

Motion for Time Limited Debate: Veterans as a Strategic Reserve for Community Resilience

Proposer: Mr Richard Streatfeild, MBE

Seconder: Mr Antony Hook

Motion

This County Council resolves to:

1. Recommend that the Executive establish a Veterans Community Resilience Task and Finish Group to examine and identify the responsibilities the Council will have under the upcoming Armed Forces Bill and request the outcomes of this to be reported to the Policy and Resources Cabinet Committee.
2. Request that the Executive works with the Health and Wellbeing Board to explore and develop appropriate workstreams to better tackle veteran related health inequality, in line with the Armed Forces Covenant commitments to ensure that veterans and serving personnel are not disadvantaged in accessing health and relevant support services.
3. Request that the Kent & Medway Civilian-Military Partnership Board (KMCMPB), working with relevant partners, map the skills, experience and interests of veterans locally and identify practical ways in which veterans can contribute to domestic resilience, including emergency preparedness, community response, recovery support, mentoring, youth engagement, neighbourhood resilience, volunteering and civic leadership.
4. Encourage the Executive and relevant services to work with the Integrated Care Board, NHS partners, primary care, veterans' charities and local voluntary organisations to review and, where appropriate, strengthen pathways for veterans into physical health support, mental health and wellbeing services, suicide prevention and postvention support, rehabilitation, social prescribing, employment assistance and peer support.
5. Recommend that the Deputy Leader, works with partners across the Kent and Medway Resilience Forum to explore the development of a local Veterans Community Resilience Framework setting out how veterans can be brought together, supported and enabled to contribute safely and appropriately to local resilience activity, without replacing statutory emergency services or professional responders.
6. Recommend that the Deputy Leader explore the establishment of annual Veteran Community Resilience Days across the authority area, bringing together veterans, reservists, former regular personnel with Reserve Liability, emergency services, employers, cadet forces, community groups and local residents.

7. Ensure that the above referenced Veteran Community Resilience Days are designed to promote wellbeing and social connection; raise awareness of support services; encourage volunteering and civic participation; celebrate military service and local heritage; maintain bonds of comradeship and esprit de corps; and support pathways into Reserve service, mentoring, community leadership and resilience activity where appropriate.
8. Note the work already completed by the Kent & Medway Civilian-Military Partnership Board to identify veterans who may be isolated, under-supported, or facing service-related health needs, and request the KMCMPB, via its Health and Wellbeing Task Group, explore any connection between veteran deaths and military service to help inform the development of improved support options.
9. Encourage the Executive and relevant services to work with Kent-based Gurkha veterans, Gurkha community organisations and the Gurkha Welfare Trust, building on the established KCC commitments to support veterans under the Armed Forces Covenant, to identify the needs, strengths and contribution of Gurkha veterans and their families in Kent; improve culturally competent signposting into welfare, housing, health, benefits, translation, employment and social support; and ensure that Gurkha veterans are actively included in Armed Forces Covenant delivery, community resilience planning and local commemorative and civic activity.
10. Encourage the Executive and relevant services to work with Royal British Veterans Enterprise (RBVE) in Aylesford, recognising its long-standing work supporting veterans and their families through welfare provision, housing, employment, training, volunteering and community-building; and explore practical partnerships to strengthen referral pathways, employment support, skills development, supported accommodation links and opportunities for veterans to move towards independent living, purposeful activity and sustained work.
11. Request that progress on the above recommendations, in addition to any other Committee reporting on portfolio specific elements, is reported back to Full Council within twelve months as part of the Armed Forces Covenant reporting.

Background Information provided by the Liberal Democrat Group:

The Government's guidance on Health and Wellbeing Boards emphasises their role in assessing local health needs, reducing health inequalities, promoting partnership working, and shaping Joint Strategic Needs Assessments and Joint Local Health and Wellbeing Strategies. In parallel, the Armed Forces Covenant recognises that those who serve or have served in the Armed Forces, together with their families, should face no disadvantage compared with other citizens, while acknowledging that special consideration may be appropriate for those who have given most, including the injured and bereaved.

Veterans are not only a group who may require support; they are also a significant civic asset. They bring leadership, discipline, practical skills, operational experience, teamwork

and a strong ethos of public service into local communities. Many former members of the Armed Forces also continue to hold a statutory Reserve Liability after Regular Service, maintaining an enduring connection with national defence and the wider Armed Forces community.

At a time when domestic resilience increasingly depends on strong local networks, trusted volunteers, practical skills, public confidence, neighbourhood cohesion and the ability to mobilise community capacity during disruption or emergency, veterans have a valuable contribution to make. Their experience, values and sense of service can help strengthen local preparedness, response and recovery arrangements, while also supporting more connected and resilient communities.

Simultaneously, some veterans experience physical injury, mental health challenges, social isolation, bereavement, difficulties with transition, or barriers to employment and civic participation arising from, or connected with, their service. Early intervention, peer support, purposeful activity, social connection and clear routes into health, wellbeing and community services can help veterans participate fully in civilian life while continuing to contribute positively to society and local resilience.

The Liberal Democrat Group believes that veterans should be recognised as a strategic reserve within our communities: a pool of people whose experience, skills and values can strengthen local preparedness, response, recovery and community cohesion. To unlock that contribution, local authorities and partner organisations must actively bring veterans together, reduce isolation and create trusted pathways into peer support, volunteering, mentoring, emergency preparedness and civic leadership. Community resilience should therefore not treat veterans merely as recipients of support, but as active partners in building safer, stronger and more connected communities.

The Liberal Democrat Group further believes that where veterans face physical or mental health issues arising from service, the Council and its partners should help remove barriers to participation by improving signposting, referral pathways and coordination between health, housing, employment, welfare and voluntary sector support. Suicide prevention among veterans is inseparable from purposeful connection, early support, accessible mental health services, strong peer networks and opportunities to continue serving the public good. The period following discharge from Regular Service, including any period of Reserve Liability, also represents an important opportunity to maintain contact, promote wellbeing and support veterans into constructive local roles that benefit both the individual and the wider community.