, these may not be the same. For example, someone in an opposite-sex relationship may also experience same-sex attraction, and vice versa. This means the statistics should be interpreted purely as showing how people responded to the question, rather than being about whom they are attracted to or their actual relationships.

In Census 2021, a voluntary question was asked about sexual orientation, which 92.8% of UK armed forces veterans answered.

## UK armed forces veteran

People who have previously served in the UK armed forces. This includes those who have served for at least one day in HM's Armed Forces, either regular or reserves, or Merchant Mariners who have seen duty on legally defined military operations. It does not include those who have left and since re-entered the regular or reserve UK armed forces, those who have only served in foreign armed forces, or those who have served in the UK armed forces and are currently living outside of England and Wales.

## Usual resident

A usual resident is anyone who on Census Day was in the UK and had stayed or intended to stay in the UK for a period of 12 months or more, or had a permanent UK address and was outside the UK and intended to be outside the UK for less than 12 months.

# 11 . Data sources and quality

Census 2021 provides the most detailed picture of the entire population, with the same core questions asked to everybody across England and Wales. Census results can be more reliable than survey results based on a sample of the population, because the whole population is included. The UK Statistics Authority has assigned National Statistics status to Census 2021 outputs, providing assurance that these statistics are of the highest quality and value to users.

Census 2021 achieved a very high response rate of 97%. Item non-response rates can also be found in our Measures showing the quality of Census 2021 estimates methodology. We ensure that census results reflect the whole population by using statistical methods to estimate the number and characteristics of people who were not recorded on a census response. This means that census statistics are estimates rather than simple counts of responses, so they have some statistical uncertainty associated with them. We take numerous steps to minimise possible sources of error.

Additionally, we apply statistical disclosure control to protect the confidentiality of census respondents. Differences in the methods used for statistical disclosure control may result in minor differences in data totals between census products. All counts in this article have been rounded to the nearest five.

Census 2021 asked the question about previous service in the UK armed forces for the first time. The Ministry of Defence previously published estimates in the Census 2011: Working age UK armed forces veterans residing in England and Wales bulletin that relate to the working age veteran population and are not directly comparable. As expected and in line with mortality data, Census 2021 estimates for UK armed forces veterans in older age groups are lower than estimates derived in 2017 derived using the Annual Population Survey.

We are working to understand how differences in the UK censuses affect our ability to produce harmonised statistics on UK armed forces veterans across England, Wales, Scotland and Northern Ireland. A question relating to previous service in the UK armed forces was asked on the 2022 Census in Scotland. The census in Northern Ireland did not ask a question about previous service in the UK armed forces, but the Northern Ireland Statistics and Research Agency are exploring administrative sources to understand their veteran population. An estimate for Great Britain may be produced with the relevant caveats.

## Quality

Quality considerations along with the strengths and limitations of Census 2021 more generally are provided in our Quality and Methodology Information (QMI) for Census 2021. More information about the specific quality considerations for UK armed forces veterans can be found in our UK armed forces veterans quality information for Census 2021 methodology.

Further information on our quality assurance processes is provided in our Maximising the quality of Census 2021 population estimates report.

We have not directly measured uncertainty of the estimates as part of this analysis. We would expect uncertainty to be small given the nature of census and associated published confidence intervals for Census 2021. However, some caution is advised in inferring genuine differences in estimates based on small variations in proportions.

# 12 . Related links

[UK armed forces veterans, England and Wales: Census 2021](#)
Statistical bulletin | Released 10 November 2022
UK armed forces veteran population who have either previously served in the regular forces, reserve forces or both, Census 2021 data.

[UK armed forces veterans in Wales (Census 2021)](#)
Statistical bulletin | Released 10 November 2022
Census 2021 data about UK Armed Forces veterans in Wales.

[UK armed forces veterans quality information for Census 2021](#)
Methodology | Released 10 November 2022
Quality information about the UK armed forces veterans data from Census 2021 in England and Wales to help users correctly interpret them.

[Census 2021 dictionary](#)
Methodology | Released 10 November 2022
Definitions, variables and classifications to help when using Census 2021 data.

[Armed forces community (veterans) question development for Census 2021](#)
Methodology | Released 27 January 2021
Information on how we researched, developed, and tested the Census 2021 question on the armed forces veterans community, including extra detail on the definitions of important terms.

[Harmonised standard for previous UK armed forces service](#)
Methodology | Released 16 March 2022
Detail on how the measurement of previous UK armed forces service has been made more comparable, consistent, and coherent.

# 13 . Cite this article

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