



Australian Government

National Mental Health Commission

Mr Robert Fitzgerald AM
Presiding Commissioner
Productivity Commission
Email: veterans@pc.gov.au

**Submission into the Compensation and Rehabilitation for Veterans inquiry draft report
– A better Way to Support Veterans**

Dear Mr Fitzgerald

Thank you for the opportunity to provide feedback on the Compensation and Rehabilitation for Veterans inquiry draft report – A better Way to Support Veterans (Draft report).

The National Mental Health Commission's (NMHC) purpose is to provide insight, advice and evidence on ways to continuously improve Australia's mental health and suicide prevention systems and to act as a catalyst for change to achieve those improvements.

The NMHC is pleased to see that the Draft report recommends practical, timely reform designed to implement a veteran-centric, wellness focused, needs-based, lifetime approach to supporting veterans and their families. A number of the recommendations made in the Draft report reflect the findings of the NMHC's Review into the Suicide and Self-Harm Prevention Services Available to current and former serving Australian Defence Force (ADF) members and their families (the Review).

Regarding the Draft report's Information Request 7.1, which seeks feedback on the period of time that the proposed Joint Transition Command should have responsibility for providing support to members and former members of the ADF who require that support, the NMHC would like to submit the following information for consideration.

As found in the Review, some serving members experience transition from the ADF as a significant adverse life event, which can increase their risk of suicide and self-harm.

A number of submissions to the Review suggested the goal of transition should be to successfully integrate ex-service personnel into the civilian community, and that successful transition processes require a plan and a number of interactions with the ex-service member after discharge, including annual reviews. These submissions suggested continuity of service delivery during the transition period is important and that the ADF needs to ensure ongoing case management and engagement through civilian service providers.

Subsequent analysis published by the Australian Institute of Health and Welfare (AIHW) shows that ex-serving men have a higher suicide rate than men in the general population and that 71% of suicide deaths among ex-serving men occur within six years of discharge from the ADF, with the highest number of suicides occurring in the first and fifth years following discharge. While the AIHW's analysis was not able to test if these deaths are related to difficulties transitioning to civilian life, the data does suggest that some ex-serving personnel may have difficulty establishing or





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maintaining a meaningful and fulfilling life outside the ADF, for a number of years post-discharge. It is likely that these ex-serving personnel require support during this time.

The NMHC recommends that the proposed Joint Transition Command have responsibility for providing support to members and former members of the ADF for a period that aligns with this higher-risk period post-discharge. A lengthy period of responsibility would ensure continuity of care is maintained over this high risk period and provide the opportunity for multiple annual reviews, including evaluation and refinement of support needs, to ensure the former member has successfully integrated into the civilian community.

Consistent with the principal of creating a needs-based supports system, consideration should also be given to establishing provisions for the Joint Transition Command's responsibility to be extended, on a case by case basis, for ex-serving personnel who are found to require additional support at the end of the defined period.

Please contact Catherine Brown, Director , [should you have any questions regarding this submission.](#)

Yours sincerely

Ms Maureen Lewis
Interim Chief Executive Officer
National Mental Health Commission
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