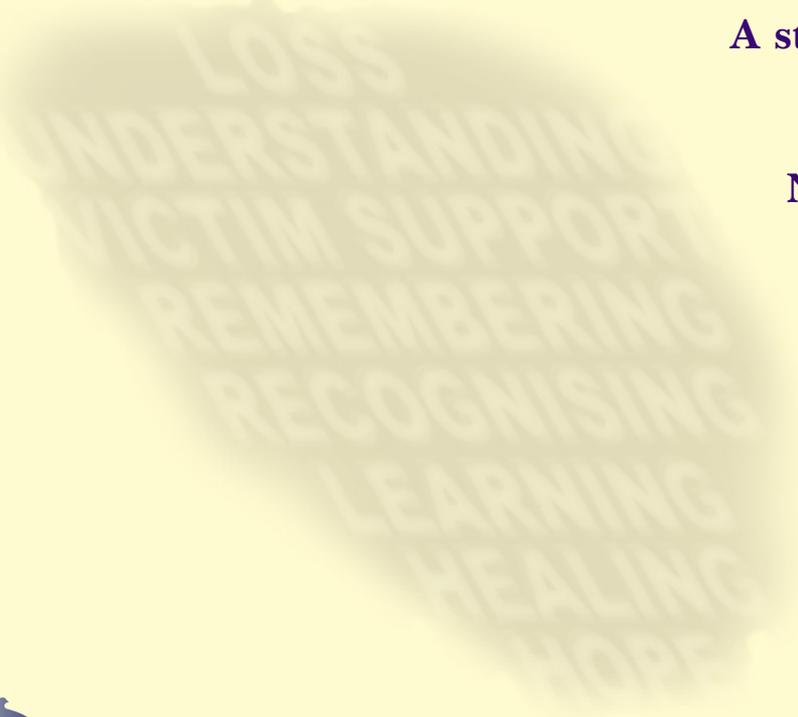




# The Legacy

A study of the needs of  
GB Victims and  
Survivors of the  
Northern Ireland  
'Troubles'



# The Legacy:

A study of the needs of GB Victims and Survivors of the Northern Ireland 'Troubles'

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The Legacy: A study of the needs of GB Victims & Survivors of the Northern Ireland 'Troubles'.

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## Foreword



My first visit to Northern Ireland took place over forty years ago. I went with some apprehension as I was going to meet the family of my girl friend for the first time. My fears were soon dispelled as I was warmly welcomed and quickly discovered a community with strong family values and genuine good nature. Soon afterwards Frances and I were married in Belfast and thus began a personal association with Ireland that has lasted across three generations or more.

Back in England we watched with dismay as long standing grievances emerged and the country descended into bitter and bloody conflict. My wife constantly reminded me that it was only a minority of the population who actually engaged in violence; I was sure she was right. However violence spread its tentacles throughout the Nation until there was hardly a family in the land that did not suffer in some way or another as a result of it.

On frequent return visits to the Province I watched with alarm as I saw the centre of Belfast ringed with a tight security barrier. Mothers continued to take their children shopping in town at Christmas and other times but some of these youngsters were involved in horrific incidents and none of them could escape the daily reports on television and the radio. Guns, whether carried by the military or their opponents were becoming an all too familiar part of life.

Outside Northern Ireland families and communities were also impacted upon - those across in England Scotland and Wales. Although the scale is different, there are a significant number of people who have been affected by the 'Troubles', although these people didn't live through it in the same way as those in Northern Ireland did. The children I saw twenty or thirty years ago have lived their whole lives in the midst of threat and violence.

Individuals and families have been seriously hurt both physically and psychologically. Many of the children of those years are now grown with families of their own. They have had to find ways of dealing with the hurt they have experienced. Some have buried the memories deep down within. Some still hold smouldering resentments. Some have found that a constructive way forward is to acknowledge the past by relating their stories in such a way that injury may be recognised and true healing take place. Long experience in various conflict situations has shown that by recounting the past, with skilled help, individuals and communities can be enabled to take a vital first step towards total healing.

On a recent visit to Kosovo the head of the UN mission said something to me that has stuck in my mind. 'Given money', he said, 'it is relatively easy to rebuild roads and bridges. It is not so easy to rebuild damaged lives.'

That is so true. It is not only victims in Ireland and Britain that have been damaged by conflict. Victimisers have also been seriously affected. As the Country moves away from decades of violence it is vital that positive steps are taken to enable *all* those involved in the situation to deal with the past constructively and discover creative ways of living together. Modern society has the tendency to regard difference as being divisive. That need not be so. Difference can and ought to be creative and enriching. We should celebrate difference rather than allow it to dominate us in a negative way.

When this report first landed on my desk I wanted to put it to one side. "Yet another account of misery" I thought. When I got round to reading it I quickly realised that it contained some profound insights. In reporting the words of individuals it not only demonstrates the consequences of violence on individuals and society but also outlines the possible serious long-term effects. It shows, quite clearly, how violence affects the individual, physically, biologically and mentally. It goes on to suggest constructive ways forward.

Alas, we live in a world where violence is all too common. We all face suffering to a certain degree and clearly some people suffer more than others. If I have learnt one lesson in life it is this. In most cases suffering need not destroy. It has the power to destroy but we also have the power, individually and collectively, to turn it around and to use it constructively. Out of suffering a new creativity can emerge that will give energy and new life. This excellent report points the way and I commend it to you.

Terry Waite CBE.

## Acknowledgements

The Research Team would like to thank all those who helped with the report. First and foremost, those victims and survivors, exiles and Maranatha volunteers who gave us so much of themselves; the representatives of agencies and organisations in Northern Ireland and Great Britain who were interviewed and provided much background information.

The team would also like to thank all those who worked on all areas of Part 1 of the study: Jo Dover, Sarah Ford and Kerri Smallwood from the Tim Parry Johnathan Ball Trust; Steve Regel and Liz Jeffries from the Centre for Trauma Studies; David Rogers, Gary Brooks, Melanie McAdam, Martin Bartlett, Julie Dabell and Lou Woodward from Nottinghamshire Healthcare NHS Trust; Mick Gregson, Tony Holden and Ruth Goodfield of the Holden McAllister Partnership and Arlene Healey from the Family Trauma Centre, Belfast.

The team would like to thank all those who worked on Part 2 of the study: Andrew Robinson from Maranatha and Mick Gregson, Tony Holden and Ruth Goodfield from the Holden McAllister Partnership.

Another thank you goes to the Legacy Project Needs Analysis Working Group, for their dedication and hard work on the whole process of getting this report together, from the tendering stage right through to the publication of the report: Lynne McCadden, Maureen Hetherington, Jim O'Neill and Anne O'Connell (Victims Liaison Unit).

## Introduction to the Tim Parry Johnathan Ball Trust

**The Tim Parry Johnathan Ball Trust** is an educational peace charity set up by my wife Wendy and I following the death of our 12 year old son Tim and 3 year old Johnathan Ball after the IRA bombed Warrington in 1993. **The Peace Centre** in Warrington is a unique LIVING legacy and memorial to Tim and Johnathan. It was built with local, national and international support, and was opened on March 20, 2000 - the 7<sup>th</sup> anniversary of the bombing. It is a £3M state of the art, fully equipped learning centre where people develop a passion for peace through participating in our learning programmes. **'Children for Peace'** is our campaign name; a campaign that comprises of learning programmes designed to help young people understand, manage and resolve conflict.

Our programmes are:

- **The Tim Parry Scholarship** – a three-way (GB, ROI, NI) youth exchange programme to develop the leadership skills of 16-18 yr old 'high-achievers'. Participants develop awareness, understanding and skills to equip them as 'Ambassadors for Peace'.
- **Young Citizens At Peace** – similar to the Scholarship, but targeting disadvantaged young people from areas of deprivation, enabling them to contribute to 'grass roots' community cohesion.
- **Full On** – nationally accredited 'Citizenship and Conflict Resolution' educational courses including Anti-Bullying, Anger Management and Rights & Responsibilities. It targets socially excluded, disaffected young people and encourages their engagement with learning.
- **A Bit of Fun** – an anti-bullying programme for children aged 10-11 years. Using the media of drama and sport, the programme educates children about bullying, encouraging them to realise that conflict can be resolved successfully without resorting to violence or self harm.
- **The Johnathan Ball Tiny Steps for Peace Project** – a unique and innovative discrimination and violence prevention project working with 3-5 year olds and their parents, aimed at encouraging tolerance, friendships and acceptance of others as equals through family learning and play.

In its scope, **The Legacy Project** is the largest of the Trust's programmes and its results could well have an influence on future Government policy with regards to the needs of victims of the 'Troubles'. Given our own roots as victims of this conflict, I naturally feel an empathy with the views, opinions and the needs of all the people who have been consulted for this report. Furthermore, I sincerely hope that we are given long-term funding to proceed to find the many victims still out there who, as yet, remain voiceless.

### **Colin Parry**

Trust Chairman

**The Legacy Project** was established to identify and meet the needs of victims and survivors of the Northern Ireland 'Troubles' who live in Great Britain\*. As part of this programme, the Project appointed independent consultants to carry out a needs analysis. The Project is aimed at those individuals and communities affected by bereavement, injury or trauma that is directly related to the 'Troubles'. This includes former soldiers, victims of bombings in Great Britain, their families, bereaved families of soldiers killed in the conflict, those who worked to assist victims, e.g. emergency services staff and exiles - those forced into exile in GB as a result of paramilitary intimidation.

As work on the analysis developed, it became clear that the needs of exiles differed in many respects from the other target groups within the Project's remit. To respond to this difference, the report is in two parts. Part 1 examines the needs of victims/survivors from Great Britain and Part 2 examines the needs of exiles now resident in Great Britain.

### **Jo Dover**

Legacy Project Leader

\*Great Britain is taken to mean England, Scotland & Wales and the islands surrounding them.

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# Executive Summary: Part 1 - The Needs of GB Victims and Survivors

## Introduction

This report describes a Needs Analysis of victims of the Northern Ireland 'Troubles' who live in Great Britain. Funded by the Legacy Project of the Tim Parry Johnathan Ball Trust in Warrington, the aim of the research was to carry out an independent needs analysis of GB victims/survivors and advise on the options for the forward strategy for the Legacy Project and, where appropriate, to point to ways other agencies and policy makers might address the needs identified.

The death toll of GB residents resulting from the NI 'Troubles' is estimated at over 600. In Great Britain itself 125 deaths have occurred and there have been over 2000 injuries as a result of paramilitary activity. Many more people have been affected including relatives, friends and colleagues of the dead and injured, witnesses of incidents, those who have been psychologically affected, and members of the emergency services. Research in Northern Ireland on the impact of the 'Troubles' has highlighted the psychological impact of bombing and other stressors, highlighting the incidence of Post Traumatic Stress Disorder (PTSD) and other related psychiatric conditions such as anxiety and depression, but there has been no such analysis relating to GB victims.

A key aspect within the work was recognition of the need for proper consideration of, and appropriate response to, the ethical issues raised by a project of this type. This was ensured through piloting and by gaining clearance from the appropriate Research Ethics Committee within the NHS.

Legacy Project staff were involved as members of the research team and the research process which had the following elements:

- In-depth qualitative interviewing of victims and survivors, supplemented by data from psychometric scales and group discussion.
- Consultation with relevant agencies and organisations to provide information to complement and contextualise the information provided within the interviews.

## The Pilot Study

The purposes of the pilot study were to test out the interview schedule, our procedures and the instruments used to ensure that they 'worked' and to make any modifications necessary before carrying out further interviews; to check out issues emerging from individual interviews with those arising in the different context of a group discussion; to seek the views of a group of victims and survivors on our approach to the needs analysis; and to provide a basis for the Interim Report, written in December 2002, which then acted as the agreed framework for the rest of the work.

Semi-structured in-depth interviews (lasting 3-4 hours each) were carried out with people recruited through contacts with the Legacy Project. The interviews were taped and transcribed. The topics covered in the interview included, for example, basic demographic information; the nature of the incident, its impact and consequences; the kind of support needed and received at different points; and contact with statutory and voluntary agencies. Analysis of these interviews revealed a number of key themes:

*Psychological* – e.g. guilt; depression and anxiety; anger; numbness; sense of change; fear; issues to do with keeping and/or losing control.

*Sociological* – e.g. lack of support; slow delivery of services; difficulty of gaining access to services; the need for practical support; peer support.

*Physical* – e.g. disability; ill-health; rehabilitation; drugs and alcohol.

*Financial* – e.g. low income; lack of information about benefits; the difficulty of obtaining criminal injuries compensation; the inadequacy of criminal injuries compensation.

*Security* – e.g. perceived threat; need to return to scene.

*Other* – e.g. relationships with colleagues; reminders of event; need for justice; media attention.

A group discussion was also held with a number of victims. This was to complement the information obtained in the pilot interviews and to seek the views of “experts by experience” on the findings from the pilot and the plan for the main study. Many issues were raised during the course of the day. These included, for example:

- Feeling abandoned by the Government – the group members’ perception that victims were increasingly forgotten victims of ‘yesterday’s conflict’.
- A lack of adequate support structures and awareness by agencies, especially in relation to psychological trauma.
- The need for practical assistance e.g. with household matters and finance.
- The need to be treated with dignity and respect.
- The need for proper consideration of GB victims and for them to have the same sort of provision as victims in Northern Ireland.
- The importance of contact with other victims.
- The reluctance of the authorities to accept and respond to some issues (e.g. imprisoned ex-soldiers).
- Media intrusion.

## **The Main Study**

Further interviews were carried out with victims and survivors. Including those in the pilot study, a total of 30 in-depth interviews were carried out. The group of people interviewed included a number who were identified through their contacts with the Legacy Project and some were recruited through press releases. These were addressed to victims and survivors from the military and from the Warrington bomb of 1993 and the Manchester bomb of 1996. Interviewees also completed some standard psychometric tests of health functioning. Representatives of relevant agencies were also interviewed. These included both national and local agencies e.g. emergency planners; emergency services; social services; hospitals; voluntary sector organisations; Ministry of Defence; etc.

Analysis of the psychometric data showed that all of the interviewees had relatively high scores on the General Health Questionnaire (GHQ). The GHQ is a self-administered screening test, designed to identify short-term changes in mental health (depression, anxiety, social dysfunction and somatic symptoms). It is a 'pure state' measure responding to how much an individual feels that their present state "over the past few weeks" is unlike their usual state. Thus all of the group displayed negative outcomes on this test. About a third scored high on the Impact of Events scale which provides a subjective measure of distress.

## **Identifying Needs**

The main analysis was a thorough qualitative analysis of the victims interviews – the interviews with agencies were used to contextualise these findings. Several clusters of needs emerged:

### *Recognition and Acknowledgement*

All victims highlighted the need for their situation to be recognised by the Government, the Criminal Justice System, by the paramilitaries, the military and agencies such as the NHS. There is a strong sense that GB victims of the 'Troubles' have not been recognised in any form and that their collective voice has not been heard. There were several aspects to this set of needs including the usefulness of the research in allowing victims to tell their stories (sometimes for the first time); of the need for greater understanding from agencies; of the need for recognition that long-term problems were being suppressed; of the need for justice; and of the importance of memorials.

### *Stoicism and Acceptance*

The majority of individuals who were interviewed were quite pragmatic and stoical concerning their experience. This stoicism meant that many victims had coped relatively well without much official or inter-agency support and relied for the most part on their friends and families. However this may also have created the effect of masking the need for support and help – an

approach of 'cope and make do' which potentially absolves agencies of the need to provide appropriate support to victims.

### *Information Sharing, Communication Flows*

Across all interviews a recurring theme was the need for more information and communication. A key point from the interviews is that while statutory agencies may be joined-up in response to immediate incidents in the medium to long term, they are not necessarily joined-up in responding to the needs of victims. Individuals were particularly critical of the Criminal Injuries Compensation Authority (CICA) and the legal system that evolves around compensation claims.

### *The Context of the NI 'Troubles'*

Understanding the context of the incident, the 'Troubles' and the experience of GB victims is crucial in understanding their needs. It highlights the need for specialist support and care. A key feature of this theme is simply how different this experience is from the normal everyday lives that victims had before their experience. The situation was different for the military and for civilians. Military victims in particular describe a context and routines that are substantially different from civilian life. Experience of Northern Ireland led some military personnel to adopt coping strategies such as drinking, drug abuse, and sometimes violent and potentially criminal behaviour. The situation was not the 'norm' that most military personnel were used to. The ex-soldiers who were interviewed for this study appeared to have had no debriefing or managed pathway from NI back to civilian life. However, it is recognised that these accounts are to some degree historical and developments have taken place recently in the Armed Services to respond to this need. Further, it appears as if the further away geographically from NI, and the further away from direct military support and involvement the victims went, the more removed, less understanding and supportive were the services and support.

The experience for civilian victims was different. For them NI had generally been of little, indirect interest. Their experience was more concerned with how their normal routines and lifestyles were changed irrecoverably following the incident, though a few victims have made more of the connection with NI as a way of making sense of their experience.

### *Psychological Needs*

Both civilian and ex-military victims described the need for psychological support as a consequence of their experiences. While only a few interviewees clearly described Post Traumatic Stress Disorder (PTSD) and Secondary Traumatic Stress Disorder (STSD), virtually all described some symptoms of these disorders. A significant number of victims had received anti-depressant medication. For many this was seen as a short-term mechanism to get through the immediate aftermath of the incident, whereas for others it was longer-term. A range of responses to incidents and coping with the impact of such incidents

emerged from the interviews. These suggest that psychological or psychotherapeutic input may be of benefit, and could be used in response to the feelings of low self-esteem, anger, grief and shame. Some individuals reflected on the danger of these feelings not being contained and explored in therapeutic settings.

#### *Medical and Health Related Needs*

Medical, and in general, health care provision appeared to be variable. In Northern Ireland hospital care, although provided in a high security environment, was experienced and viewed very positively. Hospital care and follow-up in GB was not generally viewed highly. Direct victims did not appear to be offered specific or specialist support, nor did relatives and family of victims.

#### *Social Needs*

A number of interviews highlighted how victims or relatives had lost control in their lives as a consequence of their experiences. Some ex-military victims described how they have become violent and aggressive and its effect on family, friends and the public. Impact in terms of criminal behaviour, homelessness, social isolation, relationship breakdown and employment problems were described in the interviews. Agencies added to this list, especially in terms of ex-service victims, and included the use of drugs and alcohol, mental health problems and difficulties with child-rearing.

#### *Financial Needs*

The provision of advice and support to victims is variable and the experience of some victims suggests that they are struggling financially due to the complexities of the compensation and benefits system. A number were on benefits including incapacity benefit or income support. All were coping with complex financial arrangements while coping with the impact of their experience or loss. Virtually all victims felt let down by the compensation system. Many felt that it favoured NI victims rather than GB victims, favoured civilians over the military victims and that it was complex, time-consuming and that compensation to victims was unfair relative to other similar types of claims. Many felt that there were built in barriers to obtaining compensation that included a lack of support, advice and information and that the legal system almost conspired to prevent claims.

#### *Military and Civilian Experiences*

The distinction between ex-military and civilian victims is arbitrary as ex-military victims have been discharged from military service and are civilians too. The principle difference is the incident experience. Therefore, their experiences post-incident match very closely. Key amongst these are the need for recognition and acknowledgement, the need for their medium to long term needs being met and the need for more, consistent and coherent information and support.

## Addressing Needs

Victims described examples of good practice, where their needs had been addressed or where interventions had been successful. Examples included:

- Groups/Networks – This includes charities and similar organisations (e.g. the Legacy Project; The Red Cross; church based organisations) and regiments and organisations for veterans and their families (e.g. SSAFA; BLESMA).
- Individual Responses not Service-Level Responses – Interviewees often highlighted the contribution made by particular *individuals* rather than by agencies.
- Counselling – A number of victims were cautious about the usefulness of counselling but many felt that it was useful and that there could be more counselling support available to victims.
- Individuals: Partners, Friends – In many ways victims felt comfortable with friends or family support as opposed to external counselling. However, there are also challenges when family and friends provide counselling-type support e.g. when there is existing conflict.
- Being with Others: 'Expert by Experience' – Being with others who have been through the same or similar experiences can be very therapeutic and supportive to victims.
- Work Colleagues, Managers – There can be positive effects of being in a working environment for victims. This is facilitated where employers and organisations are sufficiently aware of the need to support their employees. Those organisations that have supported their employees have engendered a great deal of loyalty in return.
- Reconciliation with Paramilitaries – Although there was a great deal of cynicism concerning the Peace Process and the Good Friday Agreement, it was clear that in those few cases, where reconciliation between victims and paramilitaries had taken place, the result had been beneficial; although any such intervention would need to be handled carefully.
- Self-Help – Self-help was seen as a vital method of coping with the experience and developing medium to long-term coping strategies. Sporting activities, socialising with family and friends and writing were the most important forms of self-help. Many victims sought and obtained a great deal of information from the internet.
- Respite Care for Ex-Military Victims – Many, particularly ex-military victims and their families, described the need for respite care. It was suggested that the model of the Veterans Administration Hospitals in the US and developed elsewhere in the world should be developed by the Ministry of Defence (MOD) or the Government.
- Telephone Helpline – The need for a centralised point for help, support and advice was highlighted throughout virtually all of the interviews.

## Agency Responses

In summarising agency responses, distinctions have to be made between responses in the immediate aftermath of an incident and responses in the longer term, and particularly between civilian, emergency service and military-related organisations. Arguably most developments have taken place in relation to supporting ex-military personnel. The recent appointment of a Veterans Minister and the establishment of the Veterans Initiative by the MOD mean that organisations for veterans and their families are more able to influence policy and that some positive changes have taken place in meeting the needs of veterans.

Emergency service personnel receive support in several ways. Perhaps first and foremost is that support provided by peers and some agencies we spoke to had built this into post-incident debriefing. In-house counselling is also available in a number of organisations and there was also access to more specialist facilities. However, there were some indications of what one interviewee called a “macho” culture in some organisations and associated pressure not to “succumb” to stress.

Although the Government has recently published a national strategy for victims, there is no civilian equivalent to the Veterans Initiative. Victims of terrorist activities are not treated as a special group within the new national victims' strategy.

Developments taking place on these fronts are more likely to impact on future victims rather than existing victims. A major problem in following up the long-term needs of victims of incidents such as the Manchester and Warrington bombs is that key statutory agencies do not maintain a database which allows the victims to be followed up.

The inability to track victims together with an apparent lack of specialist support for civilian victims in the longer-term means that any services provided to them are most likely to be simply a part of a general provision, rather than derive directly from their experiences as victims of terrorist incidents. There is thus a direct parallel with the issue of whether veterans' needs should be met as part of a separate system. In response to longer-term needs the question is whether such general provision is sensitive enough to the specific needs of victims of terrorist activity.

## Recommendations for Central Government

### *Introduction*

Greater inter-agency communication, shared information and working may improve service response and provision for victims. This can be achieved at a number of levels:

- At a Governmental level, there is a need for an Interdepartmental Group to co-ordinate responses to the needs of victims identified in this

report and to include them in the new national strategy for victims, 'A new deal for victims and witnesses', over the next six months. The remit of the Commissioner for Victims and Witnesses should include acting as a national voice to promote the interests of the victims of terrorism in government, the criminal justice system, and more widely.

- At an inter-agency level, through the bringing together of relevant agencies to develop services based on models of best practice to meet the needs of victims, so that within a year an inter-agency group is established and able to be self-servicing.
- Through the sharing of best practice between agencies and professionals in Northern Ireland and Great Britain. This can be facilitated through a conference, which could be held by the end of this financial year, and the dissemination of conference papers, as well as through the use of professional journals to reach specific groups of practitioners.
- By supporting the development of an independent group advocating the needs of victims and survivors, so that within two years the group becomes self-supporting.

#### *Strategic Co-ordination*

As with the Veterans Initiative, the provision of multi-agency services for victims of terrorism in Great Britain needs to be considered at Governmental level. The Home Office has recently published, 'A new deal for victims and witnesses: National strategy to deliver improved services' (July 2003), which sets out its national strategy to deliver improved services to victims. The strategy is primarily concerned with the victims and witnesses of crime and makes no mention of the victims of terrorism or of the 'Troubles'. It proposes setting up a new post of Commissioner for Victims and Witnesses for England and Wales to act as a national voice to promote the interests of victims and witnesses in government, the criminal justice system, and more widely.

In Scotland, the Scottish 'Strategy for Victims' that was published in 2001 and owned by all the criminal justice agencies has resulted in a significant programme of work to raise the profile of victims' issues generally to improve support and information for all victims of crime and to encourage their greater participation in the criminal justice process. Each agency published its own Action Plan to support the Strategy and a Progress Report was published earlier this year (February 2003). The Strategy is to be reviewed during 2004.

There is much that may be learnt from experiences in Northern Ireland of responding to the needs of victims. In particular there are opportunities to learn from organisations such as the Family Trauma Centre in Belfast who provide specialist trauma services, and other specialist organisations working with victims of the 'Troubles'. We are recommending that:

- R1. In the continuing Peace Talks in Northern Ireland the needs and human rights of victims of the 'Troubles' in Great Britain are formally recognised.**
- R2. The remit of the Commissioner for Victims and Witnesses in England and Wales includes acting as a voice to promote the interests of the victims of the 'Troubles' and terrorism' living in England and Wales in Government, the criminal justice system and more widely. The Scottish Executive should also take this report into consideration when reviewing its 'Strategy for Victims' in 2004 to ensure that victims of the 'Troubles' who live in Scotland receive the same treatment as their fellow GB victims.**
- R3. Victims of the 'Troubles' in Great Britain are co-opted onto the Victims Advisory Panel, which advises the Government on the delivery of the national strategy to deliver improved services to victims, 'A new deal for victims and witnesses'.**
- R4. An Interdepartmental Group is set up by the Home Office Victims' Unit, which should take the lead in co-ordinating a government response to the needs of victims as identified in this report. Victims of the 'Troubles' and terrorism in Great Britain should be included in the 'A new deal for victims and witnesses' national strategy.**
- R5. The Victims' Liaison Unit, in conjunction with the Legacy Project and other stakeholders, should organise a conference by the end of this financial year to share best practice and experiences from Northern Ireland. The budget for the conference is likely to be in the region of £25k including the dissemination of the conference report on the internet.**

#### *PTSD and Health Needs: Department of Health*

The need for specialist Trauma Centres or services that can provide a flexible response to the needs of GB victims was highlighted in this study. At one end of the scale, this could result in, for example, a Veterans Hospital or Clinics modelled on the US Veterans Administration system.

There is a need for specialist provision, especially for provision based outside London. The National Institute of Clinical Excellence (NICE) is currently developing clinical guidelines on the management of Post Traumatic Stress Disorder (PTSD) (for issue in January 2005) and these should take account of the issues discussed in this report<sup>1</sup>. We recommend that:

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<sup>1</sup> Guidelines have recently been published in Northern Ireland on the Management and Treatment of PTSD in Adults by CREST (Clinical Resource Efficiency Support Team).

**R6. The findings from this report should be fed into the NICE Guidelines on PTSD. The Legacy Project should send a copy of the report to the project team for the PTSD guidelines.**

Throughout this study there has been a clearly defined need for a central point of communication and information. Significantly, many victims described the need for a telephone helpline. As the 'NHS Direct' service is an evaluated model, which is already state funded and thus sustainable, we suggest that it be used as the principal gateway for victims of terrorism. However, as it is most likely to be used by those who see themselves as having a health-related need, secondary gateways should also be considered through Victim Support and the Veterans Agency. The Legacy Project is also a key means of signposting those individuals who present to it as having support needs to these services.

We therefore recommend that:

**R7. NHS Direct should act as a principal gateway to information and advice for victims of the 'Troubles' and terrorism. Victim Support and the Veterans Agency should also be asked if they would be prepared to offer secondary gateways. The Legacy Project is also a key means of signposting those individuals, who present to it as having support needs, to these services.**

#### *Emergency Planning*

In responding to major incidents the needs of victims come relatively "low down the pecking order". Understandably the prime focus is on dealing with the *incident* and thus while consideration is given to victims' needs in principle they may be ignored in practice. Emergency planners that we spoke to recognised that there was a need to do more in respect of victims. Since June 2003, the Civil Contingencies Secretariat at the Cabinet Office has assumed responsibility for guidance on emergency planning as a result of terrorist incidents and is understood to be updating the national guidance, 'Dealing with Disaster', for a fourth edition. We therefore recommend that:

**R8. In planning for emergencies arising from a terrorist incident there should be guidance on responding to and meeting the needs of victims and for following victims up over time. The Civil Contingencies Secretariat at the Cabinet Office is asked to take this report into account when it updates the guidance, Dealing with Disaster.**

#### *Military Issues*

As part of the work of Working Group 6 of the Veterans Initiative, research is being carried out into the needs of veterans. However, this is a larger piece of

work that focuses on the needs of Gulf War veterans. We thus recommend that:

**R9. *The Veterans Initiative Working Group on veterans' needs should consider this report alongside others.***

Transition to civilian life from the military proved difficult for some victims/survivors. Debriefing may have taken place but seems not always to have been recalled. Bereaved family members reported very different experiences but it seems that even relatively small actions taken by serving officers on behalf of their regiment are greatly appreciated and have considerable impact. We recommend that:

**R10. *The Ministry of Defence, in conjunction with the Veterans Initiative, should continue to investigate the most appropriate mechanisms for following up and facilitating support to the bereaved families of military personnel, and for the sharing of good practice.***

## **Recommendations for the Legacy Project**

### *Introduction*

The 'best practice' conference, which we have recommended the VLU organise, will also be an important building block for the Legacy Project in planning its own future responses to the needs of victims. We envisage the Legacy Project playing key roles in improving inter-agency communication, shared information and working and service provision for victims by:

- Being an active participant in the conference to share best practice between agencies and professionals in Northern Ireland and Great Britain.
- Developing support services for victims based on the models of best practice that emerge from the conference.
- Communicating to a wider audience the findings of this report and the use of professional journals to disseminate key messages to key professional audiences.
- Bringing together relevant agencies to develop services based on models of best practice to meet the needs of victims, so that within a year an inter-agency group is established and self-supporting.
- Supporting the development of an independent group advocating the needs of victims and survivors, so that within two years the group becomes self-supporting.

The Legacy Project is based within the Tim Parry Johnathan Ball Young People's Centre in Warrington and is thus part of a wider network of services and experience. The inter-generational work done by the Tim Parry Johnathan Ball Trust is important in this respect and there is potential for the Legacy

Project to feed the experience of the victims of the 'Troubles' into this ongoing work.

### *Sharing and Developing Practice*

The conference to share best practice between agencies and professionals in Northern Ireland and Great Britain to be organised by the VLU will provide the Legacy Project with an opportunity to share its own experience of working with victims and to reflect upon models of good or promising practice from elsewhere. We recommend that:

***R11. The VLU considers a funding application from the Legacy Project for the development of services to victims (and the delivery of recommendations 12 to 16 below) based on a strategy drawn up before the end of this financial year.***

Only if the needs of victims are more widely understood by a broad range of agencies will services be able to respond more appropriately than in the past to the current and future needs of the victims of terrorism. The Legacy Project has a key role in communicating to a wider audience the findings of this report.

We recommend that:

***R12. With the support of The Tim Parry Johnathan Ball Trust, the Legacy Project develops a communication strategy for disseminating key findings in this report to selected professional audiences who are in a position to develop or improve access to services in response to them.***

### *Inter-Agency Working*

A key role for the Legacy Project is to bring together relevant agencies to develop services based on models of best practice to meet the needs of victims. We therefore recommend that:

***R13. The Legacy Project brings together relevant agencies and professionals to develop services based on models of best practice to meet the needs of victims, so that within a year an inter-agency group is established and self-supporting, with one of the partner agencies agreeing to take on the administrative role for a year at a time. Travel expenses for attending meetings would be met by the each of the individual partner agencies.***

The Legacy Project should act as an information resource. This requires it to have a good knowledge of what support might be available, from where, and how it might best be utilised. We would suggest that serious consideration be given to setting up a strong presence on the Internet.

## A Victims Network

In line with Bloomfield and other studies, this study found that there is a powerful need for victims to be recognised and have their experience acknowledged. An aspect of this is the need for formal mechanisms and processes to enable victims to tell their story and for that story to be heard. For those from the military or emergency services there may be a particular need for a more formal recognition and acknowledgement of them or their families.

We recommend that as an aspect of its service provision:

**R14. *The Legacy Project brings together groups of victims and survivors to tell their stories, be listened to and supported [it may need sessional workers to help to facilitate these events and this should form part of its post-conference submission to the VLU].***

Bloomfield (1998) describes the work of Damian Gorman to develop an archive of individual experiences, feelings and testimonies – a project that is open to anyone who wishes to record their feelings and experiences. This type of initiative could be developed as part of the Legacy Project. We recommend that:

**R15. *The Legacy Project should establish an archive for victims on the Internet and by other means, alongside other organisations, and should explore its use for education, research and knowledge sharing in line with the philosophy underpinning the Tim Parry Johnathan Ball Trust.***

It is very important to recognise that despite the appalling situations and experiences that GB victims found themselves in, they had coped and learnt to live with their experiences. Many provided positive examples of how they coped. We have much to learn from the GB victims. This potentially untapped reserve of knowledge and experience in many ways denotes them as “experts by experience”. Any policy or practice developments that arise from this study would benefit greatly from their involvement in design and implementation. We recommend that:

**R16. *The Legacy Project should establish an independent group to develop a support network, inclusive of all groups affected by the Northern Ireland 'Troubles' in Great Britain for advocacy and support. The Legacy Project's role should be to support this group for the first two years with the aim of enabling it to function as an independent group and assisting it in finding its own funding.***

We have outlined in the above recommendations proposals for an Interdepartmental Group to be set up by the Home Office Victims' Unit to take the lead in co-ordinating a strategic government response to the needs of victims as identified in this report and for ensuring victims of the 'Troubles' and terrorism in Great Britain are included in the 'New deal for victims and witnesses' national strategy (see R.4). We have suggested that victims of the

'Troubles' in Great Britain are co-opted to sit on the Victims Advisory Panel, which informs the delivery of the national strategy (R.3).

The work of the Interdepartmental Group should also be informed by the Inter-agency Group of relevant agencies and professionals working with victims, which we have proposed be set up by the Legacy Project to support the development of services for victims (R.11). We have also proposed that the Legacy Project support the development of an independent group to develop a support network, inclusive of all groups affected by the Northern Ireland 'Troubles' in Great Britain for advocacy and support (R.16). This group of "experts by experience" should be available to be consulted by the Interdepartmental Group and work alongside the Inter-agency Group in ensuring that services for victims are planned in consultation with victims to ensure that they meet the needs of victims now and in the future.

## Part 1 – The Needs of GB Victims and Survivors

“Behind every statistic is a human story, the repercussions of which are lived out on a daily basis, while the tragic events which caused the suffering are often long forgotten by the rest of us. The effects of the ‘Troubles’ also extend beyond Northern Ireland to Great Britain, the Republic of Ireland and further afield.”

*Victims’ Minister, Adam Ingram, Belfast Telegraph 22 February 2001*

### 1 Introduction

- 1.1.1 This report describes the Needs Analysis of victims of the Northern Ireland ‘Troubles’ who live in Great Britain. The Needs Analysis is funded by the Legacy Project of the Tim Parry Johnathan Ball Trust in Warrington. The Tim Parry Johnathan Ball Trust was set up in 1994 after the Warrington bomb of 1993 which led to the deaths of the two boys whom the Trust is named after. Its focus is peace-building and conflict resolution. As part of this the Legacy Project is funded for three years by The Victims’ Liaison Unit<sup>2</sup> in the Northern Ireland Office in order to identify and meet the needs of Great Britain-based victims of the Northern Ireland ‘Troubles’.
- 1.1.2 In September 2002, the Legacy Project commissioned the Holden McAllister Partnership in partnership with the Centre for Trauma Studies within Nottinghamshire Healthcare NHS Trust, supported by the R&D office of the Trust to undertake a needs analysis of GB victims and survivors of the Northern Ireland ‘Troubles’. The aim of the research was to carry out an independent needs analysis of GB victims/survivors and advise on the options for the forward strategy for the Legacy Project and, where appropriate, to point to ways other agencies and policy makers might address the needs identified.
- 1.1.3 In more detail, the terms of reference of the needs analysis included the following areas of work to:
  - Quantify the problem: to begin to identify the numbers and geographic location of victims/survivors.
  - Identify the type of victim support currently and previously available and by whom it is provided.
  - Assess the impact of support on victims/survivors.

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<sup>2</sup> The Victims’ Liaison Unit was established in 1998 to take forward the recommendations in Sir Kenneth Bloomfield’s report “We Will Remember Them” on responding to the needs of those injured or bereaved in the Northern Ireland ‘Troubles’.

- Identify gaps in provision through consultation with stakeholders including victims.
- Carry out a process of research that is sensitive to the needs of victims/ survivors and is developed in a confidential manner and in accordance with clinical governance.
- Involve victims/survivors in the process.
- Identify and assess the options for the Legacy Project and other coping agencies to address needs taking into account funding implications including issues of sustainability.
- Include in the project team the Legacy Project Leader and the Administrator & Research Assistant.

1.1.4 The ways in which each of these was approached are described in the Methods section and at various other points in the text that follows. Obviously, some of these aspects are more straightforward than others and the degree to which different aims could be met varied according to the data available. The phrase “victims and survivors” used in the terms of reference is not uncontroversial both in terms of definition and in terms of appropriateness. To avoid getting terminologically bogged down we have adopted these words in an inclusive way in our text while recognising that some people would reject the perceived connotations of the word ‘victim’.

1.1.5 Thus the Legacy Project’s Needs Analysis aims to examine and analyse a complex and multi-faceted aspect of the conflict in the Northern Ireland ‘Troubles’ and its impact on victims and survivors of that conflict residing in Great Britain (GB) and identify needs within that diverse group of individuals and communities affected. This cannot be seen in isolation of the socio-political context of the conflict in Northern Ireland, or outside the wider context of the impact of such conflict on a relatively geographically and politically distant population. Therefore, the next section will provide an overview of the context of the study. There will also be some discussion of what constitutes a ‘victim’ (an issue that is both complex and controversial in the context of Northern Ireland) and what has been done in Northern Ireland to address issues arising from the normative and expressed needs of the victims. This will be followed by a brief literature review of the impact of civilian conflict on individuals and communities, both in other cultural and political contexts as well as here in GB.

## 2 Background and Literature Review

### 2.1 Background and Context

- 2.1.1 It has been suggested that, depending on one's point of view, the conflict in Northern Ireland began 80 years ago, 300 years ago or 800 years ago (Daly 1999 p.201). Since the late 1960's it is estimated that over 3600 people have been killed and over 40000 injured – though the precise figures are likely to be higher, given that not all injuries were officially recorded. Over 600 of these deaths were of GB residents, and of these, over 500 were GB soldiers. The above number of injuries does not take into account those injured in the many attacks in Great Britain, and this is estimated to be nearly 2000.
- 2.1.2 Manktelow (2001) suggests that the general population in Northern Ireland (1.5 million people) may be described as having experienced violence that is low intensity and that the negative effects on mental health are more attritional than traumatic and provide a backcloth to a semblance of normality (p.41). However, certain communities and occupational groups have been subject to high levels of violence that, he suggests, have had a more immediate and disabling effect. However, the overall death rate of 2.25 per 1000 population is about the same level as that of the Middle East or South Africa. Some countries, such as Salvador (20.25 per 1000) had almost ten times the death rate, and Cambodia a death rate of approximately 100 times (a quarter of its population) that of Northern Ireland (Fay, Morrissey & Smyth 1997, p.44).
- 2.1.3 Morrissey and Smyth (2002) discuss the notions of victimhood and argue that Northern Ireland's 'Troubles' are characterised by two main trends, those of *universalism* and *inclusivity* (p.4). The former is seen to emphasise that all residents of Northern Ireland, including those that live beyond its borders, have been affected by the cumulative effects of the three decades of civil conflict. The authors also argue that within Northern Ireland, the socio-political institutions were also shaped and formed by ongoing conflict and division. Healey (1996) articulated the culture of silence and denial which existed and to some extent still prevails today. The appointment of a Victims' Commissioner in 1997 by the British Government was a significant starting point in the recognition and understanding of issues and needs of victims. The Report of the Northern Ireland Victims Commissioner (Bloomfield 1998) was instrumental in highlighting the multifaceted needs of victims of the 'Troubles'. Whilst Bloomfield recognised the problems raised by universalistic definition, he was also mindful to adopt an inclusive approach, recognising 'the surviving injured and those who care for them, together with those close relatives who mourn their dead'. There were no exclusions of paramilitaries or their families, nor of victims of

state violence. This approach challenged and angered many of those victimised on both sides of the conflict, but did eventually lead to alliances that crossed the sectarian divide. Nevertheless, the notion of inclusivity is still sensitive for many and will remain an ongoing issue for victims and their families whatever their criteria.

- 2.1.4 The Bloomfield Report was nevertheless an influential and significant step for victims whatever the definition. It led to the appointment of a Victims' Minister and the establishment of the Victims' Liaison Unit (VLU) in June 1998 to take forward the report's recommendations.
- 2.1.5 No similar studies or needs analyses have been conducted in order to assess the impact of the Northern Ireland conflict in Great Britain, despite the total death toll of GB residents being over 600, and with 125 deaths having occurred in Britain (Sutton: CAIN 2002). The Legacy Project has derived a chronology, from public sources, of incidents that have involved GB residents as victims (see Appendix 1).
- 2.1.6 Paramilitary action *in* Great Britain has been extensive, encompassing not only large cities such as Birmingham, Coventry, London and Manchester, but also garrison towns such as Aldershot and many other towns including Brighton, Guildford, and Warrington. Legacy Project staff have carried out an analysis of incidents derived from published sources and estimate the number of those injured to be in the region of 2000. No previous research has been undertaken to identify the numbers of those otherwise or indirectly affected but obviously many more people would be included if this were to be done. Thus these figures do not include family members and friends of those injured or killed, nor are emergency service workers or other agency workers included unless they were injured.
- 2.1.7 The Social Services Inspectorate at the Department of Health and Social Services in Belfast also undertook a project to explore the current range of services available to individuals who have suffered psychosocial trauma as a result of the 'Troubles'. Their report suggested that it is only recently that the long-term social and psychosocial effects of the traumatic events experienced by many have begun to be recognised (Department of Health and Social Services, 1998).
- 2.1.8 Some of the effects of the 'Troubles' were studied recently in 'The Cost of the Troubles Study' (Fay, Morrissey, Smyth 1997; Fay, Morrissey, Smyth & Wong 2001). They suggested that there had been remarkably little interest shown in the specific psychiatric effects of the 'Troubles' on the population. Their initial report examined the 'Troubles-related' deaths over the period 1969-1994, and revealed that 90% of those killed have been male. In addition, the vast majority of prisoners and those seriously injured have been male. Many of these people will have

had associated psychological difficulties. The indirect psychological effects of the 'Troubles' have focused more upon women and children who often experience isolation, loneliness and associated socio-economic difficulties.

## **2.2 The Impact of Civil Conflict and Terrorism on Individuals and Communities**

- 2.2.1 There has been civil or ethnic conflict on a global scale for centuries. Over the last few decades attempts have been made to understand the impact of civil violence on individuals and communities, not only from the perspective of cause and effect, but also in socio-political, anthropological and psychological terms. The literature is characterised by a number of features. It is diverse and multi-faceted. That is to say, it ranges across different social, cultural and political boundaries. Few studies aim to systematically examine or address the breadth and depth of the impact on victims in any one context, or indeed their needs from a pragmatic or practical perspective. Those that do attempt to address these issues are often analysing the impact on populations in third world or developing countries. In addition, the literature focuses on issues related to reconciliation, reparation, commemoration and remembering (Hamber, Dulle and Wilson, 2001). There are some notable exceptions and the most relevant in the context of this needs analysis is 'The Cost of the Troubles Study' (Fay, Morrissey, Smyth & Wong 2001). This survey attempted to establish the range of experiences that people in Northern Ireland had of the 'Troubles' and the impact of these experiences on individuals and communities.
- 2.2.2 Therefore, in many instances the literature either examines the socio-political context of conflict (Hamber, 1998) or it focuses on the psychological impact and treatment of the survivors (Abenhaim, Dab & Salmi, 1992; Loughrey, Bell & Kee, 1988; Gillespie, Duffy, Hackman & Clark, 2002). Few, if any, attempts have been made to examine the impact of 'exported' civil conflict, that is, incidents or events that occur outside of the country or borders of the place where the conflict originates. In this case, the conflict in Northern Ireland gave rise to a number of incidents in Great Britain, which undoubtedly affected individuals and communities exposed to such events. In the main these were high profile incidents involving either the loss of civilian life because of the nature of the event (usually bombing of city centre targets e.g. London, Birmingham, Warrington and Manchester), those aimed at specific military targets or those where the intention was to cause disruption of daily life or damage to business or financial infrastructures. Less publicised events may of course impact greatly on the individuals involved in them.
- 2.2.3 The difference in this current attempt at a needs analysis of victims and survivors, is that, for those exposed to the 'Troubles' in Great

Britain, the impact could be argued to lack the socio-political dimension and ongoing stressors which would be so relevant and pertinent to those living in urban areas of Belfast such as the Falls, the Shankill, Ardoyne and in Londonderry, with only a small number of rural areas experiencing major ongoing disturbances. In addition the victims have been predominantly working class, with some groups of the population being more at risk than others. If this is the case, then how do the two groups of victims and survivors differ, not only in the nature and impact of the event, but also in terms of need? The literature does not make any such distinctions and in relation to the 'Troubles', most of the studies have been conducted within Northern Ireland and have attempted to address the impact on the health and mental health of specific communities (Smyth, Morrissey and Hamilton, 2001). In relation to the impact on GB victims there has been no such analysis.

- 2.2.4 There are few studies on the impact on civilian victims (Loughrey, Bell & Kee, 1988; Gillespie, Duffy, Hackman & Clark, 2002) within the context of Northern Ireland. All of these have highlighted the psychological impact of bombing and other stressors, highlighting the incidence of Post Traumatic Stress Disorder (PTSD) (see Box 1) and other related psychiatric conditions such as anxiety and depression.
- 2.2.5 PTSD is a common consequence of exposure to traumatic events such as assaults, natural disasters, severe accidents, bombings and other related events. The main symptoms are characterised by three symptom clusters: repeated and unwanted re-experiencing of the event, emotional numbing and avoidance of stimuli or reminders of the event together with hyper-arousal. Many individuals who initially develop PTSD recover without the aid of treatment in the months following the event, but a significant sub-group (30-40%) have persistent symptoms, often for many years (Kessler, Sonnega & Bromet 1995; Rothbaum et al, 1992).
- 2.2.6 There are few epidemiological studies of the impact of civilian conflict or paramilitary activities on communities outside of the context of Northern Ireland. Abenhaim, Dab & Salmi (1992) assessed the psychological and medical consequences of terrorist activity on 254 civilian victims in France between 1982-1987. The authors found that PTSD was present in 10.5% of uninjured survivors, 8.3% of moderately injured and 30.7% of severely injured survivors. Major depression was found in 13.3% of all survivors, with no difference according to the level of injuries. Prevalence rates were no different between genders, nor did they vary with the age of the individual. Such studies are rare however. In addition, the methodology adopted in most studies are almost exclusively retrospective and on 'treatment seeking' populations. Furthermore, there have been no attempts to address the social, physical or economic impact on survivors.

2.2.7 Research on the impact on GB survivors and their families resulting from the 'Troubles' is almost non-existent, as are any studies of service personnel and their dependents. This could be explained on a number of fronts. Firstly, the incidents of paramilitary activity here in GB have been sporadic and dispersed throughout Britain as indicated above (the incidents in GB are those highlighted in Appendix 1). Secondly, the relatively low numbers of affected populations, combined with perceived good levels of access to health and mental health services, means that affected survivors may at best have been absorbed into mainstream services – or at worst been unable to access support or appropriate help as needed. Thirdly, only over the last decade has there been a significant expansion in the academic and clinical literature concerning post-traumatic health problems following exposure to a variety of traumatic events. Lastly, political factors may have played a role in reducing the visibility of victims and survivors.

## Post Traumatic Stress Disorder (PTSD)

*“The development of characteristic symptoms following exposure to an extreme traumatic stressor involving direct personal experience of an event that involves actual or threatened death or physical injury, or other threat to one’s physical integrity; or witnessing an event that involves death, injury or a threat to the physical integrity of another person; or learning about unexpected or violent death, serious harm, or threat of death or injury experienced by a family member or other close associate”.*

1. The person has experienced, witnessed, or been confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of themselves or others.
2. The person’s response involved intense fear, helplessness or horror.

The following symptom clusters must also be present, for more than one month, with disturbance causing significant distress/impairment in social, occupational or other important areas of functioning:

<b>RE-EXPERIENCING SYMPTOMS</b> (1 or more needed)	<b>AVOIDANCE AND NUMBING SYMPTOMS</b> (3 or more needed)	<b>HYPERAROUSAL SYMPTOMS</b> (2 or more needed)
<ul style="list-style-type: none"> <li>● Recurring, upsetting intrusive memories of the event (e.g., images, thoughts).</li> <li>● Recurrent distressing dreams of the event.</li> <li>● Behaving/feeling as if the traumatic event were recurring (e.g., flashbacks).</li> <li>● Intense psychological distress on exposure to internal or external reminders of the trauma.</li> <li>● Intense physiological arousal to internal or external reminders of the trauma, or parts of.</li> </ul>	<ul style="list-style-type: none"> <li>● Avoidance of thoughts &amp; feelings, or conversations reminiscent of the trauma.</li> <li>● Avoidance of activities, people, or situations, that are reminiscent of the traumatic event.</li> <li>● Inability to recall an important aspect of the trauma.</li> <li>● Diminished interest in usual activities.</li> <li>● Feeling detached or estranged from others.</li> <li>● A restricted range of affect.</li> <li>● A sense of foreshortened future.</li> </ul>	<ul style="list-style-type: none"> <li>● Difficulty falling/staying asleep.</li> <li>● Increase in irritability/anger.</li> <li>● Difficulty concentrating.</li> <li>● Hypervigilance.</li> <li>● Exaggerated startle response.</li> </ul>

**Box 1:** Adapted from DSM-IV (1994) Diagnostic Classification of Post Traumatic Stress Disorder, (309.81).

## 3 Our Approach

3.1.1 There were several key aspects and principles of the approach taken in the needs analysis:

- An emphasis on the need for proper consideration of, and appropriate response to, the ethical issues raised by a project of this type with its many sensitive aspects.
  - The involvement of victims and survivors in the development of the work.
  - Involving the Legacy Project staff in the research team.
  - Carrying out in-depth qualitative interviewing of victims and survivors, supplemented by data from psychometric scales.
  - Piloting of the interview schedules and other instruments.
  - Consultation with relevant agencies and organisations to provide information to complement and contextualise the information provided within the interviews.
- 3.1.2 Ethical issues considered include the need for confidentiality, data protection, clinical supervision of the researchers and clinical governance. All projects undertaken under the auspices of the NHS are required to be approved by a Research Ethics Committee, either local (LREC) or multi-centred (MREC). The involvement of victims is in line with the requirement in NHS Research and Development (R&D) to involve consumers in research. We believe that these “experts by experience” can add depth and integrity to a study such as this, as well as oversight of findings and process. Ethical approval ensures that the interests of both the participants and the research team are protected. This need for ethical approval, while vital, meant that the pilot phase was carried out pending final ethical approval. Ethical approval was obtained from Cambridgeshire MREC in January 2003.
- 3.1.3 After an initial period of familiarisation and desk research, the work was carried out in stages, as follows:
- Pilot study interviews with a small number of victims and survivors.
  - Group discussion and consultation day focusing on common experiences and needs, issues arising from the interviews, and the way forward for the needs analysis and for the Legacy Project.
  - Planning main study and gaining ethical approval for the research.
  - Main study: interviews with victims and survivors.
  - Consultation with relevant agencies and organisations.
- 3.1.4 The main focus of this report is on the main study but the next section describes the pilot work with particular emphasis on the group consultation day.

## **4 The Pilot Study**

### **4.1 Introduction**

4.1.1 It is good practice in research studies to conduct a pilot study. This is particularly pertinent when the subject of the study is complex due to the nature of the subject itself, the ability to recruit and engage participants and the capacity to generate meaningful and useful data. Furthermore, where studies are conducted in a variety of contexts and environments, and with a wide range of individuals, and where the nature of the topic is sensitive or complex, a pilot study provides evidence of the effectiveness of the approach that is being taken by the researchers. It is also good ethical practice in research to assess whether the approach being proposed will be effective and provide meaningful results before asking people to participate.

4.1.2 The pilot study had the following aspects:

- In-depth semi-structured interviews were carried out with a small sample of victims.
- As part of the interview process, victims were asked to complete some standard self-report questionnaires.
- A day-long discussion was held with a group of victims.

4.1.3 All of the individual interviews were completed in October 2002, with the group meeting held at The Tim Parry Johnathan Ball Young People's Centre, Warrington, over a weekend in November 2002. Details of the process are outlined below.

4.1.4 The purposes of the pilot study were:

- To test out the interview schedule, our procedures and the instruments used to ensure that they 'worked' and to make any modifications necessary before carrying out further interviews.
- To check out issues emerging from individual interviews with those arising in the different context of a group discussion.
- To seek the views of a group of victims and survivors on our approach to the needs analysis.
- To provide a basis for the Interim Report, written in December 2002, which then acted as the agreed framework for the rest of the work.

### **4.2 The Individual Interviews**

4.2.1 A convenience sample was identified through the Legacy Project. In all, eight individuals were interviewed in the pilot study. Individuals were selected if they were injured, bereaved, or had witnessed an event as a result of the Northern Ireland conflict. Some had previously been

involved in support group activities such as the LIVE<sup>3</sup> programme. The pilot group included an emergency service worker directly injured in an incident, someone else injured in an incident, an individual who witnessed an incident, and an ex soldier who was wounded and witnessed the death of a colleague during the same incident.

- 4.2.2 A semi-structured interview schedule was constructed. Interviews lasted between three and four hours and were conducted in the individual's homes to try to ensure that they felt at ease. Each interview was taped and transcribed for analysis. The topics covered in the interview included, for example, basic demographic information; the nature of the incident and its impact and consequences; the kind of support needed and received at different points; and contact with statutory and voluntary agencies. On the basis of the pilot interviews the interview schedule was revised and thus full details are given in the account of the main study.
- 4.2.3 In addition to the semi-structured interview participants were asked to complete three self-report questionnaires. Details of these are given in the description of the main study.
- 4.2.4 The transcripts of the pilot interviews were carefully examined and a number of themes were identified as occurring in the interviews. At this point no attempt at a formal analysis was made. The aim was to provide a descriptive summary which could then be "checked" as part of the process of the group consultation. The themes identified were:

*Psychological*

- Survivor guilt, they survived when others had died.
- Guilt towards family members. Individuals giving too much time to work or causes related to the incident at the expense of other family members.
- Anger directed at "the system", e.g. health services, Ministry of Defence (MOD), Army.
- Depression and anxiety.
- A sense that their lives have changed and that they will never be the same again.
- At the time of incident/being informed of the incident: feelings of numbness.
- Lack of debriefing and immediate support post incident.
- Having to keep feelings, dreams, nightmares to oneself.

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<sup>3</sup> The Let's Involve the Victims Experience (LIVE) programme at Glenree Centre for Reconciliation, Co. Wicklow, Ireland.

- Fear of losing job if any one finds out about psychological symptoms.

#### *Sociological*

- Support – perceived lack of support from agencies (such as Victim Support).
- Waiting too long for services.
- Gaining access to services i.e. counselling, social services.
- Practical needs, help with domestic needs.
- Lack of support systems – linking in with others who have similar experiences.

#### *Physical*

- Coping and living with disability.
- Physical scars.
- Ill health resulting from the incident.
- Problems with access to equipment for rehabilitation.
- Problems with drugs and alcohol.

#### *Financial*

- Anger at the amount of criminal injuries compensation offered.
- Retrospectively wishing that criminal injuries compensation had not been sought.
- No information on criminal injuries pre or post incident.
- Low income.
- Lack of information concerning the access and availability of benefits.

#### *Security*

- Perceived or feared threats by terrorists post-incident (in hospital after incident for example).
- Need to return to place of incident.

#### *Other*

- Would like to know what the Army would do today to help the relatives of those killed in Northern Ireland.
- Negative appraisals from colleagues (they think you are exaggerating symptoms).
- No prosecution/identification of offenders.

- Frequent reminder by events such as September 11<sup>th</sup> and other terrorist attacks on TV.

#### *Media Attention*

- Intense media interest for 10-12 months post incident.

### **4.3 The Group Discussion**

4.3.1 This was a day-long event facilitated by two of the research team. It involved a cross section of invited victims which sought to address the following issues:

- The place of the needs analysis within the Legacy Project.
- The objective of the needs analysis.
- The principle of involving victims in the process as stakeholders.
- The research questions to be addressed.
- The methods being used to answer these.
- The degree to which the issues that emerged from the individual interviews were replicated from within the group.
- Feedback in general and specific terms was invited from group members.

#### *Group Composition*

4.3.2 The group consisted of nine participants plus two partners. It was composed of civilian victims of the conflict injured and bereaved by, or exposed to, bomb attacks, a wounded ex-soldier, parents of deceased soldiers killed in conflict and parents of soldiers injured or psychologically affected by the conflict. Five of those present (a mixture of the above group) had all been on the LIVE programme. The Needs Analysis team on an individual basis had also interviewed three of the group.

#### *Issues Arising from the Group Discussion*

4.3.3 From the accounts that people gave of their experiences and from the ensuing responses and discussion, several points emerged:

- Several people mentioned the importance of meeting other victims and survivors who had been through similar experiences and the level of mutual support that could be provided in this way.
- One example of this occurred when one of the group expressed the concern that she was someone who had not experienced such a serious event as many others in the group and that therefore she had less right to be present than they did. Several of the group responded by disputing this and supporting her right for support and involvement.

- There were clear differences between individuals with some having responded to their experience by campaigning, others by seeking support from other victims or professionals, while others had been reluctant to become involved in any activity that might be seen as “counselling”.
- Alongside this, clear differences emerged between groups in the sense that civilian victims had different issues from those of military families and military victims.

#### *Victims and their Status*

4.3.4 Victims expressed concern about their status. There were several aspects to this concern:

- The victims felt abandoned by the Government – their perception was that they were increasingly forgotten victims of ‘yesterday’s conflict’. In addition, there were comments such as “there is no such thing as an English victim – we are invisible to the Government”.
- There needs to be an acknowledgement of the needs of the victims of the ‘Troubles’ in GB – there was also a lack of recognition of their needs and acknowledgement of their service (in the case of military victims).
- It was suggested that the Department of Social Security should see victims as having special characteristics, rather than them being lumped in with everyone else. It was further argued that a victim of an attack on the country should not be viewed in the same way as, say, a victim of a road accident and that the State has a duty to provide immediate help.

#### *Support*

4.3.5 Generally they expressed the views that there is:

- A lack of adequate support structures.
- A lack of an awareness of the impact of psychological trauma and Post Traumatic Stress Disorder.
- A general lack of awareness by agencies.

4.3.6 In the short-term, victims need:

- Specialist and understanding medical care and rehabilitation for casualties.
- Practical help in terms of managing life e.g. cooking meals, laundry, looking after children etc.
- Practical assistance in terms of financial packages for the victims, addressing specific needs. For example, financial assistance to cover the cost of travelling, out of pocket expenses and other costs

incurred as a result of the relatives having to travel to and from various locations, resulting from their bereavement and loss, or in dealing with a member of the family who had been severely injured. The military families felt there should be a special funding package available to meet these and other needs.

- Another factor in relation to financial difficulties arising from the experiences of victims was some financial support in the form of, for example a DSS allowance which was immediately assessed and provided to the families.
- Generally, what was described as 'hard-headed' practical advice.
- An issue raised by military families was the need to be treated with dignity and to be recognised by the MOD. One parent raised the point that as a father of a bereaved soldier he felt his needs weren't met as he was not the direct next of kin – this was perceived under law to be his son's wife. Whilst he understood and accepted that fact, he nevertheless felt that he was excluded from the process and the help and support that were offered.
- The possibility of talking to non-judgemental listeners and to other victims (not necessarily of the same event). What victims don't need, but may get, is "sympathetic" others who impose their own problems on the victim.

4.3.7 In the medium and longer-terms, the following needs were identified:

- Possible on-going financial problems.
- Having access to 'appropriate' counselling rather than non-directive support very early on, which may be neither welcome nor helpful.
- The military families felt there was a need for a veterans' hospital to support the victims of military conflict, just as there is in the US, which would deal with a variety of issues related to the needs of victims of military conflicts.
- The idea of a Victims' Minister for Northern Ireland was raised with some passion amongst the group, inasmuch as they felt this would be an appropriate innovation in GB. They feel 'there is a need for someone or something here' – 'a Victims' Liaison Unit for England'.
- Victims who were victimised some time ago can help more recent victims and also, in this way, help themselves.

#### Quotes

4.3.8 The following were raised in the discussion and have been noted as quotes from the group:

*"They should take all the worry away from you and let you grieve."  
(Meaning the provision of a financial package for victims and their families.)*

*“Nobody from Victim Support has ever been near me.”*

*“Counselling should be victim led.”*

*“There should be some structured plan of action for victims.”*

*“There should be some physical presence here – a Victims’ Liaison Unit for example – but we are low on the list of priorities.”*

*“English victims have been virtually forgotten.”*

*“Agencies are ignorant of the uniqueness and consequences of trauma.”*

#### *Other Issues Raised*

4.3.9 A number of other issues were raised during the discussion:

- The amount of money that has been made available for victims in Northern Ireland in comparison with what has been made available in GB, in relation to the population size and people affected.
- Terminology: e.g. the use of the terms ‘victim’ and ‘survivor’. One group member does not want to be thought of as a victim but prefers the term “casualty of conflict.” In many respects this was not resolved but this did arise as an issue.
- One survivor who had lost a relative in a bombing incident noted that the most practical help he received was from a Family Liaison Officer in the police. In addition he also felt that he had a lot of support from a survivor who had also lost a child and to be given some practical advice and help in relation to his loss was extremely useful. He went on to make the point that this could be provided by anyone who had experience in the field and did not need necessarily to have been from somebody specifically for the needs of victims who have been exposed to terrorist attacks.
- Other members had not received support and felt they had to deal with issues (e.g. media intrusion, the psychological consequences of physical injury) alone.
- There was also some mention in the group that a therapist trained in working with survivors of terrorist events could or should be identified. They did however accept that any experienced professional working with trauma may be able to help them as their experiences reflected their involvement with professionals within generic mental health services, who may have had little experience in working with victims of trauma.
- An issue raised by one parent of a soldier who has had significant psychological problems and spells in prison, was that the military does not provide for and recognise when soldiers have been psychologically affected by their experiences. As a result many of them end up either homeless or in prison and in many ways they

are neglected and forgotten. The MOD and others in positions of power are unwilling to accept the problem, despite ten years of hard campaigning and evidence gathering on the issues.

- A common issue that was raised was the general feeling that they as victims could provide support and help to others in terms of recognising and understanding others experiences from the victims' perspective.

#### **4.4 Reflections on the Pilot Study**

- 4.4.1 On the basis of the pilot work and follow-up discussion, the semi-structured interview schedule was found to be generally appropriate and useful. Some minor amendments were made to it on the basis of experience in the pilot, and it was the amended version that was used in the main fieldwork described below.
- 4.4.2 The pilot work also allowed the development of supportive team-work in those doing the interviewing, but also pointed to ways in which clinical supervision could be enhanced. Given the nature of the interviews and the potential emotional stresses on interviewers, this is particularly important in this kind of work.
- 4.4.3 As a result of the group discussion, some victims have had their first experience of meeting other victims and discussing their experiences and many said they benefited from this experience. Further, the Needs Analysis team has been able to draw on the expertise of the group, both within the group setting and in correspondence and discussion afterwards.
- 4.4.4 Both the interviews and group discussion produced a range of interesting findings and provocative ideas for further exploration. Although there was some overlap of individuals, it is worth noting that several issues emerged separately from both the individual interviews and group discussion. Thus while the group discussion reinforced the importance of some issues arising from the pilot interviews it also *added* further material. This points to the key role that "experts by experience" can play in research of this kind.

## **5 Introduction to the Main Study and Agency Consultation**

### **5.1 Civilian Sites: Manchester and Warrington**

5.1.1 Following on from the pilot, it was decided that part of the main study and agency consultation would focus on two particular incidents, the Bridge Street bombs in Warrington in 1993 and the Manchester bomb of 1996. The rationale for this decision included considerations of efficiency:

- Both of the incidents occurred in the 1990's. This made it easier to contact relevant interviewees than would have been the case for incidents that occurred longer ago.
- Focusing on sites and particular incidents meant that several agencies could be consulted about responses to the same incident.
- As in the pilot, potential interviewees are scattered throughout the country. Focusing on these two incidents, it was thought, would help to reduce the time lost in travel to interviews.
- The team were able to make use of the extensive material gathered by the Legacy Project on these particular incidents and the connections they have with local agencies, news media etc.

5.1.2 While there are some similarities between the incidents in Manchester and Warrington they were different in several key respects thus potentially reflecting a wider range of issues. The similarities include:

- They both took place in the same part of the country.
- They involved bombs in shopping centres on a Saturday, the busiest shopping day of the week.
- The following day was Mother's Day (Warrington) or Father's Day (Manchester).
- Both places had previously been targeted by the IRA.

5.1.3 The table below compares the two incidents. Any such summary inevitably simplifies but is nevertheless useful in indicating some of the key differences.

	<b>Manchester</b>	<b>Warrington</b>
<b>Location</b>	Large City.	Large town.
<b>Local Authority</b>	Unitary authority: Manchester City Council.	At time, part of Cheshire for emergency planning purposes.
<b>Bomb</b>	One very large bomb.	Two bombs.
<b>Warning</b>	Relatively clear and in advance.	No clear advance warning.
<b>Evacuation</b>	Major evacuation.	No time to evacuate.
<b>Main immediate and short-term effects</b>	Major physical destruction; most injuries relatively minor (i.e. in the context of what might have been). No fatalities.	Injury to shoppers and passers-by: some very severe injuries and fatalities. Relatively minor physical damage.
<b>Main <i>perceived</i> medium-term impact</b>	Economic focus.	Personal, social and community focus.
<b>Main <i>apparent</i> long-term community response</b>	Rebuilding and regenerating the city centre.	The building of links with Ireland and movements for peace and reconciliation.

5.1.4 Contacting victims of these incidents involved thinking about how best to contact as many victims as possible, while also:

- Minimising any possible negative media response.
- Avoiding raising victims' expectations inappropriately.
- Dealing speedily with responses from victims.
- Having a system in place for the selection of interviewees should the number of enquiries greatly exceed our capacity and for responding to those who are not selected for interview<sup>4</sup>.

5.1.5 To attract volunteers for interview press releases were prepared by the Legacy Project and released to local media in the North-West. See Appendix 3 for these.

5.1.6 For the agency consultation, a list of relevant agencies and organisations in Manchester and Warrington was drawn up as sources of potential interviewees. They included the emergency services, hospitals, local authority departments (e.g. social services), local community and voluntary groups, and national organisations such as Victim Support. Resource constraints meant that these agency interviews had to be limited in number. Thus in most cases different agencies were consulted in Manchester and Warrington allowing for greater coverage. See Appendix 2 for the list of agencies consulted.

5.1.7 A question that arose in relation to the agency consultation was whether discussions should consider planning for responding to

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<sup>4</sup> In the event the number of enquiries did not cause this problem.

victims of any future terrorist attack. Several victims had expressed concern that others should not have to go through what they went through and indicated that this issue should be included in the study. Given this view from our "experts by experience" and that some agency people were better able to talk about planning than about what had happened some years ago, it was decided to include this as an issue.

## **5.2 The Military "Site"**

- 5.2.1 The final focus of the study was a military one. A different approach was taken here with interviewees being sought nationally rather than, for example, focusing on particular regiments involved in specific incidents. Reflecting this decision it was agreed to consult with national rather than local organisations in respect of the military. See Appendix 2 for the list of military organisations consulted.
- 5.2.2 Again appropriately targeted press releases were used in an attempt to attract volunteers for interview (Appendix 3).

## **5.3 A Note on Qualitative Methods**

- 5.3.1 A study of the needs of GB victims of the Northern Ireland 'Troubles' represents a complex and multi-faceted challenge. GB victims are dispersed and their experiences and the incidents that led to them are varied, by nature sporadic and spread over a time-frame of nearly 30 years. Their experiences are either as ex-military or as civilians or emergency service workers; and either as direct victims or as their relatives. Whatever their needs, they are framed in a social context that requires an attempt to interpret those needs and experiences.
- 5.3.2 In the light of this our approach is qualitative in nature. Its aim is not necessarily to be representative, nor can its findings aim to be generalised to the whole population. However the power of qualitative research is in its ability to shed light on social interactions and experiences and increase understanding. Qualitative data with their emphasis on people's 'lived experience' are fundamentally well suited for locating the meanings people place on the events, processes and structures of their lives (Miles & Huberman 1994) and for connecting these meanings to the social world around them. This can be contrasted to quantitative research which can be seen as pre-defining the topic and imposing concepts on the respondents (Murphy et al 1998). Face to face interviews were chosen over focus groups, given the sensitive and sometimes complex nature of the subject matter.

## **6 Method for Main Study and Agency Consultation**

### **6.1 Sample**

- 6.1.1 The recruitment of participants to studies is notoriously difficult. This is especially more so when the subject is of a sensitive or contentious nature. Furthermore, with a widely dispersed potential target audience – throughout the whole of GB – and relating to an experience that may have occurred over a time span of 30 years – identifying individuals was not going to be easy. The most appropriate method of recruiting such individuals is through established networks and using purposive or snow-ball sampling methods i.e. using people's own established networks. This was the approach adopted for the study as a whole, as the Legacy Project had a pre-existing network that the researchers could tap into. However it was felt that the numbers were not enough and we also wished to involve individuals who were not involved in such networks and who were keen to share their experiences.
- 6.1.2 A convenience sampling strategy was agreed by the project team and implemented by the Legacy Project, which distributed press releases (Appendix 3) to the media within the North-West and to national media. Media used to recruit civilian victims included television (13 TV stations including BBC, Channel 4 and Channel 5), radio (10 stations across the North-West) and local and regional press (19 papers). More extensive media networks were used to recruit ex-military victims, including the national press, TV, radio and ex-service organisations. Only six individuals were recruited by this means. Another 16 were recruited through other means in that they had made themselves known to the Legacy Project or had been contacted by the Project. This meant that, including those interviewed at the pilot stage, 24 (80%) of the total had been contacted via these contacts.
- 6.1.3 Six (20%) of the whole study sample were recruited via the media press releases. Four were military-related participants, and two were victims of the Manchester bombing. All were from the North of England.
- 6.1.4 The response rate to the publicity was low. There may be a number of reasons for this. Ideally a longer time frame for recruitment and a more focused strategy may have increased the response rate. The impending war on Iraq, which was highly publicised in the media, may also have impacted on potential recruits who perhaps considered that the timing was not right for them to come forward. The geographical dispersal, the 30 year time frame and the changes brought about by the Peace Process may all have had an impact on the decision of individuals to participate.
- 6.1.5 It may be useful and productive to follow-up those individuals who did participate because of the media publicity to understand what led to

their decision to take part. What is clear is that existing networks were more successful in recruiting participants. An issue for further work in this field is for the Legacy Project to consider how it can actively increase its and others' network membership.

## 6.2 Semi Structured Interviews

6.2.1 The semi-structured interview schedule was revised slightly in the light of the Pilot Study. Interviews lasted between 3-4 hours in length and were conducted in the individual's homes. Each interview was taped and transcribed for analysis. Topics covered in the interview included:

- Demographic information relating to gender, age, occupation, civil status etc.
- Past and current support.
- The impact and consequences of the incident.
- Employment history and financial impact of their experiences.
- Health and mental health issues, disabilities and hospitalisation.
- Help seeking (including GP attendance, psychiatric and physical care received) etc.
- Contact with voluntary agencies and specific victim support groups.
- Litigation and compensation issues.
- Previous life circumstances before the incident.
- Perceived current and future support needs.

## 6.3 Self Report Questionnaires

6.3.1 In addition to the semi-structured interview participants were asked to complete three self-report questionnaires. These were:

*The General Health Questionnaire – 28 Item Version (GHQ-28)*

6.3.2 The GHQ is a self-administered screening test designed to identify short-term changes in mental health (depression, anxiety, social dysfunction and somatic symptoms). It is a 'pure state' measure, responding to how much an individual feels that their *present* state "over the past few weeks" is unlike their *usual* state. It does not make clinical diagnoses and should not be used to measure long-standing attributes.

6.3.3 The GHQ focuses on a person's ability to carry out "normal" functions and the appearance of any new disturbing phenomena. It is a reliable and well-validated tool in research and clinical populations.

### *The Impact of Events Scale (IES)*

- 6.3.4 The Impact of Events Scale is a subjective measure of distress consisting of a 15-item scale, which measures intrusion and avoidance and assesses the emotional impact of a stressful or traumatic event on an individual. This scale has shown adequate reliability and validity and is used extensively in trauma research.

### *Trauma Attitudes and Beliefs (TABS) Questionnaire*

- 6.3.5 The Trauma Attitudes and Beliefs questionnaire is a 9-item questionnaire that measures the reactions reported by people after traumatic events. For example, changes in religious, political and interpersonal experiences are self-reported. There is no indicative score but an indication of changes in beliefs can be ascertained by the face validity of the responses.

## **6.4 A Note on Process**

- 6.4.1 We have already noted the process we went through to obtain ethical clearance for this work. Part of this involved developing procedures to support interviewers and interviewees.
- 6.4.2 The pilot study enabled the team to refine the research process and respond to the issues that had arisen. As a result, a Lone Worker policy was developed and a Buddy system for interviewers was introduced. The latter involved a second project worker who accompanied the interviewers to provide immediate technical and psychological support as well as ensuring the safety of both the interviewer and interviewee. Following each interview, fieldwork review sessions took place and any issues that arose were dealt with immediately or at Research Team or supervision meetings. Research staff were provided with separate clinical and research supervision.
- 6.4.3 For interviewees, the team developed an information booklet explaining Trauma and PTSD and this was given to interviewees. This contained information about different responses to traumatic events, when to seek help and the most appropriate sources for help, both locally and nationally, either through statutory or non-statutory services. In addition, if the interviewers had any immediate concerns about the participants, the participants were informed by the interviewers that they would be contacted by a member of the clinical team (at the Centre for Trauma Studies) in order to discuss any immediate concerns and obtain advice and guidance about accessing local help and services. This occurred on two occasions. Contact was made within 48 hours and followed up with correspondence where appropriate and with the participant's permission e.g. to the General Practitioner.

## 6.5 Agency Consultation

- 6.5.1 Contact was made with a range of relevant organisations to seek information and with the intention of interviewing individuals within some of them. Snowballing was used in some cases to identify appropriate individuals. It proved difficult in some cases to identify an appropriate individual within an organisation or to arrange an interview at a mutually convenient time. In the end, 19 agency representatives took part in interviews with several others helping by providing information in other ways. The interviews were spread across all three 'sites' though, for logistical reasons, it proved slightly less straightforward to arrange meetings with some of the service based organisations.
- 6.5.2 Given the wide range of agency responsibilities and the people interviewed, the nature and content of the interviews varied according to the role of the interviewee and the agency they represented. For the Warrington and Manchester based organisations the topics covered included:
- Details of the incident and the agency's role on the day and afterwards.
  - The needs of victims and the help provided to them.
  - The co-ordination of activity within and between organisations.
  - Nature and extent of effects on staff.
  - Coping.
  - Details of any review or debriefing that took place.
  - What worked and what didn't work?
  - Post-incident developments.
  - Lessons learnt and any changes in procedures as a result of review.
  - Information gathered.
  - Part played in emergency planning.
  - The role of victims within emergency planning.
  - Training for staff.
  - Future developments.
  - Possible connections with the Legacy Project.
- 6.5.3 For the national organisations, the questions about the incident were replaced by more policy orientated questions about their work e.g. the extent to which it was underpinned by research; its range and focus; strategies to identify and meet needs; and multi-agency working.

## 7 Victim and Survivor Interviews: Quantitative Analysis

### 7.1 Characteristics of Sample

- 7.1.1 In total, 30 individuals were interviewed. Eight of these were interviewed for the pilot study and 22 interviews were conducted in the main study. Over half of these were military-related interviews whilst the remaining interviews were of civilians who were bereaved, injured, or witnesses to GB incidents, and of emergency service personnel.
- 7.1.2 Twelve (43%) individuals came from civilian backgrounds. Of these:
- 5 (17%) were civilian bereaved family members.
  - 2 (7%) were injured civilians.
  - 5 (17%) were civilian witnesses.
- 7.1.3 Seventeen (57%) individuals came from military related backgrounds. Of these:
- 5 (17%) were injured during their employment in the military.
  - 7 (23%) were bereaved family members of military personnel.
  - 4 (13%) were relatives (immediate family members) of injured military personnel.
  - 1 (3%) was a military witness.
- 7.1.4 One was a member of the emergency services. (These details and how they came to be interviewed are shown in Appendix 4.)
- 7.1.5 Sixteen (53%) of the interviewees were from the North-West, two (7%) from the South-East, eight (27%) from the Midlands, one (3%) from Scotland, one (3%) from the East of England and two (3%) from the North-East. The gender mix was 45% female and 55% male.
- 7.1.6 The incidents that interviewees described took place on average over 14 years ago, with the earliest incident taking place 29 years ago and the most recent incident 7 years ago. The average age of interviewees at the time of the incident was 36 years. The average age at the time of the interview was 49 years.

Age of Interviewee	At Incident	At Interview
< 16	2	0
17-21	8	1
22-30	5	0
31-40	2	4
41-50	8	12
51-60	5	9
>60	0	4

7.1.7 Everyone who was interviewed was white. Eighteen (60%) were currently married, 3 (10%) divorced or separated, 2 (7%) widowed, 6 (20%) single, and 1 co-habiting. The civil status of those interviewed has changed little since the incident. One had divorced and one had separated since the incident.

7.1.8 Eighty-three percent of those interviewed were employed at the time of the incident. At the time of the interview only 47% were employed.

## **7.2 Self-Report Questionnaires**

7.2.1 In addition to the semi-structured interview, participants were asked to complete three self-report questionnaires. These were:

### *Trauma Attitudes and Beliefs (TABS) Questionnaire*

7.2.2 Responses from the attitudes and beliefs questionnaire indicated that for most of the respondents some aspect of their attitudes and belief systems had changed.

7.2.3 For 80% of the victims the experience has had a lasting effect on their priorities in life. Over half of the victims (56%) stated that a lot of good had come out of their experience; although just under one third (32%) felt that no good at all had resulted from their experience. 80% of the victims stated that their experience had affected their perception of how easy it would be to change the social and political system. Over half of the victims (56%) stated that their experience had had an impact on their political beliefs. 78% of the victims felt that they were misunderstood by others who had not shared their experience and 68% felt different from other people because of their experience. 76% said the experience has changed how differently they feel about the importance of families and friendships. Under half (44%) felt that those who were trying to help them (e.g., friends, doctors, lawyers and therapists) did not really understand them. 40% stated that the experience had had an impact on their religious beliefs.

### *The General Health Questionnaire – 28 Item Version (GHQ-28)*

7.2.4 All the interviewees had scores that were above the cut-off score of seven, indicating that they are experiencing a negative health outcome within the last 4-5 weeks. The average score was 11.8, with a range from 7 to 26.

7.2.5 There are several reasons why the GHQ-28 scores may have been raised. The high score may simply reflect ongoing problems following the trauma and/or there may be other reasons. For example, the prospect of the interview may have led interviewees to focus on the incident that they were involved in especially as, in some cases, they were coming up to the anniversary of the incident. Recent acts of

terrorism such as September 11<sup>th</sup> and the Bali bomb, which have had much media attention, may also have brought the respondents' experience and emotions related to terrorism to the forefront of their thoughts. Such reasons point to the way in which the negative health outcomes that victims can experience may be amplified long after the event.

- 7.2.6 The GHQ indicates relatively high levels of distress for the whole cohort. Whilst it would be understandable in the context of the reasons given above, it also indicates that for many, the incident is still 'live' enough to cause levels of distress above that predicted by the discussion or review of personal losses many years after the event. This may indicate unresolved difficulties arising from the incident, susceptibility to the reactivation of reminders or triggers or indeed vulnerability to stressors relating to the event.

*The Impact of Events Scale (IES)*

- 7.2.7 Nine (30%) respondents had a score above the cut off score of 30-35. As with the GHQ-28 the high score in this case may or may not have been affected by thinking about the interview and media attention to terrorism.
- 7.2.8 As with the GHQ scores, the high IES scores for some participants also suggest higher levels of subjective distress that might be attributed to the interviews. Again, this may indicate a degree of unresolved processing of the trauma or loss for those individuals.

## 8 Victim and Survivor Interviews: Qualitative Analysis

### 8.1 Introduction

- 8.1.1 The transcripts of the interviews were carefully examined and a range of themes were identified in them. Following this a group analysis of the transcripts took place. This enabled the themes that had been identified to be validated to ensure that no one had 'read' themes into the transcripts. The themes described below are therefore the result of a cross-validated analysis. The themes have been categorised for ease of reading.
- 8.1.2 A number of issues arose that impacted across all aspects of the interviewees' lives. Within this category were issues that related to the need for recognition and acknowledgement, the context of the situation (the 'Troubles') and more recently, the Peace Process. These are considered separately.
- 8.1.3 There are a number of comparisons which are potentially of interest, for example, the differences between the experiences of people according to gender, age (including whether a child was involved), whether they were civilians or in the military at the time of the incident, whether they were injured physically or not etc. Some of these are mentioned in the analysis. However, the differences were often outweighed by the similarities or we did not feel we had enough data to comment without entering into speculation or without compromising anonymity.
- 8.1.4 Many of the issues that came out of the interviews with victims also arose from the interviews with agency representatives and so contextual material from these interviews is presented in text boxes within some of the following sections.
- 8.1.5 Our analysis does not perhaps indicate the great differences between military and civilian victims that might have been expected. There are important differences and these are highlighted below, but there are also many similarities. Separate analyses of these two groups would have led to repetition or an underestimation of these commonalities. In this connection, it is worth noting that several participants in the group discussion noted how much overlap there was between their experiences despite the very different contexts and events that had brought them there. We do though include a brief section summarising the differences and similarities between ex-military and civilian victims and return to the issue in Section 9, *Addressing Needs*.

## 8.2 Military and Civilian Experiences

### *Military and Ex-Military Experiences*

- 8.2.1 Where victims were ex-military and emergency services personnel, their experiences are framed by quite different sets of routines and references. Ex-military and emergency service workers who were interviewed highlighted that they had been injured as a result of undertaking service or duty as protectors and defenders of their country. The experience of being injured in the line of duty or through service to their country clearly is invested with a set of expectations of the 'country' (embodied by the Government, MOD or statutory organisations) and of the civilians who they were deemed to be protecting. Furthermore where expectations have not been fulfilled, there are clearly articulated disappointments, resentments and anger. The feeling of having undertaken what to many would be seen as extraordinary duties, underpins their need for recognition and acknowledgement through specialised support. Where this has not occurred, there is a clear anger at the inequity.

### *Differences between Military and Civilian Victims*

- 8.2.2 The experiences of ex-military victims appear to be markedly more similar than different to civilians. Indeed, as ex-military personnel, they are civilians too and the major difference between both groups is the military experience. Two distinct but related features mark this difference. Firstly, what is clear from this study is that ex-military personnel experienced (in civilian terms) extraordinary experiences, in the context of their work and roles. These were often seen as normal, routine and expected – even planned for, incidents. Civilians, on the other hand, experienced extraordinary and unexpected incidents and were often caught up in these incidents by chance. Secondly, military personnel, once discharged from the military needed to come to terms with living as civilians in a 'normal' society – largely free from conflict and the stress of living in a militarised conflict such as Northern Ireland. This for many ex-military personnel appears to have been in itself a source of stress as both the individuals and agencies that they encountered did not appear to understand their unique experiences and needs. Consequently, it appears that ex-military victims tended to view statutory services with some cynicism and caution. Civilians, on the other hand, were to a large extent supported through the normal routines that they have – these appear to have provided them with stability and continuity, a source of strength rather than stress.

### *Similarities between Military and Civilian Victims*

- 8.2.3 In many cases, as highlighted above, the distinction between ex-military and civilian victims is arbitrary as ex-military victims have

been discharged from military service and are civilians too. The principle difference is the incident experience. Therefore, their experiences post-incident match very closely. Key amongst these are the need for recognition and acknowledgement, the need for their medium to long term needs being met and the need for more, consistent and coherent information and support.

### 8.3 Recognition and Acknowledgement

- 8.3.1 All victims highlighted the need for their situation to be recognised by the Government, the Criminal Justice System, by the paramilitaries, the military and agencies such as the NHS. There is a strong sense that GB victims of the 'Troubles' have not been recognised in any form and that their collective voice has not been heard.

#### *Telling the Story and Being Heard*

- 8.3.2 One of the more powerful messages to emerge from this study is the value to them of being given the opportunity to tell their story:

*"I have talked to you, and to others, but I think there is someone out there who had a son killed and it was just she and he, where is she going to go – who is she going to talk to."*

*"Hearing their stories [other victims of NI] I found helped me as well."*

*"Hearing the stories of other victims and having them hear mine...since going public I have felt a ripple effect."*

- 8.3.3 For many, this had been the first time an individual had listened to them. This reinforces the need for psychological support although paradoxically many interviewees were cautious of 'counselling' as a support mechanism. The important factor is that their voice was heard.

#### *The Power of the Media*

- 8.3.4 The need for recognition should be framed within the context of one to one psychological support or group work, rather than media acknowledgement and attention, as although the media has played a large role in articulating the experience of victims, many felt this to be intrusive and threatening – some felt there was a voyeuristic element to this:

*"There was quite a lot of media attention...they would just be outside and would be trying to get comments from me...and this and that."*

*"Looking back, the media attention was intense for about 10-12 months after the bomb."*

*“They never gave up, they found out where both families lived...I don't know how, but they got our phone number...the photographer, he tried to take her photograph, I went absolutely mad, he is lucky he didn't end up in the fishpond...he left the house very fast, he had no idea what he had done wrong, it was absolutely amazing. All he could think about was what he could get for printing in the paper.”*

*“The police sergeant was great, he said to me to go upstairs and look outside the curtains and tell him if I recognised the reverend from the Church. I went up and looked outside, and it wasn't him. It was a newspaper man dressed up as a priest...we kept getting phone-calls and the press kept coming round.”*

8.3.5 There was a sense that many found that while the media were intrusive and threatening concerning their specific experiences, the media did not fully inform the public about the NI 'Troubles' and the true consequences to the GB victims. This suggests that balanced reportage would have possibly enabled a greater understanding of the plight of victims within the context of the NI 'Troubles'. The development of guidelines for the media may be appropriate.

8.3.6 It is important to note that the media also play a role in reminding individuals of their situation, for example, any conflict reminds them of their experiences:

*“This weekend I was very upset on Sunday, I was in tears just watching, but just watching 9/11 – that brings it back, any car bombing or IRA...I don't know how it works but it kind of brings it back to me.”*

Of course, relations with the media are double edged. On the one hand we were told of members of the press disguising themselves in order to gain access to hospitals; of the need to keep very tight controls over names and address lists to make sure that the media did not gain access to victims' details; and of the demands made on workers by the media who may then not use the material gathered. On the other hand there is great awareness of the importance of the media in terms of emergency planning and autobiographical accounts of victims and survivors, such as those of Parry & Parry (1994) and Vickers (1994), who also support this mixed message with both reporting negative experiences but also finding utility and some kinds of support in their media involvement.

#### *Interaction with Agencies*

8.3.7 The need for recognition and acknowledgement was underlined by the experiences that individuals had in their interaction with agencies. For some, agencies recognised and acknowledged their needs and

experiences. This facilitated trust between the individual and the agency. Similarly individuals felt they had benefited when there was recognition of their experience based on a mutual understanding. Being counselled by others who had been through similar experiences was seen as crucial to gaining trust and understanding. In the section on examples of good practice we highlight where and how this happened.

For some involved in the Manchester and Warrington bombs the part played by remembrance services and anniversary events was mentioned as important. There were several aspects to this:

- Pride in the work that had been done by the agency and in being selected to attend an event as a representative of the agency.
- Appreciation of the part played by some of the “great and the good” in actively supporting the events.
- This involvement was, in some cases, mixed with extra feelings of stress resulting from attending the events. Some people wanted to “move on.”
- We were told of feelings of resentment which still linger among some staff who were not involved in one high profile event or another, but who felt that they had done at least enough behind the scenes as some of those who were invited.
- Ambivalence about such events came up in several interviews. One person was mentioned by one interviewee as someone who did not want to attend any events and by another as someone who resented not being invited. Psychologically it seems plausible that both accounts are true and revealing of internal conflict.

#### *Keeping the Lid On?*

8.3.8 A recurring theme concerning recognition focuses on the nature of victims as people who may ‘boil over’ at some point in the future. This particularly applied to the direct military victims, although civilians felt that there was a long-term negative consequence to their needs not being met. For military victims, this was shaped by events that had happened in the past and was highlighted to represent a risk of violence to the public and individuals with whom the victims related to. This risk was framed by a recognition that sooner or later a victim would react, causing problems for themselves, friends, family, the public, society and statutory agencies. The need for acknowledgement of this problem related to the parallel need for support and preventive measures:

*“We know some men whose families are terrified of them now because they don’t know what they are going to do next, because they have been traumatised so badly.”*

*"I mean there is one guy who committed murder through PTSD, he just lashed out and killed somebody. He went inside for nine years, he came out of prison, he went to live with his parents and within a month of being out he lashed out and killed somebody else."*

*"One person told me, 'God, anybody who approaches me from behind, and taps me on the shoulder, I would kill them. If they come from behind, and tap me on the shoulder it makes me jump'."*

*"I think they (the Government) want it to go away, but they don't want to deal with it. But one of these days it's going to turn around and hit them in the face and they are going to have to deal with it."*

- 8.3.9 With civilian victims this theme reflects the long-term needs of families and relatives of victims. Examples here include the need for help to prevent relationship difficulties, divorces, unemployment, and promote the well-being of children, siblings and partners. This issue is explored in the section on the impact of the victims' experience on relationships.

#### *Justice*

- 8.3.10 A significant need that victims highlighted was the need for justice. This is related to the need for recognition in that victims referred to the need for 'official' recognition. This would be embodied through compensation claims and the provision of welfare benefits:

*"It's not the money, there's a lot of time in your careers when you think I'm shedding blood for these buggers and they don't give a damn, I think that is the thing more than anything else – to know you are appreciated."*

*"I think recognition, I don't think money, because money wouldn't have brought the victims back. If we had got recognition for what happened to us, and we were treated the same as the people of Northern Ireland...I would have been more satisfied with that than any other thing."*

*"It is recognition of the sacrifice he made. If he had been killed in a car crash, I wouldn't expect it...but when he was killed, you know 'defending queen and country', there should be some recognition."*

- 8.3.11 Many individuals felt that they had been penalised as GB victims or as military victims. Their view was that NI victims were well recognised and supported through compensation and through various initiatives that have arisen from the Peace Process.

- 8.3.12 Military victims felt that they had been used by the military and had not benefited once discharged. They felt their claims for compensation were not taken as seriously as civilians, particularly those claims in NI. An aspect of this was that victims felt that for GB victims there was a strong element of political tokenism: much had been done for the NI victims but not as much for the GB victims. Official acknowledgement

was also embodied in the punishments that had been meted out to paramilitaries. Victims felt betrayed or let down by the Peace Process where terrorists were released, with compensation and support, while for GB victims these were not commensurate. This was embodied by the comments of many victims who, while supportive of the Good Friday Agreement, felt that there had been no change of improvement for the victims:

*"I could see the reasons for the Good Friday Agreement, but the people who are benefiting most from it are Gerry Adams and the likes of him."*

*"Ok, if everybody is going to benefit from this agreement, what about me? In lots of ways X and I have been betrayed again and again and again."*

*"Basically we accepted the release of the prisoners. We weren't happy with it, like every other bereaved family, but it was part of the package, and we had no say in it, you've just got to live with it. We certainly weren't consulted over it, you know."*

*"I feel let down, very disappointed...no one has been punished, I just feel that it has all been a waste of life really, I feel as though we were all forgotten."*

*"All down the line nothing happened. All the support I got was from X and myself...(the Government) have said 'no' to everything I have asked for. The duty of responsibility that they have is to me, I have got every right to protect my rights and they keep refusing me."*

*"The LIVE programme is failing because we are not getting political support, we want to be able to turn around and say 'what about this'."*

*"I was devastated when the Birmingham Six were released. I felt that all the attention was on their suffering, but nobody told us they were going to be released, or gave us any support when they were released."*

### Memorials

- 8.3.13 Finally an important aspect for interviewees, in the need for recognition and acknowledgement, was the need for memorials. This was seen by interviewees as recognition and acknowledgement, made public, embodied and real. For most there appears to be a need for a physical memorial – a landmark of some sort:

*"The Government remembered the victims of September 11th by putting a million pounds into a memorial garden. But when we asked them for a hundred pounds for a plaque for him for a tree – no they wouldn't pay for it."*

8.3.14 However for others there appeared to be recognition that the experience of GB victims was varied, their locations dispersed and the events spread over a 30 year period. The concept of a 'virtual' landmark – a website or an archive was seen as one way of counteracting this. An example of this could be based on the work of Damian Gorman who developed an archive of individual experiences, feelings and testimonies. This is a project that is open to anyone who wishes to record their feelings and experiences, and this concept could be developed to create a virtual memorial that is accessible and representative of the variety of experiences that individuals have had.

## 8.4 Stoicism and Acceptance

8.4.1 A recurring theme through the interviews was that of stoicism and acceptance by victims of their experience:

*“Being killed by a terrorist is now part of modern living.”*

*“The bomb has changed my life, but you just have to get on with life. I was back at work after three months of coming out of hospital.”*

8.4.2 The majority of individuals who were interviewed were quite pragmatic and stoical concerning their experience. There was no difference between direct or indirect victims, or between military and civilian victims. The stoicism and acceptance of their experience is remarkable in that one might expect victims of terrorism to be unaccepting and unwilling to carry on 'as normal'. There may be a cultural dimension at work here in terms of the importance of 'not making a fuss'.

8.4.3 This stoicism meant that many victims had coped relatively well without much official, inter-agency support; relying for the most part on their friends and families. However this may also have created the effect of masking the need for support and help – an approach of 'cope and make do' which potentially absolves agencies of the need to provide appropriate support to victims.

8.4.4 Many victims used the metaphor of games and gambling – of fate and chance. This acceptance of the situation not only masks the needs of victims for help and support from an agency perspective, but also prevents victims from seeking help in the first place. Help-seeking behaviour in this context is fairly muted and contained and creates a pattern of 'learned helplessness'. Any services or developments that are designed in the future should consider this issue carefully, as it will have significant impact on how successful and accessible these services are. In mental health services this group of individuals are potentially difficult to engage or reach. Lessons could be learnt from the type of services that are being developed within mental health services to reach this group of individuals. Similarly this group of individuals are not particularly aware of their needs. Features of this include denial of the

experience, denial of their needs and in particular with low degrees of self-esteem, suffering from guilt and low self-worth. This group of individuals is therefore harder to reach or difficult to engage and maintain therapeutic relationships with.

## 8.5 Information Sharing and Communication Flows

8.5.1 Across all interviews a recurring theme was the need for more information and communication. A key point from the interviews is that while statutory agencies may be joined-up in response to immediate incidents, in the medium to long term, they are not necessarily joined-up in responding to the needs of victims. Many civilians and military victims learnt more about their situation via television and other media reports than they did from agencies. Others were still unaware of the circumstances:

*"I would like to know what the army did or would do nowadays to help people, I would like to know why he died – that hurts so much."*

8.5.2 Similarly many victims have become experts through their own exploration, study and investigation. Examples include victims who went to the library, surfed the internet and campaigned for more information. It appears that some victims were fortunate to find individual professionals (psychiatrists, GPs, police, army liaison workers) who were very supportive and informative, while others were completely isolated and unsupported:

*"I would have liked someone to have got in touch with him and asked him 'How are you doing?' either physically or mentally, 'Do you want any help', in any way?"*

*"No-one volunteered that information, no-one from the military bothered to volunteer and say 'how are you doing?'"*

8.5.3 The Criminal Justice System was highlighted as part of the system that was not effective in providing information or communication. Individuals were particularly critical of the Criminal Injuries Compensation Authority (CICA) and the legal system that evolves around compensation claims:

*"CICA is crap. The process has been a nightmare and has left me feeling bitter."*

*"The Criminal Justice Act in this country doesn't extend to Northern Ireland and the one in Northern Ireland doesn't extend to over here. So consequently in Northern Ireland where they can get compensation for anything, we can't get a penny here. I think the legal, the law has let us down badly on that, I would have thought that Northern Ireland being part of Great Britain, the law would have been the same but its not."*

## 8.6 The Context of the Northern Ireland 'Troubles'

- 8.6.1 Understanding the context of the incident, the 'Troubles' and the experience of GB victims is crucial in understanding their needs. It highlights the need for specialist support and care. A key feature of this theme is simply how different this experience is from the normal everyday lives that victims had before their experience.

### *The Military Perspective*

- 8.6.2 Military victims in particular describe a context and routines that are substantially different from civilian life. Throughout the military interviews it was clear that the experience of Northern Ireland led some military personnel to adopt coping strategies such as drinking, drug abuse and sometimes violent and potentially criminal behaviour. The situation was not the 'norm' that most military personnel were used to:

*"There were bricks thrown at you, you had verbal abuse."*

*"You cannot relax, eh? Old Grandma over there is going to pull a pistol and shoot you in the head. Old Grandma is coming out with glass and Domestos in the cup of tea – 'do you want a cup of tea lads?'"*

- 8.6.3 Following incidents the army provide a military de-briefing. This focuses on factual descriptions and understanding of the situation and military response, not the personal reaction and response. From these interviews it doesn't appear to routinely assess the effect of incidents on individuals:

*"I think it was more of a de-brief than 'has anybody got problems?', 'is anybody affected by this?'"*

- 8.6.4 A significant feature of this is that there was perceived to be no exit debriefing from the army or statutory emergency services; no mechanism for 'discharge' that would enable soldiers or other service personnel to cope with the different routines, cultures, tensions and challenges of civilian life once discharged from the army or retired from statutory organisations:

*"How can you train someone to kill, how can you train someone not to feel, then when you are finished with their services, just kick them out onto the streets and expect them to put the clock back to how they were before?" (Mother, ex-military victim)*

*"He gets into the criminal justice (system) and again all they see is the criminal behaviour. He gets into the prison service and even after prison there is no help with housing, with benefits, with pensions, with everything. It is just, are we living in the 21<sup>st</sup> century, or are we living in the days of Victoria?" (Mother, ex-military victim)*

8.6.5 The ex-soldiers who were interviewed for this study appeared to have had no debriefing or managed pathway from NI back to civilian life. However it is recognised that these accounts are to some degree historical and developments in the Armed Forces have recently taken place to respond to this need.

8.6.6 Some rationalised the political dimension by labelling it as a 'religious' conflict. Following the Good Friday Agreement and the Peace Process as a whole, the ex-soldiers and their relatives felt betrayed by the politicians and that in many ways the process undermined their role and efforts:

*"What pissed me off was the way my government treated me afterwards. It is them that made me a victim, the government – not the IRA alone."*

8.6.7 Relatives of military victims were particularly challenged by this. They describe having to come to terms not only with an injured or dead relative, but also to deal with this within the context of the high level of security and all the features of living with this. For example, parents described seeing their son in a hospital in NI where there was a strong military presence for security reasons:

*"We were under armed guard all the time, although the people that were protecting us were not on show, they were behind protective screening...we could only go when we were accompanied by the Red Cross."*

8.6.8 In NI they were chaperoned by the military and were warned about the presence of paramilitary informers within the hospital. However it is clear that the emergency service response and hospital care in Northern Ireland was good and individuals were reassured at the presence and involvement of the British Army:

*"It was very open and they have a lot of informers for the IRA and I was told that there were five doctors in the operating theatre and two of those were British Army doctors, they like them in there to keep an eye on what is happening...it reassured me that it was the British Army."*

8.6.9 In many ways the response of the military and agencies was much more focused, supportive and beneficial in NI simply because of the context. Military victims and their relatives appeared to obtain more support, expertise and benefits because they were in an environment that had developed and established 'routine' responses to what in many ways is quite a remarkable experience:

*"I think the army came that afternoon, they took over and started sorting out for the uh, asked us what we wanted, whether we wanted a full military funeral, or anything."*

8.6.10 Relatives and victims found that when transferred to GB or discharged from the army the high level of service input and support appeared to diminish.

8.6.11 For the military, the need for victims and families of victims to make sense and understand the situation clearly has to be balanced with the need for security. In some cases this has been successfully achieved, in others the emphasis has been on giving families and victims little information and communication which has then isolated them, whereas if they'd received more information, appropriate to security needs, it might have been a better option:

*"Some regiments are absolutely atrocious when it comes to victim support. They don't call it victim support – they call it post-bereavement welfare. Some regiments are absolutely atrocious."*

*"When you finish with the army, unless you're lucky in your own regiment that they keep an eye on you, that's it. They won't do a bloody thing for you, you are given two weeks pay and a couple of courses and that's it."*

8.6.12 It appears as if the further away geographically from NI, and the further away from direct military support and involvement the victims went, the more removed, less understanding and supportive were the services and support:

*"He got no help from the military when he wasn't doing his job, back in England."*

*"He was presented with this medal, the Northern Ireland medal, and when he came back off the plane, they said we will have to take it back, we didn't get you one – as he was in hospital, they didn't consider he was on their records anymore."*

8.6.13 This experience also appears to be true of medical, psychological, social and financial support.

8.6.14 Ex-service victims will need military and service-related input and involvement in the development of services. Ex-military victims all referred to the US where there is a network of Veteran's Hospitals and trauma centres funded by the Veterans Administration. They argue that they are a military problem requiring a military solution. Clearly the need for respite-type care in an environment where ex-military victims can engage with others from a similar situation would be ideal. The next of kin of military victims also felt unsupported, and that their needs should be considered:

*"I wasn't next of kin so I didn't fit into anything so I had no support from anywhere, no, nothing."*

*"I've had quite a battle with the regiment and the army about aftercare for bereaved parents, because they know what to do when there's a widow and children who need looking after, but they forget the emotional support for parents."*

#### Civilian Victims

- 8.6.15 The experience for civilian victims was different. For them NI had generally been of little, indirect interest. Their experience was more concerned with how their normal routines and lifestyles were changed irrecoverably following the incident:

*"Not there yet. What's normal?...The me that was there before the bomb no longer exists."*

*"It would never return to normality. Not as long as he isn't here. It is very, very hard to get back to normality. You keep trying and trying but its too hard...I will never get over it. People say you will get over it in time but you don't."*

- 8.6.16 However a few victims have made more of the connection with NI as a way of making sense of their experience:

*"None of them (family) has connected it (bombing) to Northern Ireland, but for me it has always been a bigger picture. I felt I could feel the pain of people in Northern Ireland as well as the families in Brighton."*

- 8.6.17 Whereas military victims were experiencing conflict as part of their norm, civilian victims describe how things will never be the same, how their normal life has changed. This is crucial to understanding the needs of military and civilian victims. Our analysis of the key themes highlights striking and unsurprising similarities. However their needs diverge due to the context of their experience and any service or development of services will have to take this into account.

- 8.6.18 Civilian victims not only need support services that enable them to get back and cope with their experiences, but they also need a mechanism to make sense of their experience. This could be enabled through networks, groups or shared information. However, they need to be able to make sense of what happened to them. Civilian victims described how meeting others from similar situations was beneficial to them:

*"I think it would have been helpful right at the start (to have seen trauma counsellors). I don't think I ever met anybody who is a specific trained person in trauma."*

*"You just cope day to day...I tend to cope the best way I can."*

- 8.6.19 There is a clearly defined need for mechanisms and services that could enable this to take place.

The response of Warrington to the Bridge Street bomb has been described as “unique”. There may be a number of reasons why Warrington’s response involved such an emphasis on understanding, and responding to, the Irish dimension of what had happened and on reconciliation. From our interviews with some of those involved it seems that some of the factors involved included:

- Attempts to answer questions such as “why Warrington?”
- The horror that greeted the bombing in GB, NI and Ireland.
- The involvement of strong and determined individuals who wanted to see “good come from evil.”

The Tim Parry Johnathan Ball Trust created by Tim Parry’s parents, Colin and Wendy, is one of the organisations set up in response to the bomb. It has developed into an organisation providing a substantial range of conflict resolution learning programmes for all ages, but especially young people. It has built long term, sustainable relationships with individuals and organisations in Ireland, and through its efforts has ensured that Warrington has learnt a great deal from the Irish experience. It has also built a £3 million Peace Centre to provide a safe environment for all its users.

The Warrington Project, set up shortly after the bomb, was intended to be a multi faceted relationship – building strategy between Warrington and Ireland, North and South. Its activities are based around working with primary school children.

WIRE, the Warrington Ireland Reconciliation Enterprise, was a discussion group set up by Colin Parry and the then Mayor of Warrington, Cllr Mike Hannon. Its purpose was to ensure that its members – the various new groups set up post the bombing and those that pre-existed the bombing – kept each other informed of their activities. WIRE discontinued in the tenth anniversary of the bombing.

It is important to note that these various projects have not always been in agreement about the way forward and some extremely difficult issues have had to be dealt with over the years. Nevertheless, the various activities within the Tim Parry Johnathan Ball Trust and other local groups that make up WIRE have been important in forging links between Warrington and Ireland (North and South), in ensuring Warrington could learn from the Irish experience, and otherwise supporting the movement towards peace, thus ensuring that the events of 1993 have not been forgotten. In doing this though, WIRE representatives are conscious that their focus is not necessarily shared by all of those victims more directly affected by the bombs who want to forget, insofar as they can, and move on.

## 8.7 Psychological Needs

- 8.7.1 Both civilian and ex-military victims described the need for psychological support as a consequence of their experiences. While only a few interviewees clearly described Post Traumatic Stress Disorder (PTSD) and Secondary Traumatic Stress Disorder (STSD), virtually all described the symptoms of this disorder:

*"I know he's got PTSD, when we used to go out he would sit with his back to the wall, you know, if we were with friends or something like that and even if we were together, with his back to the wall, and then if one of our friends went to the toilet, and took a little longer then you know, he'd be straight in, obviously thinking that they'd be hiding or something." (PTSD)*

*"I think my concentration level – it is improving but I think it has been – people find it frustrating that they can talk to me and I totally go off on a tangent or won't concentrate properly." (Difficulty concentrating)*

*"My dreams are very, very vivid. I have had lots of dreams about the incident and I can't cope, I dream this regularly." (Recurring distressing dreams of the event)*

*"I was having nightmares about walking through tunnels at the hospital." (Recurring distressing dreams of the event)*

*"Having nightmares, he was trying to climb through walls and it was just heart-breaking to watch him, I thought, how am I going to cope with this." (Recurring distressing dreams of the event)*

*"I was getting quite bad flashbacks, like really bad nightmares, and I was actually reliving it a lot." (Flashbacks)*

*"I find that things I was interested in before, I don't seem to be interested in...I was very avid, um what do you call it...enthusiastic photographer, I used to do my own printing and developing and so on, I just lost interest." (Diminished interest in usual activities)*

- 8.7.2 A range of conditions were described by victims, which could benefit from psychological intervention:

*"I started getting very bad shakes in my hands. I would just come out in sweats for no reason. I got a tightness in my chest, my heart was like beating all the time, my mouth was going dry and the sweat would just drip off my hands." (Panic attacks)*

*"There are two types of depression. I had the one where you stay in bed all day and then it lifts as the day goes on. All I wanted to do was sleep and hibernate." (Depression)*

*"I was asked by a psychiatrist in '89, when was the last time I had a decent nights sleep, I could tell him. 1970. I've not had a decent nights sleep since. I'm frightened to go to bed." (Insomnia)*

*"The psychiatrist said that this binge drinking had been triggered off by [the incident]." (Alcoholism)*

8.7.3 A significant number of victims had received anti-depressant medication. For many this was seen as a short-term mechanism to get through the immediate aftermath of the incident, however one-third had been prescribed long term anti-depressants. While recognising that there is a clinical need indicated for such medication, it may be more appropriate for individuals to be assessed for their suitability for Cognitive Behavioural Therapy (CBT) or even computerised CBT in the case of those individuals who were less amenable to one to one or group therapy. Certainly it would be worth exploring a range of services that could provide such support.

8.7.4 A range of responses to incidents and coping with the impact of such incidents were highlighted in the interviews. These suggest that psychological or psychotherapeutic input may be of benefit and could be used in response to the feelings of low self-esteem, anger, grief and shame. Ultimately some individuals reflected the danger of these feelings not being contained and explored in therapeutic settings:

*"Real self-destruct mode I went through. I just didn't care what happened to me."*

8.7.5 This level of support should be available to anyone who is traumatised or perceives themselves to be a victim of such incidents. Access to assessment would be an ideal starting point. However it is clear that the families and relatives of victims also need support and help. A number of victims and relatives referred to relationship or marriage difficulties, and a lack of understanding:

*"My last boyfriend kind of said, well you should be over this by now."*

*"The women would get together, it was good because we all got together, I wasn't the only (wife) one suffering on my own, and we told each other about our problems, and how they react."*

8.7.6 However, specialist psychological therapy represents one range of interventions for victims. The presence of these symptoms and responses highlights the need for careful assessment and monitoring by NHS, military health services and other agencies.

8.7.7 Existing procedures and styles of working may need to be reviewed. Referral to primary care services and from there to psychiatric services may provide victims with a clear pathway to effective assessment and

treatment. Many of the victims did not appear to have strong links with health services, although a few described the positive support that their GP and military liaison workers provided. Referral to mental health services would open up pathways for social interventions as well as psychological and medical interventions. No one described whether they had any support from social services, however social work professionals offer a range of support to reduce isolation and alienation from society.

- 8.7.8 The option of psychological or psychiatric support is however viewed with caution. Services to support victims may need to consider the most appropriate set-up to encourage use and engagement with services. Key to effective provision of such support is the engagement of NHS services and specialist trauma centres in the development of guidelines for the provision of services to support the victims of terrorist activities. Any guidelines will need to be developed with the input and involvement of all agencies.

## Emergency Planning and the Manchester City Centre Bomb

*First, the service concentrated on the immediate action taken on by the emergency services and the help given. It reflected the heroism and the quickness of reaction of the police, the fire service and the ambulance service. Between them, they persuaded an unwilling 80,000 people to move out of the City Centre, rescued and comforted those who did not get away quickly enough, and bravely went into severely damaged buildings to look for the injured. What a miracle no one was killed. (Heginbotham 2002)*

If we add in the role of hospital staff who go on to treat the injured, this account of the service following the Manchester bomb captures much of what we perhaps expect of the emergency services in the immediate aftermath of a major terrorist incident. The account continues:

*It is perhaps also appropriate to reflect upon one small body of people who have not often been mentioned, the emergency planners of the City Council. In the first couple of days after the explosion, businesses in an area almost a mile across were inaccessible. With thousands of people in the City Centre and a number of the buildings in a very dangerous condition, it was remarkable how quickly meetings were organised, information given out, and the majority of businesses allowed to get back to work in very short order. (Heginbotham 2002)*

To this list can be added those council officers and volunteers who staff Emergency Rest Centres and organize other accommodation for evacuees, Social Services staff and volunteers from organisations like Victim Support and The Samaritans who provide support to those affected, those who run helplines, those who deal with the media, those local authority staff who clean the streets and so on. Even if we consider only the immediate aftermath of major terrorist incidents the potential list of those involved is long. The size and nature of the list will vary depending on the location and effects of the incident but it is clear that in major incidents like those in Warrington and Manchester, many individuals will be directly involved in responding to meet the needs of those caught up in the incident. The demands on them may be very high and in our interviews with representatives from the emergency services, hospitals, local authority emergency planners, and the voluntary sector this emerged as an important issue.

Examples of the kinds of issues faced are described below.

Several people mentioned the concern that staff felt for their own families and friends where either they knew them to be in the centre near the incident or where they did not know their whereabouts. Thus, for example, hospital staff in both places were busy treating the injured while anxious themselves about their families and unable to find out whether they were safe; emergency service workers experienced the

same problem. One person pointed out that this was worse for parents of teenage children compared with parents of younger children since teenagers whereabouts are less likely to be known.

Whatever the level and quality of advance planning there is bound to be confusion in the period following incidents like these. These can add to the stress for emergency services staff. In Manchester, for example, there were several false reports of:

- Hundreds of casualties lying in the road (these turned out to be mannequins from shops).
- Secondary devices several miles apart. In one instance there was a report that a bomb had exploded in a pub but the ambulance officer who investigated found the pub to be deserted but intact. He was thus fearful that the bomb was about to explode while he was standing outside the pub.
- Seventy people trapped in the Arndale Centre. These reports were "definite" and the medical and ambulance teams at the scene, as well as the hospitals, were fully prepared to deal with the serious injuries and fatalities they expected as a result of this. This caused further problems in that these teams wanted to go in, in order to save lives, but the buildings were not deemed safe enough (it was believed there were further bombs and there were concerns over live electricity combined with water). The officer faced with making the decision faced accusations that he was causing deaths by delaying but wanted to ensure the safety of the emergency teams before allowing them in.

Lack of sleep was mentioned by several people who also spoke of "running on adrenaline." In the first few hours and days after each incident a great deal was done and happened. In some cases people had to deal with the media and were perhaps especially affected in that they had to meet their demands, from early in the day to late at night, and carry out their "normal" duties.

We were told of a few individuals in the emergency services in both places who had been severely affected by their experiences and had needed much support from their peers or from a counselling or occupational health service. In some cases this related to known aspects of the person's life (e.g. having previously lost a child of their own or having suffered from anxiety) or from their lack of experience but in others it was more unexpected and less easy to explain.

According to several interviewees, the culture of the emergency and other services has changed over the last ten years with greater organisational recognition of staff needs in these situations. Previously there may have been a greater acceptance of the stresses involved as "just part of the job" and that emergency service personnel "don't have time for PTSD."

## 8.8 Medical and Health Related Needs

- 8.8.1 Medical, and in general, health care provision appeared to be variable.

*Northern Ireland and Immediate Hospital Care*

- 8.8.2 Hospital care in NI, although provided in a high security environment, was experienced and viewed very positively:

*"I will say that the staff were absolutely brilliant."*

*"The care was exemplary. He was in a room of his own, he had his nurses and that sort of thing and they were excellent."*

*Hospital Care in GB and Follow-up*

- 8.8.3 Hospital care and follow-up in GB was not generally viewed highly. Direct victims did not appear to be offered specific or specialist support, nor did relatives and family of victims:

*"None (support) at all (from the hospital or GP)."*

*"No-one suggested it (hospital care). Not even a friend. No-one. I didn't even know I needed help. I didn't see that for myself."*

- 8.8.4 However, one victim felt that she had received a great deal of moral support reflecting the views of other interviewees which highlighted the variability of the care and follow-up:

*"I felt safe in hospital, and felt that I got a lot of moral support from the nurses and doctors on the wards."*

*Psychiatric Care*

- 8.8.5 While provision itself is variable, there is a need for better assessment and treatment of both victims and their carers. Psychiatric services were not viewed very positively:

*"The psychiatrist was a total waste of time because he wanted to know what kind of childhood I had. What's wrong with me is directly due to my son being killed in Ireland; nothing to do with my childhood."*

*"The psychiatrist never turned up, every-time he was supposed to turn up, he was either late or didn't turn up."*

*"We visited a psychiatrist but that was a pre-requisite for Criminal Injuries...we wouldn't have gone out of choice."*

### Primary Care

- 8.8.6 The experience of GPs and primary care services was more positive, although again variable. They were often supportive but there was a perception that they didn't understand the situation:

*"One GP was very supportive, I am registered with a doctor who is not very supportive."*

*"(GP) was great, he was always there when you needed him..."*

*"The only thing is my doctor that helped me out and kept me going."*

*"I expected more from my previous GP, people didn't show any compassion and were ignorant of my experience – my current GP has been fantastic – he has backed me to the hilt."*

*"We saw the family doctor once. He had got absolutely no idea. All he could say to me was, you might be best going to talk to one of the professionals."*

- 8.8.7 Effective or excellent care appeared to be related to the response and input of a few outstanding individuals rather than to the NHS and other health services as a whole. Military hospital care appeared to be high quality although the psychiatric input was not viewed positively and appears to be dependent on the NHS to provide it.

## 8.9 Social Needs

- 8.9.1 The needs of victims and their relatives are not simply health-related. A number of interviews highlighted how victims or relatives had lost control in their lives as a consequence of their experiences. Ex-military victims described how they have become violent and aggressive and its effect on family, friends and the public.

### Criminal Behaviour

- 8.9.2 The link between coming out of the army, having problems coping and the incidence of criminal behaviour in ex-military personnel was mentioned in a few interviews:

*"I've just done three and a half years for criminal damage and ABH...I was finally given a ten month sentence."*

*"(Ex-soldiers in prison) they are coming in all the time...I've seen a lad there he has been in jail for 17 years, he was given an original 20 for a murder but they upped two years later to a 30 year sentence...I would say that 10% of the prison is ex-army."*

*“Judging for the ones I know in prison and judging for the ones I know outside, there are quite a few on each wing that are ex-servicemen.”*

#### Homelessness

- 8.9.3 A number of interviewees also referred to the high number of ex-military personnel who were homeless or sleeping rough. This is in line with other research and the experience of voluntary agencies, where it is recognised as a key issue. It should be noted that, due to the methods of contacting victims, none of those interviewed in this work were homeless:

*“The number of young men who are on the street because the army has finished with them but didn’t bring them down from what Northern Ireland was.”*

*“A lot of soldiers left on their own, over 20% of the down and outs in London are ex-servicemen and not old servicemen but servicemen who have just left – heard of two ex-airmen that are down and outs because of the psychological effects of having served in Northern Ireland.”*

#### Social Isolation

- 8.9.4 Many victims, ex-military and civilians, became isolated and without support as a consequence:

*“For the victim community in general I think the situation is dreadful. There are people out there who may have lost a son 20 years ago and no-one has spoke to them since about it. They have never spoken to anybody because they don’t know where to go or to whom they can talk.”*

*“I’m as certain as I could ever be, 99.9% certain that the vast majority of British victims or survivors whether they are British or Irish born living here will have encountered absolutely no help, or support or outlets for their emotions...the vast majority have been left to get on with it, get on with your life, pick up the pieces, stiff upper lip and all that, get on with it, stop crying.”*

#### Economic Impact

- 8.9.5 Many victims experience a profound economic impact as a consequence of their situation, either through unemployment or loss of earnings:

*“In one sentence, (the Manchester bomb) ruined it, brought it to an end. I had a very active life, had everything, friends, good life, good living, just when the bomb went bang, so did I, then from that year after the bomb things were just getting on top of me.” (Businessman)*

*"The bomb did not just affect me, it affected all the staff who worked for me. I had to say I have to cut your hours back because I can't afford to pay their wage." (Businessman)*

*"I ended up with nothing and I think if anyone had ever said that one day you will have no money, I would have laughed because my bank manager, we used to go out, he used to say to me 'it's so lovely, you have made a fortune, don't lose it'." (Businessman)*

In Manchester after the bomb there was a great deal of success in helping businesses that had been affected. Business organisations, the City Council and others worked together to help to house businesses and administer the fund set up to support them. Many of the small traders and retailers had no or only limited insurance and especially needed the financial support provided.<sup>5</sup> Some of the immediate impacts were on others who depended on the city centre e.g. the window cleaners who no longer had very many windows to clean.

The success of Manchester in promoting itself as a vibrant city recovering well from the impact of the bomb led to some difficulties in also getting across the message that there were some businesses who were not quickly re-housed and whose recovery was desperate and slow. The chair of the distribution committee for the fund has pointed to these mixed messages causing problems in getting enough publicity to raise funds to support that part of the business community which had not recovered well (Heginbotham 2002). Of course it is impossible to know whether those businesses would have struggled anyway without the bomb.

### *Relationships*

- 8.9.6 It is clear that relationships with partners, families and friends were strongly affected by the experiences of our interviewees. Families appear to have struggled to maintain calm and stable environments, to avoid violence and aggression and to maintain solid relationships:

*"Living with him was very, very, hard. I had to watch what I said to him, how it was said it to him, it was just like walking on eggshells all of the time...we didn't get any help at the beginning." (Wife, ex-military)*

*"I was getting violent, in cycles, twice a year, I was blowing my top...I threatened to kill her and everything...sat there with the children...I was just frightened in case I did something really crazy with the wife and kids. We split up, better to get divorced, it wasn't helping the children." (Ex-military victim)*

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<sup>5</sup> A total of £2.7m was distributed – the average grant or loan being about £4000.

*When you're out looking for a girlfriend and you've got to tell them, you've got to say, 'oh by the way, I was very badly injured. I'm very badly scarred'...because you've got to say something." (Ex-military victim)*

*"After the bomb I was not strong and because of that I allowed my ex-husband to control me, manipulate me and basically abuse me...I have been emotionally abused since." (Female, civilian victim)*

*"It was completely different (NI), at the back of your mind, you just couldn't get rid of it, and the effect on the marriage...you sort of just didn't fit into family life." (Ex-military victim)*

- 8.9.7 The effect on children appears to be quite powerful. Although not clearly specified as a need by victims, this study has highlighted the need for support for children both in the medium and long-term:

*"We all have strange behaviour, that you can't explain, strange feelings. My children backed off because they wouldn't talk about their sibling." (Ex-military victim)*

*"You know when we argue, you know people say hurtful things to each other you know, and it obviously plays on the children's minds and then afterwards we both sit down and talk to them." (Wife, ex-military victim)*

- 8.9.8 While families experience quite obvious and direct problems, such as conflict and living with the psychological problems that the incident created, other more insidious problems were also noted. For example, the loss of 'potential' family members was significant – the death of a sibling or child is not just one death to cope with, it is the loss of the family line:

*"So there would have been grandchildren, we've got a little granddaughter from one son, but the point is we've only got one set of grandchildren now to look forward to, whereas before we could have had two." (Father, ex-military victim)*

- 8.9.9 Similarly families often appeared to put on a brave face – to help each other out by denying their upset:

*"We all tried to protect one another by trying not to get upset in front of each other, we tried to pretend we were coping." (Civilian victim)*

- 8.9.10 Individuals within the family, often the wives, appear to have taken on strong, supportive, caring roles with little support themselves. This issue will be picked up again in the section on examples of good practices, however it highlights the value of respite for families to enable time and space for family members:

*“Just somebody there to support me, or whatever. So that I can say, God, give me a break. You know, just to go somewhere, to phone up somewhere like a veterans’ home and say look can you please take him for a couple of days, I just need a break, to make it easier.” (Wife, ex-military victim)*

*“We went up as a family, you know for two weeks, and he met up with the boys, have a chat or sit and talk to psychologists and psychiatrists, just like we’re talking here. I definitely need something like that, it would definitely help.” (Wife, ex-military victim)*

#### Employment and Work

- 8.9.11 Ex-military and civilian victims described how they had lost jobs and social networks associated with jobs:

*“I was angry because I thought I have lost my job through no fault of my own. I seem to have lost my career, more importantly my health and I lost my friends.” (Female, civilian victim)*

*“I went for an interview once, and they said, ‘You haven’t worked for 4 years, why is that?’ I just bawled. All I had to say was that my son was killed; they said we will let you know...it sunk in to me that I would never work again.” (Father, ex-military victim)*

*“I always say, ‘what qualifications would I need in this country today, to carry a machine gun and possibly three or four hundred rounds of ammunition through the gates of a primary school, with children around?’...You’d need to be a very responsible person, yet it counts for nothing, it doesn’t count, it doesn’t count for anything.” (Ex-military victim)*

*“I’ve written myself off because other people in this country have written me off, you know. It’s just a waste of time (applying for jobs and getting rejected).” (Ex-military victim)*

- 8.9.12 The importance of work and employment is underlined by the experience of individuals who described how work enabled them to also make sense of their situation. However overall, work itself was described as beneficial, as along with the social interaction that it brought with colleagues, interesting work also enabled individuals, particularly wives and partners to participate in an activity for which they were recognised and appreciated outside of the caring, supportive role they have provided. To others it also represented an escape from the situation:

*“I’m glad I have my work to be honest, I get some sense, do you know what I mean, I’m happy when I’m working – happier.” (Wife, ex-military victim)*

*“When I got the job, I felt useful again. I started to get into it again.”  
(Civilian victim)*

8.9.13 However for female victims a type of ‘double jeopardy’ appeared to be at work; being a victim *and* being a woman in the workplace, particularly for emergency service personnel, appeared to encourage colleagues to question their ability:

*“I know a lot of women at the time felt, you had to prove yourself, so I didn’t want to let them show that I as a woman couldn’t cope.”*

*“He said, ‘Well it doesn’t look like there’s much wrong with you’, and he kept goading me. He said ‘you aren’t one of those stress cases are you, that can’t cope with it are you?’”*

Those interviewees working with ex-service personnel identified the following as the main problems that *may* emerge:

- Homelessness.
- Relationship breakdown.
- Difficulties with children.
- Alcoholism.
- Mental health problems.

Some of this is well documented among ex-service people (e.g. Randall & Brown 1994; Ballintyne & Hanks 2000) and, more generally, it is hard to show that serving in Northern Ireland is different from other postings in these respects, especially since many individuals will have had several postings in their service careers.

The accounts given by the interviewees as explanations for these problems also pointed to the problem of attribution. For example, the army provides an organised environment that provides food, housing and a social life. These are removed on leaving the service and some people may not cope without the organisational support. This may be because it was this kind of support and structure which attracted them to the army in the first place. There is though a recognised need for support to be provided to those leaving the services (see Section 9). This has mainly fallen to the voluntary organisations set up to help ex-service personnel but the recent setting up of the Veterans Agency, and the Veterans Initiative within it, points to a greater recognition of the role of the MOD in supporting veterans. Over the last few years much work to improve resettlement of military personnel has taken place.

## 8.10 Financial Needs

- 8.10.1 The financial circumstances of victims varied. It is not clear in some cases whether this is a direct consequence of their experiences.

### *Compensation*

- 8.10.2 Certainly the provision of advice and support to victims is variable and the experience of some victims suggests that they are struggling financially due to the complexities of the compensation and benefits system:

*"From now until the day I die, my income is constrained; there is no room for improvement ever. I will always get what the Government give me."*

- 8.10.3 A number were on benefits including incapacity benefit or income support. All were coping with complex financial arrangements while coping with the impact of their experience or loss:

*"I got about 10p a week Income Support. It was to do with my pension from work."*

- 8.10.4 Virtually all victims felt let down by the compensation system. Many felt that it favoured NI victims rather than GB victims, favoured civilians over the military victims and that it was complex, time-consuming and that compensation to victims was unfair relative to other similar types of claims:

*"The day we got the compensation...I remember that because a footballer had got £600,000 because someone had called him a prat in the newspaper. Quite honestly I wanted to tear the cheque up but we were skint."*

*"I got bricked in '78 in Middletown and I didn't get a penny, yet twenty years later or less you can go to Kelly's Corner and get a brick in the head you get £500. If you have to have a stitch its £1500...two stitches later £1500, right that's my holiday paid for."*

*"We didn't want it, but they said everything would be done on our behalf, looking back I wish we hadn't taken it. I found it was an insult."*

- 8.10.5 Many felt that there were built in barriers to obtaining compensation that included a lack of support, advice and information and that the legal system almost conspired to prevent claims:

*"Years after when we got talking...when they eventually did get involved everybody got criminal injuries, it was too late for us then. Nobody told us to apply so we never did."*

*"It took nearly eight years to get a final assessment from the DHSS and during that time I had to go every six months for a medical at the DHSS with a doctor and I found that quite stressful."*

- 8.10.6 Many saw compensation not as a financial benefit, but more as 'official' recognition of the problems caused by the experience, which was deemed to be out of the victim's control:

*"I see compensation – it's the wrong word, it's not the right word, it's an acknowledgement. It's not a value on his life or anything like that, it's an acknowledgement. A recognition that something has happened to him. This person is a victim."*

*"The Government remembered the victims of September 11<sup>th</sup>, by putting a million pounds into a memorial garden. But when we asked them for a hundred pounds for a plaque for him for a tree – no they wouldn't pay for it."*

*"There is a lot of things the Government should do for victims, we didn't do anything wrong so why do we get penalised. They should do something for all victims...they spend more money on war than on victims."*

- 8.10.7 While there were criticisms of the lack of information, advice and support for victims in obtaining compensation, there was also criticism of the process of obtaining funding. In particular, victims felt exposed, humiliated and mistrusted:

*"It was intrusive and demeaning...they weren't going to take into account loss of company – the fact that you lost someone and were not going to get grandchildren. All that was taken out and it was put onto financial grounds."*

*"We had a bad time because for several weeks they didn't send me any money, so we had to tell them...they would say come down to the office and we'll give it to you. What hurt us was that I had to queue up and listen to peoples' conversations like: 'I'll see you down the pub after I got my money'. We just fitted in with them, we weren't a special case. We should have been treated differently. Its bad enough going through this trauma and then you find you have no money."*

*"There were times when it really rankled that the compensation amount was so pitiful, but you have got to be careful, how you talk about these things –people think you are trying to make money out of it."*

*"They put at the time, the value has probably gone up, since that £7,500 on his life, I found that so objectionable, as in my working life I would constantly experience employees claiming compensation against the company for petty little injuries, you know, negligence, they have tripped on the floor. They would accuse the company of tripping them up, and we*

*get guys that claim and win thousands of pounds in court or settlement out of court."*

*"He said 'Do you mind standing up so I can see your legs? Can you put your arm up?' It wasn't what couldn't you do, but what can you do. He can put his arm up but has no strength in it as his elbow has gone. It doesn't matter that he will never do what he wanted to do in life."*

## **9 Addressing Needs**

### **9.1 Introduction**

9.1.1 Throughout the interviews victims described examples of good practice, where their needs had been addressed or where interventions had been successful. In this section we highlight these as potential working models for effective practice and also describe some of the developing agency contexts for intervention.

### **9.2 Agency Context and Responses**

9.2.1 In summarising agency responses distinctions have to be made between responses in the immediate aftermath of an incident and responses in the longer term, and particularly between civilian, emergency service and military-related organisations. Arguably most developments have taken place in relation to supporting ex-military personnel and this is discussed first.

#### *Supporting Veterans*

9.2.2 As is pointed out in section 9.3 there are a very large number of organisations dedicated to the support of service and ex-service personnel. These range from small regimental associations to large organisations such as the Royal British Legion (RBL). They may be specialised, as with Combat Stress which focuses on PTSD or the various organisations such as the Sir Oswald Stoll Foundation which tackles homelessness, or they may provide a wide range of services e.g. The Soldiers' and Sailors' Families Association (SSAFA). The Confederation of British Service and Ex-Service Organisations (COBSEO) bring many of these organisations together.

9.2.3 As an example of the services offered by these organisations, SSAFA's casework statistics for 2001 show that they had over 40000 cases in that year. More than 22500 of these were army related. As might be expected from the age profile of veterans and the increasing need for help with age, the great majority of cases involved people aged over 60. Clients mainly heard about SSAFA's services from the person or organisation that referred them (44%) and referrals mainly came from local authorities and the like (35%), through regiments or other service bodies (27%) or through advisory agencies such as the Citizens Advice Bureau (20%). The services provided were varied and included services relating to financial issues and debt, medical problems, general welfare issues, household problems and accommodation.

9.2.4 In Government the responsibility for service personnel and their families falls on the Ministry of Defence (MOD). Until recently, for ex-service personnel and their families, there have been arrangements in

respect of pensions and there may have been regimental support but there has been a perception that ex-service people and their families were no longer an MOD responsibility. Rather, while they were eligible for help from ex-service organisations, they also have the same right (but no greater right) to services from other government departments and local authorities etc as other civilians.

9.2.5 The appointment in 2001 of a Minister for Veterans Affairs and the subsequent establishment of the Veterans Initiative within the newly renamed Veterans Agency (formerly the War Pensions Agency) marked a significant change. The Initiative can be seen as contributing to two of the present Government's agendas:

- For more coherent, 'joined-up' services and thinking – across departments within Government and through working in partnership with relevant organisations outside Government.
- To reduce social exclusion by, in this case, taking steps to meet the concerns of veterans that they are no longer cared for once they have left the services and by recognising and strengthening the identity of veterans as a group to whom society owes a particular debt.

9.2.6 Included among the various activities within the Veterans Initiative are a multi-departmental multi-agency Task Force charged with developing an integrated veterans policy, a wider veterans forum to build partnership between government and veterans organisations, and nine working groups to move things forward on a range of issues.

9.2.7 Among the working groups are ones concerned with:

- Improving long-term care.
- Establishing the needs of veterans.
- Developing MOD resettlement arrangements to protect the most vulnerable.
- Improving partnership between government and service organisations.
- Reviewing pensions and compensation.
- Improving communication and enhancing the status of veterans.

9.2.8 Progress on some of these has been quicker than on others. Some improvements have been made into resettlement arrangements and resources put into this area. As a key component of the needs map, Kings College, London has carried out research focusing on the psychological needs of Gulf War veterans. Schools have been provided with material designed to educate the young about the key roles played by veterans in the service of the country. The argument from some veterans organisations that veterans' special status should be reflected

in a separate system of healthcare etc more geared to their needs, is not one which, as yet, seems to have made much headway.

- 9.2.9 While there are a number of problems to be faced and issues to be resolved, it seems that positive steps are being made towards meeting some of the needs identified by our military-related interviewees as well as some of those that were not identified because of the nature of our sample (e.g. homelessness).

#### *Emergency Services*

- 9.2.10 Emergency service personnel receive support in several ways. Perhaps first and foremost is that provided by peers, and some agencies we spoke to had built this into post-incident debriefing. In-house counselling is also available in a number of organisations and there was also access to more specialist facilities. There were though some indications of what one interviewee called a “macho” culture in some organisations and associated pressure not to “succumb” to the high stress experienced by many staff, especially after time had passed since the incident.

#### *Civilians*

- 9.2.11 As yet there is no such overarching body concerned with meeting the needs of civilian victims in Great Britain, though government responsibility for victims of crime rests with the Home Office. There is a Victims' Charter which sets out the standards crime victims and their families should expect from agencies within the Criminal Justice System. In Northern Ireland a Strategy for Victims has been produced and a similar joined up national strategy for victims and witnesses is to be published during 2003. In terms of direct support to victims the Home Office funds Victim Support Schemes and recently has funded other victim organisations such as Support after Murder and Manslaughter (SAMM), which has close links with victim support.
- 9.2.12 The National Association of Victim Support Schemes (NaVSS) administers the block grant received from the Home Office. It is dispersed to the 42 local Victim Support charities on the basis of local crime figures. NaVSS also disseminates ideas of good practice, produces a code of good practice and outlines the basic requirements for victim support schemes. Victim Support Schemes currently have about 13000 volunteers, about a fifth of whom have received further training to work with victims of serious crime (e.g. relatives of murder victims).
- 9.2.13 As an organisation NaVSS has good links with CRUSE which supports the bereaved. For example, the two organisations set up a helpline for those in the UK who were affected by the events in New York and Washington on September 11<sup>th</sup> 2001. Another recent development is

that NaVSS now produce a code of practice and guidance materials for supporting people who have had relatives, friends or colleagues killed as a result of terrorist activity. A strategic plan for responding to such events is currently under development. The extent to which this will be helpful to the victims we interviewed and others like them is doubtful. Though it can provide long-term support, Victim Support is generally called on in the early days after a crime and referrals are often made by the police. Victims of the Northern Ireland 'Troubles' in GB are now unlikely to be referred in this way but would probably have to self-refer.

9.2.14 Military-related developments such as the Veterans Initiative focus on a group which includes victims of past events (while also learning from their experiences for the benefits of current service men and women). In contrast most developments in emergency planning, victim support and so on are geared towards responding to future events. This makes it less likely that victims with long-standing needs will benefit from these developments. Generally, the emphasis is on the short and medium term.

9.2.15 One of the problems in identifying such long-term needs is of identifying those people involved in incidents such as those in Warrington and Manchester. While there are lists of those affected (e.g. WIRE's list of those to be invited to memorial events; Manchester's list of affected businesses) key statutory agencies do not seem to maintain a database of those caught up in these incidents and so it is harder to track the longer term consequences. It is noteworthy that the paper by Carley & Mackway-Jones (1997) which simply details anonymously the injuries suffered by those attending Accident and Emergency as a result of the Manchester bomb is presented as a model for others to follow in future incidents. This suggests a need to extend the degree to which incidents such as these are documented.

9.2.16 The inability to track victims together with an apparent lack of specialist support for civilian victims in the longer-term means that any services provided to them are most likely to be simply a part of a general provision, rather than derived directly from their experiences as victims of terrorist incidents. Thus there is a direct parallel with the issue of whether veterans' needs should be met as part of a separate system. In response to longer-term needs then the question is whether such general provision is sensitive enough to the specific needs of victims of terrorist activity.

### **9.3 Groups and Networks**

9.3.1 A number of organisations, groups and networks appear to work very successfully to help victims. Regardless of whether these groups are focused towards the needs of military or civilian victims, there is much to learn from their approach and successful interventions.

- 9.3.2 Charities played a significant role in supporting victims. These included civilian and ex-service charities.

*The Legacy Project*

- 9.3.3 The Legacy Project was unsurprisingly a major feature of the interviews. Clearly most individuals had been recruited through the Legacy Project or via others they had contact with and there is a potential built-in bias here. However we feel it is important to describe how effective the Legacy Project has been:

*"I have met people who can understand what I have gone through. I'm not saying family and friends didn't but I think to say you have been injured or blown up by a car bomb thankfully its not in a lot of peoples experiences. I think it's so dramatic it doesn't register and I think a lot of people just don't know how to deal with it."*

*"I have just found out about the Northern Ireland Memorial Fund and Trust. That would have been useful to have known about earlier, but I only found out about that through the dinner the Legacy Project organised."*

*"I feel there is a lot that I have been asked to contribute to and I have got a lot out of that (Legacy Project)."*

*"When I met people at the Legacy Project, it helped to put some things into perspective."*

*LIVE*

- 9.3.4 Alongside the Legacy Project, the LIVE programme has been described as a successful and effective source of support:

*"I was lucky because I was in the LIVE programme."*

*"The LIVE project...that is for my personal growth development and I would like to be in a position where I can give (back to people)."*

*"(The LIVE programme was) hugely beneficial. Until I went to LIVE...I was almost a victim. I remember walking into the room at Glenree and just knowing it was safe for me to share my story for the first time...LIVE has opened a lot of doors to me...it was through being involved in the LIVE programme that I was able to get in touch with things I hadn't been able to and in ways I didn't know."*

*"The LIVE programme, it was the first time for nine years that I could actually talk about it so that people could understand what I was talking about and they didn't back off."*

*"I found the LIVE programme really useful...before I got involved I saw myself as a victim but because I have gone through a lot of things in the LIVE programme, I now see myself as a survivor."*

Red Cross

*"The British Red Cross, there were two girls...they had obviously been through this before, they were friendly and helpful. She was very reassuring."*

Round Table

*"I got a lot of practical help from the Round Table in Birmingham...they paid for my parents' taxi fares so that they could visit me in hospital. When I first got married after the bomb, they paid for our honeymoon."*

Compassionate Friends

*"A man and his wife lost their only child, thirty year ago now, and they've been marvellous, they've supported me, but the Compassionate Friends which is a support group for bereaved parents, that's the support – because there's no family around."*

BLESMA (British Limbless Ex-Services Men's Association)

*"BLESMA did help, they got his pension sorted out, and everything like that; he got what he was entitled to."*

SSAFA (The Soldiers' and Sailors' Families Association)

*"They also helped me financially, twice, they were good."*

Church

- 9.3.5 The Church (regardless of denomination) was regarded as a key routine support to those who used it. Some church groups have acted as facilitator of reconciliation within the context of the NI Peace Process. Ex-servicemen also highlighted the importance of the role of the Military Chaplain:

*"I have been going to my church for the last...since 1990, and they have been very supportive." (Civilian victim)*

*"I started going over to NI with a Christian group from both denominations, Catholic and Protestant, and I went over there...I found that quite helpful, meeting with people from what could be perceived as the other side." (Civilian victim)*

*"I found my church was the best support to be honest." (Civilian victim)*

*"More than anyone else he (the Military Chaplain) was the main one...he was very good...he was like a soldiers father." (Ex-military victim)*

### *Regimental Support*

- 9.3.6 While many ex-military victims and families of military victims were critical of the level of support from the Ministry of Defence and the British Army, many perceived that the Regiment had played an important part in providing direct and continuing support. In particular the Commanding Officer played an important and psychologically powerful support for some families. Regimental Welfare Officers were also praised for their effectiveness. It was clear from the interviews that Regiments differed in their response to the needs of victims. The key to successful support was in the provision of mechanisms (meetings, anniversary cards, follow-ups) that worked to provide a form of pastoral care:

*"On the day it happened...their (the regiment) response was quick and generally very good."*

*"I heard nothing from the Regiment, and then three years ago, they started sending a card to us on his anniversary, I think, well that is very nice, but what happened to the previous twenty years? I feel as though they could have been more supportive."*

*"We received a letter today, from uh, his battery commander, what was his battery commander then, I mean, he does write to us...roughly around the anniversary of his death, and also quite a few other times as well."*

*"We got a lot of support from our family and friends but it would have been nice to have known that there was somebody out there who could have helped. When it happens you are just so alone."*

*"The regiment's welfare officer did things for us. He ran round and did tasks for us."*

*"Each regiment should have its own welfare assistant, if you are talking regiments; you need a bigger welfare service."*

*"He was a practical no-nonsense sort of bloke...he knew when to step back and when to come forward."*

*"We didn't go anywhere. The only help we had was our 'Visiting Officer'...he stayed with us, on and off for about six months."*

- 9.3.7 Regimental associations or even a National Northern Ireland Association run for veterans of Northern Ireland was cited as a resource that could be set-up:

*“If I’m feeling particularly fed up or stressed I tend to have a chat with one of the lads from the regiment. The Regiment Association is good at getting lads together three or four times a year and you feel you are still part of it.”*

*“We should be recognised for what we did...I think if as an association we can do anything to look after or help anybody that’s ill, injured or traumatised in any way from serving over there then we should be doing it.”*

If all the regimental associations and small and specific groups are included, there are apparently about 3000 charitable organisations providing support for ex-service personnel. Even the major “players” number in three figures. Within government a wide variety of departments may be involved in responding to the needs of veterans. The scope for fragmentation in service delivery is therefore great and it was partly with this in mind that the Veterans Initiative was developed as a partnership between government departments and the key ex-service charities in order to “join up” services for veterans. After a positive start, some concern has been expressed that the Veterans Initiative has got “a bit stuck” but it is to be hoped that this is not the case, as the issues are central to the needs identified in this report.

There is possibly some movement towards rationalisation within the voluntary and charitable sector as a response to falling numbers and perceived waste of resources. However this will not be a speedy or easy process.

Another key issue on the agenda of some organisations and as reflected in some of the interviews with veterans and family members is the setting up of a separate system of support for veterans, for example, in terms of hospital care. This would model the system in some other countries. There is debate about whether this is appropriate in this country and whether, for example, elderly veterans should be treated differently from other elderly people.

## **9.4 Individual Responses not Service-Level Responses**

- 9.4.1 We described earlier that medical and health care for victims was particularly variable in Great Britain. The experience of the victims we interviewed highlighted that often successful health or medical care was down to the efforts of one individual rather than the service as a whole. This is reflective of the general experience of health care service users. A programme of modernisation is being driven by the current Government to reduce the variability and standardise assessment, treatment and care:

*“The turning point was the lady who came to have a look at him. She was actually PTSD trained, and she worked with young offenders, and*

*she diagnosed PTSD, and that was the first time I got the diagnosis. Apart from her and the psychiatrist support I got no other help.” (Ex-military)*

*“A two-week intensive course, after two weeks, the wives were brought in and they were de-briefed by clinical psychologists and psychiatrists, then it was group therapy for a year and a half – two years.” (Ex-military)*

*“I remember he was very anti-smoking but he kept giving my wife cigarettes, must have stopped on the way and bought cigarettes for her. Magic doctor he was.” (Bereaved father of military victim)*

*“The doctor was brilliant, I remember him sitting here, next to me.” (Civilian victim)*

*“The main source of support, came from the local police.” (Civilian victim)*

*“The support which was real and taken up was the police, the police allocated an officer to the family and they stayed for the best part of a month...short of moving in and living there, he was with us sometimes 12-16 hours a day, probably wasn't that long, but he was there, opened doors, washed the dishes, he would greet people, meet people, keep people away. He played the part of butler, maid and friend all rolled into one, his help was extremely useful.” (Civilian victim)*

*“The psychiatrist...has been a godsend to us.” (Ex-military victim)*

## **9.5 Counselling**

9.5.1 Although a number of victims were cautious about the usefulness of counselling, many felt that it was useful and that there could be more counselling support available to victims. Interestingly the majority of victims who advocated counselling were female:

*“What I felt, rapport, talking to her helped, I felt better when I came away.” (Female, civilian victim)*

*“Counselling of some kind, it would have been beneficial, I really do think that.” (Female, civilian victim)*

*“You really need somebody there at the time it happens to tell you what you have got to do.” (Male, civilian victim)*

*“You need somebody to talk to, definitely, I think somebody outside, because you can't always tell your family or friends whereas a complete stranger eventually you can open up.” (Female, civilian victim)*

## 9.6 Individuals – Partners and Friends

9.6.1 The role of friends and family was seen as very important. In many ways victims felt comfortable with friends or family support as opposed to external counselling. However, there are challenges when family and friends provide counselling-type support. Nowhere is this highlighted more than when there are prior conflicts and differences of opinion within families and between friends. A possible compromise to consider for the future could be a befriending scheme:

*“Friends came and rallied round...just generalised kindness. It was probably more important than somebody coming along from Victim Support saying ‘Tell me all about it’. My instinct would be – what the bloody hell do you know about it?” (Bereaved father of military victim)*

*“I did have the support of friends; friends who were not immediate family members. They were very supportive.” (Civilian victim)*

*“I would say that the only help I got was from close friends, I don’t think there was any other support.” (Civilian victim)*

*“We found the best counselling was actually our friends in Peterborough, we just sat and talked with them, because all you want is somebody just to sit there and listen to you and that’s all we wanted.”*

*“My husband, and my daughter – she is always there for me.” (Parents, military victim)*

*“I was lucky to have the best wife in the world; she knew exactly what I was going through...she knew what I was thinking, we talked, I couldn’t have asked for a better counsellor.” (Ex-military victim)*

## 9.7 Being with Others – ‘Expert by Experience’

9.7.1 It was clear from the interviews that simply being with others who have been through the same or similar experiences can be very therapeutic and supportive to victims. Any developments that arise from this study could build on this – indeed both LIVE and the Legacy Project have successfully built on this knowledge to great effect:

*“I think meeting people who have been through a similar situation to myself has really helped but this only happened last year really. It happened by chance.”*

*“That was important, very important – support from someone who knows what you are talking about, when you are explaining things to them.”*

*“I suppose talking about it really to people who experienced it, that’s the only thing I can think of, once you have talked about it, you know you*

*have put your experience to other people, they tell you what they've experienced."*

*"We just wanted to be with the people that were there when it happened...we seemed to get comfort from it, you know we were all together."*

*"The support of other people, and knowing that others had experienced the same as you...I think everybody helped each other in a situation like that."*

While organisations like Victim Support and The Samaritans provide much support of different kinds, to many victims it is generally the case that they do so on an individual or family basis. The same is true of the branch support offered by SSAFA. A related organisation (which has close links with NaVSS) which does offer support in a group setting is SAMM (Support after Murder and Manslaughter) which is obviously of relevance in the context of the Legacy Project.

## **9.8 Work Colleagues and Managers**

9.8.1 The positive effect of being in a working environment for victims was explored earlier. However it should be noted that this is facilitated where employers and organisations are sufficiently aware of this and the need to support their employees where they have experienced similar problems. It is clear from the interviews that the organisations that have supported their employees have engendered a great deal of loyalty in return:

*"The company provided any of us that needed it, counselling...the company were really, very, very good. They also had a psychologist and psychiatrist and the company also paid for my holiday. The manager at the time, he was brilliant."*

*"I had to tell my supervisor then to tell my manager, who said, 'Don't worry about anything.'"*

In some organisations counselling was provided to any workers involved in the Warrington or Manchester bomb who felt a need. This might be provided by occupational health staff or external people. In many ways great support was obtained from within the workforce. Several interviewees commented on how the incident had brought people together to support each other within the workplace. In several cases management recognised a need within their workforce and provided opportunities for groups of workers to talk through events. One manager reported that an occupational health professional brought in to meet with his staff reported that she felt she was "intruding" to some extent because they were supporting each other so well as a peer group.

Others spoke about the use of humour as a means of coping – humour of the sort that could only be shared with others in the same position.

## 9.9 Reconciliation with Paramilitaries

9.9.1 Although there was a great deal of cynicism concerning the Peace Process and the Good Friday Agreement, it was clear that where reconciliation between victims and paramilitaries had taken place, the result had been beneficial, although any such intervention would need to be handled carefully:

*“Getting to meet the man who planted the bomb that killed my father, has actually empowered me to say that I deserve more.”*

## 9.10 Self-Help

9.10.1 Self-help was seen as a vital method of coping with the experience and developing medium to long-term coping strategies. Sporting activities, socialising with family and friends and writing were the most important forms of self-help. Although not stated explicitly, many victims sought and obtained a great deal of information from the internet:

*“That’s where the gym comes in see, the gym helps me.”*

*“I always write a poem for him.”*

*“I have my way of dealing with things. I go and write it out and then throw it in the bin with the rest of the bloody rubbish.”*

*“I spent weeks writing to other people. I felt completely connected again. I wrote to all the Brighton families, I got some very nice letters back from people.”*

## 9.11 Respite Care for Ex-Military Victims

9.11.1 Many, particularly ex-military victims and their families, described the need for respite care. It was suggested that the model of the Veterans Administration Hospitals in the US and developed elsewhere in the world should be developed by the Ministry of Defence (MOD) or the Government:

*“Clinics, veterans clinics around the country. We’ve got a veterans minister for a veterans agency but no department of veterans affairs, we’ve got a captain of a ship who doesn’t have a ship himself.”*

*“There’s no infrastructure for veterans, there’s got to be clinics, with clinical psychologists, with psychiatrists, with assessment in the clinics...we only need one veterans hospital, as long as you put it central, but we need lots of clinics.”*

*"I think the Government should put their hand in their pocket, and set up some kind of mechanism where people who consider themselves victims can go and be looked at."*

9.11.2 In many ways this model could also serve the families, relatives and wives of ex-military victims. The need for more support for families, relatives and wives was indicated in the interviews in this context:

*"I mean the wife has gone through a lot; I don't think the wives get a lot of support – they certainly don't outside the regiment; within the regiment you have the wives club, you have the COs wife."*

## **9.12 Telephone Helpline**

9.12.1 The need for a centralised point for help, support and advice was highlighted throughout virtually all of the interviews. The NHS Direct telephone service for the NHS was seen as a good model from which to develop such a service for victims:

*"I think that a helpline was a very important thing to have because people wouldn't know where to turn. You are so traumatised by the events that have gone on, its sort of 'where do I go?' They not only talk to you but put you in touch with anybody who can help you."*

*"For the family, there's no helpline numbers. I rang up the Veterans Agency for help, there was no helpline numbers when I went to war, so I spoke to The Samaritans."*

*"Some form of helpline where someone could pick up a phone, probably in a similar vein to The Samaritans, because they might not want to see doctors or psychiatrists, they might just want to pick up the phone and rant and rave at someone for five minutes, or perhaps have someone at the end of the phone who's willing to listen and understands what they're going through."*

There are many telephone helplines. For example, as mentioned in one of the quotes above, the service offered by The Samaritans is well known. This provides a confidential listening service. It is perhaps less well-known that The National Association of Victim Support Schemes also run a helpline. In Manchester three helplines were set up after the bomb, one was giving out general information (about access to the area for example), one was for businesses; and the other was a counselling helpline. In Warrington, Social Services and The Samaritans jointly advertised helplines for those who felt they needed this kind of support. As a service example, SSAFA run a helpline, modelled on that of The Samaritans, for service personnel and their families.

In emergency planning terms information flow is crucial and helplines play a part in this. Manchester City Council has commissioned and

published a *Guide to Planning and Management of Emergency Helplines*, which as well as setting out the issues that need to be thought about from a technical and planning point of view also considers the skills required of helpline staff in responding to distressed callers.

## 10 Conclusions and Recommendations

### 10.1 Introduction

- 10.1.1 The findings of this study will not be surprising to the victims nor to those services and projects set up to support GB victims. Furthermore they echo the findings of the Report of the Northern Ireland Victims' Commissioner (Bloomfield, 1998). Although the research literature concerning GB victims of the Northern Ireland 'Troubles' is relatively small, these findings also reflect the evidence highlighted in the literature review.
- 10.1.2 This study analysed the in-depth experiences of thirty individuals from Great Britain who were directly affected by the NI 'Troubles.' In terms of total numbers so affected the scale of the problem is clearly larger. As mentioned in the Introduction it is estimated that there have been over 600 deaths of GB residents with 125 deaths occurring in Great Britain – not all of which were GB residents. The lack of an existing database of victims made it impossible to chart their geographic locations. A further 2000 GB residents have been injured as a result of the 'Troubles'. Many others have been less affected but it would be difficult to extrapolate this figure beyond the direct victim as there are a number of other variables at present unknown that we would have to account for. For example, we would need to know the scale of people's social and relationship networks – which in itself would require a large long term prevalence study conducted on a national basis.
- 10.1.3 Findings from the questionnaires show a relatively high level of distress among the interviewees. While this may reflect anticipation of the interview to follow, for many the incident is still 'live' enough to cause levels of distress above that which would be expected by discussion many years after the event. Thus this points to the possibility of unresolved difficulties and vulnerability. The great majority said that their priorities in life had undergone change as a result of their experience as a victim or survivor.
- 10.1.4 As Bloomfield reports, the need for justice for victims is very high. Most GB victims are, to use his terms, 'out of the loop' in terms of the criminal justice system and other responses to their experiences.

### 10.2 Recommendations for Central Government

#### *Introduction*

- 10.2.1 Greater inter-agency communication, shared information and working are needed to improve service responses and provision for the victims of the 'Troubles' and other terrorist incidents in Great Britain. This needs to be achieved at a number of levels:

- At a Governmental level, there is a need for an Interdepartmental Group to co-ordinate responses to the needs of victims identified in this report and to include them in the new national strategy for victims, 'A new deal for victims and witnesses', over the next six months. The remit of the Commissioner for Victims and Witnesses should include acting as a national voice to promote the interests of the victims of terrorism including of the 'Troubles' in government, the criminal justice system and more widely.
- At an inter-agency level, through the bringing together of relevant agencies to develop services based on models of best practice to meet the needs of victims, so that within a year an inter-agency group is established and self-supporting.
- Through the sharing of best practice between agencies and professionals in Northern Ireland and Great Britain. This can be facilitated through a conference, which could be held by the end of the year, and the dissemination of conference papers as well as through the use of professional journals to reach specific professional audiences.
- By supporting the development of an independent group advocating the needs of victims and survivors, so that within two years the group becomes self-supporting.

10.2.2 We shall in the remainder of this section spell out how we think this strategic approach to improving inter-agency communication, shared information and working and service provision for victims can be developed and by whom.

#### *Strategic Co-ordination*

10.2.3 As with the Veterans Initiative, the provision of multi-agency services of victims of terrorism in Great Britain needs to be considered at Governmental level as it already has been in Northern Ireland, where the Victims' Liaison Unit (VLU) in the Northern Ireland Office was established in June 1998 to take forward the recommendations in the Report of the Northern Ireland Victims' Commissioner, Sir Kenneth Bloomfield, 'We Will Remember Them'.

10.2.4 The report of the Northern Ireland Human Rights Commission, Human Rights and Victims Violence, states that: 'There is a good deal of consensus in international law about the general definition of victims. The only significant point at issue seems to be whether the definitions should be restricted to victims of crime. The Commission prefers to adhere to the traditional approach whereby the definition is so limited, but with the acceptance that *people whose human rights are abused – whether criminally or not – should also be designated as victims*, as indeed they already are under the European Convention on Human Rights'.

- 10.2.5 The Northern Ireland Executive's Programme for Government states that the Executive will continue to pay special attention to the particular difficulties faced by victims of the 'Troubles'. It has developed a victims' strategy, 'Reshape, Rebuild, Achieve'. However, there is no equivalent strategy or indeed recognition for the status of the victims of the 'Troubles' in Great Britain.
- 10.2.6 The Home Office has recently published, 'A new deal for victims and witnesses' (July 2003), which sets out its national strategy to deliver improved services to victims. The strategy is primarily concerned with the victims and witnesses of crime and makes no mention of the victims of terrorism or of the 'Troubles'. It proposes setting up a new post of Commissioner for Victims and Witnesses in England and Wales to act as a national voice to promote the interests of victims and witnesses in government, the criminal justice system and more widely.
- 10.2.7 In Scotland, the Scottish 'Strategy for Victims' that was published in 2001 and owned by all the criminal justice agencies has resulted in a significant programme of work to raise the profile of victims' issues generally to improve support and information for all victims of crime and to encourage their greater participation in the criminal justice process. Each agency published its own Action Plan to support the Strategy and a Progress Report was published earlier this year (February 2003). The Strategy is to be reviewed during 2004.

We are therefore recommending that:

- R1. *In the continuing Peace Talks in Northern Ireland the needs and human rights of victims of the 'Troubles' in Great Britain are formally recognised.***
- R2. *The remit of the Commissioner for Victims and Witnesses in England and Wales includes acting as a voice to promote the interests of the victims of the 'Troubles' and terrorism living in England and Wales in Government, the criminal justice system, and more widely. The Scottish Executive should also take this report into consideration when reviewing its 'Strategy for Victims' in 2004 to ensure that victims of the 'Troubles' who live in Scotland receive the same treatment as their fellow GB victims.***
- R3. *Victims of the 'Troubles' in Great Britain are co-opted onto the Victims Advisory Panel, which advises the Government on the delivery of the national strategy to deliver improved services to victims, 'A new deal for victims and witnesses'.***
- R4. *An Interdepartmental Group is set up by the Home Office Victims' Unit, which should take the lead in co-ordinating a Government response to the needs of victims as identified in this report. Victims of the 'Troubles' and terrorism in Great Britain should be***

***included in the 'A new deal for victims and witnesses' national strategy.***

**R5. *The Victims' Liaison Unit, in conjunction with the Legacy Project and other stakeholders, should organise a conference by the end of this financial year to share best practice and experiences from Northern Ireland. The budget for the conference is likely to be in the region of £25k including the dissemination of the conference report on the internet.***

PTSD and Health Needs: Department of Health

10.2.8 The need for specialist Trauma Centres or services that can provide a flexible response to the needs of GB victims was highlighted in this study. There is a clear need for specialist training of general and specialist mental health practitioners in the recognition and treatment of the conditions and problems that have been described in the study. This ongoing training should focus on appropriate evidence based assessment and treatment of psychological trauma. For example, evidence suggests that non-directive supportive counselling may be useful for those requiring general support following exposure to traumatic events, but not for those presenting with PTSD symptoms or related depression. In these cases specific psychological treatment, such as cognitive behavioural therapy (as indicated by the Department of Health Guidelines for Psychological Therapies), should be recommended.

10.2.9 There is a need for specialist provision, especially for provision based outside London. The National Institute of Clinical Excellence (NICE) is currently developing clinical guidelines on the management of Post Traumatic Stress Disorder (for issue in January 2005) and these should take account of the issues discussed in this report<sup>6</sup>.

**R6. *The findings from this report should be fed into the NICE Guidelines on PTSD. The Legacy Project should send a copy of the report to the project team for the PTSD guidelines.***

10.2.10 Throughout this study there has been a clearly defined need for a central point of communication and information. Significantly many victims described the need for a telephone helpline. There are many already in existence (and several have been mentioned in this report) but there may be a need for better integration and the provision of a one-stop shop. One model that could be considered here is the 'NHS Direct' service. This is now a national service that provides telephone help – acting as a gateway for citizens to access the NHS. It has recently been evaluated by the Department of Health and is seen as an

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<sup>6</sup> Guidelines have recently been published in Northern Ireland on the Management and Treatment of PTSD in Adults by CREST (Clinical Resource Efficiency Support Team).

effective model in providing access to appropriate NHS services and signposting individuals to specialist and self-help orientated services.

10.2.11 As the 'NHS Direct' service is an evaluated model, which is already state funded, we suggest that it be used as the principal gateway for victims of terrorism. However, as it is most likely to be used by those who see themselves as having a health-related need, other secondary gateways should also be considered through Victim Support and the Veterans Agency. The Legacy Project is also a key means of signposting those individuals who present to it as having support needs to these services. We therefore recommend that:

**R7. *NHS Direct should act as a principal gateway to information and advice for victims of the 'Troubles' and terrorism. Victim Support and the Veterans Agency should also be asked if they would be prepared to offer secondary gateways. The Legacy Project is also a key means of signposting those individuals, who present to it as having support needs, to these services.***

#### *Emergency Planning*

10.2.12 In responding to major incidents the needs of victims come relatively "low down the pecking order". Understandably the prime focus is on dealing with the *incident* and thus while consideration is given to victims' needs in principle they may be ignored in practice. Emergency planners that we spoke to recognised that there was a need to do more in respect of victims. We were struck by the fact that while supporting agencies like Victim Support and The Samaritans are included as contacts in emergency planning documents, they do not seem to play a part in planning and thus in bringing a victim perspective to emergency planning. NavSS are currently developing policies and practice in relation to responding to victims of terrorist acts, and it is to be hoped that this kind of voluntary sector activity and expertise will feed into emergency planning in the future so that, notwithstanding the obvious difficulties, voluntary sector organisations may be more involved.

10.2.13 Since June 2003 the Civil Contingencies Secretariat at the Cabinet Office has assumed responsibility for guidance on emergency planning as a result of terrorist incidents and is understood to be updating the national guidance, *Dealing with Disaster*, for a fourth edition. We therefore recommend that:

**R8. *In planning for emergencies arising from a terrorist incident there should be guidance on responding to and meeting the needs of victims and for following victims up over time. The Civil Contingencies Secretariat at the Cabinet Office is asked to take this report into account when it updates the guidance, 'Dealing with Disaster'.***

### *Military Issues*

10.2.14 As part of the work of Working Group 6 of the Veterans Initiative, research is being carried out into the needs of veterans. However, this is a larger piece of work that focuses on the needs of Gulf War veterans. We thus recommend that:

**R9. *The Veterans Initiative Working Group on veterans' needs should consider this report alongside others.***

10.2.15 Transition to civilian life from the military proved difficult for some victims/survivors. Debriefing may have taken place but seems not always to have been recalled. Bereaved family members reported very different experiences but it seems that even relatively small actions taken by serving officers on behalf of their regiment are greatly appreciated and have considerable impact. Some interviewees reported excellent support from their regiment – others did not. In recognition of ongoing needs a regimental contact needs to be provided. Consistency between regiments and the sharing of good practice is important in this respect. While there have been very positive changes arising from the Veterans Initiative these may not yet have consistently affected practice.

**R10. *The Ministry of Defence, in conjunction with the Veterans Initiative, should continue to investigate the most appropriate mechanisms for following up and facilitating support to the bereaved families of military personnel, and for the sharing of good practice.***

## **10.3 Recommendations for the Legacy Project**

### *Introduction*

10.3.1 We have set out above our recommendations to Central Government emphasising the need for a co-ordinated response across Government to the needs of victims identified in this report.

10.3.2 The 'best practice' conference, which we have recommended the VLU organise, will also be an important building block for the Legacy Project in planning its own future responses to the needs of victims. We envisage the Legacy Project playing key roles in improving inter-agency communication, shared information and working and service provision for victims by:

- Being an active participant in the conference to share best practice between agencies and professionals in Northern Ireland and Great Britain.
- Developing support services for victims based on the models of best practice that emerge from the conference.

- Communicating to a wider audience the findings of this report and the use of professional journals to disseminate key messages to key professional audiences.
- Bringing together relevant agencies to develop services based on models of best practice to meet the needs of victims, so that within a year an inter-agency group is established and self-supporting.
- Supporting the development of an independent group advocating the needs of victims and survivors, so that within two years the group becomes self-supporting.

10.3.3 Compared to the 13,000 volunteers in Victim Support or the 7,000 in SSAFA, the Legacy Project is a relatively small project. However, it is based within The Tim Parry Johnathan Ball Trust in Warrington and is thus part of a wider network of services and experience. The inter-generational work done by the Tim Parry Johnathan Ball Trust is important in this respect and there is potential for the Legacy Project to feed the experience of the victims of the 'Troubles' into this ongoing work.

#### *Sharing and Developing Practice*

10.3.4 The conference to share best practice between agencies and professionals in Northern Ireland and Great Britain to be organised by the VLU will provide the Legacy Project with an opportunity to share its own experience of working with victims and to reflect upon models of good or promising practice from elsewhere. The Legacy Project should use this experience to develop its own future role in delivering services to victims.

10.3.5 The Legacy Project is currently funded by the VLU until November 2004 with an agreed set of targets to be met. In this report we have identified a number of new functions (see recommendations 12 to 16 below) that the Legacy Project should be asked to undertake which its existing funding does not cover. We therefore recommend that:

***R11. The VLU considers a funding application from the Legacy Project for the development of services to victims (and the delivery of recommendations 12 to 16 below) based on a strategy drawn up before the end of this financial year.***

10.3.6 The Legacy Project, both as commissioner and participant in the team that conducted this needs analysis, is uniquely positioned with the support of The Tim Parry Johnathan Ball Trust to promote its findings. Only if the needs of victims are more widely understood by a broad range of agencies will services be able to respond more appropriately than in the past to the current and future needs of the victims of terrorism, especially of the 'Troubles'.

10.3.7 The Legacy Project thus has a key role in communicating to a wider audience the findings of this report. Partly this will be achieved through the publication and launch of the report. Another mechanism will be by the Legacy Project Team both writing and commissioning articles which promote the findings to selected professional audiences through relevant journals. It is thus recommended that:

**R12. *With the support of The Tim Parry Johnathan Ball Trust, the Legacy Project develops a communication strategy for disseminating key findings in this report to selected professional audiences who are in a position to develop or improve access to services in response to them.***

*Inter-Agency Working*

10.3.8 A key role for the Legacy Project is to act at an inter-agency level, through the bringing together of relevant agencies to develop services based on models of best practice to meet the needs of victims, so that within a year an inter-agency group is established and self-supporting.

10.3.9 Following discussion with the VLU and the Legacy Project Leader, we envisage that the Legacy Project will convene an inter-agency group of interested agencies and professionals for its first year of coming into being but that after that it would be self-servicing with one of the partner agencies agreeing to take on the administrative role for a year at a time. Travel expenses for attending meetings would be met by the each of the individual partner agencies. The nucleus of the inter-agency group might thus be built out of the members of the Needs Analysis Working Group and the Sounding Board that met to support the development of the Needs Analysis but would widen as other agencies come to the fore through the conference and in other ways. We therefore recommend that:

**R13. *The Legacy Project brings together relevant agencies and professionals to develop services based on models of best practice to meet the needs of victims, so that within a year an inter-agency group is established and self-supporting with one of the partner agencies agreeing to take on the administrative role for a year at a time. Travel expenses for attending meetings would be met by the each of the individual partner agencies.***

10.3.10 Another role of the Legacy Project should be to act as an information resource. This requires it to have a good knowledge of what support might be available, from where, and how it might best be utilised. Some system for efficient information storage and retrieval is thus vital here. Such systems though would be of no use without the means of attracting enquiries. We would suggest that serious consideration be given to setting up a strong presence on the Internet. Other organisations in this field receive many enquiries in this way.

### A Victims Network

10.3.11 In line with Bloomfield and other studies, this study found that there is a powerful need for victims to be recognised and have their experience acknowledged. An aspect of this is the need to enable victims to tell their story and for that story to be heard. For those from the military or emergency services there may be a particular need for a more formal recognition and acknowledgement of them or their families.

10.3.12 The Legacy Project is well situated to bring together groups of victims and survivors to tell their stories, be listened to and supported. It may need sessional workers to help to facilitate these events and this should form part of its post-conference submission to the VLU. We recommend that:

**R14. *The Legacy Project brings together groups of victims and survivors to tell their stories, be listened to and supported [it may need sessional workers to help to facilitate these events and this should form part of its post-conference submission to the VLU].***

10.3.13 Bloomfield (1998) describes the work of Damian Gorman to develop an archive of individual experiences, feelings and testimonies – a project that is open to anyone who wishes to record their feelings and experiences. This type of initiative could be encouraged and supported. Such an archive could, perhaps, be developed as part of the Legacy Project.

**R15. *The Legacy Project should establish an archive for victims on the Internet and by other means, alongside other organisations, and should explore its use for education, research and knowledge sharing in line with the philosophy underpinning the Tim Parry Johnathan Ball Trust.***

10.3.14 It is very important to recognise that despite the appalling situations and experiences that GB victims found themselves in, they had coped and learnt to live with their experiences. Many provided positive examples of how they coped. We have much to learn from the GB victims. This potentially untapped reserve of knowledge and experience in many ways denotes them as “experts by experience”. Any policy or practice developments that arise from this study would benefit greatly from their involvement in design and implementation.

10.3.15 We would see the need for a group that was more than a sounding board or steering group for the Legacy Project, but which acted as an independent group advocating for the needs of victims and survivors. Wide representation should be sought. The Legacy Project should support the initial development of the group and then assist it in finding its own funding.

**R16. *The Legacy Project should establish an independent group to develop a support network, inclusive of all groups affected by the Northern Ireland 'Troubles' in Great Britain for advocacy and support. The Legacy Project's role should be to support this group for the first two years with the aim of enabling it to function as an independent group and assisting it in finding its own funding.***

10.3.16 We have outlined in the above recommendations proposals for an Interdepartmental Group to be set up by the Home Office Victims' Unit to take the lead in co-ordinating a strategic government response to the needs of victims as identified in this report and for ensuring Victims of the 'Troubles' and terrorism in Great Britain are included in the 'new deal for victims and witnesses' national strategy (see R.4). We have suggested that Victims of the 'Troubles' in Great Britain are invited to sit on the Victims Advisory Panel, which informs the delivery of the national strategy (R.3).

10.3.17 The work of the Interdepartmental Group should also be informed by the Inter-agency Group of relevant agencies and professionals working with victims, which we have proposed be set up by the Legacy Project to support the development of services for victims (see R.11). We have also proposed that the Legacy Project support the development of an independent group to develop a support network, inclusive of all groups affected by the Northern Ireland 'Troubles' in Great Britain for advocacy and support (R.16). This group of "experts by experience" should be available to be consulted by the Interdepartmental Group and work alongside the Inter-agency Group in ensuring that services for victims are planned in consultation with victims to ensure that they meet the needs of victims now and in the future.

### **Please to Remember...**

In October 1990 my eldest son was killed whilst serving in NI. The IRA killed him. On the same day, in the same attack, other soldiers were also killed, as was a civilian. Many, many more were injured.

On occasions such as this people like me...victims...often say that the intervening years have been a living nightmare. If I told you that it would be a lie. Unwilling as I am to indulge myself in long nightmares, I have had to get on and deal with the living rather than dream about something clearly beyond my reach...the return of my son and of my peace of mind.

Every day of those 13 years has been different; of course there are times when the memory of my son's life and death comes to the fore especially birthdays and Christmas and the like. But I have other children and a wife and I needed to be there for them. Being head of the family, the certainty that I was there, that I was not going to go away was very important to me and to them. That's what families do isn't it? They pull together especially when someone breaks in and hurts them.

Bigger families, such as communities, do the same thing...and the biggest family of all, the Nation, pulls together when the chips are down. This biggest family has, like my family, its head...the Government!

However different each day has been with its many challenges and hurdles to surmount, there have always been two constants...two things that have never changed. The first is, that for every one of the thousands of days since he was killed I have missed him terribly...he was a nice man. I think you would have liked him. His name is Paul. He was very tall and some say handsome, when he smiled he showed his slightly bucked teeth...he looked like a giant rabbit!

The second constant is that the head of the *Biggest Family* wasn't there when the chips were down. All I have ever asked for the last dozen years or so is that someone with the power to change things listens to me, and to others like me.

Perhaps this report will change things in that regard.

13 years ago today...5<sup>th</sup> of November\*, at about this time, my wife and I were lowering what remained of our son into a grave...his ashes! I remember as we came away my wife asked why such a little box weighed so heavy. I looked at her and said '*His boots...army boots are very heavy Love.*' She didn't say anything then but even now it's one of the few things she remembers of that awful day.

I am wondering if out of those ashes and the ashes of many like him a new creature will rise. Not the legendary phoenix, but a creature of a very different kind. If so, what will it look like? I don't know to be truthful, but I already have several names for it...recognition, respect and parity of rights with all other victims of the Northern Ireland conflict.

So, I am asking the head of the national family, the Government, to take this report and act with practical compassion and to correct the anomaly that exists between the conflict victims living in NI and the victims living here in GB by implementing all the report's recommendations.

You never knew him, but that doesn't matter. All you need to know is that hundreds of young men and women went out from here and never returned home. He, like thousands of others, joined the armed forces voluntarily, and why? To become wealthy...I think not. And despite Napoleon's maxim that in every soldier's knapsack there is a Field Marshall's Baton, the vast majority of our soldiers remain simply that...squaddies. There is nothing you can do for those who never came home. They are forever silent...but those they left behind? They too have been patiently silent.

Let this report be their voice. Thank you for listening to me.

An English Father

(\*This report was launched on 5<sup>th</sup> November 2003)

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## Appendix 1 – A Chronology of Incidents from the Northern Ireland 'Troubles' that Relate to GB Residents

This chronology attempts to give an overview of the impact of the Northern Ireland 'Troubles' on the people of Great Britain. It is to show the many incidents in which people from Great Britain have been bereaved, injured and affected as a result of the conflict over the last few decades. It is compiled from a variety of well respected sources, including "The Cost of the Troubles Study", "Lost Lives", Malcolm Sutton's "An Index of Deaths", and a House of Commons Hansard written answers paper written in 1996, which detailed incidents between 1980 and February 1996. Also a variety of other books, newspapers and websites were searched to bring about what we believe is a comprehensive picture of the many incidents to have affected people from Great Britain. As this chronology is compiled from other sources, we are aware it may have inaccuracies in dates and numbers or other details, and we would welcome any assistance in correcting the information. This is also a work in progress, which will be constantly updated and reviewed to include information as we receive it.

Currently we only have information relating to incidents that took place in Northern Ireland where there were deaths. This leaves a significant hole in the chronology, but we felt it was important to publish as much information as we have at this time, and we hope to gain the missing information over the remainder of our project.

The majority of the incidents were carried out by republican paramilitary groups, such as the Official IRA, Provisional IRA, the INLA or the 'Real' IRA, but we do not have enough information to list which one carried out each individual act. A few other incidents were accidents, friendly fire and on a couple of occasions, carried out by loyalist groups. All incidents have been classified as having been as a result of the 'Troubles'.

Each incident listed has been cross-referenced to verify its validity. All incidents highlighted are events that occurred in Great Britain.

In this context, GB refers to Great Britain (which is taken to be England, Scotland, Wales, Isle of Man, Isle of Wight and the Channel Islands). All the incidents relate to someone from GB or who was resident in GB at the time of the incident.

Jo Dover – Legacy Project Leader

Sarah Ford – Legacy Project Administrator and Research Assistant

November 2003



July 4 1970: Albert Street, Lower Falls, Belfast	1 civilian killed in shooting incident by friendly fire.
September 26 1970: BA Base Ballymurphy	1 soldier killed in accident/suicide.
February 6 1971: New Lodge Road, N. Belfast	1 soldier killed in shooting incident. Royal Artillery, Heavy Regiment.
February 9 1971: Brougher Mountain, Co. Tyrone	2 BBC engineers killed in explosion.
February 15 1971: Butler Street, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Royal Artillery, Heavy Regiment.
March 1 1971: Westland Street, L/Derry	1 soldier killed in explosion. Royal Military Police.
March 9 1971: Squire's Hill, Ligoniel, N. Belfast	3 soldiers killed in shooting incident. All members of Royal Highland Fusiliers.
March 23 1971: Junction of Palmer Street and Crumlin Road, N. Belfast	1 soldier killed in shooting incident by friendly fire. Light Infantry.
May 22 1971: Lagan Street, S. Belfast	1 soldier killed in shooting incident. Royal Green Jackets.
May 25 1971: Springfield Road, W. Belfast	1 soldier killed in explosion. Perpetrator unknown. Parachute Regiment. 2 soldiers injured.
July 12 1971: Northumberland Street, Lower Falls, W. Belfast	1 soldier killed in shooting incident. Royal Green Jackets.
July 14 1971: Shaws Road, W. Belfast	1 soldier killed in shooting incident. Parachute Regiment.
August 9 1971: Brompton Park, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Green Howards.
August 10 1971: Bligh's Lane, L/Derry	1 soldier killed in shooting incident. Royal Horse Artillery.
August 23 1971: Butler Street, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Green Howards.
August 23 1971 ctd: Flax Street BA Base, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Green Howards.
August 29 1971: Crossmaglen, Armagh	1 soldier killed in shooting incident. 14 <sup>th</sup> /20 <sup>th</sup> King's Hussars. 1 soldier injured.
August 31 1971: Stockman's Lane, Anderstown, W. Belfast	1 soldier killed in shooting incident. Royal Artillery Regiment.
September 6 1971: Derrybeg Park, Newry, Armagh	1 soldier killed in explosion. 16 <sup>th</sup> /5 <sup>th</sup> Lancers. 2 soldiers injured.
September 9 1971: Castlerobin Orange Hall, Hannahstown, Antrim	1 soldier killed in an explosion. 321 Explosive Ordnance Disposal Unit of Royal Artillery.
September 14 1971: Edenork Street, Coalisland, Tyrone	1 soldier killed in shooting incident. Light Infantry 2 <sup>nd</sup> Battalion. 2 soldiers injured.
September 14 1971 ctd: Royal Victoria Hospital, Falls Road, W. Belfast	1 soldier killed in shooting incident. Queen's Regiment.
September 14 1971 ctd: BA Base Eastway Gardens, Creggan, L/Derry.	1 soldier killed in shooting incident. Royal Artillery, Medium Regiment.
September 16 1971: Brompton Park, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Green Howards. 2 soldiers injured.
October 1 1971: Chatham Street, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Green Howards.
October 4 1971: Cupar Street, W. Belfast	1 soldier killed in explosion. Scots Guards. A number of soldiers injured.
October 11 1971: Bishop Street, L/Derry	1 soldier killed in shooting incident. Royal Anglian Regiment.
October 16 1971: Columcille Court, L/Derry	1 soldier killed in shooting incident. Royal Green Jackets.
October 17 1971: Oldpark Road, N. Belfast	1 soldier killed in shooting incident. Parachute Squadron of Royal Armoured Corps.
October 17 1971 ctd: Glenalina Road, Ballymurphy, W. Belfast	1 soldier killed in shooting incident. Scots Guards.
October 27 1971: Rosemount RUC/BA Base, L/Derry	2 soldiers killed in explosion. Both members of Royal Artillery, 45 <sup>th</sup> Medium Regiment.
October 28 1971: Derrylin Road, Kinawley, Fermanagh	1 soldier killed in explosion. 16 <sup>th</sup> /5 <sup>th</sup> Lancers. 1 soldier injured.
October 28 1971 ctd: Cupar Street, W. Belfast	1 soldier killed in explosion. Scots Guards.

October 31 1971: Stockman's Lane, Anderstown, W. Belfast	1 soldier killed in shooting incident. Royal Artillery, Medium Regiment.
October 31 1971 ctd: Post Office Tower, London	No known deaths or injuries.
November 4 1971: Ballymurphy Road, W. Belfast	1 soldier killed in shooting incident. Scots Guards.
November 7 1971: Tandragee Road, Lurgan, Armagh	1 soldier killed in shooting incident. Royal Corps of Signals.
November 9 1971: Foyle Road, L/Derry	1 soldier killed in shooting incident. Royal Anglian Regiment.
November 18 1971: Anderson Street, Shortstrand, E. Belfast	1 soldier killed in shooting incident. Black Watch.
November 24 1971: William Street, Lurgan, Armagh	1 soldier killed in explosion. 321 Explosive Ordnance Disposal Unit of Royal Artillery.
November 27 1971: St. James's Crescent, Falls Road, W. Belfast	1 soldier killed in shooting incident. Scots Guards.
November 28 1971: Crossmaglen, Armagh	1 soldier killed in shooting incident. Queen's Regiment.
December 8 1971: North Queen Street, N. Belfast	1 soldier killed in shooting incident. Royal Regiment of Fusiliers.
December 17 1971: Alma Street, Lower Falls, W. Belfast	1 soldier killed in shooting incident. Gloucestershire Regiment.
December 29 1971: Foyle Road, L/Derry	1 soldier killed in shooting incident. Royal Artillery Regiment.
January 5 1972: Ardmoulin Street, W. Belfast	1 soldier killed in shooting incident. Gloucestershire Regiment.
January 21 1972: Derrynoose, Keady, Armagh	1 soldier killed in explosion. Devonshire & Dorset Regiment.
January 26 1972: Belfast	1 soldier killed in shooting incident.
January 30 1972: Abbey Street, Bogside, L/Derry	1 soldier killed in shooting incident. Royal Green Jackets.
February 1 1972: Hastings Street, Lower Falls, W. Belfast	1 soldier killed in shooting incident. Gloucestershire Regiment.
February 6 1972: Cullaville, Crossmaglen, Armagh	1 civilian (ex-soldier) killed in shooting incident.
February 10 1972: Culyhannah, Newtown Hamilton, Armagh	2 soldiers killed in explosion. Both members of Devonshire & Dorset Regiment.
February 13 1972: Newtown Butler, Fermanagh	1 soldier killed in shooting incident. Royal Army Ordnance Corps.
February 16 1972: Moira, Nr. Lisburn, Co. Down	1 soldier killed in shooting incident. Pay Corps.
February 22 1972: Aldershot Headquarters of the Parachute Regiment	1 soldier and 6 civilians killed in explosion. Parachute Regiment. 17 people injured
March 3 1972: Manor Street, Belfast	1 soldier killed in shooting incident. Queen's Lancashire Regiment.
March 15 1972: Grosvenor Road, W. Belfast	2 soldiers killed in explosion. Both members of 321 Explosive Ordnance Disposal Unit of Royal Artillery.
March 20 1972: Lower Road, Nr. William Street, L/Derry	1 soldier killed in shooting incident. Royal Green Jackets.
March 29 1972: Wellington Street, C. Belfast	1 soldier killed in explosion. 321 Explosive Ordnance Disposal Unit of Royal Artillery.
April 7 1972: Springfield Road, Belfast	1 soldier killed in shooting incident. Kings Own Scottish Borderers.
April 10 1972: Brooke Park, Rosemount, L/Derry	2 soldiers killed in explosion. Both members of Royal Artillery Regiment.
April 16 1972: Durham Street, W. Belfast	1 soldier killed in shooting incident. Royal Anglian Regiment.
April 16 1972 ctd: Bishop Street, L/Derry	1 soldier killed in shooting incident. Royal Welsh Fusiliers. 1 soldier injured.
April 16 1972 ctd: BA Base Foyle Road, Brandywell, L/Derry	1 soldier killed in shooting incident. Worcester & Sherwood Foresters.
April 24 1972: Belfast	1 soldier killed in shooting incident.
April 26 1972: Donegal Road, W. Belfast	1 soldier killed in shooting incident. King's Own Scottish Borderers.

April 26 1972 ctd: Navan Terrace, Killylea Road, Armagh	1 soldier killed when his vehicle was stoned. Perpetrator unknown. Royal Engineers.
May 11 1972: Sultan Street, Lower Falls, W. Belfast	1 soldier killed in shooting incident. Royal Anglian Regiment.
May 13 1972: Whiterock Road, Ballymurphy, W. Belfast	1 soldier killed in shooting incident. King's Own Scottish Borderers.
May 17 1972: Crossmaglen RUC Station, Armagh	1 soldier killed in shooting incident. Royal Engineers. 1 soldier injured.
May 18 1972: Flax Street BA Base, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Royal Regiment of Wales.
May 23 1972: Springhill Avenue, Ballymurphy, W. Belfast	1 soldier killed in shooting incident. King's Own Regiment.
May 31 1972: Springfield Road RUC Station, W. Belfast	1 soldier killed in explosion. King's Own Regiment.
May 31 1972 ctd: Kennedy Way, Anderstown, W. Belfast	1 soldier killed in shooting incident. Royal Corps of Transport.
June 2 1972: Rosslea, Fermanagh	2 soldiers killed in explosion. Both Royal Artillery Regiment.
June 6 1972: Ballymurphy Parade, W. Belfast	1 soldier killed in shooting incident. Duke of Wellington's Regiment.
June 7 1972: Tullymore Gardens, Anderstown, W. Belfast	1 soldier killed in shooting incident. Royal Artillery Regiment.
June 11 1972: Brook Park BA Base, L/Derry	1 soldier killed in shooting incident. Royal Artillery Regiment.
June 12 1972: Alliance Avenue, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Royal Regiment of Wales.
June 18 1972: Bleary, Nr. Lurgan, Armagh	3 soldiers killed in explosion. All members of Gordon Highlanders.
June 19 1972: Brompton Park, N. Belfast	1 soldier killed in shooting incident. Royal Regiment of Wales.
June 21 1972: Strand Road RUC Station, L/Derry	1 soldier killed in shooting incident. Royal Welsh Fusiliers.
June 24 1972: Crabarkey, Nr. Dungiven, L/Derry	3 soldiers killed in explosion. 1 member of 664 Aviation Squad, 1 member of Parachute Regiment and 1 member of Royal Electrical & Mechanical Engineers.
June 26 1972: Junction of Seaforde Street and Comber Street, E. Belfast	1 soldier killed in shooting incident. Royal Engineers.
June 26 1972 ctd: Abercorn Road, L/Derry	1 soldier killed in shooting incident. Royal Green Jackets.
July 1 1972: Westway Drive, Ballygomartin	1 civilian killed in shooting incident.
July 11 1972: Great James Street, L/Derry	1 soldier killed in shooting incident. Royal Artillery, Medium Regiment.
July 12 1972: Clonard Street, Lower Falls, W. Belfast	1 soldier killed in shooting incident. Royal Anglian Regiment.
July 13 1972: Dunville Park, Falls Road, W. Belfast	1 soldier killed in shooting incident. Royal Anglian Regiment.
July 13 1972 ctd: BA Post Hooker Street, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Royal Regiment of Fusiliers.
July 14 1972: Lenadoon, W. Belfast	2 soldiers killed in shooting incident. 1 member of 14 <sup>th</sup> /20 <sup>th</sup> King's Hussars and 1 member of Royal Regiment of Fusiliers.
July 14 1972 ctd: Alliance Avenue, Ardoyne, N. Belfast	2 soldiers killed in shooting incident. 1 member of Royal Corps of Transport and 1 member of Royal Regiment of Wales
July 15 1972: Silverbridge, Nr. Forkhill, Armagh.	1 soldier killed in explosion. 321 Explosive Ordnance Disposal Unit of Royal Artillery.
July 16 1972: Crossmaglen, Armagh	2 soldiers killed in explosion. Both Duke of Wellington's Regiment.
July 18 1972: BA Post Vere Foster School, W. Belfast	1 soldier killed in shooting incident. King's Own Regiment.

July 21 1972: Oxford Street Bus Station, C. Belfast	2 soldiers killed in explosion. 1 member of Royal Corps of Transport and 1 member of Welsh Guards.
July 24 1972: BA Post Vere Foster School, W. Belfast	1 soldier killed in shooting incident (see incident on July 18 <sup>th</sup> ). King's Own Regiment.
July 26 1972: Unity Flats, Upper Library Street, W. Belfast	1 sailor killed in shooting incident. Royal Marines. 1 soldier injured.
August 3 1972: Sion Mills Road, Tyrone	1 soldier killed in explosion. 321 Explosive Ordnance Disposal Unit of Royal Artillery.
August 4 1972: Bearnagh Drive, Anderstown, W. Belfast	1 soldier killed in shooting incident. Royal Green Jackets.
August 7 1972: Forfey, Lisnaskea, Fermanagh	2 soldiers killed in explosion. Both Royal Artillery Regiment.
August 7 1972 ctd: Drumag Park, Armagh	1 soldier killed in stoning incident. Royal Dragoon Guards. 1 soldier injured.
August 8 1972: Warren House Road, Northwood, Kirby	1 civilian committed suicide after his soldier son was killed.
August 14 1972: Casement Park, Anderstown, W. Belfast	2 soldiers killed in explosion. 1 member of Royal Artillery and 1 member of Royal Engineers.
August 17 1972: Selby Street, Lower Falls, W. Belfast	1 soldier killed in shooting incident. Royal Anglian Regiment. 2 soldiers injured.
August 18 1972: BA Post Falls Road, W. Belfast	1 soldier killed in shooting incident. King's Regiment. 2 soldiers injured.
August 18 1972 ctd: Roden Street, W. Belfast	1 soldier killed in shooting incident. Royal Regiment of Infantry.
August 23 1972: Kenard Avenue, W. Belfast	1 soldier killed in shooting incident. Royal Regiment of Fusiliers.
August 24 1972: Moyola Walk, Shantallow, L/Derry	1 soldier killed in shooting incident. Light Infantry.
August 24 1972 ctd: Moybane, Crossmaglen, Armagh	1 soldier killed in explosion. Royal Scots Dragoon Guards. 1 soldier injured.
August 27 1972: Creggan Estate, L/Derry	1 soldier killed in shooting incident. Coldstream Guards.
August 28 1972: Ardoyne Avenue, N. Belfast	1 soldier killed in shooting incident by friendly fire. Light Infantry.
August 28 1972 ctd: Beechmount Area, Falls Road, W. Belfast	1 soldier killed in shooting incident. Royal Green Jackets.
August 30 1972: Cupar Street, W. Belfast	1 soldier killed in explosion. King's Regiment. 2 soldiers injured.
August 30 1972 ctd: Clonard Street, Lower Falls, W. Belfast	1 soldier killed in shooting incident. Royal Green Jackets.
September 3 1972: New Lodge Road, N. Belfast	1 sailor killed in shooting incident by friendly fire. Royal Marines.
September 10 1972: Dungannon, Tyrone	2 soldiers killed in explosion. Both members of Argyll & Sutherland Highlanders. 5 soldiers injured.
September 11 1972: Dungannon, Tyrone	1 soldier killed in explosion. Argyll & Sutherland Highlanders. (See above)
September 15 1972: Meenagh Square, Bogside, L/Derry	1 soldier killed in shooting incident. Royal Regiment of Fusiliers.
September 18 1972: Lecky Road, Bogside, L/Derry	1 soldier killed in shooting incident. Scots Guards.
September 20 1972: Berwick Road, Ardoyne, N. Belfast	1 soldier killed in shooting incident by friendly fire. Light Infantry.
September 20 1972 ctd: Springhill Avenue, Ballymurphy, W. Belfast	1 soldier killed in shooting incident. Parachute Regiment.
September 22 1972: Crossmaglen, Armagh	1 soldier killed in shooting incident. Argyll & Sutherland Highlanders.
September 25 1972: Cyprus Street, Lower Falls, W. Belfast	1 soldier killed in shooting incident. Royal Anglian Regiment.
September 26 1972: Lecky Road, Bogside, L/Derry	1 soldier killed in shooting incident. Scots Guards.

September 29 1972: Albert Street, Lower Falls, W. Belfast	1 soldier killed in shooting incident. Royal Anglian Regiment.
September 30 1972: Ladbrook Drive, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Light Infantry. 1 soldier injured.
October 2 1972: Juniper Park, Twinbrook, W. Belfast	1 soldier killed in shooting incident. Royal Engineers.
October 17 1972: Falls Road, W. Belfast	1 soldier killed in shooting incident. Royal Marines.
October 24 1972: Arundel Street, Grosvenor Road, W. Belfast	1 soldier killed in shooting incident. Royal Anglian Regiment.
October 25 1972: Dromara, Armagh	1 soldier killed in explosion. Staffordshire Regiment.
October 28 1972: Bishop Street, L/Derry	1 soldier killed in shooting incident. Scots Guards.
October 31 1972: Antrim Road, New Lodge, N. Belfast	1 soldier killed in shooting incident. Queen's Regiment. 1 soldier injured.
November 10 1972: Oldpark Road, N. Belfast	1 soldier killed in shooting incident. Royal Corps of Transport.
November 13 1972: Stanhope Street, Unity Flats, W. Belfast	1 soldier killed in shooting incident. Queen's Regiment.
November 20 1972: Cullyhanna, Armagh	2 soldiers killed in explosion. Both members of Argyll and Sutherland Highlanders.
November 28 1972: Strand Road, L/Derry	1 soldier killed in explosion. Royal Artillery Regiment. 1 soldier injured.
December 5 1972: BA Post Kitchen Hill, Armagh	1 soldier killed in explosion. 321 Explosive Ordnance Disposal Unit of Royal Artillery.
December 8 1972: Whiterock Road, Ballymurphy, W. Belfast	1 soldier killed in shooting incident. Royal Green Jackets. 2 soldiers injured.
December 10 1972: Fort Monagh BA Post, W. Belfast	1 soldier killed in explosion. King's Own Scottish Borderers. 2 soldiers injured.
December 24 1972: Lecky Road, Bogside, L/Derry	1 soldier killed in shooting incident. Royal Electrical & Mechanical.
February 1 1973: Main Street, Strabane, Tyrone	1 soldier killed in shooting incident. King's Own Scottish Borderers.
February 6 1973: Servia Street, Lower Falls, W. Belfast	1 soldier killed in explosion. Queen's Lancashire Regiment.
February 14 1973: Raglan Street, Falls Road, W. Belfast	1 soldier killed in shooting incident. Queen's Lancashire Regiment. 1 soldier injured.
February 20 1973: Falls Road, W. Belfast	2 soldiers killed in shooting incident. Both members of Coldstream Guards. 1 soldier injured.
February 21 1973: Whiterock Road, Ballymurphy, W. Belfast	1 soldier killed in shooting incident. Coldstream Guards.
February 22 1973: Newtownards Road, E. Belfast	1 soldier killed in riots. Life Guards. 1 soldier injured.
February 28 1973: Crumlin Road, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Light Infantry.
March 5 1973: Albert Street, Lower Falls, W. Belfast	1 soldier killed in shooting incident. Queen's Light Regiment.
March 5 1973 ctd: Newtownards Road, E. Belfast	1 soldier killed in shooting incident. Royal Green Jackets.
March 6 1973: Whitecliff Crescent, Ballymurphy, W. Belfast	1 soldier killed in shooting incident. Coldstream Guards.
March 8 1983: Forkhill, Armagh	1 soldier killed in explosion. Duke of Edinburgh's Regiment. 2 soldiers injured.
March 8 1973 ctd: Slate Street, Lower Falls, W. Belfast	1 soldier killed in shooting incident. Queen's Lancashire Regiment.
March 8 1973 ctd: Old Bailey, London	1 civilian killed in explosion. Over 200 civilians injured.
March 13 1973: Colderry Bridge, Crossmaglen, Armagh	1 soldier killed in explosion. Royal Hampshire Regiment. 2 soldiers injured.
March 16 1973: Ballygawley, Tyrone	1 soldier killed in explosion. Royal Corps of Transport. 1 soldier injured.

March 23 1973: Antrim Road, N. Belfast	3 soldiers killed in shooting incident. 1 member of Duke of Edinburgh's Regiment, 1 member of Royal Army Medical Corps and 1 member of Royal Corps of Signals. 1 soldier injured.
March 23 1973 ctd: Near M2 Motorway	1 sailor killed in car accident. Royal Marines.
March 27 1973: Omagh to Aughnacloy Road, Tyrone	1 soldier killed in explosion. 16 <sup>th</sup> /5 <sup>th</sup> Lancers.
March 29 1973: Anderstown Park West, W. Belfast	1 soldier killed in shooting incident. Gordon Highlanders.
April 7 1973: Tullyogallaghan, Armagh	2 soldiers killed in explosion. Both members of Parachute Regiment.
April 8 1973: Lurgan, Armagh	1 soldier killed in shooting incident. Royal Regiment of Fusiliers.
April 11 1973: Westland Street, Bogside, L/Derry	1 soldier killed in shooting incident. 22 <sup>nd</sup> Light Air Defence Regiment.
April 27 1973: Creggan Road, L/Derry	1 soldier killed in shooting incident. Royal Anglian Regiment.
April 28 1973: Carnhill Estate, L/Derry	1 soldier killed in shooting incident. Royal Artillery Regiment.
April 29 1973: New Lodge Road, N. Belfast	1 sailor killed in shooting incident. Royal Marines, 42 Commando. 1 sailor injured.
May 3 1973: Creggan Heights, L/Derry	1 soldier killed in shooting incident. Royal Artillery Regiment.
May 5 1973: Moybane, Crossmaglen, Armagh	3 soldiers killed in explosion. 2 members of 17 <sup>th</sup> /21 <sup>st</sup> Lancers and 1 member of Parachute Regiment.
May 13 1973: Donegall Road, W. Belfast	2 soldiers killed in explosion. (1 died next day). All members of Light Infantry. 2 soldiers injured.
May 18 1973: Knock Na Moe Castle Hotel, Tyrone	3 soldiers and 1 sailor killed in explosion. (1 more soldier died on 3 June) 1 member of Blues & Royals Household Division, 1 member of Prince of Wales' Own Regiment, 1 member of Royal Marines and 1 member of Royal Military Police.
May 24 1973: Cullaville, Crossmaglen, Armagh	2 soldiers killed in explosion. 1 member of Parachute Regiment and 1 member of Royal Engineers.
May 31 1973: Muldoon's Bar, Corporation Square, North Belfast	1 civilian killed in shooting incident.
June 3 1973: Knock Na Moe Castle Hotel, Tyrone	1 soldier killed in explosion. (See May 18). 5 <sup>th</sup> Inniskilling Dragoon Guards.
June 20 1973: Lecky Road, Bogside, L/Derry	1 soldier killed in explosion. 321 Explosive Ordnance Disposal Unit of Royal Artillery. 3 soldiers injured.
June 21 1973: Ballycolman, Strabane, Tyrone	1 soldier killed in explosion. Royal Welsh Fusiliers. 2 soldiers injured.
July 1 1973: Ballymurphy Road, W. Belfast	1 soldier killed in shooting incident. Light Infantry.
July 17 1973: Divis Flats, W. Belfast	2 soldiers killed in explosion. Both members of Gloucestershire Regiment.
July 20 1973: Crossdall, Keady, Armagh	1 soldier killed in explosion. Royal Engineers. 1 soldier injured.
July 22 1973: Clogher, Tyrone	1 soldier killed in explosion. Royal Army Veterinary Corps.
August 29 1973: Solihull	No known deaths or injuries.
August 29 1973 ctd: Harrods Store, Knightsbridge, London	No known deaths or injuries.
August 30 1973: Tullyhommon, Fermanagh	1 soldier killed in explosion. 321 Ordnance Disposal Unit of Royal Artillery.
September 10 1973: Two Train Stations, London	No known deaths or injuries.
September 18 1973: Royal Victoria Hospital, Falls Road, W. Belfast	1 soldier killed in shooting incident. Light Infantry.
September 23 1973: Edgbaston, Birmingham	1 soldier killed in explosion. 321 Ordnance Disposal Unit of Royal Artillery.

October 3 1973: Bligh's Lane BA Base, Creggan, N. Belfast	1 soldier killed in explosion. Royal Army Ordnance Corps. 1 soldier injured.
October 28 1973: Crossmaglen, Armagh	1 soldier killed in shooting incident. Light Infantry.
November 6 1973: Newtownhamilton Court House, Armagh	1 soldier killed in shooting incident. Royal Signals Regiment.
November 24 1973: Carlingford Street, Crossmaglen, Armagh	1 soldier killed in shooting incident. Welsh Guards.
November 25 1973: Rossville Street Flats, Bogside, L/Derry	2 soldiers killed in shooting incident. Both Royal Artillery Regiment.
December 10 1973: Leeson Street, Lower Falls, W. Belfast	1 soldier killed in shooting incident. Queen's Own Highlanders.
December 31 1973: Beechmount Avenue, off Falls Road, W. Belfast	1 soldier killed in shooting incident. Scots Guards. 1 soldier injured.
January 21 1974: Lone Moor Road, Creggan, L/Derry	1 soldier killed in explosion. Royal Artillery Regiment.
January 25 1974: Ballymaguigan, Ballyroan, L/Derry	1 soldier killed in explosion. Duke of Wellington's Regiment. 2 other soldiers injured.
February 4 1974: M62 Coach Bombing	9 soldiers and 3 civilians killed in explosion (1 soldier died 3 days later). Many injuries. They were members of Royal Artillery, Royal Regiment of Fusiliers, & Royal Signals Regiment.
February 12 1974: Buckinghamshire	10 civilians injured in explosion.
February 18 1974: Moybane, Crossmaglen, Armagh	1 soldier killed in explosion. 321 Explosive Ordnance Disposal Unit of Royal Artillery.
March 13 1974: Chapel Lane, C. Belfast	1 soldier killed in shooting incident. Royal Horse Artillery. 2 soldiers injured.
March 16 1974: Dundalk Road, Crossmaglen, Armagh	2 soldiers killed in shooting incident. Parachute Regiment. 1 soldier injured.
March 17 1974: Foyle Road, Brandywell, L/Derry	1 soldier killed in shooting incident. Duke of Wellington's Regiment. 1 soldier injured.
March 20 1974: Market Hill, Armagh	2 soldiers killed in shooting incident. Both members of 14 <sup>th</sup> /20 <sup>th</sup> King's Hussars.
March 28 1974: Antrim Road, N. Belfast	1 sailor killed in shooting incident. 42 Commando, Royal Marines.
April 6 1974: Manchester Magistrates Court	No known deaths or injuries.
April 9 1974: Otterburn, Northumberland	1 soldier killed in shooting incident. Camp Commandant. 2 soldiers injured.
April 11 1974: Lisnaskea, Fermanagh	1 soldier killed in explosion. Royal Corps of Transport. 2 soldiers injured.
April 12 1974: Richill, Armagh	1 soldier killed in a helicopter crash.
April 13 1974: Chipstead, Surrey	1 civilian killed in shooting incident.
April 14 1974: Meenan Square, Bogside, L/Derry	1 soldier killed in shooting incident. 14 <sup>th</sup> Intelligence Company of the Coldstream Guards.
April 14 1974 ctd: Cambrai Street, Shankill, W. Belfast	1 civilian killed in shooting incident. 9 soldiers injured.
May 19 1974: Multi-Storey Car Park, Heathrow Airport	2 civilians injured in explosion.
June 5 1974: Irish Street, Dungannon, Tyrone	1 soldier killed in shooting incident. Green Howards.
June 14 1974: Divis Street, W. Belfast	1 civilian killed in shooting incident.
June 17 1974: House of Commons	11 civilians injured in explosion.
June 22 1974: New Lodge Road, N. Belfast	1 soldier killed in shooting incident. Royal Artillery.
July 2 1974: Carrickgallogly, Newtownhamilton, Armagh	1 soldier killed in explosion. Royal Engineers. 2 soldiers injured.
July 4 1974: Whiterock Road, Ballymurphy, W. Belfast	1 soldier killed in shooting incident. Cheshire Regiment.
July 17 1974: The White Tower, The Tower of London	1 civilian killed in explosion. 41 civilians injured.
July 17 1974 ctd: Balham, South London	No known deaths or injuries.

July 30 1974: Hillman Street, New Lodge, N. Belfast	1 soldier killed in shooting incident. Royal Artillery.
August 13 1974: BA Post Drummuckavall, Crossmaglen, Armagh	2 sailors killed in explosion. Both members of 45 Commando, Royal Marines. 2 Marines injured.
August 26 1974: Drumbeg, Craigavon, Armagh	1 soldier killed in shooting incident. Royal Pioneer Corps.
October 5 1974: Horse and Groom Pub, Guildford, Surrey	4 soldiers and 1 civilian killed in explosion. 57 injured. 2 members of Scots Guards and 2 members of Women's Royal Army Corps.
October 5 1974 ctd: Seven Stars Pub, Guildford, Surrey	8 civilians injured in explosion.
October 23 1974: Racecourse Road, L/Derry	1 soldier killed in shooting incident. Staffordshire Regiment.
October 28 1974: Ballykinlar, Down	2 soldiers killed in explosion. 1 member of Duke of Edinburgh Royal Regiment and 1 member of Royal Welsh Fusiliers.
November 6 1974: Crossmaglen, Armagh	2 soldiers killed in shooting incident. 1 member of Devonshire & Dorset Regiment and 1 member of Duke of Edinburgh Royal Regiment. 1 soldier injured.
November 7 1974: King's Arms Pub, Woolwich	1 soldier and 1 civilian killed in explosion. 5 soldiers and 21 civilians injured. The soldier was from Royal Artillery
November 7 1974 ctd: Stewardstown, Tyrone	2 soldiers killed in explosion. 1 member of 321 Explosive Ordnance Disposal Unit of Royal Artillery and 1 member of Royal Hussars. 7 soldiers injured.
November 14 1974: Greyfriars, Coventry	No known deaths or injuries.
November 15 1974: Fountain Street, Strabane, Tyrone	1 soldier killed in shooting incident. Royal Regiment of Fusiliers.
November 20 1974: Aughamullen, Nr. Coalisland, Tyrone	1 civilian killed in shooting incident.
November 21 1974: Mulberry Pub and the Tavern in the Town Pub, Birmingham City Centre	22 civilians killed in explosion (1 died 28/11/74 and 1 died 7/12/74). Over 160 civilians injured.
December 2 1974: Gortmullen, Derrylin, Fermanagh	1 soldier killed in explosion. 321 Explosive Ordnance Disposal Unit of Royal Artillery.
December 17 1974: Bloomsbury Telephone Exchange, Tottenham Court Road, London	1 civilian killed in explosion.
December 17 1974 ctd: Sloane Avenue Telephone Exchange, Chelsea, London	No known deaths or injuries.
December 17 1974 ctd: New Crompton Street, London	No known deaths or injuries.
December 17 1974 ctd: Telephone Exchange, Shaftsbury Avenue, West End, London	No known deaths or injuries.
December 29 1974: Killeavy, Foxhill, Armagh	1 soldier killed in shooting incident. Royal Green Jackets.
January 21 1975: Colinward Street, Clonard, W. Belfast	1 soldier killed in explosion. Royal Military Police.
January 27 1975: London	No known deaths or injuries.
January 27 1975 ctd: Manchester	26 civilians injured in explosion.
February 7 1975: Mullan, Fermanagh	1 soldier killed in shooting incident. 15 <sup>th</sup> /19 <sup>th</sup> Hussars.
February 27 1975: Hammersmith, London	1 Police Officer killed in shooting incident.
Spring 1975: 3 week spate of bombings, Manchester	No known deaths or injuries.
Spring 1975: Basement of Lewis's Department Store	19 civilians injured in explosion.
July 17 1975: Forkhill, Armagh	4 soldiers killed in explosion. 3 members of Green Howards and 1 member of Royal Engineers. 1 soldier injured.
August 29 1975: Car Bomb, London	1 soldier killed in explosion. 321 Explosive Ordnance Disposal Unit of Royal Army Ordnance Corps.
September 5 1975: Hilton Hotel, Park Lane, London	2 civilians killed in explosion. 63 civilians injured.
September 22 1975: McCann's Bar, Ballyhegan, Armagh	1 civilian killed in explosion and shooting incident.
September 28 1975: Caterham, Surrey	No known deaths or injuries.

September 29 1975: Oxford Street, London	7 civilians injured in explosion.
October 9 1975: Lurgancullenboy, Crossmaglen, Armagh	1 soldier killed in explosion. Royal Regiment of Fusiliers. 2 soldiers injured.
October 9 1975 ctd: Bus Stop near Green Park Tube Station, Piccadilly Circus, London	1 civilian killed in explosion. 20 civilians injured.
October 10 1975: Iniscarn Road, Creggan District, L/Derry	1 soldier killed in shooting incident. Prince of Wales Own Regiment.
October 23 1975: Camden Hill Square, Kensington	1 civilian killed in explosion.
November 12 1975: Scott's Oyster Bar, Mount Street, Mayfair, London	1 civilian killed in explosion. 15 civilians injured.
November 18 1975: Walton's Restaurant, Walton Street, Chelsea	2 civilians killed in explosion. 17 civilians injured.
November 21 1975: Carrive Road, Forkhill, Armagh	1 soldier killed in explosion. Royal Regiment of Fusiliers. 1 soldier injured.
November 22 1975: BA Post Drumuckaval, Armagh	3 soldiers killed in shooting incident. All were members of Royal Regiment of Fusiliers. 1 soldier injured.
November 27 1975: Ross McWhirter's home, London	1 civilian killed in shooting incident.
December 6 1975: Balcombe Street Siege, London	Hostages taken. No known deaths or injuries.
December 18 1975: BA Post Bank Place, L/Derry.	2 soldiers killed in explosion. Both members of Royal Artillery, 42 Heavy Regiment.
January 17 1976: Great James Street, L/Derry	1 soldier killed in shooting incident. Royal Artillery. 1 soldier injured.
March 15 1976: West Ham Underground Station, London	1 civilian killed in shooting incident. 1 civilian injured.
March 16 1976: Two Unknown Underground Stations, London	No known deaths or injuries.
March 27 1976: Ideal Home Exhibition, Olympia, London	1 civilian killed in explosion (Died 19/04/76). 85 civilians injured.
March 30 1976: Ballygargan, Lurgan, Armagh	1 soldier killed in explosion. Royal Regiment of Fusiliers.
March 31 1976: Belleek, Armagh	3 soldiers killed in explosion. All members of Royal Scots Regiment.
June 28 1976: Crossmaglen, Armagh	1 soldier killed in explosion. Parachute Regiment.
July 3 1976: Butcher's Gate, L/Derry	1 soldier killed in shooting incident. 16 <sup>th</sup> Light Air Defence Regiment.
July 21 1976: Ebrington Barracks, L/Derry	1 soldier killed in explosion. Royal Engineers.
July 21 1976: British Ambassador's Official Residence, Sandyford, Co. Dublin	1 British Ambassador and 1 civilian killed in explosion.
August 3 1976: Main Street, Dungiven, L/Derry	1 soldier killed in shooting incident. Royal Hampshire Regiment.
August 8 1976: Crossmaglen, Armagh	1 soldier killed in explosion. Parachute Regiment.
October 13 1976: Hemsworth Street, Shankill, Belfast	1 civilian (ex-soldier) killed in shooting incident.
October 24 1976: Oakfield Street, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Royal Artillery, 32 <sup>nd</sup> Light Regiment. 3 soldiers injured.
November 22 1976: Flax Street Mill, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Royal Artillery, 32 <sup>nd</sup> Light Regiment. 3 soldiers injured.
November 24 1976: Ardmonagh, W. Belfast	1 soldier killed in shooting incident. Royal Welsh Fusiliers.
December 11 1976: Bogside, L/Derry	1 soldier killed in shooting incident. Royal Engineers.
January 2 1977: Crossmaglen, Armagh	1 soldier killed in shooting incident. Royal Highland Fusiliers.
January 9 1977: Newtownbutler, Fermanagh	1 soldier killed in explosion. 321 Explosive Ordnance Disposal Unit of Royal Artillery.
January 11 1977: Old Park Road, N. Belfast	1 soldier killed in shooting incident. Royal Artillery, 49 <sup>th</sup> Field Regiment
January 23 1977: Downing Street, Off Shankill Road, W. Belfast	1 civilian stabbed and killed in shooting incident.
January 23 1977 ctd: Eliza Street, S. Belfast	1 soldier killed in shooting incident. Royal Artillery.

January 29 1977: Seven Attacks in the West End, London	No known deaths or injuries.
March 15 1977: Stockman's Lane, Anderstown, W. Belfast	1 civilian killed in shooting incident.
April 5 1977: Beleek, Fermanagh	1 soldier killed in explosion. 9 <sup>th</sup> /12 <sup>th</sup> Lancers. 1 soldier injured.
April 15 1977: Creggan, L/Derry	1 soldier killed in shooting incident. Royal Corps of Transport.
May 14 1977: Forkhill, Armagh	1 soldier kidnapped and killed in shooting incident. Grenadier Guards.
June 29 1977: North Howard Street, W. Belfast	2 soldiers killed in shooting incident. Both members of Light Infantry. 2 soldiers injured.
August 9 1977: Springfield Road, New Barnsley, W. Belfast	1 soldier killed in shooting incident. Light Infantry.
August 12 1977: Norglen Drive, Turf Lodge, W. Belfast	1 sailor killed in shooting incident. Royal Marines, 45 Commando. 3 soldiers injured.
August 28 1977: Brompton Park, Ardoyne, N. Belfast	1 soldier killed in shooting incident. Gordon Highlanders.
August 31 1977: Antrim Road, N. Belfast	1 soldier killed in shooting incident. Royal Green Jackets.
November 12 1977: Flax Street, Ardoyne, N. Belfast	1 soldier killed in shooting incident.
November 14 1977: Bearnagh Drive, Anderstown, W. Belfast	1 soldier killed in shooting incident. Irish Guards.
November 14 1977 ctd: Monagh Road, W. Belfast	1 soldier killed in shooting incident. Transferred to Intelligence Corps from 16/5 <sup>th</sup> Queen's Royal Lancers.
February 17 1978: Jonesborough, Armagh	1 soldier killed in helicopter crash while taking evasive action. Royal Green Jackets.
March 1 1978: Cliftonpark Avenue, N. Belfast	1 soldier killed in shooting incident. Royal Artillery, 39 <sup>th</sup> Field Regiment.
March 3 1978: Donegall Street, N. Belfast	1 soldier killed in shooting incident. Royal Tank Regiment.
March 4 1978: Crossmaglen, Armagh	1 soldier killed in explosion. Royal Green Jackets. 1 soldier injured.
March 17 1978: Glenshane Pass, L/Derry	1 soldier killed in shooting incident. Parachute Regiment.
June 7 1978: Shanalongford Bridge, L/Derry	1 soldier killed in car accident. SAS.
July 12 1978: Dundalk Road, Crossmaglen, Armagh	1 soldier killed in explosion. Parachute Regiment.
July 19 1978: Dungannon, Tyrone	1 soldier killed in explosion. Black Watch.
August 11 1978: Letterkenny Road, Bogside, L/Derry	1 soldier killed in shooting incident. Transferred to 14 <sup>th</sup> Intelligence Company from Scots Guards.
August 17 1978: Forkhill, Armagh	1 sailor killed in explosion. Royal Marines, 42 Commando. 3 soldiers injured.
November 12 1978: Crossmaglen, Armagh	1 sailor killed in explosion. Royal Marines, 42 Commando.
December 17 1978: Series of Attacks on Cities including Bristol, Coventry, Liverpool, Manchester and Southampton.	No known deaths or injuries.
December 19 1978: Baltic Avenue, N. Belfast	1 soldier killed in shooting incident. King's Own Scottish Borderers.
December 21 1978: Crossmaglen, Armagh	3 soldiers killed in shooting incident. All members of Grenadier Guards.
February 14 1979: Abercorn Road, L/Derry	1 soldier killed in shooting incident. Royal Welsh Fusiliers, 1 <sup>st</sup> Battalion.
March 19 1979: BA Barracks Newtownhamilton, Armagh	1 soldier killed in explosion. Queen's Regiment. 4 soldiers injured.
March 22 1979: British Ambassador's Official Residence, Holland	1 British Ambassador killed in shooting incident.
March 30 1979: Car Park, House of Commons, London	1 Conservative MP killed in explosion.
April 5 1979: Anderstown RUC Station, W. Belfast	2 soldiers killed in shooting incident. Both members of Blues & Royals.

April 11 1979: Glenalina Crescent, Ballymurphy, W. Belfast	1 soldier killed in shooting incident. King's Regiment.
April 19 1979: Glenalina Crescent, Ballymurphy, W. Belfast	1 soldier killed in shooting incident on April 11 (see above) died of his injuries. King's Regiment.
April 19 1979 ctd: Falls Road, W. Belfast	1 Cadet Force Captain killed in shooting incident. 1 Army Cadet injured.
May 6 1979: Lisnaskea, Fermanagh	1 soldier killed in shooting incident. 9 <sup>th</sup> /12 <sup>th</sup> Lancers.
May 9 1979: Norglen Gardens, Turf Lodge, W. Belfast	1 soldier killed in explosion. King's Regiment, 1 <sup>st</sup> battalion.
July 8 1979: Crossmaglen, Armagh	1 soldier killed in explosion. Queen's Own Highlanders, 1 <sup>st</sup> battalion.
August 2 1979: Cathedral Road, Armagh	2 soldiers killed in explosion. 1 member of Royal Artillery and 1 member of Royal Signals Regiment.
August 27 1979: Narrow Water, Warrenpoint, Down	18 soldiers killed in two explosions. 1 civilian killed as soldiers returned fire. 16 members of Parachute Regiment and 2 members of Queen's Own Highlanders. Several other soldiers injured.
August 27 1979: Mullaghmore, Co. Sligo	2 members of Royalty and 1 civilian killed in explosion (1 died 28/08/79). 3 civilians injured.
October 8 1979: Falls Road Junction, W. Belfast	1 soldier killed in shooting incident. Royal Anglian Regiment.
October 28 1979: Springfields Road RUC Station, W. Belfast	1 soldier killed in shooting incident. Duke of Wellington's Regiment. 1 sergeant injured.
November 13 1979: Ford's Cross, Crossmaglen, Armagh	1 soldier killed in explosion. Welsh Guards. 1 soldier injured.
December 16 1979: Ballygawley Road, Dungannon, W. Belfast	4 soldiers killed in explosion. All members of 16 <sup>th</sup> Air Defence Regiment.
December 16 1979 ctd: Tullydonnel, Forkhill, Armagh	1 soldier killed in explosion. Parachute Regiment.
January 1 1980: Tullydonnel, Forkhill, Armagh	2 soldiers killed in shooting incident by friendly fire. Both members of the Parachute Regiment.
January 26 1980: Whiterock Road, Ballymurphy, W. Belfast	1 soldier killed in shooting incident. Duke of Wellington's Regiment.
February 16 1980: Bielefeld, Germany	1 soldier killed in shooting incident. Royal Engineers.
March 15 1980: Newry Road, Crossmaglen, Armagh	1 soldier killed in shooting incident. King's Own Royal Borderers.
March 21 1980: North Street, Crossmaglen, Armagh	1 soldier killed in explosion. King's Own Royal Borderers.
May 2 1980: Antrim Road, N. Belfast	1 soldier killed in shooting incident. SAS.
July 19 1980: The Village Inn, Rosemount, L/Derry	1 soldier killed in shooting incident. Royal Green Jackets.
July 27 1980: Moybridge, Monaghan Road, Tyrone	1 soldier killed in explosion. Royal Highland Fusiliers. 1 soldier injured.
August 10 1980: BA Post Forkhill, Armagh	1 soldier killed in explosion. Parachute Regiment. 1 soldier injured.
November 11 1980: Altnagelvin Hospital, L/Derry	1 soldier killed in shooting incident. Argyll & Sutherland Highlanders.
December 2 1980: Princess Louise Regiment Territorial Army Centre, Hammersmith Road, London	5 people injured in explosion.
January 20 1981: Bogside City Walls, L/Derry	1 soldier killed in shooting incident. Staffordshire Regiment. 1 soldier injured.
January 25 1981: Berry Street, C. Belfast	1 soldier killed in shooting incident. Royal Regiment of Fusiliers.
May 9 1981: Oil Terminal, Shetland Islands	No known deaths or injuries.
May 19 1981: Chancellor's Road, Armagh	5 soldiers killed in explosion. 1 member of Royal Corps of Transport and 4 members of Royal Green jackets.
May 31 1981: Drumalane Road, Down	1 soldier killed in explosion. 321 Explosive Ordnance Disposal Unit of Royal Artillery.

July 17 1981: Glassdrummond, Crossmaglen, Armagh	1 soldier killed in shooting incident. Royal Green Jackets. 3 soldiers injured.
September 5 1981: Stranmillis Park, S. Belfast	1 soldier killed in shooting incident. Royal Pioneer Corps. 1 soldier injured.
October 10 1981: Ebury Bridge Road, Chelsea Barracks, London	2 civilians killed in explosion (1 died 14/10/81). Over 40 people injured including 20 Irish Guardsmen.
October 17 1981: London SE12	1 civilian injured in explosion.
October 26 1981: Wimpey Restaurant, Oxford Street, London	1 Police Officer killed in explosion. Bomb Disposal Expert.
November 13 1981: Attack on Politicians Home, London	No known deaths or injuries.
November 23 1981: Royal Artillery HQ, Government House, Woolwich New Rod, London	2 civilians injured in explosion.
March 25 1982: Crocus Street, W. Belfast	3 soldiers killed in shooting incident. All members of Royal Green Jackets. 1 soldier injured.
April 1 1982: Creggan Street, L/Derry	2 soldiers killed in shooting incident. 1 member of Royal Corps of Signals and 1 member of Royal Electrical & Mechanical Engineers.
April 30 1982: Belleek, Fermanagh	1 soldier killed in explosion. Royal Hampshire Regiment.
May 24 1982: Butcher Gate, L/Derry	1 soldier crushed and killed under vehicle when it came under attack. Royal Anglian Regiment. 1 soldier injured.
July 20 1982: Hyde Park, London	4 Guardsmen (1 died 23/07/82) and 7 horses killed in explosion. All members of Blues and Royals Household Cavalry. 28 soldiers and civilians injured.
July 20 1982 ctd: Regent Park, London	7 Bandsmen killed by IRA bomb. All members of the Royal Green Jackets. 18 soldiers and 13 civilians injured.
September 20 1982: Springfield Road RUC Station, W. Belfast	1 soldier killed in rocket attack. Worcester & Sherwood Foresters Regiment.
September 20 1982 ctd: Divis Flats, W. Belfast	1 soldier killed in explosion. Worcester & Sherwood Foresters Regiment.
September 27 1982: West Circular Road, W. Belfast	1 soldier killed in explosion. Worcester & Sherwood Foresters Regiment.
December 7 1982: Droppin Well Pub, Ballykelly, L/Derry	12 soldiers killed in explosion. Members of Army Catering Corps and the Cheshire Regiment. Over 6 soldiers injured.
April 7 1983: Falls Road, W. Belfast	1 soldier killed in explosion. Devonshire & Dorset Regiment.
April 8 1983: Royal Arms Hotel, Omagh, Tyrone	1 soldier killed in explosion. Queen's Regiment, 1 <sup>st</sup> Battalion. 1 soldier injured.
May 10 1983: Old Strabane Road, L/Derry City	1 civilian killed in shooting incident. 1 soldier injured.
June 10 1983: Glenalina Road, Ballymurphy, W. Belfast	1 soldier killed in explosion. Light Infantry, 1 <sup>st</sup> Battalion.
October 15 1983: Lone Moor Road, Creggan, L/Derry	1 soldier killed in explosion. Queen's Regiment. 1 soldier injured.
November 6 1983: Crossmaglen, Armagh	1 soldier killed in explosion. Devonshire & Dorset Regiment.
December 10 1983: Royal Artillery Barracks, Repository Rd, London	3 people injured in explosion.
December 18 1983: Harrods Department Store, Knightsbridge, London	3 Police Officers and 3 civilians killed in explosion (1 died 24/12/83). 91 civilians injured.
December 25 1983: Orchard Street, London, W1	2 civilians injured in explosion.
February 21 1984: Dunloy, Antrim	1 soldier killed in shooting incident. 14 <sup>th</sup> Intelligence Company. 1 soldier injured.
March 27 1984: Gransha Hospital, L/Derry	1 soldier killed in explosion. Royal Military Police. 1 soldier injured.
April 23 1984: Bishop Street, L/Derry	1 soldier killed in shooting incident. Queen's Regiment. 6 soldiers injured.
May 18 1984: Enniskillen, Fermanagh	2 soldiers killed in explosion. Royal Regiment of Fusiliers. 2 soldiers injured.
May 29 1984: Mounthill, Crossmaglen, Armagh	1 soldier killed in explosion. Staffordshire Regiment. 1 soldier injured.

October 12 1984: Conservative Party Annual Conference, Grand Hotel, Brighton	1 Conservative MP and 4 civilians killed in explosion (1 died 12/11/84). Over 30 people injured.
October 17 1984: Enniskillen, Fermanagh	1 soldier killed in explosion. Royal Regiment of Fusiliers. 2 soldiers injured.
October 19 1984: Norglen Gardens, Turf Lodge, W. Belfast	1 soldier killed in shooting incident. Royal Green Jackets. 1 soldier injured.
December 2 1984: Kesh, Fermanagh	1 soldier killed in shooting incident. SAS/Parachute Regiment.
March 27 1985: Divis Flats, W. Belfast	1 soldier killed in explosion. King's Own Borderers, 2 <sup>nd</sup> Battalion.
September 21 1985: Limavady Road, Waterside, L/Derry	1 soldier killed in shooting incident. Royal Anglian Regiment.
March 18 1986: Castlewellan, Down	1 soldier killed in explosion. Royal Green Jackets.
May 22 1986: Milltown Bridge, Crossmaglen, Armagh	1 soldier killed in explosion. Royal Anglian Regiment.
July 9 1986: Glassdrummond, Crossmaglen	2 soldiers killed in explosion. Royal Anglian Regiment. 2 soldiers injured.
March 30 1987: Divis Flats, W. Belfast	1 soldier killed in explosion. Queen's Lancashire Regiment. 1 soldier injured.
June 4 1987: Shaw's Road, Anderstown, W. Belfast	1 soldier killed in shooting incident. Queen's Lancashire Regiment.
July 19 1987: Main Street, Belleek, Fermanagh	1 soldier killed in shooting incident. Royal Green Jackets.
August 9 1987: Townsend Street Presbyterian Church, W. Belfast	1 civilian beaten to death.
August 15/16 1987: Various Postal Devices sent to 6 Senior Civil Servants in England	No known injuries.
March 19 1988: Anderstown Road, W. Belfast	2 soldiers beaten & killed in shooting incident. 1 member of Royal Corps of Signals & 1 member of Royal Artillery Regiment.
April 26 1988: Carrickmore, Tyrone	1 soldier killed in explosion. Royal Artillery Regiment. 2 soldiers injured.
May 1 1988: Roemund, Holland	1 airman killed in shooting incident. Royal Air Force. 2 airmen injured.
May 1 1988 ctd: Nieuw-Bergen, Holland	2 airmen killed in explosion. Both members of RAF. 1 airman injured.
May 21 1988: Castleblayney Road, Crossmaglen, Armagh	1 soldier killed in explosion. Dog Handler with Royal Pioneer Corps.
June 15 1988: Market Square, Lisburn, Antrim	6 soldiers killed in explosion. 1 member of Green Howards, 1 Royal Army Ordnance Corps, 3 Corps of Signals and 1 Royal Signals Regiment.
July 8 1988: Falls Road, W. Belfast	1 soldier killed in explosion. 321 Explosive Ordnance Disposal Unit of Royal Artillery.
July 29 1988: Skerriff Road, Cullyhanna, Armagh	1 soldier killed in explosion. Parachute Regiment. 2 soldiers injured.
August 1 1988: Royal Engineers Inglis Barracks, Mill Hill, London	1 soldier killed in explosion. Royal Electrical & Mechanical Engineers. 9 soldiers injured.
August 8 1988: New Barnsley BA Base, Ballymurphy, W. Belfast	1 soldier killed in shooting incident. Queen's Regiment.
August 12 1988: Ostend Port, Belgium	1 soldier killed in shooting incident. Royal Regiment of Wales.
August 20 1988: Ballygawley to Omagh Road, Tyrone.	8 soldiers killed in explosion. All members of Light Infantry. 19 soldiers injured.
August 22 1988: Albertbridge Road, E. Belfast	1 sailor killed in explosion by IRA. Naval Recruiting Officer for Royal Navy.
January 31 1989: Rock Bar, Falls Road, W. Belfast	1 soldier killed in explosion. Royal Anglian Regiment.
February 20 1989: British Army Barracks, Tern Hill, Shropshire	1 soldier injured in explosion.
February 22 1989: Bond Street, L/Derry	1 soldier killed in explosion. Royal Corps of Transport.

March 8 1989: Buncrana Road, L/Derry	2 soldiers killed in explosion. Both Royal Artillery. 6 soldiers injured.
May 4 1989: Silverbridge, Crossmaglen, Armagh	1 soldier killed in explosion. Worcester & Sherwood Foresters Regiment. 3 soldiers injured.
June 15 1989: New Lodge Road, N. Belfast.	1 sailor killed by friendly fire. Royal Marines.
July 2 1989: Hanover, W. Germany	1 soldier killed in explosion. Royal Tank Regiment. Wife & 4 children injured with him.
August 15 1989: Clooney Army Base, Waterside, L/Derry	1 soldier killed by friendly fire.
September 7 1989: BA Base Unna-Messen, Dortmund, Holland	1 civilian killed in shooting incident.
September 16 1989: Coalisland RUC Station, Tyrone	1 soldier killed in shooting incident. Royal Corps of Signals.
September 22 1989: Royal Marines School of Music, Deal, Kent	11 sailors killed in explosion. Over 30 soldiers were injured. All were members of the Royal Marines.
October 26 1989: Wildenrath, W. Germany	1 airman and his 6month old daughter killed in shooting incident. RAF.
November 15 1989: Kensington, London	No known deaths or injuries.
November 18 1989: Married Quarters, Colchester, Essex	2 soldiers injured in explosion.
November 18 1989 ctd: Drumlough Road, Moybridge, Down	3 soldiers killed in explosion. All members of Parachute Regiment. 1 soldier injured.
December 13 1989: Derryard, Rosslea, Fermanagh	2 soldiers killed in shooting incident. Both members of King's Own Scottish Borderers. 1 soldier injured.
January 1990: Army HQ, South East District, Aldershot	No known deaths or injuries.
February 20 1990: Combined Services Recruitment Centre, Rutland Street, Leicester	2 civilians injured in explosion.
February 25 1990: Army Recruiting Office, New Road, Halifax	No known deaths or injuries.
May 5 1990: Cullyhanna, Armagh	1 soldier killed in shooting incident. Scots Guards.
May 14 1990: Service Education Centre, Eltham, South London, SE9	5 civilians injured in explosion.
May 16 1990: Army Recruiting Office, High Street, Wembley, London	1 soldier killed in explosion. Queen's Own Regiment. 4 soldiers injured.
May 27 1990: Roermond, Holland	2 civilians killed in shooting incident.
June 1 1990: Lichfield Railway Station, Staffordshire	1 soldier killed in shooting incident. Royal Regiment of Wales. 2 soldiers injured.
June 2 1990: Dortmund, W. Germany	1 soldier killed in shooting incident. Royal Artillery Regiment.
June 9 1990: Honourable Artillery HQ, City Road, London, EC1	19 people injured in explosion.
June 12 1990: Hampshire	No known deaths or injuries.
June 21 1990: RAF Stanmore Park, Uxbridge	No known deaths or injuries.
June 25 1990: The Carlton Club, St. James, London	1 retired Conservative MP killed in explosion (died 8 months later 13/03/91 as result of injuries). 21 civilians injured.
July 6 1990: The Strand, London, WC2	No known deaths or injuries.
July 20 1990: London Stock Exchange	No known deaths or injuries.
July 30 1990: Hankham, Sussex	1 Conservative MP killed in explosion.
August 6 1990: London, NW8	No known deaths or injuries.
August 13 1990: Didcot	No known deaths or injuries.
September 10 1990: Army and Navy Recruiting Office, Derby	No known deaths or injuries.
September 17 1990: Army Information Centre, Finchley, London	1 soldier injured in shooting incident.
September 19 1990: Staffordshire	1 Air Chief Marshall and 1 civilian injured in shooting incident.
September 27 1990: Royal Overseas League, Park Place, London, WC1	No known deaths or injuries.

October 24 1990: Buncrana Road, Coshquin, L/Derry	5 soldiers killed in explosion. All members of the King's Regiment.
January 24 1991: Territorial Army Firing Range, Cannock Chase, Staffordshire	No known deaths or injuries.
February 7 1991: Number 10, Downing Street, London	1 civilian injured in explosion.
February 18 1991: Paddington Station, London, W2	No known deaths or injuries.
February 18 1991 ctd: Victoria Railway Station, London, SW1	1 civilian killed in explosion. 38 civilians injured.
February 25 1991: Railway Line, Napsbury Lane, St. Albans	No known deaths or injuries.
March 1 1991: Killyleagh Road, Armagh	1 member of UDR killed in explosion. Ex-soldier with the British Army.
April 3 1991: Preston Railway Station, Preston, Lancashire	No known deaths or injuries.
April 5 1991: Arndale Shopping Centre, Manchester	No known deaths or injuries.
May 25 1991: North Howard Street Army Base, W. Belfast	1 soldier killed in explosion. Royal Regiment of Fusiliers. 1 soldier injured.
June 19 1991: Nevis Avenue, E. Belfast	1 soldier killed in shooting incident. Parachute Regiment.
June 28 1991: Beck Theatre, Hayes, Middlesex	No known deaths or injuries.
June 30 1991: Navy and RAF Recruiting Office, Fishergate, Preston	No known deaths or injuries.
August 5 1991: Cambridge Public House, Charing Cross Road, London	No known deaths or injuries.
August 17 1991: Carrickovaddy, Newtownhamilton, Armagh	1 soldier killed in explosion. Coldstream Guards.
August 29 1991: London Underground Depot, Hammersmith, W6	No known deaths or injuries.
August 31 1991: Bargain Bookshop, Charing Cross Road, London, WC2	No known deaths or injuries.
November 2 1991: Musgrave Park Hospital, S. Belfast	2 soldiers killed in explosion. 1 member of Royal Army Medical Corps and 1 member of Royal Corps of Transport.
November 15 1991: Old Barclays Bank, St. Peter's Street, St. Albans, London	1 civilian injured in explosion.
December 1 1991: 3 Furniture Stores on Tottenham Court Road, London	No known deaths or injuries.
December 2 1991: Littlewoods Dept. Store, London	No known deaths or injuries.
December 7 - 8 1991: IRA Firebombs at Shopping Centres in Blackpool & another city.	No known deaths or injuries.
December 8 1991: Arndale Shopping Centre, Manchester	No known deaths or injuries.
December 14 1991: Brent Cross shopping Centre, North London	No known deaths or injuries.
December 15 1991: Sainsbury Wing, National Gallery, London	No known deaths or injuries.
December 16 1991: Railway Line near Clapham Junction, London	No known deaths or injuries.
December 23 1991: Neasden Underground Depot, London	No known deaths or injuries.
December 23 1991 ctd: Ilford Underground Depot, London	No known deaths or injuries.
December 23 1991 ctd: On a Train at Harrow Hill, London	No known deaths or injuries.
January 6 1992: Oxford Street, London	No known deaths or injuries.
January 10 1992: Downing Street, Whitehall, London	No known deaths or injuries.

January 17 1992: Marquis of Granby Public House, Shaftesbury Avenue, London	No known deaths or injuries.
January 30 1992: Elephant & Castle Underground, London	No known deaths or injuries.
February 3 1992: Neasden Underground Depot	No known deaths or injuries.
February 7 1992: London Underground between Barking and Upney	No known deaths or injuries.
February 11 1992: Telephone Box, Parliamentary Street, London	No known deaths or injuries.
February 28 1992: London Bridge Railway Station, London	29 civilians injured in explosion.
February 29 1992: Crown Prosecution Service, London, EC4	2 civilians injured in explosion.
March 10 1992: Near Wandsworth Common Railway Station, London	No known deaths or injuries.
April 6 1992: Bridle Lane, near Piccadilly Circus, London	No known deaths or injuries.
April 10 1992: London Financial District, Baltic Exchange	3 civilians killed in explosion. 91 civilians injured.
April 10 1992 ctd: North West London	No known deaths or injuries.
April 11 1992: Staples Corner, Junction of M1 and North Circular Road	No known deaths or injuries.
April 14 1992: Army Careers Office, Derby	1 soldier killed in shooting incident. Royal Corps of Signals. 1 civilian injured.
May 1 1992: BA Checkpoint at Killeen, Armagh	1 soldier killed in explosion. Royal Regiment of Fusiliers.
May 9-10 1992: Metro Centre, Gateshead	No known deaths or injuries.
June 7 1992: Royal Festival Hall, London, SE1	No known deaths or injuries.
June 8 1992: A64 Leeds-York near Tadcaster, North Yorkshire	1 Police Officer killed in shooting incident. 1 Police Officer injured.
June 10 1992: Wilcox Place, Victoria Street	No known deaths or injuries.
June 15 1992: Hijacked Taxi, St. Albans Street, near Piccadilly Circus, London	No known deaths or injuries.
June 25 1992: Coleman Street, London, EC2	1 Police Officer injured in explosion.
July 30-31 1992: Milton Keynes (Shops & Library)	No known deaths or injuries.
August 3 1992: Duncairn Avenue, New Lodge, N. Belfast	1 soldier killed in shooting incident. Scots Guards.
August 21 1992: Flax Street, N. Belfast	1 civilian killed in shooting incident.
August 25 1992: Shropshire Regimental Museum and two shops, Shrewsbury	No known deaths or injuries.
August 28 1992: The Square, Crossmaglen, Armagh	1 soldier killed in shooting incident. Light Infantry.
September 6 1992: London Hilton Hotel, Park Lane, London	No known deaths or injuries.
September 17 1992: Madam Tussaud's, Marylebone Road, London	No known deaths or injuries.
September 17 1992 ctd: The Planetarium, Marylebone Road, London	No known deaths or injuries.
September 17 1992 ctd: The Imperial War Museum, Lambeth Road, London	No known deaths or injuries.
October 7 1992: Junction of The Haymarket and Panton Street, Piccadilly, London	5 civilians injured in explosion.
October 7 1992 ctd: Flitcroft Street, London, WC2	No known deaths or injuries.
October 8 1992: Tooley Street, London, SE1	1 civilian injured in explosion.
October 8 1992 ctd: Melcombe Street, London, NW1	No known deaths or injuries.
October 9 1992: Car Park, Amos Grove Underground Station	No known deaths or injuries.

October 9 1992 ctd: Royal British Legion, Nursery Road, Southgate, N14	No known deaths or injuries.
October 10 1992: Sussex Arms Public House, Long Acre, Covent Garden	1 civilian killed in explosion. 4 civilians injured.
October 10 1992 ctd: Paddington Green Police Station, Harrow Road, Paddington, W2	1 civilian injured in explosion.
October 19 1992: Novotel Hotel, Shortlands. Hammersmith	No known deaths or injuries.
October 19 1992 ctd: Oxden Street, London, SW1	2 civilians injured in explosion.
October 21 1992: Railway Line near Silver Street Station, Edmonton	2 civilians injured in explosion.
October 21 1992 ctd: Princess Louise Territorial Army Ctr, Hammersmith Road, W6	3 people injured in explosion.
October 21 1992 ctd: Railway Line near Harrow Road, NW10	No known deaths or injuries.
October 25 1992: London SW1	No known deaths or injuries.
October 30 1992: Downing Street, London	No known deaths or injuries.
November 14 1992: Stoke Newington Road, London, N16	1 Police Officer injured in shooting incident.
November 15 1992: Canada Tower, Canary Wharf, London	No known deaths or injuries.
December 1 1992: Tottenham Court Road, London	No known deaths or injuries.
December 3 1992: Deansgate and Cateaton Street, Manchester City Centre	64 civilians injured in explosion.
December 9 1992: Woodside Park Underground Station, London, N12	No known deaths or injuries.
December 10 1992: Wood Green Shopping Centre, London, N22	11 civilians injured in explosion.
December 16 1992: Cavendish Square, London, W1	4 civilians injured in explosion.
December 16 1992 ctd: John Lewis Department Store, Oxford Street, London	1 civilian injured in explosion.
December 22 1992: Hampstead Tube Station	No known deaths or injuries.
January 6 1993: C & A, Oxford Street, London	No known deaths or injuries.
January 6 1993 ctd: Video Shop, Oxford Street, London	No known deaths or injuries.
January 6 1993 ctd: Dillon's Bookshop, Northumberland Avenue, London	No known deaths or injuries.
January 6 1993 ctd: Plaza Shopping Centre, London, W1	No known deaths or injuries.
January 14 1993: Top Shop, Oxford Circus, London, W1	No known deaths or injuries.
January 28 1993: Harrods, Brompton Road, London, SW1	2 civilians injured in explosion.
February 3 1993: Train at Kent House Station, Kent	No known deaths or injuries.
February 3 1993 ctd: South Kensington Tube Station, London	No known deaths or injuries.
February 9 1993: Cathedral Road, Armagh	1 soldier killed in explosion. Royal Regiment of Fusiliers. Over 2 soldiers injured.
February 10 1993: London, SW1	No known deaths or injuries.
February 26 1993: Gasworks Winwick Lane, Warrington, Cheshire	1 Police Officer injured in shooting incident. 1 civilian kidnapped, any other injuries unknown.
February 27 1993: Camden High Street, London, NW1	18 civilians injured in explosion.
March 17 1993: Bog Road, Forkhill, Armagh	1 soldier killed in shooting incident. Royal Scots Regiment.
March 20 1993: Bridge Street, Warrington, Cheshire	3 civilians killed in explosion (1 died 25/03/93 and 1 died 07/07/94). 56 civilians injured.

April 7 1993: Argyle Square, London, WC1	No known deaths or injuries.
April 23 1993: Esso Oil Refinery, North Shields, Newcastle	No known deaths or injuries.
April 24 1993: Bishopsgate, London	1 civilian killed in explosion. 44 civilians injured.
April 24 1993 ctd: Hijacked Taxi, Manor House Tube Station, London	No known injuries or deaths.
April 24 1993 ctd: Hijacked Taxi, Judd Street, St. Pancras, London	No known injuries or deaths.
May 9 1993: Galleries Shopping Centre, Bristol	No known deaths or injuries.
May 12 1993: Cornmarket, Oxford	No known deaths or injuries.
June 9 1993: Gas Installation, Gateshead, Tyne & Wear	No known deaths or injuries.
June 9 1993 ctd: Esso Oil Refinery, North Shields	No known deaths or injuries.
June 26 1993: Dundalk Road, Crossmaglen, Armagh	1 soldier killed in shooting incident. Duke of Edinburgh Royal Regiment.
July 17 1993: Carron Road, Crossmaglen, Armagh	1 soldier killed in shooting incident. Duke of Edinburgh Royal Regiment.
August 13 1993: The Pier and several shops, Bournemouth	No known deaths or injuries.
September 16 1993: Curzon Phoenix Cinema, Charing Cross Road, WC2	No known deaths or injuries
September 16 1993 ctd: MGM Cinema, Shaftsbury Avenue, WC2	No known deaths or injuries
October 2 1993: Finchley Road, London	6 civilians injured in explosion.
October 4 1993 ctd: Tottenham Lane, London, N8	No known deaths or injuries.
October 4 1993 ctd: Archway Road, London, N19	No known deaths or injuries.
October 4 1993 ctd: Highgate High Street, London, N6	No known deaths or injuries.
October 8 1993: Junction of Coles Green Road and Humber Road, NW2	No known deaths or injuries.
October 8 1993 ctd: Black Lion Public House, 295 West End Lane, NW6	No known deaths or injuries.
October 24 1993: Reading Station	No known deaths or injuries.
October 24 1993 ctd: Basingstoke Station	No known deaths or injuries.
October 29 1993: Edwardes Square, W8	No known deaths or injuries.
December 2 1993: Victoria Street, Keady, Armagh	1 soldier killed in shooting incident. Royal Artillery Regiment.
December 14 1993: Railway Line near Woking Station, Surrey	No known deaths or injuries.
December 16 1993: Railway Line near Brookwood & Farnborough Stations, Surrey	No known deaths or injuries.
December 20 1993: Sorting Office, London, EC1	No known deaths or injuries.
December 20 1993 ctd: Travellers Tavern, Elizabeth Street, Victoria, London, SW1	No known deaths or injuries.
December 20 1993 ctd: Mount Pleasant Sorting Office, London, EC1	No known deaths or injuries.
December 20 1993 ctd: Northfields Tube Station, London, W13	No known deaths or injuries.
December 30 1993: Newry Street, Crossmaglen, Armagh	1 soldier killed in shooting incident. Grenadier Guards.
January 27 1994: C & A, Oxford Street, London	No known deaths or injuries.
January 27 1994 ctd: Mothercare, Oxford Street, London	No known deaths or injuries.
January 27 1994 ctd: Silverdale travel Goods, Oxford Street, London	No known deaths or injuries.
January 28 1994: C & A, Oxford Street, London	No known deaths or injuries.
January 28 1994 ctd: Mothercare, Oxford Street, London	No known deaths or injuries.

January 29 1994: Nightingales Oxford Street, London	No known deaths or injuries.
February 18 1994: 157 Charing Cross Road, London	No known deaths or injuries.
February 19 1994: 157 Charing Cross Road, London	No known deaths or injuries.
February 19 1994 ctd: Top Shop, Oxford Circus, London	No known deaths or injuries
February 19 1994 ctd: Hennes, Oxford Circus, London	No known deaths or injuries.
February 19 1994 ctd: Newsagents, Great Cumberland Place, London	No known deaths or injuries.
February 19 1994 ctd: Burtons, New Oxford Street, London	No known deaths or injuries.
February 19 1994 ctd: Burtons, Regent Street, London	No known deaths or injuries.
February 19 1994 ctd: Liberty's, Regent Street, London	No known deaths or injuries.
February 19 1994 ctd: Mr Byrite, Oxford Circus, London	No known deaths or injuries.
February 22 1994: Edgware Road, London	No known deaths or injuries.
March 8 1994: Heathrow Airport, London	No known deaths or injuries.
March 10 1994: Heathrow Airport, London	No known deaths or injuries.
March 13 1994: Heathrow Airport, London	No known deaths or injuries.
May 14 1994: Keady, Armagh	1 soldier killed in explosion. Royal Artillery Regiment. 1 soldier injured.
June 6 1994: Seven Oakes Railway Station, Kent	No known deaths or injuries.
June 10 1994: Liberty's, Oxford Street, London, W1	No known deaths or injuries.
June 11 1994: Mr Byrite, Oxford Street, London, W1	No known deaths or injuries.
June 13 1994: Railway Line near Stevenage Station	No known deaths or injuries.
August 13 1994: Shopping Centre, Bognor Regis	No known deaths or injuries.
August 13 1994 ctd: Brighton Pier, Sussex	No known deaths or injuries.
August 22 1994: Laura Ashley Shop, Regent Street, London, W1	No known deaths or injuries.
February 9 1996: Docklands, London	2 civilians killed in explosion. Over 100 civilians injured.
February 15 1996: Charing Cross Road, London	No known deaths or injuries.
February 18 1996: Aldwych, Central London	8 civilians injured in explosion.
March 9 1996: London	No known deaths or injuries.
April 17 1996: Earls Court, London	No known deaths or injuries.
April 26 1996: Hammersmith Bridge, London	No known deaths or injuries.
June 15 1996: Arndale Centre, Manchester	Over 200 civilians injured in explosion.
October 11 1996: Thiepval Barracks, Lisburn, Down	1 soldier killed in explosion. Royal Electrical & Mechanical Engineers. 31 soldiers and civilians injured.
February 12 1997: Green Road, Bessbrook, Armagh	1 soldier killed in shooting incident. Royal Horse Artillery.
March 26 1997: Wilmslow Railway Station, North West England	No known deaths or injuries.

April 3 1997: M1, M5 and M6 Motorways	No known deaths or injuries.
April 5 1997: Grand National Horse Race, Aintree, Liverpool	No known deaths or injuries.
April 18 1997: Motorways and Railway Networks Countrywide	No known deaths or injuries.
April 18 1997 ctd: Cheshire & Staffordshire	No known deaths or injuries.
April 21 1997: London	No known deaths or injuries.
June 22 1998: Newry, Down	1 soldier killed in road accident.
June 1 2000: Hammersmith Bridge, London	No known deaths or injuries.
July 19 2000: Tube Line near Ealing Broadway, West London	No known deaths or injuries.
September 20 2000: MI6 Missile Attack, Vauxhall Cross, South London	No known deaths or injuries.
March 4 2001: BBC Television Centre, Wood Lane, White City, West London	1 civilian injured in explosion.
April 14 2001: Post Depot, Hendon, North London	No known deaths or injuries.
May 6 2001: Post Depot, Hendon, North London	1 civilian injured in explosion.
August 3 2001: Ealing Broadway, West London	7 civilians injured in explosion.
November 3 2001: New Street Railway Station, Smallbrook, Birmingham City Centre	No known deaths or injuries.

## **Appendix 2 – Agencies Consulted (Including Sounding Board)**

### *Manchester*

Emergency Planning  
Chamber of Commerce/Lord Mayor's Fund  
Accident & Emergency Consultant  
Ambulance Service (x2)  
Police (attended Sounding Board)

### *Warrington*

Social Services  
The Samaritans  
Bridge Project  
Warrington Ireland Reconciliation Emergency  
Fire Service (x2)  
Hospital Chaplain  
Emergency Planning

### *National*

National Association of Victim Support Schemes (also at Sounding Board via Cheshire VS)  
The Soldiers' and Sailors' Families Association (also at Sounding Board via Cheshire VS)  
The Legacy Project

### *Military*

Ministry of Defence (x 3 including War Pensions)  
Combat Stress (also at Sounding Board)  
Criminal Injuries Compensation Board (at Sounding Board)

## Appendix 3 – Press Releases



# News Release



For immediate release

### **Appeal to Northern Ireland Veterans**

The Tim Parry Johnathan Ball Trust, set up by the parents of Tim Parry who was killed by a bomb in Warrington in 1993, is appealing to GB based Northern Ireland veterans to come forward to help with a unique project.

The Legacy Project – which works with GB based victims and survivors of the Northern Ireland 'Troubles' – aims to identify the needs of former soldiers and families of those killed and injured in the 'Troubles' who may be suffering trauma many years after the event.

Funded by the Northern Ireland Office Victims' Liaison Unit the project has been working with former soldiers, victims of other GB bombings and emergency service workers since last year but now wants to target those affected by their service in Northern Ireland in particular. Ex-services personnel who served in Northern Ireland during the 'Troubles', witnessed incidents or were injured as a result of their time in Northern Ireland are being asked to help with the project. Families of those killed or injured in service are also being asked to come forward.

Their information will help inform research into the long-term needs of those affected by the 'Troubles' and ultimately the types of services which are offered to GB based casualties, victims or survivors.

To date there has been little work with those who have been affected by the 'Troubles' and although work with groups who have been affected by the conflict is commonplace in Northern Ireland, there has been very little intervention work with those affected in Great Britain.

Colin Parry, Chairman of the Trust says "Trauma in victims of major terrorist attacks is now recognised internationally but very little has been done to assess levels of trauma and impact on victims after the many major IRA bomb attacks in Great Britain. Our armed forces and their families have also been greatly affected by incidents both in Britain and Northern Ireland. Our research will help us to deliver services to those affected and we feel confident that our work at the Peace Centre will lead to a change in the way that social and medical services help victims and survivors who are still suffering many years after the events".

All information given will be treated as strictly confidential and anyone interested in participating in the research should contact the Peace Centre by phoning 01925 581229, emailing on [info@childrenforpeace.org](mailto:info@childrenforpeace.org) or writing to The Legacy Project, Tim Parry Johnathan Ball Trust, Peace Centre, Peace Drive, Warrington WA5 1HQ

- Ends -

**NOTES TO EDITORS:**

- The Tim Parry Johnathan Ball Trust was set up in the wake of the 1993 Warrington bomb.
- The Tim Parry Johnathan Ball Trust operates from the Peace Centre in Warrington.
- In November 2001, the Trust launched The Legacy Project, which aims to work with victims and survivors of the Northern Ireland 'Troubles' who are based in Great Britain.
- The Legacy Project was set up to identify and meet the needs of GB victims / survivors of the 'Troubles'.
- Research work is being carried out by the Trust in partnership with Holden McAllister Partnership & the Centre for Trauma Studies in Nottingham.
- It is anticipated that a Final Report on the research will be published in July 2003.

### **Notes for Information:**

#### ***Who can take part?***

Ex-service personnel who served in the Northern Ireland during the 'Troubles' (1969 to present) and have been affected by their experiences, were injured or witnessed a traumatic incident. We are also looking for family members of soldiers who were killed or injured during the 'Troubles'.

#### ***What will it involve?***

They will be contacted by a member of the research team who will give them details of the project and discuss their potential involvement in the research. All information will be treated as strictly confidential.

#### ***Why should they participate?***

Their shared experiences will be used to inform decisions concerning services for victims/survivors and ex-service personnel affected by the 'Troubles' here in Great Britain and the support they will afford to victims and survivors.

*For further information contact:*

#### **Jo Dover**

Legacy Project Leader

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# News Release



For immediate release

## **Appeal to Warrington & Manchester Bomb Victims**

The Tim Parry Johnathan Ball Trust, set up by the parents of Tim Parry who was killed by an IRA bomb in the town in 1993, is appealing to victims of the Warrington bomb and the 1996 Manchester bomb to come forward to help with a unique project.

The Legacy Project – which works with victims and survivors of the Northern Ireland 'Troubles' based in Great Britain – aims to identify the needs of victims who may be suffering trauma many years after the bombings.

Funded by the Northern Ireland Office Victims' Liaison Unit the project has been working nationwide with former soldiers, victims of other GB bombings and emergency service workers since last year to share their experiences. The Legacy Project now wants to target victims of the Manchester and Warrington bombs in particular. Individuals who were in the vicinity of the IRA bombs, who either witnessed the incidents or were injured as a result of them, are being asked to help with the project.

Their information will help inform research into the long-term needs of victims of the bombs and ultimately the types of service which are offered to bomb victims.

Since the bombs, there has been no formal grouping of victims and although work with victims groups is commonplace in Northern Ireland, there has been very little intervention work with victims of GB-based bomb attacks.

Colin Parry, Chairman of the Trust says "Trauma in victims of major terrorist attacks is now recognised internationally but very little has been done to assess levels of trauma and impact on victims after the many major IRA bomb attacks in Great Britain. Our research will help us to deliver services to those affected and we feel confident that our work at the Peace Centre will lead to a change in the way that social and medical services help victims and survivors who are still suffering many years after the bombs"

All information given will be treated as strictly confidential and anyone interested in participating in the research should contact the Peace Centre by phoning 01925 581229, emailing on [info@childrenforpeace.org](mailto:info@childrenforpeace.org) or writing to The Legacy Project, Tim Parry Johnathan Ball Trust, Peace Centre, Peace Drive, Warrington WA5 1HQ

- Ends -

## **NOTES TO EDITORS:**

- The Tim Parry Johnathan Ball Trust was set up in the wake of the 1993 Warrington bomb.
- The Tim Parry Johnathan Ball Trust operates from the Peace Centre in Warrington
- In November 2001, the Trust launched The Legacy Project, which aims to work with victims and survivors of the Northern Ireland 'Troubles' who are based in Great Britain.
- The Legacy Project was set up to identify and meet the needs of GB victims / survivors of the 'Troubles'.
- Research work is being carried out by the Trust in partnership with Holden McAllister Partnership & the Centre for Trauma Studies in Nottingham
- It is anticipated that a Final Report on the research will be published in July 2003.

Notes for Information:

### ***Who can take part?***

Individuals who witnessed, were injured or have been affected by the IRA bombs in Warrington in 1993 and Manchester in 1996 including family members and members of the emergency services.

### ***What will it involve?***

They will be contacted by a member of the research team who will give them details of the project and their potential involvement in the research. All information will be treated as strictly confidential.

### ***Why should victims participate?***

Their shared experiences will be used to inform decisions concerning services for victims of the 'Troubles' here in Great Britain and the support they will afford to victims and survivors

*For further information contact:*

### **Jo Dover**

Legacy Project Leader

01925 581240

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## Appendix 4 – Interviewees

<b>Interviewee</b>	<b>How contacted</b>
Relative of soldier killed	Contact with Legacy
Relative of soldier killed	Contact with Legacy
Relative of soldier killed	Contact via another survivor
Relative of soldier killed	Contact with Legacy
Relative of soldier killed	Contact with Legacy
Relative of soldier killed	Contact with Legacy
Relative of soldier killed	Contact with Legacy
Relative of soldier injured	Contact with Legacy
Relative of soldier injured	Contact via another survivor
Relative of soldier injured	Contact via another survivor
Relative of soldier injured	Via press release
Ex-soldier who was injured	Via press release
Ex-soldier who was injured	Contact with Legacy
Ex-soldier who was injured	Contact with Legacy
Ex-soldier who was injured	Contact via another survivor
Ex-soldier who was injured	Via press release
Ex-soldier who was a witness	Via press release
Ex-police officer injured in London bomb	Contact with Legacy
Civilian injured in London bomb	Contact with Legacy
Civilian injured in Birmingham bomb	Contact with Legacy
Relative of civilian killed in Brighton bomb	Contact with Legacy
Relative of civilian killed in Warrington bomb	Contact with Legacy
Relative of civilian killed in Warrington bomb	Contact with Legacy
Relative of civilian killed in Warrington bomb	Contact with Legacy
Relative of civilian killed in Warrington bomb	Contact with Legacy
Civilian witness of Warrington bomb	Contact with Legacy
Civilian witness of Warrington bomb	Contact via another survivor
Civilian witness of Warrington bomb	Contact with Legacy
Civilian witness of Manchester bomb	Via press release
Civilian witness of Manchester bomb	Via press release

# Part 2 – The Needs of Exiles

November 2003

*Prepared by:*

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## Executive Summary: Part 2 – The Needs of Exiles

### Our Approach to the Study

The Legacy Project of the Tim Parry Johnathan Ball Trust commissioned the Holden McAllister Partnership to undertake an independent needs analysis of exiles, which would identify gaps in provision and advise on the options for the forward strategy for the Legacy Project and other coping agencies including Maranatha, and to point to ways agencies might address the needs identified.

The research was carried out in stages as follows:

- Interviews with agencies in Northern Ireland to establish the nature of, the response to and provision for those intimidated out of their homes by paramilitary organisations and being forced to leave Northern Ireland.
- Group discussion and consultation day with Maranatha volunteers focusing on their common experiences in supporting and meeting the needs of exiles.
- Interviews with exiles and Maranatha volunteers.
- Consultation with other relevant agencies and professionals.

### Definition and the Scope of the Problem

The definition of an 'exile' adopted for the purposes of this study is that:

*“An exile is an individual or a family who have been intimidated by a paramilitary organisation through the use of force, threats or menaces, into leaving Northern Ireland.”*

The practice of exiling individuals and families from Northern Ireland is part of a wider 'tariff' system of informal justice and 'punishments' adopted by both republican and loyalist paramilitary organisations. The so-called 'tariff' ranges from warnings, threats, curfew, fines or restitution, placarding, tarring and feathering, beatings, shootings, to exiling and ultimately execution. The relationship between 'punishment' beatings, shootings and forcing people into exile is far from being the linear one that the notion of a 'tariff' might suggest. Some exiles have been subject to 'punishment' beatings as well as being exiled and others who have been exiled have also been shot and left for dead.

All of the exiles interviewed for this study are from working class backgrounds, sometimes extremely deprived ones.

There are seven main ways of categorising people who have been forced into exile by paramilitary organisations:

- Victims of sectarian intimidation – who are attacked because of their perceived religious or political beliefs.

- Victims of paramilitary feuds – who are attacked by members of their own community because they are seen as being associated with or supporting a different paramilitary faction.
- Those who have disputes with paramilitaries – people who have stood up to paramilitary threats or spoken out against their activities.
- Alleged criminals – those whom the paramilitaries allege are guilty of petty crime, drug dealing or ‘anti-social behaviour’.
- Individuals who have broken the rules of paramilitary organisations by providing information to the British and Irish security services, or who have acted as witnesses in criminal prosecutions of alleged paramilitaries.
- Those who have otherwise fallen foul of leading members of these organisations or their family members.
- The family members (and extended family members) of the individuals concerned in each of the above categories.

The Northern Ireland Housing Executive (NIHE) gave the following figures to the Northern Ireland Affairs Select Committee for individuals forced to leave their homes in Northern Ireland, including individuals who may have left Northern Ireland as a result of intimidation without seeking NIHE assistance:

Year	1997-98	1998-99	1999-2000
Belfast area	157	62	117
Northern Ireland	330	106	190

The Northern Ireland Association for the Care and Resettlement of Offenders (NIACRO), which runs a crisis intervention service for individuals who are under paramilitary threat through a project known as BASE 2, provided the Select Committee with the numbers presented to BASE 2 who were subsequently relocated:

Year	1995	1996	1997	1998	1999	2000
Relocated outside NI	55	126	81	88	57	45
Relocated within NI	76	128	198	247	199	278
Total	131	254	279	335	256	323

Whilst some individuals will have come through BASE 2 and the Housing Executive (and thus may be double counted in these figures), many go to only one of these agencies and a significant (but unquantifiable) number will have gone into exile without contacting either of them.

Latest figures show that 904 of the clients who came to BASE 2 in 2002 did so under alleged threat of exile, 110 others have received specific threats of shootings or beatings and 54 others received death threats. Of those threatened with exile, 60 actually left the country and went into exile.

Maranatha estimates the number of expulsions to Great Britain to be around **four per month**, although there are also other family members who follow subsequently, and some which only come to light retrospectively. Maranatha suggested that it had seen a change in the nature of expulsions from Northern Ireland since 1994: there was now an increasing tendency to expel whole families rather than individuals.

## **Exiles and Human Rights**

As the recent report of the Northern Ireland Human Rights Commission, 'Human Rights and Victims of Violence', acknowledges: "There is a good deal of consensus in international law about the general definition of victims. The only significant point at issue seems to be whether the definitions should be restricted to victims of crime. The Commission prefers to adhere to the traditional approach whereby the definition is so limited, but with the acceptance that *people whose human rights are abused – whether criminally or not – should also be designated as victims*, as indeed they already are under the European Convention on Human Rights".

Specifically in relation to exiles, the Northern Ireland Human Rights Commission report says:

*"A particular category of people who could be said to be 'on the run' are those who have been forced to leave Northern Ireland by paramilitary organisations, usually because they are suspected of having perpetrated 'anti-social behaviour' (the 'exiles'). Ironically, there are probably more of these individuals from the Loyalist community than there are from the Republican community. The Human Rights Commission is of the clear view that all such individuals should immediately be 'permitted' to return to Northern Ireland if they so wish, with no fear that they will be attacked if they do so. The rule of law demands that private justice cannot be exacted within any part of our society."*

In accordance with the findings of the Northern Ireland Human Rights Commission report we are recommending that:

**R1. In the continuing Peace Talks in Northern Ireland the needs and human rights of exiles are publicly recognised and that paramilitary organisations and the parties that represent them agree to an ending of the practice of exiling.**

## **Routes into Exile**

The organisations providing services for those intimidated out of their homes within Northern Ireland all acknowledge that they only see a proportion of those going into exile as a result of paramilitary threat. Even then, the direct contact with the agency is not always with the person under threat (as they may have gone into hiding or already have left) but with a relative or friend seeking help on their behalf. Many simply flee to stay with friends or relatives in Great Britain.

Whilst the Northern Ireland Housing Executive and BASE 2 see some of the same people as a result of cross-referrals, there are people in both loyalist and republican communities who through choice will not go to either of these agencies. Others may not know of the help which can be offered or only learn about it after they have already left Northern Ireland.

The Housing Executive has responsibility for re-housing those made homeless by intimidation. The services it offers cover:

- Assessment of need for social housing for re-housing.
- Temporary re-housing, furniture storage and securing homes.
- Purchasing the homes of intimidated persons (Scheme for the Purchase of Evacuated Dwellings – SPED).

Where an applicant is accepted as homeless because of intimidation, he/she is entitled to an emergency payment of £199.40 (currently under review) provided they were a public or private tenant at the time of the intimidation. The receiving district housing office usually makes this payment. This payment does not apply to those going into exile and being re-housed in Great Britain.

We are recommending that:

**R2. *Where an exiled housing applicant is accepted as homeless because of housing intimidation in Northern Ireland, he/she is entitled to an emergency payment provided they were a public or private tenant at the time of the intimidation. The receiving local authority housing office in Great Britain should be authorised by the Northern Ireland Housing Executive to make this payment on its behalf. If it were estimated that up to four exiled households might present to housing authorities as homeless in Great Britain per month, this would cost £9,571 at the current emergency payment level of £199.40.***

BASE 2 is integral to provision for those intimidated out of their own homes and acts as a key support service for those forced into exile. BASE 2:

- Assesses individual need and verifies and clarifies that intimidation has taken place.
- Mediates, wherever possible, so that people who are intimidated can return to their communities.
- Assists those going into exile to find, wherever possible, temporary accommodation in Great Britain before they leave.
- Liaises with the Northern Ireland Housing Executive and with local authority housing departments in Great Britain to help to find temporary accommodation for those going into exile.
- Liaises with the Homeless Advice Centre and Bryson House on getting people's furniture moved into storage and helps with transport

arrangements and in cases of hardship also helps with meeting the transport costs to Great Britain.

Base 2 is thus in a unique position to assess need **before** an individual or a family goes into exile. Such assessments can be used to identify need and as the starting point for brokering appropriate services on entry into Great Britain. The process of brokering and linking with specialist support could be helped by the creation of a Contingency Fund to assist in accessing appropriate services to meet the assessed needs of exiles and their families. We therefore recommend that:

- R3. NIACRO continues to place a high priority on Base 2 staff assessing the needs of exiles and their families before they leave Northern Ireland.**
- R4. Base 2 considers making a proposal for funding from the Strategy Implementation Fund through the Department of Social Development, for a Contingency Fund to assist Base 2 in accessing appropriate services to meet the assessed needs of exiles and their families.**

The Social Security Agency can also assist in meeting transport costs and with a Crisis Loan. A person does not need to be receiving a qualifying benefit (Jobseeker's Allowance or Income Support) before they can be considered for a Crisis Loan. However, given that it is clear from our interviews with exiles that they may well already be in debt and up to the limit for a loan from the Social Fund, it would seem to be a more appropriate emergency response from the Social Security Agency to make a non-refundable community care grant in such cases (as it said it would do in its evidence to the House of Commons Select Committee on Northern Ireland Affairs).

We are therefore recommending that:

- R5. The Department of Social Development in Northern Ireland together with the Social Security Agency issues guidelines clarifying that it will meet the transport costs for those going into exile who are in receipt of benefits and that the Social Security Agency will consider making a non-refundable community care grant to meet these travel costs in cases of emergency need, where someone is being forced to leave Northern Ireland through paramilitary intimidation. In these cases the verification of intimidation by PSNI, the Northern Ireland Housing Executive or BASE 2 should be accepted by the Agency. It is estimated that this could cost the Social Security Agency between £5,000 and £7,000 per annum.**

## **Housing and Accommodation**

Housing and accommodation needs are evident in nearly all the cases dealt with by Maranatha volunteers. BASE 2 has also found that finding appropriate

accommodation in a crisis situation is extremely difficult. Several exiles have been declined hostel accommodation because of their health needs. The quality of that accommodation can create further difficulties as all exiles have concerns about personal safety and security, particularly when they are in hostels or other temporary accommodation where the threat of violence may be present. Many exiles and their families have to move several times and almost all are nervous in the unfamiliarity of new settings.

BASE 2 helps to broker accommodation for those who have decided they have no other choice than to go into exile and to find, wherever possible, temporary accommodation in Great Britain before they leave. It liaises with the Northern Ireland Housing Executive and with local authority housing departments in Great Britain to help to find temporary accommodation for those going into exile.

The Housing Executive has responsibility under the Housing Act (Northern Ireland) 1998 for re-housing those made homeless by intimidation within Northern Ireland and its Homeless Advice Centre is responsible for securing temporary accommodation. Under Housing Executive policy any persons presented and accepted as homeless because of intimidation are awarded sufficient housing points to ensure that they are treated as a priority for re-housing. However, this virtually automatic right to housing in cases of intimidation within Northern Ireland does not cross the Irish Sea when someone is forced out and into exile.

The legislation in England and Wales is clear: under the Housing Act 1996 no Local Authority should decline a homeless applicant who has been intimidated out of their home and cannot return (even if they are an owner-occupier) if it would be 'unreasonable to return'. Nevertheless we are aware of a local authority initially declining to provide temporary accommodation, whilst they assessed a young woman who had been exiled, on the grounds that as she was no longer in Northern Ireland, she was no longer under threat, so they did not have a duty of care. Although this young woman was eventually housed after Maranatha's intervention, the case exemplifies the degree of discretion which local authorities may exercise in individual cases and the lack of a clear understanding of the nature and extent of paramilitary intimidation which forces people to leave Northern Ireland.

Part of the housing legislation concerns an assessment as to whether the person is 'intentionally' homeless through their own behaviour. Exiles with a history of anti-social behaviour may be deemed by some Local Authorities to be 'intentionally' homeless and Maranatha has drawn a number of these cases to our attention.

There are no governmental guidelines to local authority housing departments or other Registered Social Landlords (RSLs) for dealing with exiles in Great Britain. Exiles presenting as homeless are dealt with within general homelessness legislation. All Local Authority Housing Departments must provide temporary accommodation whilst investigating and assessing a homeless application. Local Authorities can experience difficulties in getting

corroborating information from Northern Ireland when they are assessing the homeless application of an exile.

We are recommending that:

**R6. *The Department of Social Development in Northern Ireland draws up guidance for the Office of the Deputy Prime Minister in England and Wales and the Scottish Executive to issue to local authority housing departments on which agencies to contact to verify that intimidation has taken place in Northern Ireland and the circumstances which may have led up to someone being forced into exile. The guidance should clarify that where intimidation has taken place and has resulted in that person and/or family being forced into exile, local authorities have a duty to regard that household as being homeless and to provide temporary accommodation whilst their housing needs are being assessed. Information should be made available within this guidance to local authorities about relevant contact agencies in Northern Ireland including BASE 2.***

We have noted that many local authority housing departments and RSLs require homeless applicants to sign an agreement to having their housing needs details go onto a common database shared with other RSLs to assist in the housing allocation process. In Witness Protection cases this information is safeguarded and restricted but not specifically in the case of exiles. We are therefore recommending that:

**R7. *Local authority housing departments and RSLs should be required by the Office of the Deputy Prime Minister in England and Wales and the Scottish Executive to safeguard and restrict access to personalised information relating to exiles in all cases where there has been verification of intimidation from either the PSNI, Northern Ireland Housing Executive or BASE 2.***

The Housing Executive also has a duty under the Housing Act (Northern Ireland) 1998 to protect the property of homeless persons and people threatened with homelessness. However, the Housing Executive have clarified that this duty "is only relevant for people who continue to be homeless in Northern Ireland". Whilst local authorities in England and Wales have a similar duty to protect the property of homeless persons under the Housing Act 1996, there is a 'reasonableness' test within the legalisation and local authorities may also apply a 'reasonable' charge for this service.

Staff at the Homeless Advice Centre can refer those who wish to arrange for the storage of furniture and its transportation to the docks through the charity Bryson House. It seems clear that for many exiles the Bryson House Furniture Removal service is the most realistic way of getting their furniture and belongings to Great Britain. However, exiles we have interviewed say they have experienced both delays and potential breaches of security in the delivery of

their furniture. BASE 2 has also expressed concern about the level of security in the existing furniture transport arrangements.

We are thus recommending that:

**R8. *The Voluntary and Community Unit within the Department for Social Development reviews the level of funding it provides towards the Home Removal Scheme administered by Bryson House to ensure that the full costs of removal are able to be met for those exiled to Great Britain. The Unit should also review the full contract with Bryson House.***

Where an owner-occupier has been intimidated out of their home they can request the Housing Executive to purchase their home under the Scheme for the Purchase of Evacuated Dwellings – SPED – at market value. Officers of the Housing Executive acknowledged that there could be considerable delays between a person vacating a property and its valuation under the SPED scheme. In practice we have been told by some exiles how their properties have been damaged in the meantime, often with the apparent connivance of the paramilitary organisations that intimidated these people out of their homes in the first place. The principle ought to be that the SPED scheme assesses the market value at the time of departure in exile to Great Britain.

We are therefore recommending that:

**R9. *The Department of Social Development in Northern Ireland review the arrangements under the Scheme for the Purchase of Evacuated Dwellings to establish what mechanisms may be put in place to expedite valuations and purchase in the case of exiles.***

## **Welfare Benefits and Finance**

One key issue in the early stages of exile has been the delay in getting benefits sorted out. Several exiles to whom we have spoken also expressed concerns about the security of their personal information in social security systems. The Department of Social Development, which is responsible for the Social Security Agency in Northern Ireland, has made it clear that:

- Customers can request to have access to their records restricted. To do this they should make representation to the office manager providing any supporting evidence. The customer's records are then marked 'locally sensitive'.
- Customers can also apply in writing for their records to be made 'nationally sensitive'. Such requests are forwarded to Special Section D in Newcastle-upon-Tyne, who will make the decision and take the action to make the customer's records nationally sensitive. This means no one can access the customer's records on any Government computer system without permission, and special access being granted. Customers in the witness protection programme would fall into this category.

We recommend that:

**R10. In all cases of people being exiled through paramilitary intimidation as verified by the PSNI, Northern Ireland Housing Executive or BASE 2, social security records should be treated as nationally sensitive.**

Delays in the payment of benefits are a critical issue as we have established that these delays can cause severe hardship and increased debt for exiles. We therefore recommend that:

**R11. The Department of Social Development and the Social Security Agency undertake an urgent review of the system for transferring benefits for those forced into exile through paramilitary intimidation.**

Our group interview with Maranatha volunteers showed that exiles experience considerable difficulty in communicating their needs to statutory agencies:

- Exiles and volunteers spoke about the issue of *trust*. Not surprisingly exiles do not always feel able to open up and explain their situation fully.
- Exiles are highly *stressed* and this can undermine their ability to cope with the situation, especially if they are also embarrassed, angry and feeling humiliated by their position.
- This may be especially the case given the lack of *privacy* at the benefits office.
- There may be problems because of a lack of shared expectations and understandings.

We are recommending that:

**R12. The Social Security Agency works with its colleagues in the benefit system in Great Britain to provide information and advice on dealing with cases involving paramilitary intimidation.**

Many exiles experience problems with budgeting, partially as a result of delays in receiving benefits, reduced benefits and/or managing without employment. Many exiles from NI had not expected to pay water rates and council tax. Many are in receipt of Disability Living Allowance (DLA), whilst for others the level of DLA provided has been cut.

## **Employment and Training**

For many people work provides not just a source of finance but also plays a part in giving them an identity, reinforces feelings of self-worth, provides occupation, and is a basis for social interaction outside of the family. Many of the exiles we interviewed were unable to work for medical or other reasons, even if they had had some employment in NI.

## Psychological Factors and Responses to Exile

Many exiles spoke of their shock at what had happened to them. Some spoke about having had a “nervous breakdown” or having to deal with the consequences of such a breakdown in other members of their family. In some cases this had led to attempted suicide or suicidal thoughts.

Many of the exiles were or had been on medication for depression and/or anxiety. Some had seen a psychiatrist or community psychiatric nurse. In a number, but not all, of cases the medication pre-dated leaving NI.

As outlined in Part 1 of this report, Post Traumatic Stress Disorder (PTSD) involves the development of a cluster of symptoms after the person has been exposed to “events that involved actual or threatened death or serious injury...to themselves or others” to which they responded with fear, helplessness or horror. We must stress that it is not our intention here to make diagnoses of PTSD or of any other psychological disorder; we are not in a position to do so. However, what is clear is that the circumstances of exiles are likely to produce PTSD in a number of them and extreme and/or long-lasting psychological distress in many of them. For many, while exile is a shocking experience, because of the conditions in which they lived in NI, it may follow lengthy periods of intimidation and of being anxious and fearful. Exiles may therefore be relatively vulnerable psychologically *before* they are exiled and thus less able to cope with the consequences of being uprooted in such traumatic circumstances.

A pattern of withdrawal, social isolation, depression, difficulty in sleeping, persistently thinking over events, anger and excessive alcohol consumption was reported by several interviewees. These effects can be long lasting.

It is evident therefore that many exiles have quite profound psychological needs, which in some cases require clinical intervention. We recommend that:

**R13. *The findings of this report should be fed into the National Institute for Clinical Excellence (NICE) Guidelines on PTSD.***

**R14. *The Department of Health should consider highlighting the particular sensitivities and needs to be taken account of when dealing with victims and exiles.***

## Medical Needs

The group of exiles interviewed and their families in GB had a variety of health problems. These ranged from chronic diseases such as diabetes, kidney failure, various forms of heart disease, dementia and epilepsy through to physical injuries caused by shooting in one case or a near-fatal road accident in another, to a range of psychological ailments such as depression, anxiety and an inability to sleep, as described above.

Whether the various ailments were a cause or a consequence of exiling, or were unrelated to it, was difficult to establish in many cases. In some it seems likely that exiling has had a detrimental effect on pre-existing illness.

Getting registered on the list of a GP can be a problem for exiles because many have closed lists and applications have to be made through the local Primary Care Trust (PCT). However, because of the high level of trauma and other needs associated with exiles (e.g. gunshot wounds), Maranatha try to arrange for registration with a GP who has more "sensitivity" to these needs and is more knowledgeable about NI.

We are recommending that:

***R15. The Department of Health raises awareness with Primary Care Trusts (and within existing guidelines) of the difficulties exiles have with admission onto GPs waiting lists.***

## **Families and Exile**

There are three main aspects of exile relating to families that emerged from the interviews. One concerns the particular issues of children in families who are exiled including education. Another concerns relationships within the family and the strain these can be put under. The third relates to family left behind in NI.

Several problems have arisen in relation to schools and the education of children. One is simply getting children into schools at all, or into a school of choice. Another is the particular issue facing those who were close to exams like GCSEs at the time of exile, given that the systems in NI and in GB are not as identical as is often assumed. Lastly, of course, there is the difficulty for the young person of fitting in and making friends at a time when they may be very traumatised.

Issues of resentment and blame, of guilt, conflict and separation within families appeared in many interviews. There was a suggestion that women have played a key role in helping their families cope with exile.

Visits from relatives (and friends) had been important for a number of those interviewed but they could be a source of problems as well as being valued. The loss of relatives in Northern Ireland and bereavement has been very difficult for exiles to deal with.

## **Social Factors**

A number of social issues arose in the course of the interviews:

- Prejudice and discrimination against exiles.
- Cultural identity.
- Feelings of injustice.

Prejudice may be worse for younger exiles because:

*“They are looked on as terrorists and they’re not all terrorists...the innocent ones who will take a stand (against the paramilitaries) and just have to get on the boat and go.”*

Cultural differences are also experienced, as there is a general ignorance of Northern Ireland and the distinctions, which are so important there. The exiles considered Northern Ireland their home, and most would want to return there should it be possible, even though they often reported feeling safer in GB.

Many exiles are angry. There was a common perception of injustice and a feeling that no-one cared or even noticed their existence. Several commented that refugees and asylum seekers from other states received much more help than they, as refugees within their own country, received. This need for recognition is a paramount concern for many exiles.

## **Coping and Not Coping**

Most exiles we interviewed spoke extremely highly of the support they had received from Maranatha and contrasted it with what they perceived as a complete lack of support from elsewhere. The Maranatha Northern Ireland Project Leader mentioned a common theme of people starting off with intentions of responding positively to their exile by changing their way of life and building a better future. Sadly most of these good intentions do not last or are undermined by a lack of personal resources.

## **Support Needed and Provided**

Maranatha’s resources are stretched and there is a great deal of reliance on the NI Project Leader. The demand on him and on the volunteers involved can be great. The Haven Project will help with this and will formalise some links which to date have remained informal.

If adequate services are to be developed outside of what Maranatha can provide, the starting point has to be acknowledgement and recognition of the problem of exiling.

There is a need for greater understanding on behalf of welfare agencies of the NI context, of the lives that exiles had been living in NI, and of the difficulties they face in coping with their move to GB. While exiles may share characteristics with many other people who need support from welfare agencies there are also key differences relating to their experience and the context of NI.

The difficulties for exiles in explaining their situation fully to agency representatives coupled with a lack of understanding on the part of these representatives can lead to a clash of expectations, misunderstandings, conflict, anger, and a further loss of trust as well as to people failing to receive

what they are entitled to. When discussions cannot be held with any privacy this can be a particular problem.

We are recommending that:

**R16. BASE 2 and Maranatha consider forming, together with other relevant helping agencies, an inter-agency group to co-ordinate and promote best practice in responding to the needs of exiles. This group should be encouraged to liaise with the inter-agency group for victims of the 'Troubles' that the Legacy Project is to establish.**

**R17. BASE 2 and Maranatha promote the needs of exiles in journals for social and welfare professionals and encourages the relevant professional bodies to develop training, guidance and awareness-raising on this issue.**

Self-help and mutual support groups is a feature of many groups of people in difficult and/or traumatic circumstances. The Legacy Project has plans to set up such groups for other victims of the 'Troubles' and some exiles would appreciate such opportunity for interaction with some others in similar circumstances. However, there are major difficulties associated with this kind of activity with exiles because of the potential dangers such contact might involve and because of the fear that it might engender even in the absence of any real danger. As an alternative, we recommend that:

**R18. Maranatha consults exiles on the potential for the development for self-help and mutual support for exiles by linking individuals or families with those 'further down the line'.**

While counselling or other therapeutic intervention by psychologists or psychiatrists may not be appropriate for all exiles or even acceptable to them, it is potentially helpful in many cases.

Regel & Healey (2003) have identified the complex nature of the responses to living through the 'Troubles' in NI and to the potential enormity of the therapeutic challenge. From their point of view also, intervention requires an understanding of the context on the part of the therapist and success is unlikely to be achieved quickly. Regel & Healey also consider that early intervention is crucial but this is difficult to set up for exiles, even if they would agree to see someone.

We understand that Maranatha is currently drawing up plans for private briefing conferences to be addressed by those with 'hands-on' experience of working with exiles and by exiles themselves, which will enable agencies with less experience to be better informed.

In our original terms of reference we had been asked to consider what role the Legacy Project might play in the future in supporting work with exiles. Our overall conclusion is that the Legacy Project itself does not have a direct role in

meeting the needs of exiles as examined in this report. However, we would suggest that it continues to network with Maranatha and to support it in its work.

## Part 2 - The Needs of Exiles

### 1 Introduction

- 1.1.1 This report describes the Needs Analysis of those forced into exile from Northern Ireland into Great Britain by paramilitary organisations. The project has been undertaken on behalf of the Legacy Project within the Tim Parry Johnathan Ball Trust in Warrington. As part of this the Legacy Project is funded for three years by the Victims' Liaison Unit in the Northern Ireland Office in order to identify and meet the needs of Great Britain based victims of the Northern Ireland 'Troubles'.
- 1.1.2 The Legacy Project commissioned the Holden McAllister Partnership to undertake an independent needs analysis of exiles, which should identify gaps in provision and advise on the options for the forward strategy for the Legacy Project and other coping agencies including Maranatha, to point to ways agencies might address the needs identified.
- 1.1.3 In more detail, the terms of reference of the needs analysis included the following areas of work to:
- Identify gaps in provision through consultation with exiles, Maranatha, the Legacy Project and a limited number of local housing, medical, social and welfare providers and professionals who have played a part in addressing the needs of exiles.
  - Carry out a process of research that will be sensitive to the needs of exiles and developed in a confidential manner at all times.
  - Make an assessment of the needs of exiles based on interviews with a small group of exiles facilitated through Maranatha and the volunteers who have worked with those and other exiles.
  - Consult with the Northern Ireland Housing Executive, VLU and BASE 2.
  - Identify and assess options for the Legacy Project and other coping agencies including Maranatha to address needs, taking into account funding implications including the sustainability of any proposed initiatives.
  - Liaise regularly with the Legacy Project Leader regarding the progress of the work and report to the Legacy Needs Analysis Working Group.
  - Produce a report of the findings and recommendations for publication that can be disseminated widely.

- 1.1.4 The ways in which each of these was approached are described in Section 3 and at various other points in the text that follows.
- 1.1.5 The next section will provide a brief literature review of the system of informal justice exercised by paramilitary organisations and of the process of exiling that forms part of the context of the study. There will also be some discussion of what constitutes and defines an 'exile' and of the nature and scale of the problem as reported in the Select Committee on Northern Ireland Affairs Third Report, 'Relocation Following Paramilitary Intimidation'. The section concludes with a discussion of whether exiles can be considered to be victims of the 'Troubles' and of their human rights in the context of the Northern Ireland Human Rights Commission's recent report, 'Human Rights and Victims of Violence'.

## 2 Informal Justice in Northern Ireland

*“Turning a Nelsonian blind eye to the problem of paramilitary domination of certain areas, including the problem of exiling, is a gross betrayal of some of the most vulnerable, powerless and disadvantaged members of our society.”*

Professor Liam Kennedy, Evidence to the Select Committee on Northern Ireland Affairs, 2000

### 2.1 Introduction

- 2.1.1 The practice of exiling individuals and families from Northern Ireland is part of a wider system of informal justice adopted by both republican and loyalist paramilitary organisations. It represents part of a spectrum of collective violence that can be seen as a form of vigilantism. Knox and Monaghan (2002) in the book, 'Informal Justice and Divided Societies', have reviewed the various attempts that have been made in the literature to define vigilantism. Brown (1975) has defined vigilantism as referring to 'organised, extralegal movements, the members of which take the law into their own hands'.
- 2.1.2 Johnston's (1996) distinction made between two modes of vigilantism, 'crime control' and 'social control', is helpful in understanding the part exiling plays in a wider spectrum of paramilitary 'punishment' attacks. Johnston argues that paramilitary organisations have used punishment beatings both for those accused of crimes, generically described as forms of 'anti-social behaviour' (e.g. committing 'joy riding' and burglary within areas of territorial control exercised by a particular paramilitary organisation), and against those accused of communal acts of deviance (including breaches of paramilitary discipline).
- 2.1.3 As Feenan (2002) has pointed out in his review of paramilitary conflict in Northern Ireland, 'it is in the context of community demand that paramilitary punishment in the North of Ireland can best be, even if not sufficiently explained...it is essential to correct the sometimes mistaken impression that paramilitaries operate independently of, or abstracted from, their communities. Loyalist and Republican paramilitaries arise from, live within and depend upon the communities in which they are based.' Feenan goes on to show that the demand within communities is widely regarded by academics as a key factor in the paramilitaries assuming a justice role within their communities (Sluka, 1989; McEvoy, 2001; Winston, 1997; Brewer et al., 1998). However, as Feenan goes on to point out, grass roots objections to informal justice and punishment

beatings carried out by paramilitaries within communities exist. Feenan cites work by Kennedy (2000), which found that 79 per cent of respondents on a nationalist estate near Lurgan, outside Belfast, responded "no" to the question 'are you in favour of punishment beatings?' in the aftermath of the shooting of a 15-year-old boy.

- 2.1.4 In tracing the history of contemporary informal justice in republican areas, Knox and Monaghan have shown how, over the years, the IRA has developed a graded scale or tariff dependent on the perceived seriousness of the offence. The tariff ranges from warnings, threats, curfew, fines or restitution placarding, tarring and feathering, beatings, shootings, exiling and ultimately execution (Silke, 1998). Shootings can be through the soft tissue on the legs and includes bone shattering in the ankles, knees and wrists. As Knox and Monaghan go on to note, "the 'punishment' ordered, in theory, is influenced by mitigating factors such as age, gender, past criminal record and family background - particularly those from a strong republican tradition. In some cases the accused are told to turn up at an designated time and place to receive their 'punishment' - punishment beating/shooting - by appointment. Failure to do so often results in a harsher 'punishment'. In practice however, the level of 'punishment' can be arbitrarily brutal or lenient, depending on whether the offender is 'connected' in some way to known paramilitaries or influential members of the republican movement. Furthermore, some individuals have been punished as a result of 'mistaken identity'".
- 2.1.5 In addition to physical punishments, the IRA can order people out of their area, city or Northern Ireland. The period of exile may be time limited or indefinite. Often there will be a period of leeway of between 24 and 48 hours 'or else', the threat that usually accompanies an expulsion order. Many people go into hiding until they (and other family members under threat) are ready to depart.
- 2.1.6 In tracing the history of contemporary informal justice in loyalist areas, Knox and Monaghan describe how (like their republican counter parts), loyalist paramilitaries take action against those perceived to be involved in both 'political' and 'normal' crime. Unlike the IRA, which has different units assigned to 'internal' and 'external' discipline, loyalist paramilitaries employ the same Active Service Units (Bell, 1996). Loyalist groups employ a similar range of 'punishments' as republican paramilitaries although their use of warnings is less widespread. Silke (1999) suggest that the vast majority of 'internal' punishments by loyalist paramilitaries involve money, such as swindling, skimming funds from the group, payment of misappropriate 'cuts' or self-gain robberies. Members suspected of informing are usually executed. Rivalries between loyalist paramilitaries, recently focused around 'turf wars' for the control of drugs markets in

loyalist areas, may also lead to 'punishments' including shootings or exiling.

2.1.7 Liam Kennedy in 'Crime and Punishment in West Belfast', in analysing data about 'punishment' shootings between 1989 to 1993 published by the RUC Information Office, has argued that four main points of comparison can be made between the 'punishment' system in loyalist and republican areas:

- Most of the victims of 'punishment' shootings between 1989 and 1993 were young, with a third of republican shootings being aimed at the body joints of those under the age of twenty. The greater propensity of republican paramilitaries to maim young people is probably linked to the higher incidence of 'joyriding' in nationalist as opposed to loyalist areas.
- The overwhelming majority of loyalist shootings – 97% of those recorded by the police during the period 1989-1993 – were confined to Belfast. By contrast, while 80% of the victims of republican shootings were located in the Greater Belfast area, there were nonetheless significant sites of 'punishment' shootings in Newry, the city of Derry/Londonderry and in mid-Ulster. This points to the more uniform distribution of republican paramilitary activity across Northern Ireland.
- Virtually all the victims of shootings and beatings by both republican and loyalist paramilitaries were from working class backgrounds, sometimes extremely deprived ones.
- The victims in both loyalist and republican areas were almost exclusively male.

2.1.8 In an interview for this study, Kennedy asserted that republican paramilitaries have adopted a more disciplined approach to the use of violence as a punishment, whilst loyalist paramilitaries appear to be "far more indiscriminate" in their use of violence. Kennedy, in a recent analysis of the child victims of paramilitary punishment attacks, 'They Shoot Children Don't They' (2001), has analysed the trends of punishment assaults on children and juveniles, which increased from one a month throughout much of the 1990s to one a fortnight in 1999 and 2000. He sees this as indicating a tightening of the control of paramilitary organisations within working class communities. Kennedy states in this article that: "Another way of putting this is to say that loyalist and republican gunmen – the power of the gun lies behind all types of vigilante activity, from shooting to exiling – have not only ignored the Mitchell Principles and the most elementary forms of human justice, they have actually *intensified the degree of repression within working class*

*communities. This appeared to be particularly true of loyalist paramilitaries."*

- 2.1.9 Kennedy also points out in the same article that while the numbers of beatings of women were small compared to men in the 1990s, they were far from being negligible. Loyalist groups were responsible for 33 of the 56 serious assaults on women between 1990 and 2000; republicans accounted for the other 23. As Kennedy also indicates: "There is a sense in which women experienced the trauma associated with the 'punishment' systems to a far greater extent than the official figures might suggest. Mothers, wives, partners, sisters and daughters have their homes invaded by hooded men; they are threatened verbally, sometimes physically; they are sometimes obliged to witness the beating of a male family member, or to listen to screams from the adjoining room; women are in the frontline in terms of caring for the traumatised and broken bodies of their loved ones."
- 2.1.10 Knox and Monaghan cite police statistics as showing that between 1973 and the end of December 2001 there had been 2564 paramilitary 'punishment' shootings (an average of 91 per year) of which 45 per cent have been perpetrated by loyalists and 55 per cent by republicans. Overall the figures show that there was a significant increase in beatings and a parallel decrease in shootings following the cease-fires of August and October 1994. Generally this is seen as a consequence of paramilitaries protecting the claims of their political representatives that the cease-fires were holding and that non-violent alternatives were being pursued. However, whilst beatings have decreased since 1996 they remain higher than pre-cess-fire levels. Shootings have escalated particularly since 2000. In 2002 there were 173 shootings recorded by the police of whom 117 were by loyalist and 56 by republican groups<sup>7</sup>. The RUC/Police Service Northern Ireland (PSNI) figures understate the extent of shootings and punishment beatings as they only record cases reported to them.
- 2.1.11 The Chief Constable of the Police Service Northern Ireland has identified the Provisional Irish Republican Army (IRA), Ulster Defence Association (UDA) and Ulster Volunteer Force (UVF), all of which have declared cease-fires, as being behind many of these attacks<sup>8</sup>. In 2001 the government

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<sup>7</sup> The PSNI figures for 2002 are provisional and may be subject to change.

<sup>8</sup> The Provisional IRA was formed in 1970 when the IRA split into two factions. The Ulster Defence Association as formed in 1971 from a number of loyalist vigilante groups. The Ulster Volunteer Force was formed in 1966. In 1996 a number of dissident members broke away to form the Loyalist Volunteer Force (LVF).

'specified' the UDA, Ulster Freedom Fighters (UFF) and Loyalist Volunteer Force (LVF) for breaking their cease-fires<sup>9</sup>.

2.1.12 Does an escalation in 'punishment' shootings and/or beatings suggest a rise in the practice of forcing people into exile? The relationship between 'punishment' beatings, shootings and forcing people into exile is far from being the linear one that the notion of a 'tariff' might suggest. Some people may be subject to a 'punishment' beating as well as being exiled and others who have been exiled have also been shot, others are known to have been 'offered' the alternative of going into exile instead of being kneecapped. It is also known that some young people, who have been forced into exile for alleged 'anti-social behaviour', have subsequently returned to Northern Ireland and 'accepted' being kneecapped as an alternative to remaining in exile.

## 2.2 Relocation Following Paramilitary Intimidation

2.2.1 There are no accurate figures on the number of people forced into exile from Northern Ireland as a result of paramilitary 'punishment' and intimidation. In May 2000, the Select Committee on Northern Ireland Affairs conducted an enquiry into the problem with the following terms of reference:

*"To examine the incidence in Northern Ireland on the practice of paramilitary organisations intimidating residents into relocating within, or leaving, the Province, and the alleged causes; the steps being taken by Government and law enforcement agencies to eliminate this activity; the response of the Government and public bodies to persons having been forced from their homes through paramilitary intimidation; and the assistance available to persons affected by such intimidation who subsequently reside, permanently or temporarily, in Great Britain."*

*Defining the Term 'Exile'*

2.2.2 The Select Committee investigation was into 'the practice of paramilitary organisations intimidating residents into relocating within, or leaving, the Province'.

2.2.3 The offence of intimidation is statutorily defined in Section 7 of the Conspiracy and Protection of Property Act 1875 and in Section 1 of the Protection of the Person and Property Act (Northern Ireland) 1969. The latter states that "a person shall be guilty of an offence if he unlawfully

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<sup>9</sup> Being 'specified' means that early release prisoners associated with these organizations can have their early release suspended. The Ulster Freedom Fighters is the *nom de guerre* members of the UDA have adopted since 1973 when claiming responsibility for killing Catholics.

causes, by force, threats or menaces, or in anyway whatsoever, any person:

- To leave any place where that other person is for the time being *resident or in occupation*, or
- To leave his place of employment, or
- To terminate the services of employment of any person, or
- To do or refrain from doing any act.”

2.2.4 This legal definition requires strict criteria to be met in order for an offence to be committed. The police recorded 349 cases of intimidation in the financial year 1997-98, 491 in 1988-89 and 469 in 1999-2000. These do not necessarily relate to paramilitary threat and the background of the case may be purely criminal – for example a worker being intimidated out of a workplace because they refused to participate in a picket.

2.2.5 The definition we have adopted for the purposes of this study is that “*an exile is an individual or a family who have been intimidated by a paramilitary organisation through the use of force, threats or menaces, into leaving Northern Ireland*”.

2.2.6 The definition includes those forced to leave Northern Ireland by paramilitary organisations for alleged ‘anti-social behaviour’.

2.2.7 It should be noted that there are several dozen fugitives who are members of the republican movement, the Provisional IRA, who have fled Northern Ireland to escape from the British justice system. These individuals are generally referred to as the ‘OTRs’ (in capital letters) standing for the ‘On The Runs’. The ‘OTRs’ have not been exiled by a paramilitary organisation and therefore are not included within the definition of ‘exile’ being used for this study.

2.2.8 In its evidence to the Select Committee, the RUC gave statistics in relation to housing intimidation in Northern Ireland, which they said should be seen in the context of the overall pattern of paramilitary intimidation. The RUC identified six principal categories of victims of such intimidation:

- Victims of sectarian intimidation – who are attacked because of their perceived religious or political beliefs.
- Victims of paramilitary feuds – who are attacked by members of their own community because they are seen as being associated with or supporting a different paramilitary faction.
- Those who have disputes with paramilitaries – people who have stood up to paramilitary threats or spoken out against their activities.

- Alleged criminals – those whom the paramilitaries allege are guilty of petty crime, drug dealing or ‘anti-social behaviour’.
- Members of the security forces, prison officers and public officials – intimidated or targeted because of their profession or role in the criminal justice system.
- Victims of racial discrimination – selected for attack for purely racial motives.

2.2.9 The first four of these categories are readily identifiable amongst those known to have been forced into exile. To this list, relating to those categories of people exiled, might be added:

- Individuals who have broken the rules of paramilitary organisations by providing information to the British and Irish security services, or who have acted as witnesses in criminal prosecutions of alleged paramilitaries.
- Those who have otherwise fallen foul of leading members of these organisations or their family members.
- The family members (and extended family members) of the individuals concerned in each of the above categories.

#### *The Scope of the Problem*

2.2.10 The evidence given to the Select Committee contained in its Third Report entitled, ‘Relocation Following Paramilitary Intimidation’, indicates something of the scope of the problem.

2.2.11 The Northern Ireland Housing Executive (NIHE)<sup>10</sup> gave the following figures to the Select Committee for individuals forced to leave their homes in Northern Ireland, including individuals who may have left Northern Ireland as a result of intimidation without seeking NIHE assistance:

<b>Year</b>	<b>1997-98</b>	<b>1998-99</b>	<b>1999-2000</b>
Belfast area	157	62	117
Northern Ireland	330	106	190

2.2.12 The Northern Ireland Office agreed that there is under-reporting and had no figures for the numbers going into exile in Great Britain.

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<sup>10</sup> The Northern Ireland Housing Executive has responsibility for re-housing within Northern Ireland those made homeless by intimidation.

2.2.13 The Northern Ireland Association for the Care and Resettlement of Offenders (NIACRO), which runs a crisis intervention service for individuals who are under paramilitary threat through a project known as BASE 2, provided the Select Committee with the numbers presented to BASE 2 who were subsequently relocated:

Year	1995	1996	1997	1998	1999	2000
Relocated outside NI	55	126	81	88	57	45
Relocated within NI	76	128	198	247	199	278
Total	131	254	279	335	256	323

2.2.14 NIACRO subsequently provided us with updated data which suggests that the BASE 2 project saw a larger number of people overall in each of these years: 393 people in 1996, 563 in 1997, 646 in 1998, 624 in 1999, 854 in 2000 and in 2001, 906 referrals. The updated figures reflect BASE 2's wider activities in which it works to help people in being reintegrated into their communities and thus, as the figures suggest, some people do not have to relocate. In the next section of the report, we shall report further on the most recent NIACRO/BASE 2 figures.

2.2.15 Whilst some individuals will have come through BASE 2 and the Housing Executive (and thus may be double counted in these figures), many go to only one of these agencies and a significant (but unquantifiable) number will have gone into exile without contacting either of them.

2.2.16 Maranatha<sup>11</sup> maintained at the Select Committee "many expulsions and punishment beatings go unannounced and unreported. This is often because the victim has been warned that there will be further punishment to himself or herself and their family if the offence is reported to the police or even recorded in the press". It estimated the number of expulsions to Great Britain at around **four per month**, although there are also other family members who follow subsequently, and some which only come to light retrospectively. Maranatha suggested that it had seen a change in the nature of expulsions from Northern Ireland since 1994: there was now an increasing tendency to expel whole families, rather than individuals. It receives only a small proportion of its referrals from BASE 2 and the Housing Executive. Church leaders refer other exiles to them and many exiles will self-refer having already arrived in Great Britain.

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<sup>11</sup> Maranatha is a dispersed Christian community with 12,000 active members drawn from all the churches in the UK and beyond of whom about 1,800 to 2,000 live in Northern Ireland. It has helped many individuals and families who have been exiled to Great Britain from Northern Ireland.

### *Exiles and Human Rights*

- 2.2.17 The appointment of a Victims' Commissioner in 1997 by the British Government was a significant starting point in the recognition and understanding of issues and needs of victims. The Report of the Northern Ireland Victims' Commissioner (Bloomfield 1998) was instrumental in highlighting the multifaceted needs of victims of the 'Troubles'. Whilst Bloomfield recognised the problems raised by universalistic definition, he was also mindful to adopt an inclusive approach, recognising "the surviving injured and those who care for them, together with those close relatives who mourn their dead". There were no exclusions of paramilitaries or their families, nor of victims of state violence.
- 2.2.18 The Bloomfield Report was nevertheless an influential and significant step for victims whatever the definition. It led to the appointment of a Victims' Minister and the establishment of the Victims' Liaison Unit (VLU) in June 1998 to take forward the report's recommendations.
- 2.2.19 As the recent report of the Northern Ireland Human Rights Commission 'Human Rights and Victims Violence', acknowledges: "There is a good deal of consensus in international law about the general definition of victims. The only significant point at issue seems to be whether the definitions should be restricted to victims of crime. The Commission prefers to adhere to the traditional approach whereby the definition is so limited, but with the acceptance that people whose human rights are abused – whether criminally or not – should also be designated as victims, as indeed they already are under the European Convention on Human Rights". The Commission considers that human rights abuses that happen not to be crimes (e.g. abuses of the right to fair trial, the right to a private family life and the right not to be discriminated against) should be included in a Bill of Rights.
- 2.2.20 This extends the earlier position taken by the Northern Ireland Human Rights Commission for its consultation document on a 'Bill of Rights for Northern Ireland' (published in 2001), in which the Commission adopted the following definition of victims:

*"Victims' means persons who, individually or collectively, have suffered harm, including physical and mental injury, economic loss or substantial impairment of their fundamental rights, through acts or omissions that are in violation of criminal laws. A person may be considered a victim regardless of whether the perpetrator is apprehended, prosecuted or convicted and regardless of the familial relationship between the perpetrator and the victim. The term also includes, where appropriate, their family, their dependents, those with whom they have a close relationship and persons*

*who have suffered harm in intervening to assist victims in distress or to prevent victimisation.”*

2.2.21 Specifically in relation to exiles the Northern Ireland Human Rights Commission, 'Human Rights and Victims of Violence' report says:

*“A particular category of people who could be said to be ‘on the run’ are those who have been forced to leave Northern Ireland by paramilitary organisations, usually because they are suspected of having perpetrated ‘anti-social behaviour’ (the ‘exiles’). Ironically, there are probably more of these individuals from the Loyalist community than there are from the Republican community. The Human Rights Commission is of the clear view that all such individuals should immediately be ‘permitted’ to return to Northern Ireland if they so wish, with no fear that they will be attacked if they do so. The rule of law demands that private justice cannot be exacted within any part of our society. The return of the exiles should not be seen as a quid pro quo for the return of other ‘on the runs’ both categories of people deserve to be allowed back. The Commission was glad to note that both categories were referred to in the proposals published as part of the two Government’s ‘Joint Declaration’ on 30 April 2003.”*

2.2.22 It should be noted that in the section quoted above the second reference to 'on the runs' is in reference to those republican OTRs who are 'on the run' from criminal investigations, prison or remand.

## **2.3 The Costs of the 'Troubles'**

2.3.1 As with other forms of paramilitary action, the practice of exiling takes place within particular loyalist and republican communities. These are usually the same communities that have borne the brunt of the 'Troubles' in other ways. Thus exiles are most likely to come from areas of extreme socio-economic disadvantage, which have been characterised by years of conflict.

2.3.2 'The Cost of the Troubles' study (1999 and 2001) is the only systematic attempt to study the impact of the 'Troubles' on the population as a whole. As part of the study a survey was conducted in 30 wards throughout Northern Ireland, which were stratified by death rates as a result of the 'Troubles':

- *High intensity* wards with death rates of 7 or more per 1,000 population, of which there were 10 wards to select from.
- *Medium intensity* wards with death rates ranging from 2 to 6.9 deaths per 1,000 population, of which there were 122 wards to select from.

- *Low intensity* wards with death rates ranging from 0 to 1.9 deaths per 1,000 population, of which there were 424 wards to select from.
- 2.3.3 The group of wards with the high intensity of violence was characterised by households with very low incomes. Almost a quarter of respondents to the survey in these wards reported household incomes of less than £100 per week and 70 per cent had incomes of less than £250 per week. The study found that for lower income categories, household income varied inversely with degree of violence. Thus the wards with least violence had the lowest proportion of households in the bottom income categories.
- 2.3.4 The researchers concluded that “differential experience of the ‘Troubles’ would seem to be conditioned more by location than by either gender or religion. These responses suggest that there have been three key dimensions to life in the areas most affected by the ‘Troubles’:
- First, there is much greater exposure to ‘Troubles’-related events both from paramilitary organisations and the security services – a set of experiences almost unmatched in the rest of Northern Ireland (this group of wards regularly reported experience of ‘Troubles’ related activity at twice the rate for middle wards and four times the rate for least intensity wards).
  - Second, there are insecurities and fears in being outside one’s own area and an acute wariness of outsiders, for example reflected in efforts to conceal where one lives.
  - Third there is a strong pattern of segregation – over a quarter of those from highest intensity wards who were employed, worked only with members of their own community”.
- 2.3.5 Thus, when we go on later in this report to consider the needs of exiles, account needs to be taken of the nature of the areas from which they are likely to have been exiled (i.e. areas of high and medium intensity violence) with all attendant problems stemming from those experiences.

### 3 Our Approach

3.1.1 There were several key aspects and principles of the approach taken in the needs analysis:

- An emphasis on the need for proper consideration of, and appropriate response to, the ethical issues raised by a project of this type with its many sensitive aspects and in particular the need for security and confidentiality.
- Carrying out in-depth qualitative interviewing of exiles and ensuring that they are provided with support to cope with issues which may be raised by the interview process.
- Consultation with relevant agencies and organisations to provide information to complement and contextualise the information provided within the interviews.

3.1.2 Ethical issues considered include the need for confidentiality, data protection and security, and supervision of the researchers. All projects undertaken under the auspices of the NHS are required to be approved by a Research Ethics Committee, either local (LREC) or multi-centred (MREC). The involvement of victims is in line with the requirement in NHS Research and Development (R&D) to involve consumers in research. Whilst this project followed on from the study of the needs of victims of the 'Troubles', it did not need ethical approval as it was not an NHS project. However, the project team tried to adopt the same broad principles as were laid down for the earlier study and these were agreed with Maranatha and the Legacy Project at the outset.

3.1.3 After an initial period of familiarisation and desk research, the work was carried out in stages, as follows:

- Interviews with the VLU, Northern Ireland Housing Executive, BASE 2, PSNI, Maranatha and Professor Liam Kennedy to establish the nature of, the response to and provision for those intimidated out of their homes by paramilitary organisations and being forced to leave Northern Ireland.
- Group discussion and consultation day with Maranatha volunteers, who had direct experience of working with one or more exiles and their families, focusing on their common experiences in supporting and meeting the needs of exiles.
- Interviews with exiles and, where appropriate, the Maranatha volunteers working with those individuals and families. Maranatha

volunteers were also interviewed about their broader work with other exiles.

- Consultation with other relevant agencies and professionals. The Maranatha volunteers included two GPs who had worked with the health needs of exiles. In spite of other requests to agencies through Maranatha, the police service and a housing department were the only other agencies that agreed to co-operate with the study team.

## **4 Introduction to the Study**

### **4.1 Northern Ireland Agency Interviews**

4.1.1 We conducted a small number of interviews with key agencies identified in the project brief discussion in order to familiarise ourselves with the context in which individuals and families have been exiled by paramilitary organisations and to review the steps that are taken to support them in Northern Ireland. We added a meeting with Professor Liam Kennedy to the agencies originally identified – the Victims Liaison Unit, Police Service Northern Ireland, the Northern Ireland Housing Executive and BASE 2 – in order to further clarify some issues from our initial desk review.

4.1.2 The interviews were conducted in Belfast in June and centred around:

- The nature and scope of the problem of exiling.
- The policy and practice response the issue raises.
- The support service available for exiles and their families.
- The problems and gaps encountered in providing services to address the needs of exiles.
- Liaison with agencies in Great Britain.

4.1.3 Further information was subsequently requested from several of these agencies and contact was also established with the Northern Ireland Association for the Care and Resettlement of Offenders (NIACRO)<sup>12</sup> as the major charity responsible for the development of BASE 2, with the Social Security Agency to explore issues relating to the benefit system, and with the Victims Unit in the Office of the First Minister and Deputy First Minister (OFMDFM) which is responsible for the victims strategy, 'Reshape, Rebuild, Achieve' within the Northern Ireland Executive.

### **4.2 Maranatha Volunteers Group Interviews**

4.2.1 A meeting was organised by Maranatha with a group of 12 volunteers with considerable experience of working with exiles in Great Britain. The meeting was semi-structured to draw out the changes which may have occurred in the nature of the problem in the more than 20 years in which Maranatha has been working with exiles. It was structured to initially consider the needs the volunteers have identified and then to explore how both they and other agencies have been involved in meeting these needs

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<sup>12</sup> NIACRO is a major charity working with prisoners, their families, ex-offenders and young people at risk of offending. It also works for a 'more humane and effective criminal justice system'.

and the obstacles and gaps that have arisen. Finally the meeting also looked at some of the support needs of the volunteers as well as for Maranatha as an organisation in undertaking this area of work.

### **4.3 Exiles and Volunteers Sample**

- 4.3.1 The recruitment of participants to studies is notoriously difficult. This is especially more so when the subject is of a sensitive or contentious nature. These difficulties are compounded by the security needs of exiles and their dispersed nature. It was agreed at the outset that the recruitment of exiles for interview would be done through Maranatha, which is the only known voluntary organisation known to be routinely working to support exiles in Great Britain.
- 4.3.2 The small qualitative sample of exiles was agreed with Maranatha. Maranatha tends to work mostly with exiles to help them in the early period of their exile and has fewer ongoing contacts with those who have been in exile for a long period. This has meant that the majority of the exiles willing to be interviewed were more likely to have been in GB for between 3 months and 5 years. An attempt was made to include in the sample a range of experiences including taking account of the circumstances which led up to the exiling, the range of paramilitary groups using exiling with loyalist and republican areas, geographic location and family circumstances. Although over the years Maranatha has seen an approximate balance in the proportion of those exiled by loyalist and republican groups; more people exiled by loyalist paramilitaries were willing to be interviewed reflecting recent trends in those known to Maranatha.
- 4.3.3 Where feasible we also interviewed the volunteer(s) who have been working with individual exiles and/or their families.

### **4.4 Semi Structured Interviews**

- 4.4.1 A semi-structured interview schedule was utilised in a qualitative interview setting. Interviews were conducted in volunteer's homes and the homes of exiles. Interviewees were told beforehand of the steps taken to ensure the confidentiality of the interview; the safeguards on the security of the data collected and that any personalised information would not be retained or identified in the report. They were advised that they could decline to answer any questions or to terminate the interview at any point if they wished to do so. They were asked to contact either the volunteer working with them or the Maranatha NI Project Leader if they experienced any distress after the interview. Each interview was taped for analysis. Topics covered in the interview included:

- Demographic information relating to gender, age, occupation, civil status and communitarian background.
- Past and current support.
- The impact and consequences of being exiled and for family members staying behind in Northern Ireland.
- Employment history and financial impact of their experiences.
- Housing history and experience of contact with the Northern Ireland Housing Executive and BASE 2 on housing issues, as well as the SPED and furniture removal schemes where they applied.
- The educational and emotional needs of children in the exiles family and entry into the education system, where appropriate.
- Health and mental health issues, disabilities and hospitalisation.
- Help seeking - including GP attendance, psychiatric and physical care received etc.
- Contact with voluntary agencies including BASE 2 and Maranatha.
- Personal security concerns.
- Witness protection and liaison, where this applied.
- Litigation and compensation issues.
- Previous life circumstances before the incident.
- Perceived current support needs.

## **4.5 Agency Consultation**

4.5.1 Amongst the Maranatha volunteers are a number of professionals who were also able to offer the perspectives of a medical practitioner, community psychiatric nurse, counsellor and so on. In addition we wanted to follow up issues raised in the interviews with exiles and volunteers from relevant agencies. After some difficulties in getting other agencies to engage with this part of the process, we spoke to the Business Manager of the Housing Needs section of a large council housing department and to the Assistant Chief Constable for Greater Manchester Police. We were unsuccessful in persuading a social services department to agree to be interviewed.

## **5 Services in Cases of Paramilitary Intimidation in Northern Ireland**

### **5.1 Introduction**

5.1.1 In this section of the report we outline the responsibilities of Government and non-Governmental organisations in Northern Ireland for relocation following incidents of intimidation. We report on some of the obstacles that agencies we spoke to in Northern Ireland have highlighted there are in making this provision work for those going into exile.

5.1.2 Responsibility for dealing with the needs of those displaced from their home as a result of intimidation is shared between the Northern Ireland Office (NIO) and the devolved administration (which is currently in suspension). Each agency or Department responds to the needs of those displaced within its statutory responsibilities – for example the Northern Ireland Housing Executive attempts to rehouse those made homeless by intimidation, social services staff deal with consequential family and other problems, and the Compensation Agency considers claims for loss as a result of injury or damage.

### **5.2 The Northern Ireland Office**

5.2.1 The Northern Ireland Office (NIO) is responsible for the Compensation Agency, which deals with payments for compensation in respect of personal injury or damage as a result of intimidation.

#### *The Compensation Agency*

5.2.2 The Compensation Agency administers four main types of compensation scheme. These are:

- The criminal injuries compensation scheme which provided compensation for pain, suffering, financial loss and loss of amenity by the victims of violent crime, including terrorist crime, in Northern Ireland for injuries suffered before 1 May 2002. The governing legislation is the Criminal Injuries (Compensation) (Northern Ireland) Order 1998.
- The criminal injuries compensation scheme (Tariff) which provides compensation for the innocent victims of crime, including terrorist crime, in Northern Ireland for injuries suffered from 1 May 2002. The governing legislation is the Criminal Injuries (Compensation) (Northern Ireland) Order 2002.

- The criminal damage compensation scheme which provides compensation for malicious damage to property in Northern Ireland caused by terrorism or unlawful assemblies of three or more people and for malicious damage to agricultural property. The governing legislation is the Criminal Damage (Compensation) (Northern Ireland) Order 1977.
- Compensation for those who suffer loss or damage resulting from action taken under the Terrorism Act 2000.

5.2.3 The legislation precludes the payment of criminal injuries compensation to a person convicted of a terrorist offence at any time.

5.2.4 Under the criminal injuries compensation scheme for injuries suffered before 1 May 2002, there is a right of appeal to the Court against the decision of the agency, which has meant that some exiles have had to return to Northern Ireland for the appeal hearing. Under the new tariff-based scheme for injuries suffered after 1 May 2002, there is a new system of Independent Appeals Panels which could also lead to exiles having to return to Northern Ireland to pursue their appeals. The Compensation Agency can pay the transport costs of individuals for attending these hearings.

5.2.5 The Northern Ireland Office is also responsible for the Key Persons Protection scheme, which provides physical protection measures of certain categories of individuals (for example elected public representatives, members of the judiciary and police officers), where the Secretary of State receives advice from the Chief Constable that there is a serious or significant threat against the individual concerned. We have no knowledge whether any exiles have been on the Key Persons Protection scheme.

5.2.6 The Victims' Liaison Unit (VLU) in the NIO was established in June 1998 to take forward the recommendations in the Report of the Northern Ireland Victims' Commissioner, Sir Kenneth Bloomfield, 'We Will Remember Them'. To date the Government has committed over £18.25 million to support victims of the 'Troubles' including £250k over three years for the Legacy Project.

### **5.3 Devolved Administration Responsibilities**

5.3.1 The Northern Ireland Executive's Programme for Government states that the Executive will "continue to pay special attention to the particular difficulties faced by victims of the 'Troubles'". It has developed a victims' strategy, 'Reshape, Rebuild, Achieve'. There is no specific mention of exiles within the strategy. The strategy sets out an intention to:

- Review emergency payments for persons re-housed as a result of intimidation (this does not include payments to those exiled and re-housed in Great Britain, as they fall outside the jurisdiction of the Northern Ireland Executive); and to
- Use specialist Support Officers to provide information for victims with special housing needs.

5.3.2 The Trauma Support Advisory Panels (TAPs), which were set up in each Health Board area to take forward and develop partnerships in a range of areas related to victims, are a significant element in the strategy. TAPs are expected to work with the Victims' Unit in the Office of the First Minister and Deputy First Minister to highlight (at a local level) victims' needs and to contribute to the planning and development of services to meet those needs. Under the strategy a full-time worker is being funded for each TAP until 2004.

5.3.3 Central support for emergency planning is provided by the Central Emergency Planning Unit in the Office of the First Minister and Deputy First Minister. 'Operational Procedures for Displaced Families' were published in June 2002. In cases of emergency (e.g. where large numbers of households are displaced over a short period, as occurred for example in the Lower Shankill in July 2000), the Interagency Working Group on Displaced Families can be convened to co-ordinate an inter-agency and community level response in the Greater Belfast area.

5.3.4 Two Departments in Northern Ireland are responsible for agencies which work directly to the needs of those displaced through intimidation. The Department of Health, Social Services and Public Safety is responsible for social services delivered by the health trusts in Northern Ireland, while the Department of Social Development is responsible for the Northern Ireland Housing Executive and the Social Security Agency.

#### *The Northern Ireland Housing Executive*

5.3.5 The Housing Executive has responsibility for re-housing those made homeless by intimidation. The services it offers cover:

- Assessment of need for social housing for re-housing.
- Temporary re-housing, furniture storage and securing homes.
- Purchasing the homes of intimidated persons (Scheme for the Purchase of Evacuated Dwellings – SPED).
- Re-housing through normal social housing stock or by acquired properties (Acquisition of Satisfactory Housing – ASH).

### *Assessment of Need*

- 5.3.6 Under Housing Executive policy, any persons presented and accepted as homeless because of intimidation are awarded sufficient housing points to ensure that they are treated as a priority for re-housing. The assessment process involves the Housing Executive referring the case to the PSNI for confirmation or otherwise of the intimidation. The policy is to give the applicant freedom of choice about where they are re-housed.
- 5.3.7 The staff at the Housing Executive's Homeless Advice Centre told us that in practice they usually refer to the BASE 2 project for confirmation of intimidation, pending written confirmation from the PSNI, which may be delayed.
- 5.3.8 16 and 17 year olds who are intimidated and deemed to be 'vulnerable' are the responsibility of Social Services, but the staff at the Homeless Advice Centre told us that they often experience considerable difficulties in getting social workers involved in these cases.
- 5.3.9 Where an applicant is accepted as homeless because of intimidation, he/she is entitled to an emergency payment of £199.40 (currently under review), provided they were a public or private tenant at the time of the intimidation. The receiving district housing office usually makes this payment. This payment does not apply to those going into exile and being re-housed in Great Britain.

### *Temporary Re-Housing, Furniture Storage and Securing Homes*

- 5.3.10 The Homeless Advice Centre is responsible for securing temporary accommodation during working hours and the Health and Social Service Trusts do so through the Duty Social Worker out of normal working hours and at weekends. The Trusts account for a significant proportion of referrals to BASE 2, as does the Homeless Advice Centre.
- 5.3.11 The Housing Executive has a duty under the Housing Act (Northern Ireland) 1998 to protect the property of homeless persons and people threatened with homelessness. However, the Housing Executive have clarified to us that this duty "is only relevant for people who continue to be homeless in Northern Ireland". The Executive maintains a list of certified private furniture removal firms that collect, store and deliver the furniture when the applicant is re-housed in Northern Ireland.
- 5.3.12 If a homeless applicant moves to Great Britain and then presents to another Local Authority as homeless, then the Housing Executive have stated that the duty to protect the property of homeless persons resides with the receiving Local Authority. In these cases we were told, "the

Executive in conjunction with the receiving Local Authority will have their furniture transported to a port in Northern Ireland and it is then picked up by another furniture company of the respective Local Authority, as they then have the duty to secure the furniture or belongings". However, whilst local authorities in England and Wales have a similar duty to protect the property of homeless persons under the Housing Act 1996, there is a 'reasonableness' test within the legislation and local authorities may also apply a 'reasonable' charge for this service. Therefore, how well this arrangement actually works in practice, will vary according to how the receiving Local Authority interprets its obligations under this legislation.

- 5.3.13 Periodically the Housing Executive has stored furniture for people who have fled Northern Ireland. Staff at the Homeless Advice Centre have said to us that they can arrange for the storage of furniture and its transportation to the docks in the case of those who are going into exile in Great Britain through the charity Bryson House.
- 5.3.14 The Voluntary and Community Unit (VCU) within the Department for Social Development (DSD) provides a small amount of funding towards a Home Removal Scheme, administered by Bryson House. This scheme provides financial assistance to families who have been intimidated from their homes in Northern Ireland and enables them to relocate in Great Britain. The current level of funding is £13k per annum although in the past there have been occasions when no expenditure was incurred. This funding is provided under Article 3 of the Social Need (NI) Order 1986.

*Purchasing the Homes of Intimidated Persons*

- 5.3.15 Where an owner-occupier has been intimidated out of their home they can request the Housing Executive to purchase their home under the Scheme for the Purchase of Evacuated Dwellings – SPED – at market value. It has to be the person's main residence and the case has to be certified by the PSNI as intimidation. An independent valuation is carried out and the person who is intimidated has to pay the usual solicitors fees. Intended purchasers have to be informed of the reasons why the Housing Executive under the SPED scheme bought the house.
- 5.3.16 Officers of the Housing Executive acknowledged that there could be considerable delays between a person vacating a property and its valuation under the SPED scheme. In practice many of these properties are damaged in the meantime, often with the connivance of the paramilitary organisations that intimidated the people out of their homes in the first place. For exiles these difficulties may be exacerbated by the delays in making a SPED application.

*Re-housing through Normal Social Housing Stock or by Acquired Properties*

5.3.17 The ASH (Acquisition of Satisfactory Homes) scheme allows for the Housing Executive to purchase suitable property in the private sector property market to meet urgent housing need. The scheme has been used in the past to re-house the victims of intimidation but, as it only applies within the confines of Northern Ireland, it is not of assistance in meeting the needs of those in exile in Great Britain.

*Social Services*

5.3.18 In addition to the roles described above in supporting the housing needs of those intimidated out of their homes, Social Services have specifically trained staff that may be able to help those families who have experienced particular trauma in the context of intimidation and civil disturbances. Referral to these staff will normally be made by social work staff, self-referral or through contact with others involved in supporting families. They may also involve specialist community resources and, in the case of exiles, have been known to refer cases to Maranatha.

*Social Security Agency*

5.3.19 The Social Security Agency for Northern Ireland works with other agencies to provide a service for families who have been displaced through intimidation. In its evidence to the Northern Ireland Select Committee, the Department of Social Development (which is responsible for the Social Security Agency) stated that “the Agency works with the Northern Ireland Housing Executive, which is best placed to confirm that intimidation has taken place. Such status is normally sufficient to enable Social Fund decision makers to make an award of a non-refundable community care grant to help meet immediate need where basic qualifying conditions are satisfied (i.e. the applicant is in receipt of Income Support or Income Based Jobseekers Allowance)”. However, in response to a request for further clarification which we raised with the Department of Social Development, they have pointed out that “a person does not need to be receiving a qualifying benefit (Jobseeker’s Allowance or Income Support) before they can be considered for a Crisis Loan. However, assistance can only be given where the expense has arisen as a result of an emergency and any such assistance is the only means of avoiding serious risk/damage to the health/safety of the applicant, or any member of their family”.

5.3.20 We asked the Department of Social Development about the safeguards for securing the personal information of exiles on the relevant Social Security Agency systems. We have set out their response in full below:

5.3.21 "Transfer of papers – Documents relating to a claim for benefit must be retained securely for auditing purposes and as such there are internal courier arrangements. Our current practices for claim transference are set out in the following paragraphs:

- Jobseeker's Allowance. Generally, when a customer makes a new claim or reports a change of circumstance, for instance a change of address, the registering of either event on the computer system will initiate claim transfer. The claim held by the old office is then closed. However before closure the customer needs to complete and return form JS 40 to the issuing office. A new JS 40 can be obtained from the new office if required. On receipt of form JS 40 the claim is closed and details automatically transfer via the computer system to the new office. In the majority of cases a paper transfer is not required at this point and the new office can complete its action within a few days. If the customer either makes known their intention to move prior to leaving, their claim will be closed and ready for transfer. In the event that they move and provided they then immediately advise one of the benefit agencies concerned, there should be no delay in processing a claim.
- Incapacity Benefit/Severe Disablement Allowance. If Incapacity Benefit or Severe Disablement Allowance are in payment, the customer should not lose out on any benefit by transferring to Great Britain. If they are paid by direct payment/giro cheque they will only need to contact the appropriate office to advise them they are now living in their area. The office will then ask Incapacity Benefits Branch in Northern Ireland to transfer the clerical papers. The office in Great Britain can automatically access the computer account and the claim should continue so long as the conditions for benefit continue to be met. If the customer is paid by order book, they can cash up to two orders in Great Britain. To transfer permanently to the mainland, the customer would need to advise their new post office they have now moved in the area and complete form P80 MA. The customer should send this form to Incapacity Benefits Branch who will transfer the papers to Great Britain (it would speed thing up if the customer confirmed which office in Great Britain they would be using). The order book can continue to be cashed so long as the conditions for benefit are met.
- Disability Living Allowance/Attendance Allowance. For these benefits, the customer would make their claim for either benefit in the relevant office in Great Britain, who in turn would contact the benefit branch in Northern Ireland. A full record print would be requested from the computer system in Northern Ireland and the case would be closed. Following receipt of the full record print, all the clerical papers would be sent to the relevant office in Great Britain.

- Restricted access to computer records. To properly administer social security benefits and ensure customers receive their benefit(s) at the proper time it is essential that there is an exchange of information between computer systems. Access to these systems is limited to the particular business need. A range of measures ensures that access to the computer systems is strictly controlled and managed and security controls are in place to ensure that staff who use the system are accountable for their actions. Guidance for the Protection of Customer Information is held in every office and details the various laws made to protect personal information held.
- Customers can request to have access to their records restricted. To do this they should make representation to the office manager providing any supporting evidence. The customer's records are then marked locally sensitive, i.e. no one can access the customer's records without special authorisation and a record is kept of everyone who has been given this access and the action they take on the case.
- Customers can also apply in writing for their records to be made nationally sensitive. Such requests are forwarded to Special Section D in Newcastle-upon-Tyne who will make the decision and take the action to make the customer's records nationally sensitive. This means no one can access the customer's records on any Government computer system without permission and special access being granted. Customers in the witness protection programme would fall into this category."

## **5.4 Police Service Northern Ireland**

- 5.4.1 The Police Service Northern Ireland has a key part to play in the procedures outlined above particularly by certifying that housing intimidation has taken place and by providing information for the criminal injuries compensation schemes.
- 5.4.2 It should be noted that in the RUC evidence to the Northern Ireland Affairs Select Committee they reported that historically around 40% of all SPED applications were by police officers. The figure had dropped to around 12% in 2000.
- 5.4.3 It was the view of the PSNI Chief Superintendent to whom we spoke that very few paramilitary punishments or shootings are likely to get as far as criminal injuries compensation because many go unreported and witnesses do not come forward.
- 5.4.4 The police response to both sectarian attacks and the recent loyalist feuds has been:

- To work closely with community leaders to prevent attacks taking place and encourage mediation between groups.
- The effective use of intelligence to target key areas at key times.
- Pre-emptive operations to prevent attacks and arrest those involved.
- Where necessary, saturation patrolling to deter attacks and reassure the community.

5.4.5 The PSNI also play a role in the Key Persons Protection scheme, which is operated by the Northern Ireland Office. The police provide a security assessment as part of that process.

5.4.6 PSNI is a full and active member in the Government's Organised Crime Task Force having taken the lead on the strategic areas of drugs, extortion and money laundering. The raising of finance by paramilitary organisations is largely being addressed through the Task Force.

5.4.7 PSNI will, in appropriate circumstances, provide an escort for individuals and families leaving Northern Ireland. It provides for witness liaison and protection in Great Britain in appropriate cases.

## **5.5 BASE 2**

5.5.1 Since 1990 NIACRO through its BASE 2 project has been providing a crisis intervention service for individuals and families at risk of paramilitary intimidation. Part of that service is to assist when necessary in the relocation of individuals out of the geographic area of risk.

5.5.2 The operational guidelines for BASE 2 are grounded in the principles of non-violence and human rights. They include:

- Carrying out a comprehensive risk assessment in each individual case.
- Operating within a legal framework.
- Ensuring that the principles of confidentiality are adhered to, with the exception of those who prevent a danger to others – particularly those who have committed crimes against children or young people.
- Being non-judgemental.
- Seeking to maintain people in the community wherever possible.
- Acknowledging the negative effects of cultural dislocation for those who have to move away from their own communities.

5.5.3 BASE 2 is now integral to provision for those intimidated out of their own homes and acts as a key support service for those forced into exile. As

outlined in the section on the Northern Ireland Housing Executive above, BASE 2:

- Assesses individual need and verifies and clarifies that intimidation has taken place through its contacts in the loyalist and republican communities.
- Mediates, wherever possible, so that people who are intimidated can return to their communities.
- Helps to broker accommodation for those forced to leave their own homes through intimidation within Northern Ireland and assists those who have decided they have no other choice than to go into exile to find, wherever possible, temporary accommodation in Great Britain before they leave. It liaises with the Northern Ireland Housing Executive and with local authority housing departments in Great Britain to help to find temporary accommodation for those going into exile. It also liaises with the Homeless Advice Centre and Bryson House on getting people's furniture moved into storage. Base 2 has expressed concern about the level of security in the existing furniture transport arrangements.
- Helps with transport arrangements and in cases of hardship, BASE 2 will also help with meeting the transport costs to Great Britain. In the BASE 2 worker's experience, many of those going into exile have not been able to get a crisis loan or other assistance with transport costs from the Social Security Agency. They are concerned that Social Security offices are referring people to BASE 2 to get travel costs paid, rather than using an award of a non-refundable community care grant to meet these costs.

5.5.4 It is apparent that the trend of referrals to the BASE 2 project has been steadily upwards – 624 referrals in 1999 increasing to 1100 in 2002. One must also take into account the fact that as BASE 2 becomes better known around various networks (both formal and informal) it will be expected that the rate of referrals will increase. However one cannot come to the conclusion from these figures on their own that the actual rate of intimidation measured by threats, beatings, shootings and exiling is actually increasing.

5.5.5 BASE 2 has been in existence for 13 years and during this time has dealt with approximately 7000 referrals – this probably makes BASE 2 the organisation that has most experience of dealing with the aftermath of paramilitary threats with the exclusion of PSNI/RUC and NI Housing Executive. Given that this experience has been contained within a relatively small staff complement (approximately 6) over the 13-year period, knowledge of the issues is quite deep.

- 5.5.6 Base 2 received funding of £25,375 from the Core Funding scheme administered by the NI Voluntary Trust on behalf of the VLU in 2000-2002.
- 5.5.7 The BASE 2 statistics for 2002 show that of the 1100 referrals:
- 580 referrals were aged 25 plus.
  - 421 referrals were aged 18-25.
  - 109 were under 17 years of age.
  - The male/female ratio was approximately 3 to 1.
- 5.5.8 A significant number of these referrals (194) were of families being intimidated.
- 5.5.9 The Housing Executive (326 referrals) and Social Services (172) and Probation (40) were the most significant statutory referral agencies to the service provided by BASE 2. Voluntary groups (155) and self-referrals (225) made up a significant number of non-statutory referrals.
- 5.5.10 Of those referred to the project in 2002: 695 were allegedly threatened by loyalist organisations and 383 were allegedly threatened by republicans. This ratio of roughly 2 to 1 loyalist/republican threats is a trend that was in evidence for the previous 2 to 3 years. Most of those threatened coming to BASE 2 come from the greater Belfast area.
- 5.5.11 BASE 2 clients self report the reasons for threat as being:
- Anti-social behaviour (388).
  - Drugs (129).
  - Sectarian reasons (102).
  - Sex offences (50).
  - Family feuds (96).
  - Internal paramilitary 'fall outs' (66).
  - Assault (40).
  - Other reasons given are informing, joyriding, burglary, robbery, monies owed and 'other' (127).
- 5.5.12 904 of the clients who came to BASE 2 in 2002 did so under alleged threat of exile, 110 others have received specific threats of shootings or beatings and 54 others received death threats.

5.5.13 In 2002 BASE 2 has mediated on 83 occasions in an attempt to get threats lifted. It has provided clarification and advice in all cases, supporting letters in 580 cases, access to accommodation in 480 cases and transport for 64 clients.

5.5.14 In terms of client outcome in 2002:

- 451 left the area to move elsewhere in Belfast.
- 60 left the country and went into exile.
- 20 left Belfast.
- In 38 cases the threat was lifted.
- After the BASE 2 verification process had been operationalised, 305 cases were found to have no threat existing.

5.5.15 This last statistic is important. BASE 2 has consistently found that over the years approximately 25% to 30% of referred cases prove to be without foundation in the sense that no direct paramilitary threat is confirmed to BASE 2.

5.5.16 BASE 2 would note that the numbers known to them going into exile is fairly constant for the past number of years i.e. around 50 to 60 per year.

5.5.17 In the year 2002 BASE 2 referred 8 cases to Maranatha. They have no figures for referrals to Maranatha in 2003, but believe it will have been more this year given the events in the Shankill Road earlier in the year.

5.5.18 There is also an interaction between BASE 2 and Maranatha in cases in which Maranatha may seek clarification/verification of threat where someone has come into contact with them through another route.

5.5.19 BASE 2 is also funded from 2000-03 to run the Community Reintegration Project (CRIP), which aims to work with other agencies and the community in a co-ordinated way to achieve the safe reintegration of young people at risk and reduce crime. Further funding has been secured until 2004. The project is aimed at young people less than 25 years of age in the Greater Belfast areas who are under threat as a result of their alleged offending behaviour and who have the opportunity to reintegrate into the community. The CRIP programme looks at the reintegration needs of individuals and families under the following headings:

- Accommodation.
- Income.
- Physical and mental health.
- Family and community.

- Offending behaviour – where appropriate.
- Education, training and employment.

5.5.20 An action plan is agreed with the individual and reviewed to the point where they have been successfully reintegrated. All of these people could have been displaced from their community of origin and been located within Northern Ireland or Great Britain. BASE 2 therefore has established two models of intervention with those under threat namely a quick response intervention that deals with the emergency at the time and a more considered planned and informed type of intervention that seeks to reinsert people into or close to their community of origin.

5.5.21 During the life of BASE 2 it has always been recognised that a significant gap has existed in provision in respect of those who are actually in exile, whether this is within Northern Ireland or beyond.

## **5.6 Routes into Exile and Maranatha**

5.6.1 The existing organisations providing services for those intimidated out of their homes within Northern Ireland all acknowledge that they only see a proportion of those going into exile as a result of paramilitary threat. Even then, the direct contact with the agency is not always with the person under threat (as they may have gone into hiding or already have left) but with a relative or friend seeking help on their behalf. Many simply flee to stay with friends or relatives in Great Britain.

5.6.2 Whilst the Northern Ireland Housing Executive and BASE 2 see some of the same people as a result of cross-referrals, there are people in both loyalist and republican communities who through choice will not go to either of these agencies. Others may not know of the help which can be offered or only learn about it after they have already left Northern Ireland.

5.6.3 The Maranatha Community is an interdenominational, Christian based organisation that has been working in Northern Ireland for more than 20 years. It has working relationships with individuals in all of the principal agencies working with the victims of paramilitary intimidation but no formal links with any of them. It also has informal links with the community and clergy in both the loyalist and republican communities. The Northern Ireland Housing Executive and BASE 2 make referrals to Maranatha, although there are stronger working links with BASE 2, which also assists Maranatha in verifying the nature of the intimidation that has taken place. Maranatha also has links with Social Services, which enables it to check whether there are any child protection issues concerned in a particular case.

5.6.4 In addition, many people going into exile make their own self-referrals to Maranatha and through the churches, either before leaving Northern Ireland or after they have left.

## **6 The Needs of Exiles in Great Britain**

### **6.1 Introduction**

- 6.1.1 In this section of the report we present the key findings of our interviews with exiles and Maranatha volunteers about the needs of exiles residing in Great Britain. They also provide a further opportunity to reflect upon the nature of provision for exiles within Northern Ireland and Great Britain. We have thus used our interviews with the police, a local authority housing department and the different health and social professionals working with Maranatha to present these needs in the wider context of service provision in Great Britain.
- 6.1.2 It is important to recognise that people forced into exile by paramilitary organisations in Northern Ireland have no formal legal status other than their normal rights and duties as British citizens. They are not entitled to refugee status for, even though exiles are most likely to come from areas of extreme socio-economic disadvantage that have been characterised by years of conflict, they are already UK citizens. There is also no statute covering their status or giving them any special entitlements. Unlike those intimidated out of their homes and relocating within Northern Ireland, exiles have no specific statutory entitlements other than the general entitlements of other citizens. There is no specialist statutory provision.
- 6.1.3 The Maranatha Community is the only organisation in Great Britain known to have developed a specialist support and advice service for exiles. We shall therefore begin by looking at what we learnt of the needs of exiles from the group meeting which we held with Maranatha volunteers and then go on to consider the key findings from the interviews with exiles, the volunteers who work with them and the other volunteers and agencies we have interviewed for the study.

### **6.2 Consultation with a Group of Maranatha Volunteers**

- 6.2.1 We held a consultation session with 12 of Maranatha's volunteers. The meeting was semi-structured to draw out the changes which may have occurred in the nature of the problem in the more than 20 years in which Maranatha has been working with exiles. It was also structured to initially consider the needs the volunteers have identified and then to explore how they and other agencies have been involved in meeting these needs and the obstacles and gaps that have arisen. The meeting also looked at some of the support needs of the volunteers, as well as for Maranatha as an organisation in undertaking this area of work.

- 6.2.2 The professional backgrounds of the volunteers included general medical practice, physiotherapy, counselling, nursing, teaching and the church and they were thus able to offer insights both as concerned and committed volunteers and as professionals. The group member's experience of working with exiles ranged from over 20 years to less than two years.
- 6.2.3 It was the general view that the intensity of the numbers being exiled and of the problems that exiles face has increased since the Belfast Agreement. The Leader and co-founder of the Maranatha Community, who is also a member of the Haven Project<sup>13</sup> committee, recalled that Maranatha had been involved since 1981 when it had assisted five families who were exiled. His personal impression was that pre-the-Belfast Agreement the organisation's work with exiles had related to a greater extent to inter-community conflict and that post-the-Belfast Agreement there was a greater degree of internecine conflict, particularly between loyalist groups engaged in 'turf wars' (including over the control of drug markets) which he likened to rivalries between drug gangs in the United States, where the expulsion of opposing members of groups from an area is not uncommon.
- 6.2.4 The group identified the following key needs as being presented by exiles, most of whom have multiple needs:

*Personal Needs*

- 6.2.5 The volunteers highlighted some of the personal needs of exiles. Many exiles are shattered by their experience and have a deep sense of despondency, feelings of helplessness and an inability to act. This can also sometimes lead to a sense of dependency upon the volunteers. Many exiles have other experiences related to their sense of self-worth – feeling a threat to their sense of identity, personal beliefs and faith. The consequential demands on the volunteers are for around the clock support, '24/7', (particularly in the early stages of being in exile) in an attempt to help people to rebuild their sense of identity and self-worth. The volunteers have also identified longer-term personal support needs related to exiles desire for personal dignity and recognition. Some exiles lack social skills and thus require access to social skills and employment training programmes to enhance their occupational skills, as well as a need for employment.

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<sup>13</sup> The Haven Project aims to be an extension of what Maranatha already provides by employing two part-time staff to provide administrative support and help with co-ordinating referrals.

### *Medical Needs*

- 6.2.6 Some exiles known to the volunteers have suicidal tendencies. The medically defined, clinical needs of exiles often include acute anxiety, hypertension, sleeplessness, depression, and (for some) paranoia and Post Traumatic Stress. Volunteers are concerned at the extent to which these needs too often go untreated, as exiles experience considerable difficulties in accessing GPs and other health services as well as dental services. Some exiles known to the volunteers have left Northern Ireland with serious injuries, sometimes as a result of being subjected to a 'punishment' beating or shooting and GPs have been reluctant to take these individuals on their lists, (it is suggested by the volunteer) because of the costs of ongoing treatment. One volunteer, who is also a GP, said that delays, which generally occur in transferring medical records, make accurate diagnosis more of a problem. He is particularly concerned that clinicians may also fail to understand the context (of the 'Troubles' and the situation in which exiling occurred) in which the symptoms are presented and that this could lead to misdiagnosis or inappropriate and inadequate treatment.

### *Social Needs*

- 6.2.7 The volunteers said that a common experience for exiles is of a sense 'dislocation from community' and of loss from no longer being part of a close-knit community, which can neither be replicated nor replaced in Great Britain. Exiles often find it difficult to integrate within the areas they settle, for even though they may have a strong need for social contact, they have a basic lack of trust in others because of their experiences. Volunteers also said that this related to a lack of peer support - not having someone to turn to with similar experiences that can understand their situation. A sense of loneliness is thus a problem which volunteers find many exiles experience.

### *Family Needs*

- 6.2.8 The loss of family and the extended family is, in volunteer's experience, keenly felt by many exiles. Younger, teenage exiles also put simply "miss their Mum" and parental support and guidance, especially as most have not previously lived on their own. Volunteers often have to help exiles to work through the feelings of guilt they experience due to the dangers of retaliation and further intimidation that family members who have been left behind in Northern Ireland have to face; as well as feelings of guilt for the degradations and difficulties faced by family members who have come with them into exile. The stresses put on families can also lead to family breakdown.

- 6.2.9 Volunteers are concerned that children in the family experience dislocation of schooling because of moves within Great Britain and consequential changes of school ethos, culture and aspects of the curriculum. This can lead to children in exiled families underachieving and sometimes being singled out and bullied at school. Children may also have feelings of resentment for the situation they find themselves in and work these resentments out within the family. Getting children into appropriate schools, which are willing to take them and support their particular needs, is something Maranatha has to work hard to achieve.
- 6.2.10 The volunteers noted that there appears to be an increase of the numbers of single mothers being exiled with their children and feel that they may be being singled out by the paramilitaries because they are on their own. They also noted that social services appear to be reluctant to accept children in exiles families as being 'vulnerable' and in need of social work support. Ironically, because of what some of the volunteers perceive to be a better social welfare system in Northern Ireland, some of these families may have been receiving social work support before they left.

#### *Financial and Housing Needs*

- 6.2.11 The Maranatha volunteers have found that the majority of exiles have a severe lack of financial resources related to the areas of severe socio-economic deprivation from which they have mainly come. Many are in debt and almost all have a need for benefits and welfare rights advice. Maranatha has a specialist welfare rights volunteer who can support the volunteers in offering advice. Volunteers are concerned about the delays that occur in transferring case files from the Social Security Agency, so that new assessments can be made or benefits continued.
- 6.2.12 Housing and accommodation needs are evident in nearly all the cases dealt with by Maranatha volunteers. Finding appropriate accommodation in a crisis situation is extremely difficult. The quality of that accommodation can create further difficulties as all exiles have concerns about personal safety and security, particularly when they are in hostels or other temporary accommodation where the threat of violence may be present. Many exiles and their families have to move several times and almost all are nervous in the unfamiliarity of new settings. Living in hostels or shared accommodation also creates a lack of privacy which volunteers say some exiles find hard to deal with.

#### *The Needs of Maranatha Volunteers*

- 6.2.13 We asked the group of Maranatha volunteers about their own training and support needs. Although the Maranatha Community as a whole is large,

the number of volunteers actively working with exiles is quite small – currently there are about 20 volunteers engaged in this aspect of Maranatha's work.

- 6.2.14 The '24/7' nature of the commitment and of the demands and needs of exiles means that few volunteers can sustain this level of commitment for long periods without beginning to feel strains in their own family life and risking 'burnout'. There are concerns about this in the group and the need to replenish the supply of volunteers as well as to maintain a high level of volunteer support. There are also concerns about the very real dangers and strains faced by the NI Project Leader who is central to this aspect of Maranatha's work. The Haven Project, which provides an administrative support and referral base for Maranatha's work with exiles, is crucial to its development. The complexity of the issues which volunteers face also means that priority should be given to their training and support needs and we will return to this in our conclusions and recommendations.

### **6.3 A Local Authority Housing Perspective**

- 6.3.1 To get a further understanding of the challenges that Local Authorities face in meeting exiles housing needs, we interviewed the Business Manager of the Housing Needs Section at Telford & Wrekin Council. The Council estimates that it has dealt with about three to six cases involving homeless exiles per year. They range from young single exiles to families.
- 6.3.2 There are no Governmental guidelines to Local Authority Housing Departments for dealing with exiles, and cases presenting as homeless are dealt with within general homelessness legislation. All local authority-housing departments must provide temporary accommodation whilst investigating and assessing a homeless application. In Telford & Wrekin, as in many other local authorities, this is in bed and breakfast accommodation and the private rented sector.
- 6.3.3 Whilst the average homeless case in Telford & Wrekin is assessed and housed in 33 days, this may take longer in some cases involving exiles. This is chiefly due to the difficulties they experience in getting corroborating information from Northern Ireland. Typically this would involve contacting the Northern Ireland Housing Executive to confirm housing history and (especially where young people are the applicant) liaising with the relevant Social Services officers in Northern Ireland. PSNI may also be asked for information relating to intimidation stemming from these initial enquiries. Telford & Wrekin have only relatively recently established that BASE 2 is a useful point of contact and verification. The Business Manager of the Housing Needs Section feels that more information should be made available to local authorities about relevant

contact agencies and their role in Northern Ireland including the important part played by BASE 2.

- 6.3.4 The legislation is clear in the 1996 Housing Act – no Local Authority should decline a homeless applicant who has been intimidated out of his or her own home and cannot return (even if they are an owner-occupier) if it would be ‘unreasonable to return’. However, part of the housing legislation concerns an assessment as to whether the person is ‘intentionally’ homeless through his or her own behaviour. Whilst only 2 per cent of all homeless cases in Telford and Wrekin are deemed to be ‘intentionally’ homeless, other Local Authorities have a far higher percentage of applicants turned down for this reason. Exiles with a history of anti-social behaviour may well be deemed by some Local Authorities to be ‘intentionally’ homeless.
- 6.3.5 In common with most Local Authorities in England and Wales, 16 and 17 year olds who are homeless are seen as automatically ‘vulnerable’ in Telford and Wrekin but are not usually allocated a tenancy until they are 18 years old.
- 6.3.6 Telford and Wrekin (as do nearly all areas in England and Wales) has a Public Protection Panel, which deals with sex offenders and Schedule One (violent) offenders. If there were cause for concern (following enquiries with PSNI and Social Services in Northern Ireland), an exile would be considered by this panel before being re-housed. The police are also concerned about the relocation of exiles with a known terrorist connection.
- 6.3.7 Telford and Wrekin provides furniture for homeless applicants from within the district. This is not a statutory requirement and does not apply to exiles. However in line with the duty to protect the property of homeless persons, they could store furniture on behalf of an exile.
- 6.3.8 In many Local Authorities homeless applicants sign an agreement to having their housing needs details go onto a common database shared with other Registered Social Landlords to assist in the housing allocation process. The Business Manager of the Housing Needs Section believes that guidance should be issued so that in the case of exiles this information is safeguarded and restricted, as already happens in Witness Protection cases, which should not go on the common database and should have access guarded by a nominated Housing Witness Protection Officer.

## 6.4 A Police Service Perspective

- 6.4.1 We conducted a telephone interview with the Assistant Chief Constable (ACC) in Greater Manchester Police (GMP). He told us that in keeping with other police forces, Greater Manchester Police do not recognise the term 'exile' as having any specific status (as opposed to 'asylum seekers' who do). They would broadly see exiles as being no different from citizens in any other part of the UK unless intelligence brought them to their attention for some reason. In general therefore, cases involving exiles tend to emerge on an 'ad hoc' basis and are dealt with mainly at Divisional Level.
- 6.4.2 Inter-agency co-ordination has taken place on an 'ad hoc' basis where necessary in relation to particular groups of exiles within the GMP area. The ACC recognised that other agencies dealing with exiles – especially housing and social services – need good information from which to assess risks in relation to exiles and he acknowledged that getting a complete picture "is almost impossible". He was therefore concerned that "risk assessments" may currently be based on imperfect material. He would support a more co-ordinated approach to the provision of information from agencies within Northern Ireland to assist the risk assessment process and guidance as to their roles and responsibilities.
- 6.4.3 Greater Manchester Police refer to 'witness liaison' as opposed to 'witness protection' which is a term they prefer not to use. The role of 'witness liaison' is to support individuals or witnesses and provide for their security as needed.
- 6.4.4 In general, and without specific intelligence of a threat, exiles would be seen as being a perceived rather than actual threat. As Greater Manchester Police finds it difficult to resource its own witness liaison programme, it would not be looking to extend that to exiles.
- 6.4.5 In the view of the ACC "practically and frequently" communication between police forces on witness liaison cases does not happen as well as it should. His view was that in relation to those from Northern Ireland who may come into the Greater Manchester Police area under the PSNI 'Witness Protection' programme, the cuts in police strength "post-Patten"<sup>14</sup> meant that they may find it even more difficult to liaise with GMP over witness liaison.

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<sup>14</sup> John Patten undertook the review of policing in Northern Ireland, A New Beginning: policing in Northern Ireland, (1999) that led to the setting up of the Police Service of Northern Ireland.

## 7 Interviews with Exiles and Maranatha Volunteers

### 7.1 Introduction

7.1.1 In depth semi-structured interviews were carried out with a number of exiles known to Maranatha and with a few members of the Maranatha Community. Before proceeding we agreed with the Maranatha NI Project Leader some principles which would underpin the interviews. These were that:

- It was appropriate to use the term “exile.” While it has major connotations most of the people Maranatha work with have accepted its relevance to them.
- Interviewers would be respectful of and sensitive to the needs and position of the interviewees.
- Questions would be open-ended to allow people to express their experiences as fully as possible.
- Confidentiality and security were fundamental. Specifics of names and places were not necessarily needed and there might be a need to discourage interviewees from disclosing these.
- No pressure would be put on individuals to take part and involvement would be entirely voluntary.
- Support from Maranatha would be available to any interviewee who found the interview particularly stressful.
- Interviews might be taped with the permission of the interviewee but these tapes would not be kept beyond the lifetime of the project.
- In organising the exile interviews the Maranatha NI Project Leader would seek to involve people with a variety of characteristics in terms of such factors as age, gender, family position, religious background, how long ago they had been put out, the reason for exiling etc.

7.1.2 Fifteen interviews were carried out. In a few cases two family members were interviewed together. In total the interviews involved 12 exiles, 6 Maranatha volunteers, one of whom was also interviewed as an exile from Northern Ireland, and one relative who had remained in Northern Ireland after her brother had been exiled. Four exiles interviewed were from one family and another two were partners.

7.1.3 The volunteers interviewed were chosen for one or more of the following reasons:

- They had extensive experience in the field.

- They could provide a relevant professional perspective (as GP and professional counsellor).
- They had provided support to some of the exiles being interviewed.

7.1.4 Two of the six volunteers interviewed took part in the group discussion described in 6.2.

7.1.5 The interviews had the following features:

- Interviewees were told that they were in control of the interview and that they could stop it or take a break at any time.
- Most interviews lasted between 90 minutes and 2 hours though some were longer.
- Interviews were carried out in several places including the homes of Maranatha volunteers and the homes of exiles.
- In all cases permission was given to tape the interview (though the circumstances of the interview sometimes meant that the recording was of poor quality). Notes were also taken.
- In most cases when exiles were being interviewed Maranatha volunteers were at hand should the interviewee need support during or after the interview.

7.1.6 In order to analyse the information provided in the interviews, notes were made summarising the contents of the handwritten notes and the interview tapes. Where it seemed appropriate verbatim quotations were taken from the tapes. This process produced 89 pages of text. Initial coding of these pages produced over 70 factors emerging from what people had told us. After further analysis and re-reading of the notes these were grouped under the following main headings for ease of exposition:

- Routes into exile.
- Accommodation.
- Welfare Benefits and Finance.
- Psychological Factors and Responses to Exile.
- Medical Issues.
- Family Issues.
- Social Factors.
- Coping and Not Coping.
- Support Needed and Provided.

7.1.7 Some of these issues have been further sub-divided in the account below. In discussing each of the issues identified we do not describe every circumstance of every case in full as this would make the report too long. Rather we provide illustrative examples to draw out similarities (and differences where they exist). It should also be noted that many of the issues identified were inter-related. With further time and resources we could carry out further analysis of these inter-relations and here we give some examples to indicate their nature.

7.1.8 All of the exiles interviewed have some contact with Maranatha and have retained some kind of link (though in some cases this has only been over a short period of time). Those who make their own way out of NI and/or where no contact is made subsequently with Maranatha are not represented here. Nor are those who have been helped by Maranatha initially but who later break off contact.

## 7.2 Routes into Exile

7.2.1 Our role was not to explore the full details of why and how people had been exiled. Nevertheless, the sequence of events that occurred at the time individuals and families left Northern Ireland differed greatly depending on a variety of factors such as the level of danger they were in, the support they received from agencies like BASE 2, Maranatha and the police, whether they had relatives or other contacts, or at least knew where they going before they arrived in GB, the date of exile and so on.

7.2.2 Of those we interviewed most had been forced to leave Northern Ireland in the last five years, some within the last few months, but some had been exiled for a much longer period.

<b>Exile</b>	<b>How long in exile?</b>	<b>Put out by?</b>	<b>Approximate age at time of exile</b>	<b>Background</b>
Daniel and family:	4.5 years	Loyalist Paramilitaries	42	Protestant
Jill			42	
Mark			22	
Hannah			13	
Peter	2.5 years	Loyalist Paramilitaries	35	Protestant
Elizabeth	1.5 years	Loyalist Paramilitaries	40's	Protestant
Rachel	32 years	Loyalists	21	Catholic
Robert and partner:	0.5 years	Loyalist Paramilitaries	40's	Protestant

Sarah			40's	
Matthew	8 years	Witness Protection Scheme	40,s	
Laura	4 years	Loyalist Paramilitaries / Witness Protection	30's	Protestant
Ben	0.5 years	Republican Paramilitaries	40's	Catholic

7.2.3 Of those exiles we interviewed most were Protestants and two were from a Catholic background. Of these two, one had left Northern Ireland in 1970 as a result of intimidation from loyalists. Thus, only one of our sample had been exiled by republicans. There has been a shift in recent years towards greater use of exiling out of Northern Ireland by loyalist rather than by republican paramilitaries but not to this extent and it would have been preferable had the balance been more equal. However, in Maranatha's view the experiences of the exiles who took part in the interviews were broadly representative of the experiences of exiles more generally.

7.2.4 Some had experienced intimidation for a considerable time before leaving. For example, Rachel reflected that:

*"1969 was...a year of intimidation for us...we were burnt out and stuff like that...eventually in September 1970 when they'd made several attempts to burn us in the house, er, we had no choice but to get out."*

7.2.5 One of 11 children, Rachel, then aged 21, had left Northern Ireland with her 14 year old brother to seek accommodation in England. After some time they found a flat over a pub and the rest of the family eventually followed.

7.2.6 More recently Elizabeth and her family had experienced intimidation during the year following the sudden enforced departure of her 21 year old son. The family had a brick thrown through their window, they received many threatening calls aimed at them and their son, and were under pressure from neighbours:

*"Certain people were living not too far from us...watching us and walking past my windows. It was all about Christmas time because they thought my son would be sneaking home for Christmas."*

- 7.2.7 As well as these pressures Elizabeth's son was desperately homesick and unhappy. She visited him a couple of times and was very concerned by what she found in terms of "the hovel" he was living in, his drinking and his state of mind. Underpinning this was the fear that he might return to NI and be killed. All of this provided a motivation for the whole family to leave NI, which did eventually become a necessity. A key factor in this case though, was that because her son had had some contact with Maranatha, Elizabeth had also come to know the Maranatha NI Project Leader and he was able to help the family plan their move and provide accommodation for them when they arrived.
- 7.2.8 Ben also came out with the support of Maranatha and BASE 2, which paid for his fare across to GB. He had been in hiding for several weeks before leaving.
- 7.2.9 Others have to leave more quickly. For example, Daniel and his family left within 36 hours of receiving a call threatening all of them as a consequence of their making a formal complaint about paramilitary members for assault and for attempting to pervert the course of justice by using intimidation to stop the prosecution. The police made it clear that they could not provide adequate protection in NI and advised that they should leave. Daniel had gone to FAIT (Families against Intimidation), which was then still in existence, to BASE 2 and to Maranatha. He had had contact with all of these on a previous occasion, which made things easier. It meant for example, that the family were provided with accommodation immediately as a result of the Maranatha contacts Daniel already had.
- 7.2.10 In contrast Peter made his own way to London. Though not a member of any organisation, he had been shot and seriously wounded and had been subject to further threats. The police told him it would be best if he left NI. They dropped him at the docks one morning where he got a ferry to Scotland and then took a train to London. He was on two crutches because of his injuries and had a couple of changes of clothing in a rucksack. It was his sister Tracey who contacted BASE 2 after Peter had left. She was then able to pass on a contact number for Maranatha to Peter. When asked why he had gone to London Peter said "*really and truthfully, I didn't know where to go*". He had no relations in GB and had spent his three days in London, before making contact with Maranatha, wandering the streets and drinking.
- 7.2.11 Mathew came out with a police escort through the witness protection programme.

## 7.3 Accommodation

- 7.3.1 One of the biggest initial hurdles facing most exiles is finding somewhere to live. In the case of those who make contact with Maranatha before leaving Northern Ireland, the NI Project Leader discusses with them whether there is the possibility of a move *within* the Province. He mentions the difficulties they will face in coming to GB and, as part of this, points out that having to live in temporary accommodation will not be a short-term “blip”, which is he thinks, what many exiles anticipate. Rather it is likely to last between two and ten months. This is one example of a conflict between the *expectations* of exiles moving to GB and the *reality* of what they find when they do move. In general available housing is of a higher standard and the arrangements made on behalf of those forced out of their home are better in NI than in GB and this is not always appreciated by exiles.
- 7.3.2 Assuming that some delay is possible, Maranatha does not encourage people to move right away but to wait until the case has been fully verified as genuine and contact has been made with the local authority housing office in the area where the exiles are planning to move to<sup>15</sup>. This contact allows the local authority’s housing policy in the area to be discovered and for checks to be made on how the policy is implemented and on the nature of accommodation that might be provided. It has been Maranatha’s experience that some housing offices are more helpful than others.
- 7.3.3 Assuming all goes well people are likely to move initially into a family hostel or a B&B. According to the Maranatha NI Project Leader this may well cause problems in that exiles may have left “beautiful” homes and, based on provision in NI, may expect a higher standard than they receive. For example, they may be sharing the building with alcoholics and drug addicts and crammed into a small space with few facilities e.g. a family room in a large city containing five beds, a fridge, and a washbasin.
- 7.3.4 While Maranatha always liaises with local authority housing offices and Registered Social Landlords (RSLs) and attempts to work in partnership, some exiles have been defined by the local authority housing office as “intentionally” homeless, or have had other obstacles put in their way. For example, one local authority refused a young woman on the grounds that they sought only to provide emergency accommodation for people in their area and that, since she was no longer in NI, she was no longer under threat so they had no duty of care. Only after pressure from Maranatha

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<sup>15</sup> The area chosen depends on whether the exiles have preferences or relatives in an area and on advice provided by Maranatha based on their experience; for example, that London is over-stretched and that rural areas are not suitable because the exiles tend to stand out.

did they relent. Most local authorities give only one offer once they have agreed to re-house someone and if it is refused move people down the list making it more likely that they will end up in hard-to-let houses or areas. Again Maranatha, as people who understand the system, can act as an advocate and may be involved in helping exiles with their case e.g. a woman with a small child who was put in a house with no inside toilet. The problem with seeking private accommodation is that a month's rent is needed in advance. All of these are issues well known to charities and others working with the homeless. From Maranatha's point of view there is a need to recognise the special circumstances of the exile's situation.

7.3.5 These circumstances will vary from case to case. In several cases we have come across, Maranatha volunteers have provided accommodation for exiles themselves. Perhaps the most extreme case of this is that experienced by Daniel and his family who are supported by Mary and Emma, members of the Maranatha Community. Mary and Emma are neighbours. Since the family's arrival, Mary has moved into Emma's house and the family have lived in Mary's house. Subsequently Mary and Emma have bought another dwelling in which they provide accommodation for Daniel's son Mark, having previously found and funded another flat for him.

7.3.6 Peter also came to rely on Maranatha volunteers. He had arrived in London, on crutches and knowing no-one. He stayed there for three days. During that time he spent one night in a doorway and another in a hostel. Once he had made contact with Maranatha he was found a place in a Salvation Army hostel. As someone who had left school at 15 to work on building sites Peter was not comfortable filling in the forms required by the hostel and was reliant on Maranatha for this. Within a week, during which he had made a brief return to Northern Ireland for the funeral of his father, Peter had a fall in which he broke his hip. After he left hospital the hostel could not take him back because they did not have facilities for disabled people. He says that he was effectively:

*"...put out on the streets...it's bad news if even the Salvation Army doesn't want to have you! Where do you go? There's nowhere else for you to go except to lie on a street corner!"*

7.3.7 It was at this point that he was taken in by Maranatha volunteers with whom he lived for several months. He says that without them he would have been lost even though he had felt very awkward staying in their home. He now lives in a privately rented flat/bed-sit but he had expected to be able to get a house with a garden with at least two bedrooms so that he could more easily put up relatives when they came to visit. He would like a house with a garden, somewhere where he can keep a dog. He has

made a claim for compensation for his injuries and hopes that this will make it possible for him to buy a house at some point.

7.3.8 Ben has also stayed with Maranatha volunteers, having had four moves before moving into his current temporary council bed-sit: *“without Maranatha I would have nowhere to go.”* BASE 2 had provided him with a letter about his status as a homeless person and had tried to get him into a hostel in GB but none would have him because of his medical record (he has a heart problem). Before the local authority was able to provide his current flat he stayed in a B&B for several weeks. It could be up to two years before he is provided with something permanent and it is only at that point that his wife will join him.

7.3.9 An important accommodation issue is that of furniture. As explained in section 5.3 there is a system for bringing furniture over. Ben knew nothing about this system but it had been used by Robert and Sarah, by Laura and by Daniel and family. In the latter case it had taken eight weeks before the furniture and the rest of their clothes had arrived.

7.3.10 After her son was attacked and badly hurt, Laura was advised by the police to leave Northern Ireland. She approached FAIT who told her that she could receive help from the NIHE and get her furniture put into storage:

*“In one day I had to go and give up my job, go and sign on Income Support and go up to the Housing Executive and prove that I was on Income Support before they would help me get my furniture put away.”*

*“With 2 girlfriends I had to go up in the middle of the night – pack away our furniture, put in the boxes, do that, go away in the early hours of the morning before people started getting up and that’s how I got my house packed up.”*

7.3.11 After many weeks living with her sister and with the help of Maranatha she and her children moved into a privately rented house. However, when her furniture was delivered, the family realised that one of the removal men delivering the furniture had also been one of those who had removed the furniture from their house in NI. In other words he knew who they were and thus their security was compromised:

*“The next day the furniture arrived. It wasn’t supposed to be by the company that took your furniture out but that’s just what happened to me. The kids drew to my attention that really we were in trouble, they were talking to one of the furniture removal men and he had been there taking the furniture out in... (Northern Ireland).”*

7.3.12 The family did remain in the house for some months before going on the witness protection scheme and moving again.

7.3.13 Robert and Sarah, with their children found that, to their surprise, they were turned down for council housing in the area they moved to. They found themselves an unfurnished privately rented two-bedroom house. Unusually they had come out of NI as part of a group and at one point there were many people camping out in their house. Before their furniture was delivered they had to sleep on the floor, buy a cooker and use a bath full of cold water to keep food fresh. It was two months before their furniture arrived due to a hold-up in Northern Ireland which was eventually sorted out by Maranatha. The grant of £1000 did not cover the full cost and they had to find the remaining £315. In some cases Maranatha have paid the balance of this expense for families who could not afford to pay themselves.

7.3.14 Returning to Laura, we have mentioned that she and her children were put on the witness protection scheme and were housed as part of this. After the Belfast Agreement however, they were dropped from the scheme and had to find their own accommodation, having been told there was a 10 year waiting list for a council house. Laura also sold her house in NI through the SPED scheme (see 5.3) though she did not get its full market value because of damage that had been done to the house by paramilitaries:

*“During that time they had tried to set it on fire, they had tried – they had stolen my heating – they had stolen my boiler out of it, they had broke windows. They had drained the central heating tank, the oil tank, they had come back at night for the tank.”*

7.3.15 In this section we have maintained a narrow focus on accommodation but it is important to point to several ways in which this issue links with others to be identified in later sections. To give just a few examples, there are links with:

- The need for support for many exiles in communicating with agencies like housing offices.
- The financial problems associated with housing issues.
- The effect of poor housing and over-crowding on family relations.
- The sense of dislocation from their community felt by exiles, etc.

## **7.4 Welfare Benefits and Finance**

7.4.1 Several issues emerged in discussion of finance and benefits.

### Delay

- 7.4.2 One key issue in the early stages of exile has been the delay in getting benefits sorted out. Maranatha and BASE 2 tell people that it might be up to six months before things are completely sorted out and several weeks before they get any money at all. Several of our interviewees had experienced delay. Daniel signed on when he arrived but it took several weeks for any benefit to come through even though, according to Mary and Emma, Daniel made great efforts to sort it all out. He did not understand why there was such a “terrible” delay:

*“They talked about two different systems, I said no it’s not it’s all the one but anyway, it took about seven weeks before we had any money, but luckily enough we had a bit of money at that time.”*

- 7.4.3 Child Benefit was delayed for over three months in the case of Robert and Sarah, though they were able to sort out Robert’s DLA (Disability Living Allowance) by having a relative collect the money in NI while they waited for the transfer to go through. Elizabeth’s husband did not have that option and it took some time for the transfer of the DLA to go through. It was a year after being shot that Peter was awarded DLA and only after considerable help from Maranatha who he relies on to fill in forms. Because Ben was in hiding in NI his benefit was cut because of his failure to keep in contact with the DSS. He has since appealed against this but has been waiting for six months for the appeal to be considered.

### Security of Information

- 7.4.4 Several exiles to whom we spoke expressed concerns about the security of their personal information in social security, medical and housing records.
- 7.4.5 Laura, who was on the witness protection programme after a breach of her security occurred, was told by the police that they would ensure access would be restricted to her details on the DSS computer system: *“that never happened”*. A DSS manager told her *“that it was ridiculous that my case was open for all to see”*.
- 7.4.6 Ben, who has severe health problems, is fearful of getting his medical records sent from Northern Ireland as he has heard about a case of paramilitaries accessing medical records.

### Communicating with Agencies

- 7.4.7 In the group session with Maranatha volunteers they stressed the importance of social skills in, among other things, facilitating interaction with agencies. Certainly, all the Maranatha volunteers we spoke to

mentioned having an involvement in smoothing the path of exiles in their contact with agencies. However, there are several aspects to this difficulty:

- Both exiles and volunteers spoke about the issue of *trust*. Not surprisingly, exiles do not always feel able to open up and explain their situation fully.
- Because of the nature of their situation, exiles are highly *stressed* and this can undermine their ability to cope with the situation, especially if they are also embarrassed, angry and feeling humiliated by their position.
- This may be especially the case given the lack of *privacy* at the benefits office.
- There may be problems because of a lack of shared expectations and understandings. For example, the welfare officer may have no understanding of the situation in NI and the circumstances which have led to the exile being there, while the exile may have inappropriate expectations about the level of benefits and resources on offer, based on a belief that these will be at the same level as in NI.

7.4.8 Elizabeth's income support was delayed for several weeks and her attempts to deal with this at the benefit office were unsuccessful:

*"It was all a bit of a rigmarole...we had to stand there at the counter with people behind us and they can't make us out talking ever (i.e. because of their accent) so you're shouting and that's even worse again when there's people there right behind you and you're trying to tell your business...we just didn't have the privacy."*

7.4.9 According to the Maranatha NI Project Leader, the lack of an accelerated system and the treatment of exiles as just like other clients reveals a lack of appreciation of the circumstances that have brought them to GB. A Maranatha volunteer who is a GP explained that there is a lack of understanding in all of the major agencies: *"I think we are particularly badly prepared for this group of people"*.

#### Work

7.4.10 For many people work provides not just a source of finance but also plays a part in giving them an identity, reinforces feelings of self-worth, provides occupation (in the sense of having something to do) and is a basis for social interaction outside of the family. In this light it is important that many of the exiles we interviewed were unable to work for medical or other reasons, even if they had had some employment in NI. In a context in which many other supports had also been removed from their lives this was a loss for a number of them.

7.4.11 For example, Peter had worked all his life on building sites but was having to become reconciled to the fact that he would never do this again due to his injuries. For this and other reasons, he had sunk very low and had seen no reason to leave his flat for long periods of time. Jill had worked part-time in NI but had not worked since coming to GB. She had struggled more with the fact that other members of her family had not been able to find work and, for the first six months or so, were:

*"...stuck in the house...it was getting me down more than anybody...my nerves were shocking...I just wasn't coping."*

7.4.12 Her husband Daniel and her son Mark *had* sought work but struggled to obtain employment. Daniel, who had worked for the local authority in the town in NI where he was from, was offered a job 50 miles away making sandwiches. He had no way of getting there and it paid less than what was to be the minimum wage. This was the best job he was offered and in the end, after receiving advice from a welfare benefits officer, he came to be registered as Jill's carer and gave up any idea of employment.

7.4.13 Mark, on the other hand, did eventually get a job but only after some difficulty and some intervention from Maranatha. In particular Mark wanted to continue a job which he had enjoyed in NI. For reasons that were baffling to the family and to the Maranatha volunteers involved with them, he was at first accepted and then turned down. It transpired that this was because he had received a reference from NI which had queried his attendance record but this did not acknowledge that this had been caused by the intimidation that he had faced and which had led eventually to his exile. After Maranatha intervened and got MPs involved Mark was offered a part-time post. In all it took six months for him to find work – time which as Mary and Emma put it, hung heavy on his hands.

#### *Budgeting*

7.4.14 Elizabeth told us of her struggle to cope financially in GB, a struggle which had left her feeling ashamed. In NI Elizabeth had managed her family's income and expenditure and there had no problems in coping. This had not been the case in GB however, and the family had got into significant debt. There were several reasons for this:

- Like many others from NI there were bills that she had not expected i.e. water rates and council tax.
- There were delays in sorting out DLA and Income Support.
- The level of DLA provided has been cut.

- Elizabeth made an error in filling in the form for Housing Benefit (she mistakenly included her son on the form), which meant that it was £120 per month lower than had been anticipated.
- Elizabeth had not fully understood all that was happening as the debt grew to £1200.
- A reduced ability to cope outside the familiar context of NI and in a situation of great stress.

7.4.15 When the family had taken on the house a guarantor had been required and a couple from the Maranatha Community had agreed to take on this role. After five months, to the embarrassment of Elizabeth, the landlord requested that the guarantors pay the rent deficit that had built up. The situation had caused stress within the family and conflict between Elizabeth and her husband:

*“At start I had too many things in my head to worry about money but when you start getting cut off...(and get threatened) with court and I’ve never been to court in my life...(it was) making my husband sick with worry about going to court.”*

7.4.16 Maranatha have responded to this by arranging support through a welfare rights adviser and by providing support on budgeting. The family have now repaid some of the money they owe the Maranatha members who acted as guarantors.

7.4.17 The ease with which people would accept financial help varied. For example Jill said:

*“It’s hard to (rely on) people when you’re not used to it...I don’t like...taking anything off them...we’re degraded...it’s hard when you’re not a sponging family.”*

7.4.18 On the other hand Michael, the Maranatha volunteer who was Elizabeth’s guarantor, spoke of a young family he and wife had supported who had large debts and had always spent their money by half way through the week. Michael and his wife tried to support them by giving meals rather than money for fear that the money would be wasted. Rachel, who was exiled as a 21 year old in 1970 and had to look after several younger sisters, expressed the view that people in the 1970’s were less dependent on benefits and were able to take on more personal responsibility for sorting themselves out. The Maranatha NI Project Leader agreed with this and considers that this is partly a consequence of paramilitary control reducing levels of personal control in some parts of NI.

## 7.5 Psychological Factors and Responses to Exile

- 7.5.1 Many exiles spoke of their shock at what had happened to them. For example Daniel said of his feelings in the first few weeks:

*"I don't know how to describe it...you were walking about...you didn't know what was happening."*

- 7.5.2 This sense was worsened when, after two or three months, telling him that the case against his son's attackers and those who tried to intimidate him was to be dropped:

*"I was stunned...I did think, you know, 'why did I do this?' Why give up all this and now walking the street...that was...a shock...I suppose for quite a while, maybe a year, you were sort of walking about in shock like."*

- 7.5.3 His wife Jill became tearful as she described the "unbelievable" shock of exile. Their son, Mark, could not describe his feelings – it was "just shock".

- 7.5.4 Peter has used the same phrase. He felt bewildered by the strangeness of his new surroundings and the difference between the big city and the small village he had spent most of his life in:

*"Just in shock...everything is so big, you're staring up at these buildings thinking to yourself 'where am I at?'...People are rushing, they seemed to be running."*

- 7.5.5 As outlined in Part 1 of this report, Post Traumatic Stress Disorder (PTSD) involves the development of a cluster of symptoms after the person has been exposed to "events that involved actual or threatened death or serious injury...to themselves or others" to which they responded with fear, helplessness or horror. We must stress that it is not our intention here to make diagnoses of PTSD or of any other psychological disorder; we are not in a position to do so. However, what is clear is that the circumstances of exiles are likely to produce PTSD in a number of them and extreme and/or long-lasting psychological distress in many of them. For many, while exile is in itself a shocking experience, it may follow lengthy periods of intimidation and of being anxious and fearful because of the conditions in which they lived in NI. Exiles may therefore be relatively vulnerable psychologically *before* they are exiled and thus less able to cope with the consequences of being uprooted in such traumatic circumstances.

- 7.5.6 Many of the exiles were or had been on medication for depression and/or anxiety. Some had seen a psychiatrist or community psychiatric nurse. In a number, but not all of the cases, the medication pre-dated leaving NI.

Elizabeth had been prescribed anti-depressants in NI. She didn't want to take them but recognised that she had to. Her husband's depression had deepened since coming to GB and he also was on medication.

- 7.5.7 Since coming to GB Peter has been using sleeping pills and anti-depressants. His sister Tracey, who has been subject to considerable intimidation herself since Peter left (including having her nose broken), is on tranquillisers and anti-depressants. She has thought about leaving NI but does not want to leave her mother and, in any case, she does not think she could afford to leave or that given Peter's experience, she would be able to obtain adequate accommodation for her and her child.
- 7.5.8 Robert's medication has changed several times. He has both tranquillising drugs to combat anxiety and several kinds of anti-depressants. However, during the interview it became clear that he was using them inappropriately. He complained that the anti-depressants did not have an immediate effect but he was not taking them regularly and he was using different drugs together. This issue was picked up by the Maranatha NI Project Leader but it illustrates the difficulty of communication between traumatised exiles and busy professionals.
- 7.5.9 Matthew had appeared as a witness in a trial and subsequently was referred to a psychiatrist because of his fear, his inability to sleep and the stress he was under. He was prescribed anti-depressants. It was noted that during his interview he could not relax or sit still but was jumping up and down and moving about.
- 7.5.10 Some spoke about having had a "nervous breakdown" or having to deal with the consequences of such a breakdown in other members of their family. In some cases (e.g. Laura's son) this had led to attempted suicide on two occasions, while several others had suicidal thoughts. He has been receiving treatment for PTSD at a specialist clinic. Peter told how he's just stayed in his flat "drinking and drinking" and had thought of killing himself a few times but he had thought that would be "just doing the job for them" i.e. those who had shot him. One of Daniel and Jill's daughters (not Hannah) self-harmed and while her problems pre-dated their leaving NI it was an added source of stress for the family.
- 7.5.11 A pattern of withdrawal, social isolation, depression, difficulty in sleeping, persistently thinking over events, anger and excessive alcohol consumption was reported by several interviewees. For example, Peter was angry when he arrived and this has remained with him:

*"I was very angry with everyone...(if people tried to talk) I told them, I don't want to talk...And I was very angry and sometimes, even yet, when the*

*thoughts get too bad I would get very upset but now that I'm slowly starting to walk a bit better...I get scared at times because I think to myself maybe you will hurt someone over here and end up lying in jail...I'm trying to speak to these psychiatrists about it."*

- 7.5.12 Withdrawal and depression followed. For prolonged periods he said he felt overwhelmed by everything that happened:

*"I get into a really that bad a way when I get into the flat. I get into a real bad way that I just er just closed myself off from the rest of the world, never left the flat, just sat there...for 18 months calling taxis and the taxi would come to the door and I just says 'go down and get me 12 bottles of whisky and bring them up, 12 bottles of vodka' and I just sat there in my flat the whole time and never left. And er, I nearly killed myself a few times but then I says 'no why should I?' that would just be doing the job for them."*

- 7.5.13 At various times he had strong desires for revenge but considered that his family would be very badly affected if he did go back to NI since they would become even more of a target. His family were protecting his feelings by not telling him of the extent of the intimidation they were facing. For example, Tracey did not tell Peter of her broken nose out of concern for the effect it would have on him.

- 7.5.14 Rachel had had to look after her younger brothers and sisters while living in poverty in the 1970's. Both her mother and father had breakdowns and were unable to cope:

*"Our first 2 years of living in England, well, er...were bad. We had no beds to sleep on – we slept on the floor. There was no provision from social services or any agencies. That was the position for two years. At that time my mother had a very young family and she had a nervous breakdown and...so I was left more or less to care for the family...My father had a nervous breakdown because of all this...We had to flee because of our tradition that we came from...we lived in a mixed street...we got out with our lives but more or less everything else was destroyed."*

- 7.5.15 The effects can be long-lasting. Rachel spoke of her initial denial that she had been affected and her later realisation of the impact her experiences had had on her:

*"You go on through life thinking that things are OK and you bury things...but only in the late 70's when I started returning to the province to see family...only then did I realise how affected I've been by what had happened....very fearful, always scared of being killed, there's a fear of being shot or a bomb under the car...A fear of going into certain parts...that's still there. Life goes on and...you feel you cope."*

- 7.5.16 She is still affected by the events of over 30 years ago though she said that she can handle the fear. As a Maranatha Community member it took her a long time to get over her fear of exiles. Very recently she has gone back to live in NI on a trial basis, but she has installed security features in her house, she will not drive at night or go into certain parts of the city and had left during the “marching season” because of her residual fear. Rachel pointed out that if she was still affected after all this time, what can we expect of people who have been forced out of NI more recently?
- 7.5.17 Denial of reality was reported by Robert and Sarah, who both said that it had felt like they were on holiday in the first week or so when they had been staying in a hotel, and that keeping busy sorting things out had helped in the early weeks. It had become harder as things had settled down and reality had bit but even after several months there was a feeling of unreality:
- “Even now reality’s not really there.” (Robert)*
- “It hasn’t really kicked in.” (Sarah)*
- 7.5.18 Problems with sleeping and with dreams were mentioned by some exiles and by volunteers in discussing cases. Anna described the case of a man who had successfully managed a farm in NI but who developed complex mental health problems in GB. Because he had been attacked a couple of times during the night, night-times were very difficult for him. To begin with he stayed with members of the Maranatha Community but he was not able to stay in the house overnight and he would go into the city and try and be anonymous, wandering, keeping a low profile. He could not sleep during the day either and eventually became paranoid about the people he was staying with and had to go into a hostel.
- 7.5.19 Laura reported that both she and her son had trouble sleeping:
- “There are days he won’t sleep for days on end, same as me, I haven’t slept a full night’s sleep since (four years ago), sometimes I fall asleep in the morning because the night’s over, that just won’t go away, it’s just part of life now.”*
- 7.5.20 Rachel said that she had met with many exiles who could not sleep because of their dreams and Peter reported that his dreams of vengeance were so violent he could not even begin to describe them.
- 7.5.21 Anna identified several common characteristics of those exiles she has met both in her role as a counsellor and more generally as a member of the Maranatha Community:

- Hiding behind a “smokescreen of words” because of a fear of:
  - Allowing people too close.
  - Acknowledging “the reality of what’s happened”.
- Alcohol problems.
- Suspicion.
- Fear.
- A difficulty in maintaining relationships.
- Superficial relationships.
- Poor attendance at appointments.
- Disturbed sleep.

7.5.22 Some of these are illustrated and discussed in other sections as well as in this section. The inter-linking of different kinds of issues is vital to understanding the problems. For example, Mark’s response to exile had been to become very withdrawn. His father Daniel, described him as “lost”. He missed his friends and the way of life he had been part of in NI. This withdrawal left him alone with his thoughts as did his failure to gain employment. He became depressed which reinforced his isolation and affected his ability to form relationships with others. Because he was not forming relationships over here he went over things in his mind, which made him more upset and angry as did news from NI, especially when it involved hearing about punishment beatings of his friends. His depression led to drinking and to taking time off work when he did eventually get a job.

## **7.6 Medical Issues**

7.6.1 The group of exiles interviewed and their families in GB had a variety of health problems. These ranged from chronic diseases such as diabetes, kidney failure, various forms of heart disease, dementia and epilepsy through physical injuries caused by shooting in one case or a near-fatal road accident in another, to a range of psychological ailments such as depression, anxiety and an inability to sleep, as described in the previous section. In this section we focus mainly on physical disorders.

7.6.2 Whether the various ailments were a cause or a consequence of exiling or were unrelated to it, was difficult to establish in many cases. In some it seems likely that exiling has had a detrimental effect on pre-existing illness but it is hard to tell. For example, one of Michael’s exiled patients “smokes like a chimney”, has neglected his diabetes, is severely depressed and watches TV all day. Michael was of the view that this patient’s health

has deteriorated as a consequence of being in exile and the stresses associated with that but could not be certain since he did not know him before he left NI. This was another case in which the discrepancy between *expectations* and *reality* emerged in that the patient expected to be taken into hospital when his blood sugar levels destabilised as he would have been in NI. Resources where he lives now made that impossible.

7.6.3 Laura's son suffers from epilepsy that has deteriorated since moving from NI.

7.6.4 When he had to leave NI, Ben was waiting for an appointment with a consultant about his heart problem and because he left he missed the appointment. Thus his treatment has been delayed and he did not know when he will get another appointment. In any case, he was nervous about this due to his concern that medical records are not secure.

7.6.5 Several Maranatha members involved with exiles are doctors or from a related field, and their expertise has been invaluable to the NI Project Leader. For example, even getting registered on the list of a GP can be a problem for exiles because many have closed lists and applications have to be made through the local Primary Care Trust (PCT). However, because of the high level of trauma and other needs associated with exiles (e.g. gunshot wounds), Maranatha try to arrange for registration with a GP who has more "sensitivity" to these needs and is more knowledgeable about NI. In cases where an exile becomes registered with a Maranatha GP then there is a need for great care over professional boundaries.

7.6.6 In her support for Daniel and Jill and family, Mary arranged for them to be registered with her own GP, who, with the family's permission, she "put in the picture" about the family. This was important as Jill would not open up to anyone and the family would generally say they were fine:

*"When they first came they were so shocked and so afraid they weren't giving the picture to anyone."*

7.6.7 The issue of communication with medical staff was also raised by Anna, a Maranatha volunteer who is a professional counsellor who works at a GP surgery. She pointed to the problem that:

*"GPs find it very difficult – they only give two or five minute slots...so I felt that I was like a link person, working and keeping in contact with the GP and with the mental health services and the social worker."*

7.6.8 Michael pointed to the further difficulty that the problem of exiling has not appeared much in the mainstream press or other media and generally GPs have little understanding of the NI situation or the circumstances of those

who are exiled. The information provided to GPs about new patients may not be very informative in this respect and he pointed to the need for better communication between agencies in NI and in GB.

- 7.6.9 Peter's father was taken into hospital with chest pains just a few days after Peter left and died soon after. According to Tracey, Peter's sister, her father, who was only in his 50's, died as a result of the stress related to what had happened to Peter. During his illness his mind was wandering and he was talking about Peter all the time. Matthew's brother had a terminal illness in NI. Matthew was very resentful that the local doctor would not support extra services for his brother to come to England to die. He did go to NI to see his brother before he died.

## **7.7 Families and Exile**

- 7.7.1 There are three main aspects of exile relating to families that emerged from the interviews. One concerns the particular issues of children in families who are exiled including education. Another concerns relationships within the family and the strain these can be put under. The third relates to family left behind in NI.

- 7.7.2 Several problems have arisen in relation to schools and education of children. One is simply getting children into schools at all, or into a school of choice. Another is the particular issues facing those who were close to exams like GCSEs at the time of exile, given that the systems in NI and in GB are not identical. Lastly there is the difficulty for the young person of fitting in and making friends at a time when they may be very traumatised.

- 7.7.3 Hannah was 13 when she came over. Her family were helped greatly in sorting out a school by the fact that Mary, the Maranatha volunteer, had been a school head and she had taken them to see schools and eased access. Hannah said that she had done much of the work her classmates were doing because the education system in NI is "better" and she "had to wait on everyone to catch up". The main problem she faced was that she simply did not want to be in the school but wanted to be at home in NI. Jill reported that:

*"For a long time (about a year) she (Hannah) didn't know anyone, she was coming home every night and she was crying and she didn't want to go to school."*

- 7.7.4 Hannah said that she had understood the necessity for leaving but she had "hated" being here.

- 7.7.5 Maranatha helped several families with their school arrangements by speaking to schools and sometimes arranging places.
- 7.7.6 Disruption to schooling was mentioned by several parents who were interviewed. Elizabeth's daughter had been due to take her GCSE's six months after arrival in GB but because of the problems of timing, different boards and levels etc the school had advised deferment. So she had not attended school for nine months and had thus lost a year. One of Robert and Sarah's daughters was also missing school because they wanted two of them to attend the same school and this was proving difficult to arrange. Laura reported that her children's schooling had slipped because of the several moves they had been forced to make. Nevertheless they eventually each achieved 9 GCSEs.
- 7.7.7 Obviously, missing school like this has a negative effect on the children's abilities to make friends in GB and they continued to rely on their friends in NI. For example, Elizabeth's daughter:
- "Just used to sit up in her bedroom...the only thing that maybe helped her a wee bit was the 'phone...(we were) cut off three times because of the bill...but most of her friends would have mobiles...her wee way of...talking to someone...back home...it kept her sane."*
- 7.7.8 Issues of resentment and blame, of guilt, conflict and separation appeared in many interviews. Jill said that the effects on her family had been:
- "Very bad...I have two sons...you know...they would sit and cry...and one is 27...he would sit in the lounge and cry and feel guilty but it's not his fault...just because he wouldn't join their organisation."*
- 7.7.9 Robert and Sarah have several children but some have remained in or gone back to NI. One has gone back to NI. He is *"an angry wee boy (who is) cut to pieces inside."* He has had heated arguments with Sarah and Robert as he blames them for having to leave.
- 7.7.10 Elizabeth's husband sometimes has said that he doesn't want to be in GB and this has caused rows when he has blamed their son for them having to leave, leaving Elizabeth in the middle. Elizabeth's daughter has also expressed similar views, blaming her brother as the source of her unhappiness.
- 7.7.11 Elizabeth said also that she has *"lost"* her small grandchild since her son's partner veers between wanting to be in GB with him and back home in NI with her family:

*“One minute she thinks she wants to stay and then the next minute she wants to go back home to her family, and you can’t blame her you know what I mean because she’s got a close family and they’re very very close. To give it all up too would be hard for her.”*

7.7.12 Ben’s wife and child are still in NI. They would not come over, though his wife will join him when he has permanent accommodation. Meanwhile, he reported that he speaks to his son twice daily on the ‘phone. Robert was worried about never seeing his parents again.

7.7.13 Tracey gave the perspective of those left behind in NI. She spoke of how when Peter had left:

*“My Ma just cried all the time, then me Da died...”*

7.7.14 Tracey feels she has to be strong for her mother, though she herself has been beaten up twice. Peter’s grandmother also misses him badly but she has cancer and it is difficult for her to stay with him.

7.7.15 In the interviews there was a suggestion that women have played a key role in helping their families cope with exile. Tracey’s position, that she had to hold everything together for her family, was also echoed in interviews with Jill and Elizabeth, and with those Maranatha volunteers who supported their families. Although Jill has problems of her own, she was described by a volunteer as the “kingpin” of her family - the person who took on everybody’s troubles and held the family together. Similarly Elizabeth agreed with Maranatha volunteers that she has taken on the main responsibilities in her family for keeping it together:

*“My husband doesn’t really take any responsibility. I don’t think he really can, you know, with his health.”*

7.7.16 Visits from relatives (and friends) had been important for a number of those interviewed but they could be a source of problems as well as being valued. Peter has had several visits from relatives. They have not been able to come very often and the size of his one-bed roomed flat means that not many can come at any one time. While he has welcomed these visits, visits from other relatives have caused him some distress as they have brought their own problems with them from NI and this has reawakened his own.

7.7.17 Michael said that his experience was that visits from friends and relatives often tend to cause distress, especially in the early days. Elizabeth said:

*“Sometimes you think you’re coping and everything’s OK but maybe the least wee thing and you’re...just set back again...when the family come over it takes a while to get over it.”*

- 7.7.18 Some exiles had been able to make brief visits to NI, though in many cases this had been to attend funerals. Mark’s visits had been very valuable to him, despite the danger. He said that he goes “in secret” and avoids certain people and places, that to him it is going home and that it is good to see “friendly faces”. In contrast, one of Robert and Sarah’s children had been harassed and threatened while on a visit back and had quickly left again.
- 7.7.19 Anniversaries and holidays like Christmas were said by some interviewees to be particularly difficult times to be separated from family.
- 7.7.20 Several exiles had been bereaved while in exile as a consequence of the deaths of relatives in NI. The loss of relatives in Northern Ireland and bereavement has been a very difficult for exiles to deal with as some have either not been able to return to see a dying father (Laura) or have been whisked in and out of funerals by the police without the opportunity to talk to relatives (Matthew).

## **7.8 Social Factors**

- 7.8.1 Rachel, the Maranatha volunteer, reported taking one young male exile to a social security office and:

*“How he was spoken to was just absolutely appalling...he was just made to feel like a lump of dirt...he was so upset in the end, he just left because they wouldn’t even listen to him. And he walked out of the door and he said ‘It’s just because I’m Irish. I’m nothing’.”*

- 7.8.2 This statement reflects a number of social issues that arose in the course of the interviews:

- Prejudice and discrimination against exiles.
- Cultural identity.
- Feelings of injustice.

- 7.8.3 Rachel argued that prejudice is worse for younger exiles because:

*“They are looked on as terrorists and they’re not all terrorists...the innocent ones who will take a stand (against the paramilitaries) and just have to get on the boat and go.”*

7.8.4 Jill reported that her sister-in-law had put them off living on a housing estate in England because of the prejudice she had experienced.

7.8.5 Rachel herself as an exile had found that people in GB were much less friendly than she had been used to and she linked this to prejudice against the Irish:

*“When you’re Irish, people just don’t want to know.”*

7.8.6 However, Daniel just thought that English people were less friendly and open than in NI. This had been strange to start with.

*“It’s hard for me saying that – I would call myself a Brit but it’s just...it was a bit strange, we had err, the people weren’t as friendly and open – and they’re still not of course – as they would be at home although I have made a lot of friends now...it’s different at home...England is a bigger country.”*

7.8.7 Elizabeth also pointed to this difference. Despite the social contact afforded by attending church, she misses the community and social life in NI and has found that:

*“There’s lots of closed doors over here...this is very hard...it’s a completely different way of living.”*

7.8.8 A number of exiles have found the church to be a source of solace and of social contact and have rediscovered their faith since coming to Great Britain.

7.8.9 Mark agreed that it is a different way of life especially in terms of size. He described NI as being like a big village where everybody knows everybody unlike England where everybody kept themselves to themselves and it was harder to get to know people.

7.8.10 Cultural differences were also experienced, as there is an ignorance of Northern Ireland and the distinctions, which are so important there. Mark said he was often thought of as Irish, which did not worry him except when “stupid” people held stereotypes. He had got into an argument after being “lumped” together with loyalist paramilitaries. His father had found it “totally alien” to find Irish flags and football shirts on display in GB and strange to be considered Irish himself.

7.8.11 The exiles considered Northern Ireland their home, and most would want to return there should it be possible, even though they often reported feeling safer in GB. In Daniel and Jill’s family only Daniel expressed anything other than a strong desire to return. They strongly agreed that they were exiles. For example, Jill said:

*"It's (GB) still a strange place...It's a nice place...but...it's somewhere to put your head...it's not home...(if circumstances changed)...I'd go home now".*

*"Well, you're not worried in the way you were worried back home that someone would be kicking your door in...or someone there with a baseball bat...so you do have more control over life...English people must think we're mad, you know, wanting to go home to that..."*

7.8.12 Mark said that he missed everything about home. He particularly feels the loss of his involvement with the marching band he used to belong to. He has developed a website as a means of keeping in contact with this aspect of his life in NI.

7.8.13 According to the Maranatha NI Project Leader some Catholic exiles are able to attend their local Irish Centre and this gives them a link with home. This is not open to all Catholics because of their fear and nor is it generally open to Protestants.

7.8.14 Many exiles keep in close contact with events in NI, not just through their links with people still living there but also through the media. Satellite television helps with this. For example, Daniel said "I never miss a news bulletin from NI" and the NI news channel was running in the background throughout the interview with Robert and Sarah.

7.8.15 Many exiles are angry. They said they were angry with those who had forced them from their home; they were angry with the government for allowing it to happen; they were angry with the government for not acknowledging that there existed any problem of exiling from NI; and they were angry because of the lack of state support they had received as exiles. There was a common perception of injustice and a feeling that no-one cared or even noticed their existence. Several commented that refugees and asylum seekers from other states received much more help than they, as refugees within their own country, received. Daniel expressed this most clearly and in a way which clearly ties these responses to the needs of the 'Troubles' more generally:

*"I have nothing against them (asylum seekers) – but it seems that the British Government is helping them more (than exiles from NI)...You know if you're an asylum seeker trying to get away from a country where you're in danger you're seen nearly right away, well you have to be seen...there's so many people who've had to leave NI for exactly the same reasons and the British Government is turning a blind eye to it."*

*"It's as if I don't exist to the British Government... you know it doesn't matter about the victims."*

## 7.9 Coping and Not Coping

7.9.1 When asked about differences between those exiles that have coped well and those that have coped less well, Anna, a volunteer, replied:

*"I haven't had any experience of seeing people who've coped well."*

7.9.2 Rachel agreed:

*"They don't have any coping mechanisms at all. The only coping mechanism they have is...booze, most of them smoke, some take illicit drugs...Most are on some form of medication...(anti-depressants, sleeping tablets)...they can't sleep because of their dreams...they have just lost their way, they've been booted out of their own home, they come here, they are totally on their own, they hit the bottle...they can see no way out. For them their world has ended. And again they feel, sometimes, that their country has let them down as well...their world collapses...they are just devastated."*

*"I haven't known a family who have just come here and lived their life."*

7.9.3 Michael and Rachel agreed that Elizabeth had coped well compared to most yet she had run into major financial problems and had needed a good deal of support from Maranatha. She had demonstrated perseverance and motivation to deal with the problems her family faced. The family had stayed together and had somewhere to live. Other families were more dysfunctional to start with and less able to cope. Michael made the point that an exile "is unlikely to be an accountant earning £80,000 a year" but is more likely to come from a deprived area where the paramilitaries have control.

7.9.4 We have already given examples (e.g. Peter and Mark) of increased drinking of alcohol among exiles. This "drowning of sorrows" is a common response as Rachel pointed out but its powers to make people feel better are temporary and limited. Daniel and Jill's sons had both been in trouble with the law after drinking bouts. While still on crutches, Peter had fallen over while drunk and broken his hip. Tracey had worried greatly about the extent of Peter's drinking.

7.9.5 Most exiles we interviewed spoke extremely highly of the support they had received from Maranatha and contrasted it with what they perceived as a complete lack of support from elsewhere. It was clear from the interviews that some members of the Maranatha Community show extraordinary commitment to the exiles they come into contact with, providing support in a variety of ways and giving much of themselves.

7.9.6 Maranatha is a Christian organisation and, although it does not set out to proselytise, it is perhaps not surprising that some exiles become Christians or rediscover their faith as a result of their involvement with Maranatha. For example, Peter said that he had gone as low as he could go before finding his faith and beginning a slow path to recovery. Even in these circumstances it is very hard to leave the past behind. One exile Anna had been involved with became a Christian and had gone away for a weekend with Maranatha to an English seaside resort. During the weekend he had found it impossible to sit still for any length of time but had been “up and down” and “in and out” of the room. From a Protestant background he had become particularly anxious when the group had attended a service at a local Catholic church. He had become:

*“Absolutely filled with fear because he thought there would be people there in that church who would know him and this information would get back to NI.”*

7.9.7 Daniel has coped through meeting people locally and getting involved with others through his hobby and through following an ‘A’ level class. His serious accident has also affected his outlook on life in GB:

*“The hospital in England saved my life so part of me is here now because I’ll never forget what they done for me...I’ve met a lot of friends from my accident.”*

7.9.8 Both Michael and the Maranatha NI Project Leader mentioned a common theme of people starting off with intentions of responding positively to their exile by changing their way of life and building a better future. Sadly, most of these good intentions do not last or are undermined by a lack of personal resources. It is a challenge to make such fundamental changes and many exiles, especially the younger ones, do not persevere with the attempt. Thus they may start courses but not continue with them; they may intend to stop taking drugs (prescription or illicit) or drinking but not be able to resist, and so on. Rather than being able to take control of their lives they may “lurch from crisis to crisis”.

## **7.10 Support Needed and Provided**

7.10.1 The NI Project Leader said that Maranatha has to “fight” for people since there is no other support available. Most exiles we interviewed spoke extremely highly of the support they had received from Maranatha and contrasted it with what they perceived as a complete lack of support from elsewhere.

7.10.2 Peter said he would be dead if it had not been for Maranatha. Jill said that Emma and Mary were:

*"...like two mothers to me...I don't know honestly what we would have done without them as regards getting somewhere to live, getting her into school..."*

7.10.3 Elizabeth also said she did not "know what people would do without them." They had provided a "welcome to make you feel at home" and had been accepting and "not made you feel like a bad person." They had given information and advice. Exiles "need to know they will still be there for you" and will not disappear once the initial period is over but can still call them. Maranatha volunteers had given "unbelievable trusting generosity" and without them Elizabeth and her family would not have coped in GB.

7.10.4 For Sarah, the NI Project Leader has provided:

*"A shoulder to cry on...Everything we've needed...He's been like a best friend, he's never judged us, he made that clear from the beginning – he's taken us at face value, we have his house number...his mobile number...his work number...he has been there 24/7...he's listened...taken the pressure off ...Basically I don't think we would be much further on if he hadn't been there... (and) would have blown a fuse if he hadn't been there."*

7.10.5 For Laura the NI Project Leader:

*"...should be nominated for the highest award you can get."*

7.10.6 It was clear from the interviews that some members of the Maranatha Community show extraordinary commitment to the exiles they come into contact with, providing support in a variety of ways and giving much of themselves. The support we came across was varied. Examples include:

- Providing transport.
- Financial assistance.
- Helping to sort out:
  - benefits
  - housing
  - schools
  - furniture removal
  - registration with GPs and dentists.
- Befriending and providing a listening ear.
- Aiding communication with agencies.

- Acting as a go-between between agencies and linking to specialist services.
- Being readily available at all hours of the day.
- Helping people to get jobs, apply for courses etc.
- Providing on-going support for problems relating to budgeting, drug abuse and so on.
- Having exiles stay in their homes.

7.10.7 Many other examples can be given. The point is that the Maranatha Community is putting a great deal into supporting those exiles they come into contact with. However, as Daniel said, those exiles which Maranatha have contact with are just a proportion of those who come over to GB:

*"I'm pretty sure...a lot of people...(who) didn't know about them (Maranatha)...they must have major problems."*

7.10.8 Furthermore Maranatha's resources are stretched and there is a great deal of reliance on the NI Project Leader. The demand on him and on the volunteers involved can be very great. The Haven Project will help with this and will formalise some links which to date have remained informal. However, having a centre will also raise new concerns about security.

7.10.9 If adequate services are to be developed outside what Maranatha can provide then, for Michael, the starting point has to be acknowledgement and recognition of the problem of exiling:

*"If there is a Peace Process there shouldn't be exiles, but because there is a Peace Process we can't accept that there is a problem..."*

7.10.10 All we spoke to were agreed that, alongside this recognition, was the need for greater understanding on behalf of welfare agencies of the NI context, of the lives that exiles had been living in NI and of the difficulties they face in coping with their move to GB. While exiles may share characteristics with many other people who need support from welfare agencies there are also key differences relating to their experience and the context of NI. For example, as the Maranatha NI Project Leader put it:

*"So what I'm saying is...there is a difference, right, and the difference is (to do) with structures...these people are ripped out of their community where there are support mechanisms and are put into this society where there are no obvious support mechanisms."*

7.10.11 Anna and Rachel both pointed to the key issue of trust. Exiles are likely to be suspicious and very careful about what they say and to whom

they say it but they do need to find people they can trust. The extent to which they are in danger will vary but there will always be this issue of finding it difficult to trust others. There are several implications of this for services.

7.10.12 The difficulties for exiles in explaining their situation fully to agency representatives, coupled with a lack of understanding on the part of these representatives, can lead to a clash of expectations, misunderstandings, conflict, anger, and a further loss of trust, as well as to people's failure to receive what they are entitled to. When discussions cannot be held with any privacy this can be a particular problem.

7.10.13 Even the work of those providing practical help can be undermined by this lack of trust. For example, we were told of one case in which home helps had provided a great deal of support to an individual who had eventually told them not to come because of his lack of trust.

7.10.14 Self-help and mutual support groups is a feature of many groups of people in difficult and/or traumatic circumstances. The Legacy Project has plans to set up such groups for other victims of the 'Troubles' and some exiles would appreciate such opportunity for interaction with some others in similar circumstances. For example, Jill said "that would be lovely" when asked about this possibility. However, there are major difficulties associated with the kind of activity with exiles because of the potential dangers such contact might involve and because of the fear that it might engender even in the absence of any real danger.

7.10.15 Busy professionals such as GPs tend not to be able to devote a great deal of time to any one person. Again this, together with an ignorance of the NI context and the situation of exiles, can lead to a poorer service than is ideal. Michael, who is a GP, pointed out that there are now "salary GPs" that have some special responsibilities for asylum seekers and he wondered whether this model could be extended to exiles and other "needy" groups.

7.10.16 While counselling or other therapeutic intervention by psychologists or psychiatrists may not be appropriate for all exiles or even acceptable to them, it is potentially helpful in many cases. Quite apart from the problems of obtaining appointments in the first place, Anna identified key obstacles to the success of such intervention:

- One is the difficulty of doing an assessment. She believes that this follows from the difficulty many exiles have in disclosing to others because of their lack of trust; their tendency to hide behind a "smokescreen of words"; and the lack of understanding of most professionals of the NI context.

- A second is the relative unreliability of exiles in attending appointments and their need for support to improve attendance.
- The third is the current emphasis on brief intervention. In her view this is inappropriate given the complexity of the circumstances for exiles with mental health problems and the lack of openness and attendance problems mentioned.

7.10.17 Just to build enough trust to do a proper assessment might take more time than would normally be allocated for intervention. Regel & Healey (2003) have identified the complex nature of the responses to living through the 'Troubles' in NI and to the potential enormity of the therapeutic challenge. From their point of view also, intervention requires an understanding of the context on the part of the therapist and success is unlikely to be achieved quickly.

7.10.18 Regel & Healey also consider that early intervention is crucial but this is difficult to set up for exiles, even if they would agree to see someone. Mark had found it helpful to talk to an occupational health officer but he said that, in retrospect, it would have been useful to speak to someone else earlier.

## 8 Conclusions and Recommendations

### 8.1 Our Approach to the Study

8.1.1 The Legacy Project commissioned the Holden McAllister Partnership to undertake an independent needs analysis of exiles, which would identify gaps in provision and advise on the options for the forward strategy for the Legacy Project and other coping agencies including Maranatha, and to point to ways agencies might address the needs identified.

8.1.2 After an initial period of familiarisation and desk research, the work undertaken by the Holden McAllister Partnership was carried out in stages, as follows:

- Interviews with the VLU, Northern Ireland Housing Executive, BASE 2, PSNI, Maranatha and Professor Liam Kennedy to establish the nature of, the response to, and provision for those intimidated out of their homes by paramilitary organisations and being forced to leave Northern Ireland.
- Group discussion and consultation day with Maranatha volunteers, who had direct experience of working with one or more exiles and their families, focusing on their common experiences in supporting and meeting the needs of exiles.
- Interviews with exiles and, where appropriate, the Maranatha volunteers working with those individuals and families. Maranatha volunteers were also interviewed about their broader work with other exiles.
- Consultation with other relevant agencies and professionals.

### 8.2 Definition and the Scope of the Problem

8.2.1 The definition of an 'exile' adopted for the purposes of this study is that:

*"An exile is an individual or a family who have been intimidated by a paramilitary organisation through the use of force, threats or menaces, into leaving Northern Ireland."*

8.2.2 The practice of exiling individuals and families from Northern Ireland is part of a wider 'tariff' system of informal justice and 'punishments' adopted by both republican and loyalist paramilitary organisations. The 'tariff' ranges from warnings, threats, curfew, fines or restitution, placarding, tarring and feathering, beatings, shootings, to exiling and ultimately execution. The relationship between 'punishment' beatings, shootings and forcing people into exile is far from being the linear one that

the notion of a 'tariff' might suggest. Some of the exiles we have interviewed for this study have been subject to 'punishment' beatings as well as being exiled and others who have been exiled have also been shot and left for dead. All of the exiles interviewed for this study are from working class backgrounds, sometimes extremely deprived ones.

8.2.3 There are seven main ways of categorising people who have been forced into exile by paramilitary organisations:

- Victims of sectarian intimidation – who are attacked because of their perceived religious or political beliefs.
- Victims of paramilitary feuds – who are attacked by members of their own community because they are seen as being associated with or supporting a different paramilitary faction.
- Those who have disputes with paramilitaries – people who have stood up to paramilitary threats or spoken out against their activities.
- Alleged criminals – those whom the paramilitaries allege are guilty of petty crime, drug dealing or 'anti-social behaviour'.
- Individuals who have broken the rules of paramilitary organisations by providing information to the British and Irish security services or who have acted as witnesses in criminal prosecutions of alleged paramilitaries.
- Those who have otherwise fallen foul of leading members of these organisations or their family members.
- The family members (and extended family members) of the individuals concerned in each of the above categories.

8.2.4 The Northern Ireland Housing Executive (NIHE) gave the following figures to the Northern Ireland Affairs Select Committee for individuals forced to leave their homes in Northern Ireland, including individuals who may have left Northern Ireland as a result of intimidation without seeking NIHE assistance:

<b>Year</b>	<b>1997-98</b>	<b>1998-99</b>	<b>1999-2000</b>
Belfast area	157	62	117
Northern Ireland	330	106	190

8.2.5 The Northern Ireland Association for the Care and Resettlement of Offenders (NIACRO), which runs a crisis intervention service for individuals who are under paramilitary threat through a project known as BASE 2, provided the Select Committee with the numbers presented to BASE 2 who were subsequently relocated:

Year	1995	1996	1997	1998	1999	2000
Relocated outside NI	55	126	81	88	57	45
Relocated within NI	76	128	198	247	199	278
Total	131	254	279	335	256	323

- 8.2.6 Whilst some individuals will have come through BASE 2 and the Housing Executive (and thus may be double counted in these figures), many go to only one of these agencies and a significant (but unquantifiable) number will have gone into exile without contacting either of them.
- 8.2.7 Latest figures show that 904 of the clients who came to BASE 2 in 2002 did so under alleged threat of exile, 110 others have received specific threats of shootings or beatings and 54 others received death threats. Of those threatened with exile, 60 actually left the country and went into exile.
- 8.2.8 Maranatha estimates the number of expulsions to Great Britain at around **four per month**, although there are also other family members who follow subsequently, and some which only come to light retrospectively. Maranatha suggested that it had seen a change in the nature of expulsions from Northern Ireland since 1994: there was now an increasing tendency to expel whole families, rather than individuals. It receives only a small proportion of its referrals from BASE 2 and the Housing Executive. Church leaders refer other exiles to them and many exiles will self-refer having already arrived in Great Britain.

### 8.3 Exiles and Human Rights

- 8.3.1 As the recent report of the Northern Ireland Human Rights Commission, 'Human Rights and Victims of Violence' acknowledges: "There is a good deal of consensus in international law about the general definition of victims. The only significant point at issue seems to be whether the definitions should be restricted to victims of crime. The Commission prefers to adhere to the traditional approach whereby the definition is so limited, but with the acceptance that *people whose human rights are abused – whether criminally or not – should also be designated as victims*, as indeed they already are under the European Convention on Human Rights".
- 8.3.2 Specifically in relation to exiles, the Northern Ireland Human Rights Commission report says:

*“A particular category of people who could be said to be ‘on the run’ are those who have been forced to leave Northern Ireland by paramilitary organisations, usually because they are suspected of having perpetrated ‘anti-social behaviour’ (the ‘exiles’). Ironically, there are probably more of these individuals from the Loyalist community than there are from the Republican community. The Human Rights Commission is of the clear view that all such individuals should immediately be ‘permitted’ to return to Northern Ireland if they so wish, with no fear that they will be attacked if they do so. The rule of law demands that private justice cannot be exacted within any part of our society.”*

8.3.3 In accordance with the findings of the Northern Ireland Human Rights Commission report, we are recommending that:

**R1. *In the continuing Peace Talks in Northern Ireland the needs and human rights of exiles are publicly recognised and that paramilitary organisations and the parties that represent them agree to an ending of the practice of exiling.***

## **8.4 Routes into Exile**

8.4.1 The organisations providing services for those intimidated out of their homes within Northern Ireland all acknowledge that they only see a proportion of those going into exile as a result of paramilitary threat. Even then the direct contact with the agency is not always with the person under threat (as they may have gone into hiding or already have left) but with a relative or friend seeking help on their behalf. Many simply flee to stay with friends or relatives in Great Britain.

8.4.2 Whilst the Northern Ireland Housing Executive and BASE 2 see some of the same people as a result of cross-referrals, there are people in both loyalist and republican communities who through choice will not go to either of these agencies. Others may not know of the help which can be offered or only learn about it after they have already left Northern Ireland.

8.4.3 The Housing Executive has responsibility for re-housing those made homeless by intimidation. The services it offers cover:

- Assessment of need for social housing for re-housing.
- Temporary re-housing, furniture storage and securing homes.
- Purchasing the homes of intimidated persons (Scheme for the Purchase of Evacuated Dwellings – SPED).

8.4.4 The staff at the Housing Executive’s Homeless Advice Centre told us that in practice they usually refer to the BASE 2 project for confirmation of

intimidation, pending written confirmation from the PSNI, which may be delayed.

8.4.5 Where an applicant is accepted as homeless because of intimidation, he/she is entitled to an emergency payment of £199.40 (currently under review), provided they were a public or private tenant at the time of the intimidation. The receiving district housing office usually makes this payment. This payment does not apply to those going into exile and being re-housed in Great Britain.

8.4.6 We are recommending that:

**R2. *Where an exiled housing applicant is accepted as homeless because of housing intimidation in Northern Ireland, he/she is entitled to an emergency payment, provided they were a public or private tenant at the time of the intimidation. The receiving local authority housing office in Great Britain should be authorised by the Northern Ireland Housing Executive to make this payment on its behalf. If it were estimated that up to four exiled households might present to housing authorities as homeless in Great Britain per month, this would cost £9,571 at the current emergency payment level of £199.40.***

8.4.7 BASE 2 is integral to provision for those intimidated out of their own homes and acts as a key support service for those forced into exile. BASE 2:

- Assesses individual need and verifies and clarifies that intimidation has taken place.
- Mediates, wherever possible, so that people who are intimidated can return to their communities.
- Assists those going into exile to find, wherever possible, temporary accommodation in Great Britain before they leave.
- Liaises with the Northern Ireland Housing Executive and with local authority housing departments in Great Britain to help to find temporary accommodation for those going into exile.
- Liaises with the Homeless Advice Centre and Bryson House on getting people's furniture moved into storage and helps with transport arrangements and in cases of hardship also helps with meeting the transport costs to Great Britain.

8.4.8 Base 2 is thus in a unique position to assess need **before** an individual or a family goes into exile. Such assessments can be used to identify need and as the starting point for brokering appropriate services on entry into

Great Britain. The process of brokering and linking with specialist support could be helped by the creation of a Contingency Fund to assist in accessing appropriate services to meet the assessed needs of exiles and their families. We therefore recommend that:

**R3. NIACRO continues to place a high priority on Base 2 staff assessing the needs of exiles and their families before they leave Northern Ireland.**

**R4. Base 2 considers making a proposal for funding from the Strategy Implementation Fund through the Department of Social Development, for a Contingency Fund to assist Base 2 in accessing appropriate services to meet the assessed needs of exiles and their families.**

8.4.9 The Social Security Agency can also assist in meeting transport costs and with a Crisis Loan. A person does not need to be receiving a qualifying benefit (Jobseeker's Allowance or Income Support) before they can be considered for a Crisis Loan. However, assistance can only be given where the expense has arisen as a result of an emergency and any such assistance is the only means of avoiding serious risk/damage to the health/safety of the applicant, or any member of their family. However, given that it is clear from our interviews with exiles that they may well already be in debt and up to the limit for a loan from the Social Fund, it would seem to be a more appropriate emergency response from the Social Security Agency to make a non-refundable community care grant in such cases (as it said it would do in its evidence to the House of Commons Select Committee on Northern Ireland Affairs).

8.4.10 We are therefore recommending that:

**R5. The Department of Social Development in Northern Ireland together with the Social Security Agency issues guidelines clarifying that it will meet the transport costs for those going into exile who are in receipt of benefits and that the Social Security Agency will consider making a non-refundable community care grant to meet these travel costs in cases of emergency need where someone is being forced to leave Northern Ireland through paramilitary intimidation. In these cases the verification of intimidation by PSNI, the Northern Ireland Housing Executive or BASE 2 should be accepted by the Agency. It is estimated that this could cost the Social Security Agency between £5,000 and £7,000 per annum.**

## **8.5 Housing and Accommodation**

- 8.5.1 Housing and accommodation needs are evident in nearly all the cases dealt with by Maranatha volunteers. BASE 2 has also found that finding appropriate accommodation in a crisis situation is extremely difficult. Several exiles have been declined hostel accommodation because of their health needs. The quality of that accommodation can create further difficulties as all exiles have concerns about personal safety and security, particularly when they are in hostels or other temporary accommodation where the threat of violence may be present. Many exiles and their families have to move several times and almost all are nervous in the unfamiliarity of new settings. Living in hostels or shared accommodation also creates a lack of privacy which exiles find hard to deal with.
- 8.5.2 BASE 2 helps to broker accommodation for those who have decided they have no other choice than to go into exile and to find, wherever possible, temporary accommodation in Great Britain before they leave. It liaises with the Northern Ireland Housing Executive and with local authority housing departments in Great Britain to help to find temporary accommodation for those going into exile.
- 8.5.3 The Housing Executive has responsibility under the Housing Act (Northern Ireland) 1998 for re-housing those made homeless by intimidation within Northern Ireland and its Homeless Advice Centre is responsible for securing temporary accommodation. Under Housing Executive policy, any persons presented and accepted as homeless because of intimidation are awarded sufficient housing points to ensure that they are treated as a priority for re-housing. However, this virtually automatic right to housing in cases of intimidation within Northern Ireland does not cross the Irish Sea when someone is forced out and into exile.
- 8.5.4 The legislation in England and Wales is clear: under the Housing Act 1996 no Local Authority should decline a homeless applicant who has been intimidated out of their home and cannot return (even if they are an owner-occupier) if it would be 'unreasonable to return'. Nevertheless we are aware of a local authority initially declining to provide temporary accommodation, whilst they assessed a young woman who had been exiled on the grounds that, as she was no longer in Northern Ireland she was no longer under threat, so they did not have a duty of care. Although this young woman was eventually housed after Maranatha's intervention, the case exemplifies the degree of discretion which local authorities may exercise in individual cases and the lack of a clear understanding of the nature and extent of paramilitary intimidation which forces people to leave Northern Ireland.

8.5.5 Part of the housing legislation concerns an assessment as to whether the person is 'intentionally' homeless through their own behaviour. Exiles with a history of anti-social behaviour may be deemed by some Local Authorities to be 'intentionally' homeless and Maranatha has drawn a number of these cases to our attention.

8.5.6 There are no governmental guidelines to local authority housing departments or other Registered Social Landlords (RSLs) for dealing with exiles in Great Britain. Exiles presenting as homeless are dealt with within general homelessness legislation. All Local Authority Housing Departments must provide temporary accommodation whilst investigating and assessing a homeless application. Local Authorities can experience difficulties in getting corroborating information from Northern Ireland when they are assessing the homeless application of an exile.

8.5.7 We are recommending that:

**R6. *The Department of Social Development in Northern Ireland draws up guidance for the Office of the Deputy Prime Minister in England and Wales and the Scottish Executive to issue to local authority housing departments on which agencies to contact to verify that intimidation has taken place in Northern Ireland and the circumstances which may have led up to someone being forced into exile. The guidance should clarify that where intimidation has taken place and has resulted in that person and/or family being forced into exile, local authorities have a duty to regard that household as being homeless and to provide temporary accommodation whilst their housing needs are being assessed. Information should be made available within this guidance to local authorities about relevant contact agencies in Northern Ireland including BASE 2.***

8.5.8 We have noted that many local authority housing departments and RSLs require homeless applicants to sign an agreement to having their housing needs details go onto a common database shared with other RSLs to assist in the housing allocation process. In Witness Protection cases this information is safeguarded and restricted but not specifically in the case of exiles. We are therefore recommending that:

**R7. *Local authority housing departments and RSLs should be required by the Office of the Deputy Prime Minister in England and Wales and the Scottish Executive to safeguard and restrict access to personalised information relating to exiles in all cases where there has been verification of intimidation from either the PSNI, Northern Ireland Housing Executive or BASE 2.***

8.5.9 The Housing Executive also has a duty under the Housing Act (Northern Ireland) 1998 to protect the property of homeless persons and people threatened with homelessness. However, the Housing Executive have clarified that this duty “is only relevant for people who continue to be homeless in Northern Ireland”. Whilst local authorities in England and Wales have a similar duty to protect the property of homeless persons under the Housing Act 1996, there is a ‘reasonableness’ test within the legalisation and local authorities may also apply a ‘reasonable’ charge for this service. How well this arrangement actually works in practice will vary according to how the receiving Local Authority interprets its obligations under this legislation.

8.5.10 Staff at the Homeless Advice Centre can arrange for the storage of furniture and its transportation to the docks in the case of those who are going into exile in Great Britain through the charity Bryson House. It seems clear that for many exiles the Bryson House Furniture Removal service is the most realistic way of getting their furniture and belongings to Great Britain. However, exiles we have interviewed say they have experienced both delays and breaches of security in the delivery of their furniture. BASE 2 has also expressed concern about the level of security in the existing furniture transport arrangements.

8.5.11 We are thus recommending that:

**R8. *The Voluntary and Community Unit within the Department for Social Development reviews the level of funding it provides towards the Home Removal Scheme administered by Bryson House to ensure that the full costs of removal are able to be met for those exiled to Great Britain. The Unit should also review the full contract with Bryson House.***

8.5.12 Where an owner-occupier has been intimidated out of their home they can request the Housing Executive to purchase their home under the Scheme for the Purchase of Evacuated Dwellings – SPED – at market value. Officers of the Housing Executive acknowledged that there could be considerable delays between a person vacating a property and its valuation under the SPED scheme. In practice we have been told by some exiles how their properties have been damaged in the meantime, often with the apparent connivance of the paramilitary organisations that intimidated these people out of their homes in the first place. The principle ought to be that the SPED scheme assesses the market value at the time of departure in exile to Great Britain.

8.5.13 We are therefore recommending that:

**R9. *The Department of Social Development in Northern Ireland review the arrangements under the Scheme for the Purchase of Evacuated Dwellings to establish what mechanisms may be put in place to expedite valuations and purchase in the case of exiles.***

## **8.6 Welfare Benefits and Finance**

8.6.1 One key issue in the early stages of exile has been the delay in getting benefits sorted out. Maranatha and BASE 2 tell people that it might be up to six months before things are completely sorted out and several weeks before they get any money at all. Several of our interviewees had experienced delay. Several exiles to which we spoke also expressed concerns about the security of their personal information in social security systems, including those supposedly guaranteed anonymity whilst under witness protection. We have set out in section 5.3 the detailed response to these issues from the Department of Social Development, which is responsible for the Social Security Agency in Northern Ireland. They make it clear that:

- Customers can request to have access to their records restricted. To do this they should make representation to the office manager providing any supporting evidence. The customer's records are then marked locally sensitive, i.e. no one can access the customer's records without special authorisation and a record is kept of everyone who has been given this access and the action they take on the case.
- Customers can also apply in writing for their records to be made nationally sensitive. Such requests are forwarded to Special Section D in Newcastle-upon-Tyne, who will make the decision and take the action to make the customer's records nationally sensitive. This means no one can access the customer's records on any Government computer system without permission, and special access being granted. Customers in the witness protection programme would fall into this category.

8.6.2 We recommend that:

**R10. *In all cases of people being exiled through paramilitary intimidation as verified by the PSNI, Northern Ireland Housing Executive or BASE 2, social security records should be treated as nationally sensitive.***

8.6.3 Delays in the payment of benefits are a critical issue as we have established that these delays can cause severe hardship and increased debt for exiles. We therefore recommend that:

**R11. The Department of Social Development and the Social Security Agency undertake an urgent review of the system for transferring benefits for those forced into exile through paramilitary intimidation.**

8.6.4 Our group interview with Maranatha volunteers showed that exiles experience considerable difficulty in communicating their needs to statutory agencies:

- Both exiles and volunteers spoke about the issue of *trust*. Not surprisingly, exiles do not always feel able to open up and explain their situation fully.
- Because of the nature of their situation exiles are highly *stressed* and this can undermine their ability to cope with the situation, especially if they are also embarrassed, angry and feeling humiliated by their position.
- This may be especially the case given the lack of *privacy* at the benefits office.
- There may be problems because of a lack of shared expectations and understandings.

8.6.5 We are recommending that:

**R12. The Social Security Agency works with its colleagues in the benefit system in Great Britain to provide information and advice on dealing with cases involving paramilitary intimidation.**

8.6.6 Many exiles experience problems with budgeting, partially as a result of delays in receiving benefits, reduced benefits and/or managing without employment. Many exiles from NI had not expected to pay water rates and council tax. Many are in receipt of Disability Living Allowance (DLA), whilst for others the level of DLA provided has been cut.

## **8.7 Employment and Training**

8.7.1 For many people work provides not just a source of finance but also plays a part in giving them an identity, reinforces feelings of self-worth, provides occupation and is a basis for social interaction outside of the family. In this light it is important that many of the exiles we interviewed were unable to work for medical or other reasons, even if they had had some employment in NI. In a context in which many other supports had also been removed from their lives this was a loss for a number of them.

## 8.8 Psychological Factors and Responses to Exile

- 8.8.1 Many exiles spoke of their shock at what had happened to them. Some spoke about having had a “nervous breakdown” or having to deal with the consequences of such a breakdown in other members of their family. In some cases this had led to attempted suicide or suicidal thoughts.
- 8.8.2 Many of the exiles were or had been on medication for depression and/or anxiety. Some had seen a psychiatrist or community psychiatric nurse. In a number, but not all, of cases the medication pre-dated leaving NI.
- 8.8.3 As outlined in Part 1 of this report, Post Traumatic Stress Disorder (PTSD) involves the development of a cluster of symptoms after the person has been exposed to “events that involved actual or threatened death or serious injury...to themselves or others” to which they responded with fear, helplessness or horror. We must stress that it is not our intention here to make diagnoses of PTSD or of any other psychological disorder; we are not in a position to do so. However, what is clear is that the circumstances of exiles are likely to produce PTSD in a number of them and extreme and/or long-lasting psychological distress in many of them. For many, while exile is a shocking experience, because of the conditions in which they lived in NI, it may follow lengthy periods of intimidation and of being anxious and fearful. Exiles may therefore be relatively vulnerable psychologically *before* they are exiled and thus less able to cope with the consequences of being uprooted in such traumatic circumstances.
- 8.8.4 A pattern of withdrawal, social isolation, depression, difficulty in sleeping, persistently thinking over events, anger and excessive alcohol consumption was reported by several interviewees. These effects can be long lasting.
- 8.8.5 A Maranatha volunteer identified several common characteristics of those exiles she has met both in her role as a counsellor and more generally as a member of the Maranatha Community:
- Hiding behind a “smokescreen of words” because of a fear of:
    - Allowing people too close.
    - Acknowledging “the reality of what’s happened”.
  - Alcohol problems.
  - Suspicion.
  - Fear.
  - A difficulty in maintaining relationships.
  - Superficial relationships.

- Poor attendance at appointments.
- Disturbed sleep.

8.8.6 It is evident therefore that many exiles have quite profound psychological needs, which in some cases require clinical intervention. Accessing psychological and psychiatric services is difficult for most exiles, many of whom have found it difficult even to register with a GP. They are also generally cautious about who they place their trust in and are unwilling to disclose all the things that have happened to them and their families. This makes assessment and selection of the most appropriate forms of intervention very difficult.

8.8.7 We recommend that:

**R13. *The findings of this report should be fed into the National Institute for Clinical Excellence (NICE) Guidelines on PTSD.***

**R14. *The Department of Health should consider highlighting the particular sensitivities and needs to be taken account of when dealing with victims and exiles.***

## **8.9 Medical Needs**

8.9.1 The group of exiles interviewed and their families in GB had a variety of health problems. These ranged from chronic diseases such as diabetes, kidney failure, various forms of heart disease, dementia and epilepsy through to physical injuries caused by shooting in one case or a near-fatal road accident in another, to a range of psychological ailments such as depression, anxiety and an inability to sleep, as described above.

8.9.2 Whether the various ailments were a cause or a consequence of exiling, or were unrelated to it, was difficult to establish in many cases. In some it seems likely that exiling has had a detrimental effect on pre-existing illness.

8.9.3 As noted above, getting registered on the list of a GP can be a problem for exiles because many have closed lists and applications have to be made through the local Primary Care Trust (PCT). However, because of the high level of trauma and other needs associated with exiles (e.g. gunshot wounds), Maranatha try to arrange for registration with a GP who has more “sensitivity” to these needs and is more knowledgeable about NI.

8.9.4 The problem of exiling has not appeared much in the mainstream press or other media and generally GPs have little understanding of the NI situation or the circumstances of those who are exiled. The limited

information provided to GPs about new patients may not be very informative in this respect.

8.9.5 We are recommending that:

***R15. The Department of Health raises awareness with Primary Care Trusts (and within existing guidelines) of the difficulties exiles have with admission onto GPs waiting lists.***

## **8.10 Families and Exile**

8.10.1 There are three main aspects of exile relating to families that emerged from the interviews. One concerns the particular issues of children in families who are exiled including education. Another concerns relationships within the family and the strain these can be put under. The third relates to family left behind in NI.

8.10.2 Several problems have arisen in relation to schools and the education of children. One is simply getting children into schools at all, or into a school of choice. Another is the particular issue facing those who were close to exams like GCSEs at the time of exile, given that the systems in NI and in GB are not as identical as is often assumed. Lastly, of course, there is the difficulty for the young person of fitting in and making friends at a time when they may be very traumatised.

8.10.3 Issues of resentment and blame, guilt, conflict and separation within families appeared in many interviews.

8.10.4 In the interviews there was a suggestion that women have played a key role in helping their families cope with exile.

8.10.5 Visits from relatives (and friends) had been important for a number of those interviewed but they could be a source of problems as well as being valued. Anniversaries and holidays like Christmas were said by some interviewees to be particularly difficult times to be separated from family.

8.10.6 Several exiles had been bereaved while in exile. The loss of relatives in Northern Ireland and bereavement has been very difficult for exiles to deal with.

## **8.11 Social Factors**

8.11.1 A number of social issues arose in the course of the interviews:

- Prejudice and discrimination against exiles.
- Cultural identity.

- Feelings of injustice.

#### 8.11.2 Prejudice may be worse for younger exiles because:

*“They are looked on as terrorists and they’re not all terrorists...the innocent ones who will take a stand (against the paramilitaries) and just have to get on the boat and go.”*

8.11.3 Cultural differences are also experienced, as there is ignorance of Northern Ireland and the distinctions, which are so important there. The exiles considered Northern Ireland their home, and most would want to return there should it be possible, even though they often reported feeling safer in GB.

8.11.4 Many exiles are angry. They said they were angry with those who had forced them from their home; they were angry with the Government for allowing it to happen; they were angry with the Government for not acknowledging that there existed any problem of exiling from NI; and they were angry because of the lack of state support they had received as exiles. There was a common perception of injustice and a feeling that no-one cared or even noticed their existence. Several commented that refugees and asylum seekers from other states received much more help than they, as refugees within their own country, received. This need for recognition is a paramount concern for many exiles.

## 8.12 Coping and Not Coping

8.12.1 Most exiles we interviewed spoke extremely highly of the support they had received from Maranatha and contrasted it with what they perceived as a complete lack of support from elsewhere. It was clear from the interviews that some members of the Maranatha Community show extraordinary commitment to the exiles they come into contact with, providing support in a variety of ways and giving much of themselves. Maranatha is a Christian organisation and, although it does not set out to proselytise, it is perhaps not surprising that some exiles become Christians or rediscover their faith as a result of their involvement with Maranatha.

8.12.2 The Maranatha NI Project Leader mentioned a common theme of people starting off with intentions of responding positively to their exile by changing their way of life and building a better future. Sadly, most of these good intentions do not last or are undermined by a lack of personal resources. It is a challenge to make such fundamental changes and many exiles, especially the younger ones, do not persevere with the attempt. Thus they may start courses but not continue with them; they may intend to stop taking drugs (prescription or illicit) or drinking but not be able to

resist, and so on. Rather than being able to take control of their lives they may “lurch from crisis to crisis”.

## 8.13 Support Needed and Provided

8.13.1 For one exile the Maranatha NI Project Leader has provided:

*“A shoulder to cry on...Everything we’ve needed...He’s been like a best friend, he’s never judged us, he made that clear from the beginning – he’s taken us at face value, we have his house number...his mobile number...his work number...he has been there 24/7...he’s listened...taken the pressure off ...Basically I don’t think we would be much further on if he hadn’t been there...(and) would have blown a fuse if he hadn’t been there.”*

8.13.2 It was clear from the interviews that some members of the Maranatha Community show extraordinary commitment to the exiles they come into contact with, providing support in a variety of ways and giving much of themselves. The support we came across was varied. Examples include:

- Providing transport.
- Financial assistance.
- Helping to sort out:
  - benefits
  - housing
  - schools
  - furniture removal
  - registration with GPs and dentists.
- Befriending and providing a listening ear.
- Aiding communication with agencies.
- Acting as a go-between between agencies and linking to specialist services.
- Being readily available at all hours of the day.
- Helping people to get jobs, apply for courses etc.
- Providing on-going support for problems relating to budgeting, drug abuse and so on.
- Having exiles stay in their homes.

8.13.3 Maranatha’s resources are stretched and there is a great deal of reliance on the NI Project Leader. The demand on him and on the volunteers involved can be very great. The Haven Project will help with this and will

formalise some links which to date have remained informal. However, having a centre will also raise new concerns about security.

8.13.4 If adequate services are to be developed outside what Maranatha can provide, the starting point has to be acknowledgement and recognition of the problem of exiling.

8.13.5 The difficulties for exiles to explain their situation fully to agency representatives coupled with a lack of understanding on the part of these representatives can lead to a clash of expectations, misunderstandings, conflict, anger and a further loss of trust as well as to people failing to receive what they are entitled to. When discussions cannot be held with any privacy, this can be a particular problem.

8.13.6 There is a need for greater understanding on behalf of welfare agencies of the NI context, of the lives that exiles had been living in NI, and of the difficulties they face in coping with their move to GB. While exiles may share characteristics with many other people who need support from welfare agencies there are also key differences relating to their experience and the context of NI.

8.13.7 Exiles are likely to be suspicious and very careful about what they say and to whom they say it but they do need to find people they can trust. The extent to which they are in danger will vary but there will always be this issue of finding it difficult to trust others. There are several implications of this for services.

8.13.8 We are recommending that:

**R16. BASE 2 and Maranatha consider forming, together with other relevant helping agencies, an inter-agency group to co-ordinate and promote best practice in responding to the needs of exiles. This group should be encouraged to liaise with the inter-agency group for victims of the 'Troubles' that the Legacy Project is to establish.**

**R17. BASE 2 and Maranatha promote the needs of exiles in journals for social and welfare professionals and encourages the relevant professional bodies to develop training, guidance and awareness-raising on this issue.**

8.13.9 Self-help and mutual support groups is a feature of many groups of people in difficult and/or traumatic circumstances. The Legacy Project has plans to set up such groups for other victims of the 'Troubles' and some exiles would appreciate such an opportunity for interaction with some others in similar circumstances. However, there are major difficulties associated with this kind of activity with exiles because of the potential dangers such

contact might involve and because of the fear that it might engender even in the absence of any real danger. As an alternative, we recommend that:

**R18. *Maranatha consults exiles on the potential for the development for self-help and mutual support for exiles by linking individuals or families with those 'further down the line'.***

8.13.10 While counselling or other therapeutic intervention by psychologists or psychiatrists may not be appropriate for all exiles or even acceptable to them, it is potentially helpful in many cases. Quite apart from the problems of obtaining appointments in the first place, one Maranatha volunteer who is a counsellor identified key obstacles to the success of such intervention:

- One is the difficulty of doing an assessment. She believes that this follows from the difficulty many exiles have in disclosing to others because of their lack of trust, their tendency to hide behind a "smokescreen of words" and the lack of understanding of most professionals of the NI context.
- A second is the relative unreliability of exiles in attending for appointments and their need for support to improve attendance.
- The third is the current emphasis on brief intervention. In her view this is inappropriate given the complexity of the circumstances for exiles with mental health problems and the lack of openness and attendance problems mentioned.

8.13.11 Just to build enough trust to do a proper assessment might take more time than would normally be allocated for intervention by busy professionals. Regel & Healey (2003) have identified the complex nature of the responses to living through the 'Troubles' in NI and to the potential enormity of the therapeutic challenge. From their point of view also, intervention requires an understanding of the context on the part of the therapist and success is unlikely to be achieved quickly. Regel & Healey also consider that early intervention is crucial but this is difficult to set up for exiles, even if they would agree to see someone.

8.13.12 We understand that Maranatha is currently drawing up plans for private briefing conferences to be addressed by those with 'hands-on' experience of working with exiles and by exiles themselves, which will enable agencies with less experience to be better informed.

8.13.13 In our original terms of reference we had been asked to consider what role the Legacy Project might play in the future in supporting work with exiles. Our overall conclusion is that the Legacy Project itself does not have a direct role in meeting the needs of exiles as examined in this

report. However, we would suggest that it continues to network with Maranatha and to support it in its work.

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