



Ministry  
of Defence

Defence Statistics (Health)  
Ministry of Defence  
Oak 0 West (#6028)  
Abbey Wood North  
Bristol BS34 8JH  
United Kingdom

Telephone [MOD]: +44 (0)30679 84423  
Facsimile [MOD]: +44 (0)1179 319634  
E-mail: DefStrat-Stat-Health-PQ-FOI@mod.uk

Reference: **FOI 2014/00924**

[REDACTED]

Date: **27 May 2014**

Dear [REDACTED],

Thank you for your email of 27 April 2014 requesting the following information:

*How many members of the British army have been discharged because they are overweight in the following years.*

2002 - 2003  
2003 - 2004  
2004 - 2005  
2005 - 2006  
2006 - 2007  
2007 - 2008  
2009 - 2010  
2010 - 2011  
2011 - 2012  
2012 - 2013  
2013 - 2014

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

A search for the information has now been completed within the Ministry of Defence, and I can confirm that information in scope of your request is held. Some of the information falls entirely within the scope of the absolute exemptions provided for at section 40 (Personal Data) and section 44 (Prohibitions on Disclosure) of the FOIA and has been withheld.

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. Defence Statistics suppress numbers less than five 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.

Section 44(1)(a) has been applied as the disclosure of some of the information is prohibited by the Statistics and Registration Service Act 2007. Defence Statistics release annual updates on medical discharges in the UK Armed Forces as an Official Statistic publication. In accordance with the Code of Practice for the release of National and Official Statistics, as set out in the 2007 Act, we are unable to provide the data for 2013/14 prior to the next statistical release, 10<sup>th</sup> July 2014. Section 44 is an absolute exemption and there is therefore no requirement to consider the public interest in making a decision to withhold the information.

Between 1<sup>st</sup> January 2002 and 31<sup>st</sup> March 2013 (latest data available), **50** UK Regular Army personnel were medically discharged with a principal or contributory (not principal) cause of obesity. **Table 1** shows the numbers by year of medical discharge.

**Table 1: UK Regular Army personnel medically discharged with a principal or contributory (not principal) cause of obesity, 1 January 2002 and 31 March 2013, Numbers<sup>1</sup>**

Year	Number of Medical discharges
<b>All</b>	<b>50</b>
2002	~
2003	~
2004	~
2005	~
2006	0
2007	~
2008	~
2009	~
2010	6
2011	13
2012	9
2013 <sup>2</sup>	~

1. Data presented as “~” has been suppressed in accordance with Defence Statistic’s rounding policy (May 2009).

2. 1 January 2013 – 31 March 2013 (latest data available)

Service personnel are graded for employment and deployment purposes in accordance with their functional abilities, not their medical condition. As such, and in accordance with MOD policy, service personnel are not discharged due to obesity (or any other condition) but on its impact on carrying out military activities in all environments

Under section 16 of the Act (Advice and Assistance), you may find it useful to note the following:

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 introduce a series of time lags, as well as impact on the quality of data recorded.

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.

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 the Service Personnel and Veterans' Agency.

Regular Army personnel include all Regulars (trained and untrained) including Ghurkha Regiments and Military Provost Guard Service (MPGS).

Principal cause is the first principal coded cause on the medical discharge paperwork (F Med 23). Contributory cause contains all other principal coded causes and any contributory coded causes on the medical discharge paper (F Med 23).

Figures for obesity have been compiled using the International Classification of Diseases & Related Health Problems version 10 (ICD 10), specifically ICD 10 code group E66 (Obesity).

The tables presented have been scrutinised to ensure individual identities have not been revealed inadvertently. In line with Defence Statistic's 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.

Would you like to be added to our contact list, so that we can inform you about updates to our statistical publications covering medical discharges in the UK Armed Forces and consult you if we are thinking of making changes? You can subscribe to updates by emailing: [DefStrat-Stat-Health-PQ-FOI@mod.uk](mailto:DefStrat-Stat-Health-PQ-FOI@mod.uk)

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](mailto: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.gov.uk>.

I hope this is helpful.  
Yours sincerely

Defence Statistics (Health) Head (B1)