



Ministry of Defence

Ministry of Defence
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Whitehall
London SW1A 2HB
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Telephone : +44 (0)20 721 89000

Our Reference: [REDACTED]

[REDACTED]

[REDACTED]

Dear [REDACTED],

Thank you for your email to the Ministry of Defence (MOD) dated [REDACTED] in which you requested the following information:

How many members of the British Army have been discharged because they are overweight in the following years:

2013-2014

How many members of the Royal Navy/Royal Air Force have been discharged because they are overweight in the following years:

2002-2014

I am treating your correspondence as a request for information under the Freedom of Information Act (FOI) 2000.

A search for the information has now been completed within the Ministry of Defence (MOD), and I can confirm that the MOD does hold information within the scope of your request; this is provided in the attached Annex.

Section 40(2) has been applied to some of the information in order to protect personal information as governed by the Data Protection Act 1998. This is also in line with Defence Statistics rounding policy, in which numbers fewer than five are suppressed in order to reduce the possible inadvertent disclosure of individual identities. Section 40 is an absolute exemption and there is therefore no requirement to consider the public interest in making a decision to withhold the information.

Under Section 16 of the Act (Advice and Assistance), you may find it useful to note that Defence Statistics release annual updates on medical discharges in the UK Armed Forces as an Official Statistic publication. The next statistical release is due on 14 July 2016. The latest report can be found at: <https://www.gov.uk/government/collections/medical-discharges-among-uk-service-personnel-statistics-index>

If you are not satisfied with this response or you wish to complain about any aspect of the handling of your request, then you should contact me in the first instance. If informal resolution is not possible and you are still dissatisfied then you may apply for an independent internal review by contacting the Information Rights Compliance team, 1st Floor, MOD Main Building, Whitehall, SW1A 2HB (e-mail CIO-FOI-IR@mod.uk). Please note that any request for an internal review must be made within 40 working days of the date on which the attempt to reach informal resolution has come to an end.

If you remain dissatisfied following an internal review, you may take your complaint to the Information Commissioner under the provisions of Section 50 of the Freedom of Information Act. Please note that the Information Commissioner will not investigate your case until the MOD internal review process has been completed. Further details of the role and powers of the Information Commissioner can be found on the Commissioner's website, <http://www.ico.org.uk>.

Yours sincerely,

Defence People

Table 1: UK Regular Armed Forces personnel medically discharged with a principal or contributory condition of Obesity by Service and Year, 1 January 2002 – 31 December 2014, Number¹

	All	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Naval Service	17	~	0	~	0	0	~	0	~	~	~	~	~	~
Army ²	14												8	6
RAF	8	~	0	0	~	0	0	0	~	~	0	~	~	0

Source: FMed 23 & JPA

1 - Data presented as “~” has been suppressed in accordance with Defence Statistics’ rounding policy (see paragraph 5)

2 - Only includes 2013 and 2014 as requested.

1. It is a condition of service that personnel must be fit and healthy. Medical discharges are the result of a number of specialists (medical, occupational, psychological, personnel, etc) coming to the conclusion that an individual is suffering from a medical condition that pre-empts their continued service in the Armed Forces. Statistics based on these discharges do not represent measures of true morbidity or pathology. At best they indicate a minimum burden of ill-health in the Armed Forces. Furthermore, the number and diversity of processes involved with administering a medical discharge introduces a series of time lags, as well as impact on the quality of data recorded.

2. The information on cases was sourced from electronic personnel records and manually entered paper documents from medical boards. The primary purpose of these medical documents is to ensure the appropriate administration of each individual patient’s discharge. Statistical analysis and reporting is a secondary function.

3. Medical discharges in the UK Armed Forces involve a series of processes, at times complex, which differ in each Service to meet their specific employment requirements. Due to these differences between the three Services, comparisons between the single Service statistics are judged to be invalid.

4. Although Medical Boards recommend medical discharges they do not attribute the principal disability leading to the board to Service. A Medical Board could take place many months or even years after an event or injury and it is not clinically possible in some cases to link an earlier injury to a later problem which may lead to a discharge. Decisions on attributability to Service are made by Vets UK (formerly Service Personnel and Veterans Agency).

5. The tables in this FOI response have been scrutinised to ensure individual identities have not been revealed inadvertently. In line with Defence Statistics’ rounding policy for health statistics (May 2009), and in keeping with the Office for National Statistics Guidelines, all numbers less than five have been suppressed and presented as ‘~’. Where there is only one cell in a row or column that is less than five, the next smallest number (or numbers where there are tied values) has also been suppressed so that numbers cannot simply be derived from totals.

6. Medical discharges for obesity were compiled using the International Classification of Diseases and Related Health Problems Version 10 (ICD), specifically E66 (Obesity).

7. Principal condition is the first principal ICD 10 code on the medical discharge documents (FMED 23). Contributory cause contains all other principal conditions and any contributory conditions on the medical discharge paper (FMED 23).

