

# exposure

April 2022

The combined magazine for the nuclear community

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Next issue copy  
deadline for all  
editorial sections:  
**31st Jul 2022**

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# Foreword

Hello and welcome to a new edition of exposure magazine. In this issue we announce two new initiatives aimed at helping the nuclear community.

We have partnered with Celebration of Life to offer Free Pre Paid Direct Cremation Funeral Plans. Please see page 18 for details on how the scheme will work.

Secondly the NCCF will be joining nearly two hundred other charities in the National Free Wills Network, a national network of around 885 law firms offering Will writing services to supporters of UK charities. See page 20 for details and how you can apply.

Earlier this year there was a bereavement in my family, the bereaved had already arranged and paid for their funeral but hadn't written a will. The experience I had with dealing with their affairs led us to look at ways in which the NCCF may be able to help others who haven't yet thought about a Will or funeral.

We hope you are remaining to stay safe and well and hope you enjoy the magazine.

**Editor - Exposure**

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## Exposure

### Christmas Island

Terry Brown recalls his service on Christmas Island

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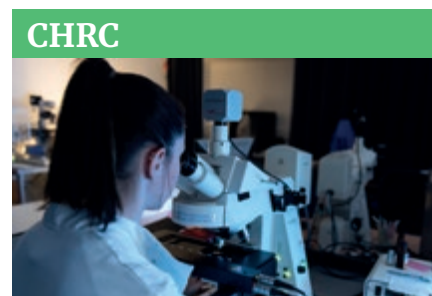


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**exposure**



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# Christmas Island – Terry Brown

I was a naive young serviceman, serving in the Royal Air Force, when I was posted to Christmas Island in the Pacific to take part in operation GRAPPLE which was the task force name for the British nuclear weapons tests.

Christmas Island is in the Pacific Ocean, an atoll in northern line Islands part of Republic of KIRIBATI, is in the middle of the Pacific Ocean.

The whole operation was given top priority because of the time factor involved, we had to be up and running within six months to drop the first megaton nuclear bomb which was launched on the 15th of May 1957 by a Valiant Aircraft of 42 Squadron.

It was a dead line that was very difficult to achieve because of all the problems that we encountered during the work up period. All that could go wrong went topsy-turvy, the main hindrance was that the weather was against us causing us some major problems such as flooding, vehicles breaking down and getting stuck in the mud and various illnesses.

There was a major out-break of Dysentery, this caused Diarrhoeas which were incredibly debilitating. The epidemic was because the sanitation on the camp and hygiene was wholly inadequate, conditions left a lot to be desired. They had built the refuse waste tip too near to the base camp where all the other ranks were billeted and when we had an out-break of millions of flies landing on our cookhouse infecting the food and poisoning it there was an out-break of Dysentery.

This was not aided by the complete lack of any greens in our diet, which consisted wholly of composite rations.

At one time I had become light-headed and was burning up. I went to the sickbay where my temperature was recorded at 104 degrees. I was lined up outside the sick quarters with many others in special one man canvas cubical and spent eight days recovering but was off work for a further two days to get my strength back, before I returned to the Equipment Stores.

So in the interest of our wellbeing they decided to use an Auster aircraft to spray the domestic camp area with Malathion and Phosphorodithoate OP insecticide. This turned out in later years to be harmful to human beings and was banned.

The weather was another reason for our plight as conditions were appalling. We had never experienced anything quite like these tropical down falls. It rained all night non-stop. As an R.A.F. Supplier I was responsible for handling all the equipment coming from the Port of London to the Airfield Stores Department. Unpacking all the wooden crates and putting the contents into large marquees onto racks, because it was so hot inside these marquees, we could only



CPL Terry Brown (RAF) Christmas Island during the tests 1956 to 1957

stay inside for a limited period otherwise we would suffer with a heat stroke.

Because of all the rain that we had received the area that had been designated was now under water, and all the wooden cases were floating and the aircraft spares were getting wet. So all the stores in their special crates had to be moved to higher ground away from these ponds. But if the authority who selected this storage area, had taken a good look around them, they would have seen numerous derelict bamboo huts built on stilts. And they should have picked a suitable area for a stores compound and would have saved us a lot of unnecessary work and the forklift would not have got stuck in the mud.

I never in my whole service career come across such a hard working bunch of military personnel working so hard to achieve the same goal and get this special operation done and dusted. We all seemed to be on the same wave length.

It was like no other military unit or camp that I have served in. the working atmosphere was like working in a civilian work place.

All the Officers, N.C.O,S Other Ranks all worked together as a solid team to get the difficult job done. There was no military discipline like cleaning boots polishing badges or parades, I cannot even remember saluting an officer. The officers gave you a word of encouragement and the combined morale was very high.

It was like we were on a war footing and we all pulled together as a team.

We B.N.T.V.A. are some of the very few people who have experienced a megaton nuclear bomb explosion, It's an life times experience that I shall never forget.

I believe we all deserve recognition not only for the work we achieved, but also for the appalling health conditions we have all suffered since.

**Terry Brown**





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# Send us your Story

If you have a story that you would like to share and be published in exposure magazine then get in touch with us.

If you have something to say that would be of interest to our reader then why not write about it and send it to us. It doesn't necessarily have to be about your service or the tests, any experience or information you think would be interesting to the community would be welcome.

You may run Marathons, help with a local charity, or walk the Pennines or grow prize winning vegetables, whatever you do we would like to hear about it.

Don't worry if you don't have a computer we will accept hand written stories and type it for you. Don't worry about spelling or grammar we can check that and amend it too. If you have photographs that accompany your story you can send those and we will scan them and send back the originals to you.

If you do have a computer and would prefer to send us your story and pictures via email the details are below.

This is your chance to have your voice heard and share your experience with the rest of the community. Each magazine story also goes onto the exposure.press website which is then shared across social media for even more people to read it.

Once published a copy of the magazine is sent to the British Library and held in their archives, immortalising your story for future reference.

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If you are unsure or need help or advice please call:

**0115 888 3442**

Please clearly leave your name and telephone number and we will get back to you.



Wikimedia Commons / Royal Engineers construct the airfield runway on Christmas Island



# The Nuclear Community Charity Fund

## Building for Our Future

The issue of Nuclear veterans is raised with the PM

**P08**

**The NCCF and Mr Alan John Owen make a joint statement at page 13**

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## Funeral Worry

The NCCF may be able to help

**P18**

# Building for Our Future

In November 2021 Exposure Magazine reported that Rebecca Long Bailey MP, had raised the issue of Nuclear Veterans during PMQ's and following from the very positive reply by the Prime Minister we wrote a **joint BNTVA/NCCF response to him**.



Rebecca Long-Bailey Official Portrait  
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“

My constituent Laura told me that Remembrance Sunday hurts. It hurts because there have been no medals for her grandad's service and the thousands of men involved in nuclear weapons tests overseas between 1952 and 1991. It hurts because studies of such veterans have shown increased miscarriages, increased birth defects and the same rate of genetic damage as clean-up workers at Chernobyl. And it hurts because the UK is the only nuclear power on earth that has denied recognition. So I ask the Prime Minister: will he recognise nuclear testing veterans today and agree to meet them? The Leader of the Opposition has.

**Rebecca Long-Bailey**  
Salford and Eccles (Lab)



The Prime Minister ©UK Parliament/Jessica Taylor

“

I am grateful to the hon. Lady for bringing this to my attention. I will certainly make sure that we get a proper meeting with the representatives of the nuclear veterans that she mentions.

**Boris Johnson**  
The Prime Minister



The official transcript of question and the reply can be found at the House of Commons Hansard using the following link (Column 577):

<https://hansard.parliament.uk/Commons/2021-11-17/debates/E3057CAE-25D3-4192-BE45-560AA0ABB4C8/Engagements?highlight=nuclear%20veterans#contribution-365C082D-7566-4D87-BFDC-D7COB4F58243>

## Joint Statement from the British Nuclear Test Veterans Association and the Nuclear Community Charity Fund

22 November 2021

The British Nuclear Test Veterans Association and its sister charity the Nuclear Community Charity Fund, are proud to represent the members of the British Nuclear Test Veterans and their survivor community, and sincerely welcome the words of The Right Honourable, Boris Johnson, MP, Prime Minister speaking about our community to the house on 17th November.

We acknowledge that in July 2014 the then Prime Minister made a formal statement to the house recognising the contribution of our Nuclear Test Veterans.

*"I am happy to tell the House that the Government recognise and are extremely grateful to all the service personnel who participated in the nuclear testing programme. We should be in no doubt that their selfless contribution helped to equip the UK with the deterrent that it needs."*

In June 2021 the BNTVA submitted a medal application to The Advisory Military Sub-Committee of The Committee on the Grant of Honours, Decorations and Medals. The AMSC is independently considering the application and we do not believe it is appropriate to lobby the Government to intervene in that process.

We look forward to the support of the Prime Minister in fostering meetings and joint working with our two organisations and various Government Departments to explore and take forward the implications of the research projects being conducted by NHS England and the Centre for Health Effects of Radiological and Chemical Agents at Brunel University London.

We are committed to ensuring constructive and beneficial outcomes for all parties involved and wish to record our appreciation of the Prime Ministers support in the matter.

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# The Future...

On the 19th of January we received a personal letter from the Prime Minister thanking us for our joint statement. He reconfirmed the governments recognition of 2014 and has asked that the MOD take the matter forward with us.



10 DOWNING STREET  
LONDON SW1A 2AA

THE PRIME MINISTER

19 January 2022

*Dear Tony,*

Thank you for your letter of 22 November, enclosing a joint statement from the British Nuclear Test Veterans Association and the Nuclear Community Charity.

I would also like to thank you for your kind words of support. The Government is extremely grateful to all those who participated in the nuclear testing programme. I want to be clear that their contribution will not be forgotten.

Due to the importance of the issue, I have asked the Ministry of Defence to take this forward.

Thank you, once again, for writing to me on this important matter.

*Yours sincerely*  
*Rishi Sunak*

Mr Tony Jeffery

This is a great step forward in the work both the NCCF and BNTVA are delivering within our community. Work that will be coordinated between the charities to ensure we develop the representation amongst Government Departments and Health

Providing Agencies to focus the measures and services needing delivery within our unique community. Thanks to the great work of the CHRC we are on the brink of being able to quantify so many aspects of the mental and physical health effects

experienced by our community, our task is to educate and negotiate to develop access to resources and support we have so long needed.



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Issues surrounding the Nuclear Veterans continue to be raised in the house, on the 21st of February

**Andrew Gwynne Shadow Minister (Health and Social Care) asked**

"The UK is now the only atomic nation with no official recognition of or compensation for nuclear test veterans and their families. Ahead of the 70th anniversary of the first British nuclear test later this year, will Ministers now do the right thing and give these veterans the recognition they deserve?"

**Ben Wallace The Secretary of State for Defence replied**

"I hear what the hon. Gentleman says and I absolutely recognise that we are now the only country in this regard. The last internal review was in December, and I have asked officials to go back and look at that again.

Then on the 22nd of February

**Stephanie Peacock, the Shadow Defence Minister raised a written question**

"To ask the Prime Minister, With reference to the oral contribution of the Prime Minister of 19 November 2021, official report, column 577, when he plans to meet with the nuclear testing veterans.

**The Prime Minister responded**

"We are grateful to all those who participated in the British nuclear testing programme which played a valuable role towards developing a nuclear deterrent that has ultimately kept Britain safe for decades. We take our obligations to our personnel extremely seriously and ministers are always open to discussing whether we can do more. My Office is in discussions to arrange a mutually convenient time to meet representatives of the nuclear testing veterans.

These exchanges in conjunction with the warm response from Mr Johnson clearly shows that continued support and an open door awaits professional, organised cooperation between the key representatives of our nuclear survivor community. You can be assured that the BNTVA and NCCF will step through that door together.

# No Will? - No Power of Attorney?

Millions of retirees in the UK have not put in place important arrangements in case of death or incapacitating illness, new research from retirement specialist **Just Group** reveals.

- More than one in 10 over 75s (nearly 700,000 people) and over a fifth of 65-74 year olds (1.5 million people) have not made a will
- Seven in 10 over 75s (over 4 million people) have not arranged Power of Attorney
- Over 120,000 people aged 65-74 died in 2019 – a fifth of all UK deaths – highlighting the need to draw up plans in case of sudden illness or lack of capacity

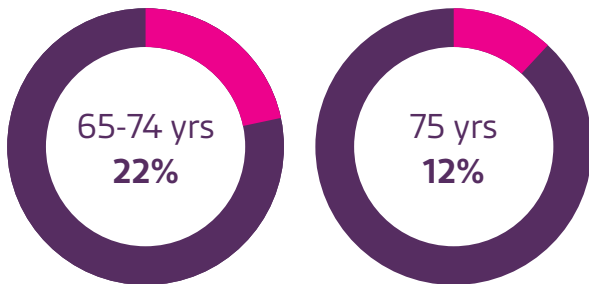
Just Group's research uncovers that more than one in 10 (12%) over 75s had still not yet arranged a will, equal to 695,000 people.

Younger people were less likely to have made a will with over a fifth of 65-74s (22%) yet to have had a will written, amounting to 1.5 million people.

Worries about death or serious illness may feel a long way off for many retirees, but the most recent ONS statistics reveal that a fifth of all UK deaths in 2019 were in the 65-74 age group.

In total, over 2 million retirees aged over 65 have no will in place and risk how their estate is shared up being left to the rules of intestacy.

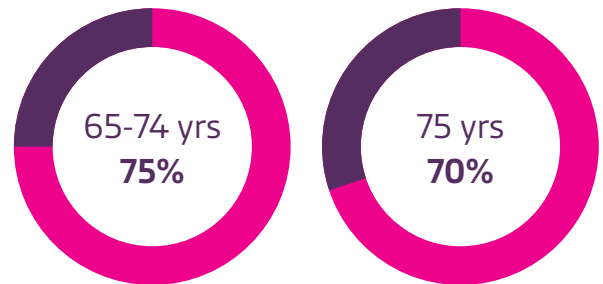
Have **not** arranged a will



1.48 million people

695,000 people

Have **not** arranged Power of Attorney



5.4 million people

4.05 million people

Power of Attorney arrangements are much less common than wills with seven in 10 over 75s yet to have put these in place, equivalent to more than four million people. And among those aged 65-74, more than 5 million people had not put a Power of Attorney in place.

Three in 10 (30%) retirees aged 65+ who are yet to arrange a Power of Attorney said they did not feel they were at the right stage of life to do so, and retaining control over their finances emerged as another key reason for not putting a Power of Attorney in place. A quarter (24%) said they did not want to relinquish power over their finances, a sentiment that was even stronger (35%) among those aged 75 plus.

In the event of a person losing capacity without having a lasting Power of Attorney in place, family members must apply for deputy-ship through the Court of Protection. Deputy-ship has a more limited remit than a Power of Attorney, carries an annual renewal fee of £2,500 and can cause financial difficulties in the time it takes for the Court to appoint a deputy.

# NHS Continuing Healthcare remains 'best kept secret' in care financing



Three in four over-45s (75%) have never heard of NHS Continuing Healthcare (CHC) which can fully-fund the care costs of those qualifying for the package. A further 15% have heard of CHC but don't know any of the details, research from retirement specialist Just Group shows.

- Three-quarters of over 45s have never heard of NHS Continuing Healthcare
- Only one-in-10 know full funding for care needs is available in some circumstances
- Professional care advisers can help 'fight your corner' says Just Group

The retirement specialist said the low level of understanding – only one-in-10 knew what CHC is or had used it – reflected a system in which most people don't know when they must pick up the bills and at what point the State will step in.

The research shows that lack of knowledge about NHS CHC remained high even among those over-45s who had experience of finding care for a parent with seven-in-10 (70%) never having heard of it. However, among the one in five who had heard of it, nearly half had accessed a CHC package.

Stephen Lowe from Just Group said "This is the second year we have asked about NHS Continuing Healthcare and it remains the best kept secret in government support available to finance care,"

"This is despite a 2020 report by the Parliamentary and Health Service Ombudsman (PHSO) recommending improvements to communications and the assessment system to ensure people receive the support they are eligible for without jumping through hoops."

He said that plans to reform care funding by introducing a health and social care levy and cap on care costs is a chance for the government to be clear with the electorate about who pays for their own care and at what point the State is prepared to step in and help.

"The reforms need a high-profile public awareness campaign to avoid any misunderstandings,"

"People need to know that even with a levy and a cap on personal care costs, they are also likely to face significant costs from their own pockets if they need professional care in later life, either in their own home or in a care home."

"While we await the details of the reforms, information, guidance and professional advice become ever more important in helping people get the support they need when grappling with the complexity and cost of finding care."

NHS Continuing Healthcare is a fully funded package of care that covers the full cost of care and residential accommodation for those who are entitled to it due to disability, accident or illness. It differs from local authority care which is primarily based on social or personal care needs, rather than health needs, and is subject to a means-test.

#### Apply for NHS Continuing Healthcare

To apply for NHS Continuing Healthcare for yourself or a family member, you need a GP or social worker to arrange an assessment. There is no set list of health conditions or illnesses that qualify for funding and although the assessment process is complex it can be worth thousands of pounds.

The PHSO report revealed that more than 175,000 adults were considered for NHS CHC funding in 2019- 20 and about 112,000 were assessed as eligible. Assessments were paused for five months last year due to the pandemic lockdowns but restarted in September.

Mr Lowe continued

"Even before the extra difficulties caused by the pandemic, mistakes have been made meaning people who should have received funding were instead paying for themselves and relying on family for their care,"

"This is such a complex area and with a large amount of money involved it is often worth consulting a professional care adviser who understands the system and can help fight your corner. They will be able to help you through the process of finding out whether financial support is available or if you need to pay for yourself."

The Just Group research shows that nearly three in four over-45s (73%) who managed to obtain care for a relative said they thought that the care system is complex and almost eight in ten (77%) said they were shocked at how expensive care is. More than half (52%) of all over-45s said that if they approached their council about care needs, they would find it helpful to be referred to a professional financial adviser.

The NCCF have assisted some beneficiaries to access their CHC entitlement.

#### About this research

1. Just Group, online survey among 1,000 adults aged 45 years and older in England and Northern Ireland, conducted 7-13 April 2021 by Opinium
2. Parliamentary & Health Service Ombudsman, Continuing Healthcare: Getting it right first time; <https://www.ombudsman.org.uk/publications/continuing-healthcare-getting-it-right-firsttime/introduction>

# Nearly seven in ten pensioner homeowners eligible for State Benefits are missing out!

Cash-strapped pensioner homeowners are missing out on thousands of pounds of extra income by failing to claim their full entitlement to key means-tested State Benefits.

## 'Just Group's' annual customer insight report reveals

- Nearly half (49%) of homeowners eligible for benefits are failing to claim any benefit
- £1,197 a year in benefit being lost on average by homeowners failing to claim
- Two in 10 (21%) homeowners are underclaiming and missing out on £1,220 extra income
- Just Group calls for benefits information to be at heart of retirement guidance

Just Group's twelfth annual State Benefits insight report found that of pensioner homeowners entitled to receive benefits, nearly half (49%) were failing to claim with each household missing out on an average of £1,197 a year extra income. Two in 10 (21%) who were claiming were receiving too little, on average missing out on £1,220 a year income.

Stephen Lowe, group communications director at retirement specialist Just Group said:

"Every year we find meaningful income that would make a real difference to people's lives is not being claimed,"

"The proportion eligible for a benefit is trending lower but more of those people are failing to claim. It raises serious questions about why people in most need of support are not receiving what is rightly theirs."

The research from Just Group, is based on in-depth fact-finding interviews with clients seeking advice on equity release during 2021. It shows nearly one in four (24%) were entitled to benefits. Of those, nearly half (49%) were not claiming anything and two in 10 (21%) were claiming too little:

"The first step carried out by specialist equity release advisers from our sister company HUB Financial Solutions is to check if clients are eligible for more income from the State," said Stephen Lowe.

"Claiming their full entitlement can give them extra income that will often reduce the amount they need to release or remove the need to release any funds altogether at that time.

"The highest amount of extra income lost was £9,090 a year to a couple in Kent who were receiving some disability and mobility benefits but whom the advisers discovered should also be claiming Guarantee Pension Credit, Savings Pension Credit and Council Tax Reduction.

In total, about one-third of those missing income (30%) were entitled to benefits worth at least £1,000 a year. Guarantee Pension Credit is the main benefit targeted at helping low-income pensioners. It has the highest take up rate of all the four key benefits with seven in 10 (72%) who are eligible claiming. But those failing to claim are missing out on an average £2,265 extra income per year, the most of all the benefits.

Savings Pension Credit has the lowest take-up rate at just 45% of those who are eligible. Those failing to claim are missing out on £596 a year. Council Tax Reduction is claimed by less than half (47%) of those who are entitled to claim with an average shortfall of £748 a year. About a quarter of Just Group's lifetime mortgage enquiries are from those who are yet to reach State Pension Age and become eligible for Pension Credit but who may be able to claim Universal Credit. Takeup among those eligible is just 43% and the average income they are missing out on is £2,806 a year. Overall, 49% of those eligible to claim were totally missing out on one of the key pensioner benefits, 8% were missing out on two benefits and 2% were missing three types of benefit.

Stephen Lowe continued

"Our insight broadly reflects government figures which show that take-up of Guarantee Pension Credit is 70% and Savings Credit 42% overall," "For the two elements of Pension Credit, the government estimates up to a million households are failing to claim up to £1.8 billion or around £1,700 each. Couples are less likely to take up their entitlement than single people and the over-75s are less likely to claim than younger pensioners."

He said the findings once again raise questions about the support and guidance available to those struggling for income, particularly among homeowners.

"It reinforces the message that benefits information is integral to retirement guidance and that those struggling for income should check if they are missing out which many fail to do. Our research last year found nearly half (44%) of homeowners aged over-65 had never checked their entitlement to State Benefits compared to just 16% who are renting."

There are a range of resources to provide information and guidance: The government highlights free, independent third-party benefit calculators at <https://www.gov.uk/benefits-calculators>

Local councils provide information on financial help to pay rent or Council Tax. Organisations such as the Money Advice Service and charities such as Citizens Advice and Age UK can be good sources of assistance.

Professional advisers will charge but can provide regulated advice alongside information about benefit eligibility.

### About this Research

1. DWP, Income-related benefits: estimates of take-up: financial year 2018 to 2019  
<https://www.gov.uk/government/publications/income-related-benefits-estimates-of-take-up-financial-year-2018-to-2019/income-related-benefits-estimates-of-take-up-financial-year-2018-to-2019>
2. HUB Financial Solutions, Nearly half of UK homeowners aged over 65 have never checked their eligibility for State Benefits:  
<https://www.hub-group.co.uk/globalassets/documents/hub-media/nearlyhalf-of-uk-homeowners-aged-over-65-have-never-checked-their-eligibility-for-state-benefits.pdf>

# Funeral Plans and Direct Cremation Funerals

In our May 2019 edition of exposure we featured the services of the Beyond organisation, the people behind the funeral service comparison website which allows you to look at the differing costs of arranging a funeral with companies in your area.

One of the most common things we find when working with applicants for Care Wellbeing and Inclusion fund support is that they are 'ringfencing' considerable sums of money for funeral costs.

The desire to ensure all our loose ends are tidied to make things as easy as we can for our loved ones is hugely important and often beneficiaries who are struggling with everyday costs are holding four or five thousand pounds aside for their funeral.

Whilst the NCCF allow ringfencing of these expenses from the calculating of your wealth cap many other government bodies and organisations do not. This results in further hardship and additional stress.

Rather than holding a large sum of cash in a bank account to be used against funeral costs it makes much better financial sense to take out a funeral plan. Fixing your future funeral cost now regardless of future price rises and releasing some of the funds you were sitting on.

On the internet you will find that the major 'price comparison' sites have a facility to search and compare providers of funeral plans.

There are two main services relating to funeral costs which are as follows.

## 1 Funeral insurance (over 50s plans)

You'll sometimes hear these called over 50s plans. You make regular payments to the insurer and they'll pay out a lump sum when you die.

You don't have to set it up so that your beneficiary uses the payout to cover funeral costs, but many people do and it's often what the payout's used for.

Be wary, you'll make payments right up until you die, or up to a specified age, so you could pay more than you get back.

If you want to cancel your insurance, you won't get your money back. Missed payments often terminate policies, and you could lose the money you've put in. Make sure you're had a good look at the terms and conditions before you take out a plan.

We have come across members of our community who have been paying these insurance policies for many years and have fallen into the trap of not wanting to cancel them as they will lose the money paid in even though they are struggling to keep payments up and have often paid much more in to the policy than the amount that will be paid out.

Because of this fact the NCCF could not recommend this type of arrangement to our beneficiaries.

## 2 Pre-paid Funeral plan

A pre-paid funeral plan is a stand-alone option for paying for your funeral.

You can either pay in advance in one payment or spread the payments for the plan over a number of months. What's included varies – some policies simply cover the funeral director's costs, while others pay for the entire thing, including a plot and the wake.

Cover tends to come in tiers from basic to more premium options. Read all the small print carefully, so you know exactly what's included.

The earlier in life you take out a pre-paid plan the more likely you are to make a significant saving on the ultimate value of your funeral.

The NCCF have been researching the possibility of making pre-paid funeral plans available to our beneficiaries and during this research we came across an interesting contemporary, affordable alternative to the traditional funeral option.

## Direct Cremation Funerals

A Direct Cremation funeral is where an organisation collects your remains and arranges a private cremation, returning your ashes so that the family can arrange their own celebration of your life. The cost of direct cremation is much lower than traditional cremation making it a very appealing alternative.



Our aim is simple. Lead the way as Britain's specialist direct cremation provider and help positively change how we celebrate the lives of our loved ones.

**Celebration of Life™ (CoL™)** have developed a simple comprehensive Direct Cremation service.

### Contact

CoL™ are available 24 hours a day. If you prefer, you can call them in advance to provide some basic information, so when the time comes there is less for loved ones to worry about.

### Collection

They will collect the deceased from anywhere in Great Britain and take care of them at their mortuary facilities. This includes suitable transport to the crematorium for cremation.

### Cremation

CoL™ take care of everything including the removal of artificial devices such as pacemakers and handling of paperwork. The direct cremation will take place at their trusted partner crematorium and they will let next of kin contacts know the date and time it will take place.

### Ashes returned

Delivered on a day that suits the designated contact, usually within 14 days after cremation. Ashes are returned in a biodegradable urn which can be buried or used to scatter in a special location.

### Celebration

Your next of kin are free to gather the people that matter, at a time that suits everyone, to celebrate the life of the loved one in whatever manner has been decided.

### A tree planted in memory

Celebration of Life™ donate to plant a tree with the National Trust 'Plant a Tree Fund' for every service they perform. A certificate is provided in memory of your loved one by the National Trust.



Celebration of Life™ donate to plant a tree with the National Trust 'Plant a Tree Fund' for every service they perform.

pikselstock / Shutterstock

### Pre-Paid Direct Cremation Funeral Plan Free!

The NCCF has partnered with Celebration of Life™ to offer pre-paid Direct Cremation funeral plans to many of our beneficiaries.

If you are eligible to apply for a pre-paid funeral under the NCCF Celebration of Life™ scheme you will have the assurance and comfort that your funeral needs are satisfied and your loved ones will be able to celebrate your life according to your wishes. You will also be able to release any savings you were keeping to cover funeral costs and use them to increase your wellbeing.

### How Does the Scheme Work?

You complete an initial application form and submit it to the NCCF. We evaluate the form and ensure the current criteria are satisfied. Providing you meet the current criteria you will receive your pre-paid funeral package documentation which will contain all the details of your arrangement and contact instructions to give to your next of kin and or executors.

It really is as simple as that, the NCCF will set up and pay for your pre-paid direct cremation funeral plan through Celebration of Life™ with no cost to yourself.

Currently the criteria for receiving an NCCF funded pre-paid direct cremation funeral are as follows:

- British Nuclear Test Veteran
- Resident within Great Britain
- Less than £6,000 in savings and investments
- No current pre-paid funeral plan in place
- Not received compensatory payment relating to test attendance from outside the UK

Depending on how successful the initial uptake of the scheme is we are intending to expand qualification to cover as many members of our community as we are able within budget projection.

Contact the **NCCF** today and ask for your Pre-Paid Direct Cremation Funeral Plan Application Form.

Call: **0115 888 3442**  
Email: **office@thencf.org**

If you are not eligible for assistance please feel free to contact them direct on tel: **08001 503555** or visit: **<https://www.col.co.uk/>**

# No Will? - No Worries!



Following from our story from the Just Group plc on the lack of Wills amongst our community we are pleased to announce that the NCCF have got you covered.

We have now joined with almost two hundred other charities in the National Free Wills Network, A national network of local law firms offering Will writing services to supporters of UK charities.

The National Free Wills Network comprises charities ranging from household names to those with a strong regional or local focus. The purpose of the Network is to offer free Will writing services to the charities' known beneficiaries and supporters.

The National Free Wills Network is a paid-for Wills programme and the NCCF can pay for your will to be written under the scheme.



Having an up-to-date Will prepared by a solicitor is the best way to ensure that your future wishes will be carried out. It is also the perfect way to leave something to help the charity continue their vital work for generations to come, though there is no obligation to do so.

The National Free Wills Network is a closed programme and is not open to the public – the only way to use the Network is to be referred by a recognised charity like the NCCF.

As an Associate Member of the NCCF we can refer your details to the Network and Your Charity Free Wills Pack will be sent to you with all the instructions needed to complete your free Will.

The purpose of the National Free Wills Network is to encourage more people to leave a gift to the charities they love – however, there is no obligation to do so because the NCCF will fund your will whether you decide to leave us a legacy or not.

### **Make or Update your will for free**

Choose from around 885 firms of solicitors across the UK to make or update a simple will free of charge, in person. Our offer is convenient, free and local - most people will have a choice of solicitor firms no more than 15 miles from home. While we hope you consider a gift to the NCCF, there is no obligation.

### **How to Apply**

The NCCF scheme is open to any British Nuclear Test Veteran, their Spouse or Widow and any direct bloodline offspring over the age of 18.

To find out more please contact for your Free Will Application Pack:  
**office@thencf.org**  
**0115 3888442**

**PO Box 8244**  
**Castle Donington**  
**DE74 2BY**



### Exposure Editorial Spring 2022

A round up of what's been happening at the CHRC

P22

### A lay summary of

Mortality and cancer incidence 1952–2017 in participants in the UK's atmospheric nuclear weapon tests and experimental programmes

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# Exposure Editorial Spring 2022



We start with the news that three of our CHRC PhD doctoral researchers have successfully defended their research through formal viva voce examinations. Our congratulations go to George Collett, Amy Prescott and Isabella Bastiani for their respective achievements, both in commitment to their work and in their contributions, which are adding knowledge and understanding to their particular areas of research. We look forward their graduations in the summer and to continued collaboration with them as they embark on their careers.

As many of you will know, the 4th epidemiological update on cancer and mortality in British nuclear test veterans, authored by Gillies and Haylock, was recently published in the Journal of Radiological Protection. This work was undertaken to understand if the excess of cancers in self-identified individuals reported by Knox and colleagues in 1983, was representative of the incidence of cancer for all test veterans.

The Nuclear Weapons Test Participant Study, commission by the Ministry of Defence, is seeking to examine the health of ~22,000 test veterans by collecting and comparing the numbers of cancer and death registrations reported in test veterans with those of control veterans and, the general population. This epidemiological study first published findings up to the end of 1983, then to 1990 and then to 1998. The conclusions of the study up to 1998 included the possibility that test participation could have caused a small increased risk of leukaemia.

The paper just published, describes the 4th epidemiological update of this study and spans the period from 1952 up to 2017. The key message reported by the authors in this latest update is that a small, but measurable, increase both in terms of numbers of deaths and in cancers in nuclear test veterans is seen, when compared to control veterans, which had not been detectable in earlier studies.

The researchers explored this in detail looking at different categories of disease and also, where veterans may have been located and/or their particular job role, to ask if differences were seen and possible causes, including exposure to radiation.

In this Edition, we continue our series of lay summaries with an outline of the 4th epidemiological update, authored by Gillies and Haylock, with a focus on their key findings.

I would like to finish by highlighting the original article published by Collett et al., Exposure worry paper <https://exposure.press/exposure-worry-study-reveals-nature-of-psychological-impact-on-british-nuclear-test-veterans/> accessed through our 'Articles' page and, our 'Basic Information' series which is available as either flip-books or interactive versions, through our **Knowledge Hub** <https://chrc4veterans.uk/knowledge-hub/> page on our website [www.chrc4veterans.uk](http://www.chrc4veterans.uk).

Thank you again to all our volunteers who have contributed to all of our projects. CHRC staff are contactable via email at [CHRC@brunel.ac.uk](mailto:CHRC@brunel.ac.uk).

**Dr Rhona Anderson, Director, CHRC**



George Collett: Exposure worry: an in-depth study of British nuclear test veterans.



Amy Prescott: British nuclear test veterans: The Complexities of Identity, Health and Wellbeing, and the Ageing Process.



Isabella Bastiani: Radiation risks from high-let alpha particle emitters using radium-223 as a model.

# A lay summary of:

## Mortality and cancer incidence 1952–2017 in United Kingdom participants in the United Kingdom’s atmospheric nuclear weapon tests and experimental programmes

Here we present a lay summary of the 4th epidemiological update recently published by Gillies and Haylock. This summary outlines the key research question, how the researchers went about addressing this and, the key findings of the work. You can access more lay summaries and find supporting information on our website Knowledge Hub (<https://chrc4veterans.uk/knowledge-hub/>) – Centre for Health Effects of Radiological and Chemical Agents ([chrc4veterans.uk](https://chrc4veterans.uk))

### What were the research questions?

The Nuclear Weapons Test Participant Study is assessing the health impact of being present at sites used in the British nuclear testing programme. The study has previously reported on three occasions. The first presented information on the numbers of death and cancers documented in national registers up in 1983, the second up to 1990 and the third up to 1998. The findings of these studies revealed no detectable effect on overall life expectancy or, on total risk of cancer, when compared to a control group of veterans. The studies did show some evidence for a small excess in leukaemia, particularly in the early years after the tests which the authors describe as meaning a small increased risk of leukaemia could not be ruled out.

The purpose of the work reported by Gillies and Haylock is to strengthen the statistical power and the certainty in understanding by increasing the follow-up period to 2017. This adds an additional 19 years of reported mortality (deaths) and cancer incidence to the epidemiological dataset and with an average veteran age of 81, would represent the lifetime impact of test participation on health.

### How was the scientific problem approached?

An epidemiological case-control study was set up and previously described by colleagues of the authors. This included military veterans from all services and civilian employees of Atomic Weapons Establishment (AWE) and Atomic Energy Research Establishment who had been present at one or more nuclear test sites or, had sampled radioactive plumes. A total of 21,357 test participants were verified mainly through information obtained from MoD records. A control group of 22,312 veteran or AWE personnel who did not participate in the tests, who were matched for age, service, rank and date of entry to the study, were also recruited to the epidemiological study.

### What did the research involve?

Information on the number of deaths, including their cause of death and, the number diagnosed with cancer was determined for all individuals within the test and control group. This information was obtained from national registries.

These numbers were then compared in two different ways.

- Numbers in test and control groups were compared with expected numbers of deaths and cancers assuming similar rates to the general population. These are known as standardised mortality ratio (SMR) or standardised incidence ratio (SIR).
- Numbers were compared directly between test and control groups. This is expressed as a relative risk (RR) or risk in test participants relative to control group.

For each of these statistical comparisons, some sub-group analysis to examine for specific cause of death or cancer sub-types were performed in addition to sub-group analysis considering recorded radiation exposure levels and/or different high-risk job roles.

## What did they find?

### Compared to general population:

The proportion of deaths in the test participants is lower than that expected in the general population (SMR=90,  $p < 0.001$ ). This was due to their being less non-cancer related deaths (SMR=85,  $p < 0.001$ ). The number of cancer related deaths (SMR=97,  $p = 0.08$ ) and cancer diagnosis (SIR=101,  $p = 0.27$ ) was similar to those seen in the general population.

### Compared to control veterans and AWE workers

A small increase (2%) in number of deaths in test participants was recorded compared to controls (RR=1.02, 90% CI 1.00-1.05,  $p = 0.04$ ). The number of deaths from cancer was 3% higher (RR 1.03, 90% CI 1.00-1.07) while for non-cancer diseases the figure was 2% (RR=1.02, 90% CI 1.00-1.05).

Several specific cancers contributed to these higher rates including non-CLL leukaemia, cancers of the stomach, bladder, prostate and respiratory organs.

The diagnosis of chronic myeloid leukaemia (CML) is higher in the test participants in comparison with both the national population (SIR=151,  $p = 0.03$ ) and the control group (RR 2.43, 90% CI 1.43-4.13,  $p = 0.003$ ).

Prostate, brain and non-melanoma skin cancer also showed some evidence of being reported more in sub-groups who had a greater potential for exposure.

For non-cancer diseases, the increase in number of deaths was mainly due to cerebrovascular disease.

## How did the researchers interpret their results?

The authors highlight that differences in characteristics, such as smoking habits, between the participation and control groups could be an explanation for the small increases in death and disease.

The authors suggest their findings indicate the potential for test participation to lead to a small increase in risk of non-CLL leukaemia cannot be ruled out. They highlight the risk for this appears stronger for CML whilst noting this is a rare disease with only 32 instances observed among the participants and 14 among the controls.

The authors state there was some evidence that the number of reported incidences is increased in those participants most likely to have been exposed to radiation and, in those groups most likely to have been exposed to internal emitters. However, they caution interpretation as the actual numbers of individuals in these sub-groups is very low.

Overall, they state that a small impact of test participation for the small increases in death and disease cannot be ruled out.

### Who did this research?

Researchers of the UK Health Security Agency carried out this work.

## Key messages

- study examines the lifelong impact of participation at test sites
- number of deaths registered among the test participants (and the controls) is lower than expected from national rates
- number of deaths registered in participants is slightly (2%) higher than in the control group
- evidence for an increased risk of leukaemia, particularly CML, in comparison with both the national population and the control group
- some evidence that participants had higher mortality rates from cerebrovascular diseases
- background characteristics of the participant and the control group (e.g. smoking habits, diet) are not known and could be responsible for the differences reported
- a small long-term detrimental health effect associated with participation in the tests cannot be completely ruled out

## Full Reference:

Gillies, M and Haylock, R G E. (2022) Mortality and cancer incidence 1952–2017 in United Kingdom participants in the United Kingdom's atmospheric nuclear weapon tests and experimental programmes. *Journal of Radiological Protection*. 42 021507

<https://doi.org/10.1088/1361-6498/ac52b4>

# RAF Cosford Visit

Last August the BNTVA organised a trip to RAF Museum at Cosford as part of their conference. Due to a busy schedule I was unable to attend the visit, but on seeing their report I decided to visit the museum for myself.

RAF Cosford, the site of the RAF Museum was opened in 1938. It was set up to deliver operations training to technicians and ground trade recruits. Cosford along with other RAF stations stored aircraft for the RAF Museum at Hendon. The museum at RAF Cosford began in the spring of 1974 with monthly openings to view aircraft.

In 1977 the volunteer group, the *Aerospace Museum Society* was founded which ran events, raised funds, and restored and conserved aircraft as well as informing visitors to the Museum. In 1979, the trustees took over the management of the Museum and then in 1998 an arrangement between the MOD and the RAF Museum, passed ownership of the collection to the RAF Museum which became *RAF Museum Cosford*.

Since then the site has seen the development of a Visitor Centre, a Conference Centre and a Conservation Centre named after the then Marshall of the RAF Sir Michael Beetham. In 2007 the National Cold War Exhibition in Hanger 4 was opened.

Parking is situated straight in front of the entrance to the museum. Access is very good with ramps from the car park to the main entrance. Entry to the museum is free but donations can be made, and the car park is pay and display. Staff at the museum are very helpful and we were told which way to proceed and what time guided tours could be taken.

Walking from the visitor centre, several aircraft are on display including the Hawker Siddeley Nimrod R Mk1 which can be toured in spring and summer.

Hangar 2 is the first part of the tour displaying the history of the RAF from its formation during WWI to the its role in our defence today. Exhibits feature stories about the people who served and a huge amount of objects that show the history of the RAF across 100 years. The next area is Test Flight – this contains prototype aircraft used to test new designs and features that not all of which would go into production. Notable aircraft include: Hawker Siddeley Kestral that went on to become the Harrier, the Euro Fighter Typhoon and the BAC TSR 2 Strike and reconnaissance aircraft.



Hawker Siddeley Nimrod R Mk1 – Electronic Intelligence variant



Hangar 2: Hawker Siddeley Kestral F(GA).1  
– Later developed into the Harrier



Hangar 2: Bristol 188 – Supersonic research aircraft



Hangar 3: Spitfire Mk1 – Oldest surviving MK1 in the world



Hangar 3: de Havilland Mosquito TT35

Hangar 3, War in the air was next on the tour which features aircraft from WW1 and WW2. The Sopwith Pup and Sopwith 1½ Strutter are two examples of British planes from this era but the majority are from WW2. Not only does museum exhibit Allied aircraft, many Axis aircraft are also in the collection.

What is very interesting are the numerous information boards giving personal details about the servicemen and women who fought in the wars. One Board depicts Wing Commander Eric James Brindley Nicholson VC DFC who despite being injured and his Hurricane on fire, shot down an enemy aircraft and was awarded the Victoria Cross for his bravery.

I was able to get up close to the Lancaster bomber exhibit and was able to stand underneath it with the bomb bay doors open. This gives you a sense of just what the aircraft was capable of carrying, the space was vast.

Moving through Hangar 3, there are a lot of familiar aircraft on show including: Spitfire Mk1, Hurricane IIC, de Havilland Mosquito TT35, Messerschmitt BF109G-2, and various other Axis forces fighters and bombers. It's an impressive collection and again includes lots of objects such as squadron mascots and flight uniforms.

Next is Hanger 4, which houses The National Cold War exhibition which is the highlight of the museum. The Hangar itself is visually stunning with its sloping angular sides and is packed literally to the rafters with aircraft, missiles and vehicles.

No exhibition would be complete without Britain's V-Bombers and the exhibition has all three.

The Vickers Valiant XD818 flown by Captain Ken Hubbard which dropped the first bomb in operation Grapple, is housed within the hanger. We were able to walk around the whole aircraft and also take a look into the plane via the port crew door just to the rear of the cockpit. This area housed the navigators and electronics operator and to the rear you can see the soup heater.

Next was the Handley page Victor the last of the V-bombers. designed as a strategic nuclear bomber, but later were converted to in-flight refuelling tankers, remaining in service until 1993. Much use was made of them in the 1982 Falklands campaign and the 1991 Gulf War.

And finally we saw the Avro Vulcan B2 Bomber, the second of the RAF's V-Bombers. By 1966 Vulcan's switched from high level to low level attack due to improved Russian missile defence.

In 1970 Vulcan's were switched to a conventional bomber role with their range greatly increased by in-flight refuelling. This was used to such good effect in the long range attacks on the Falkland Islands from Ascension Island in 1982. The last Vulcan retired from operational service in 1984.

The Cold War Hanger also shows our Nuclear deterrent missiles including the Thor, Polaris and Blue Steel as well as many other aircraft and weapons systems.

For anyone who is interested in the British Nuclear deterrent and anyone involved in the nuclear community this is a must see exhibition. All information is superbly laid out and easy to read. The hanger is split into 2 levels but access is no problem with a lifts and stairs between the floors.

RAF Cosford can be found at **Lysander Ave, Cosford, Shifnal TF11 8UP.**

Tickets do need to be booked in advance but can be booked online at <https://www.rafmuseum.org.uk/midlands/>

For any other enquiries email: [cosford@rafmuseum.org](mailto:cosford@rafmuseum.org) or telephone: **01902 376 200**

**Editor - Exposure**



Hangar 4: Vickers Valiant XD818 with Canberra PR9 above



Hangar 4: Vickers Valiant XD818 with crew door removed for viewing



Hangar 4: Handley Page Victor K2



Hangar 4: Interior of the Vickers Valiant



Hangar 4: Avro Vulcan B2 with BAC Bloodhound Missile in the foreground



Hangar 4: Various cold war era vehicles

# exposure

The combined magazine for the nuclear community

Next issue copy  
deadline for all  
editorial sections:  
**31st Jul 2022**

Contributions for Exposure  
magazine should go to the  
relevant section editor:

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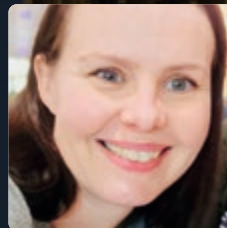
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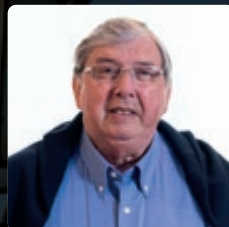
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