**IN REPLY To the Draft report - A Better Way to Support Veterans**

As a Veteran that falls under both the Veterans Act and DRCA, while also being the subject of a wide-ranging defence inquiry, I wish to give some feed back by way of a letter as to the Commission’s review into DVA and the proposals contained in the draft report.

I am a former Regular Infantryman with Active Service overseas. I am currently classified as a “Contemporary Veteran” by the Department of Veterans Affairs and was aged 25 when I first saw Operational Service in East Timor as a member of 4RAR(Cdo). I wish to comment on my experiences to shed light on the experiences of Veteran’s who have had their lives irreversibly changed in service of Australia.

The Productivity report acknowledges serious problems into the Department of Veterans’ Affairs.

After looking at what has been put forward by the Productivity Commission staff, I believe a Royal Commission is the only way to highlight and address the current Acts failings to allow the multitude of cases to be brought into light to highlight the struggles Veterans face in dealing with the endless bureaucracy causing so many of our Veterans to choose to end their lives when the sense of futility overwhelms them.

In my opinion this report isn’t fixing things, just copying and pasting current flawed acts which are the reason for the raised suicide rates in the first place. I feel the recommendations of this report are using the most adversarial parts of modern Acts to further the Government’s agenda with cost cutting over Veterans’ welfare.

If you wish to recruit the finest men and women Australia has to offer, they need to know someone will appreciate their sacrifice when the sun goes down on their service. Why would anyone sign up to put their life on the line if their Government won’t support them when they can no longer serve? I feel that the report and recommendations fail to appreciate the dedicated service and sacrifices made by our service people.

I can briefly outline my experiences as a Veteran under the current Acts in relation to your proposals, and why I think the Government’s current proposals for change are flawed .I am writing a short history to show you the treatment under a similar model to the one you are proposing was a nightmare.

I was medically discharged from the Army in 2004 following a major brain haemorrhage suffered whilst testing for Special Forces. After the injury I was unable to care for myself and received minimal pre and post discharge support leaving me to navigate the different systems on my own in my diminished state. Post discharge there were issues found in a Military inquiry reguarding both Defence and Veterans’ Affairs. The Inquiry was headed by the Deputy Chief of the Army Major General Gordon and given to the then Minister of Defence (Reference number 2005/1052745/3DCA/OUT/2006/). I believe there were findings outlined in this extensive report that would be of benefit to this current review.

My Mother (legal carer) along with my Father and I, were flown to Parliament House where we had a meeting with the Minister for Veterans’ Affairs to discuss the outcome and troubles, we had experienced particularly with DRCA. We also a had a Senator by the name Andrew Bartlett who had a hand in writing the legislation DRCA fly up for a few days to look at the case and treatment. Senator Bartlett commented that he thought the Act wasn’t being interpreted and executed the way he had written it and also gave a speech about his findings to the parliament as well as several media interviews.

Being unable to self-care post discharge, a long hard fight ensued that was done on my behalf by a Veterans’ Advocate, my family and a number of lawyers (Due to the complexities around the Act’s and my condition I had limited ability to choose/comprehend which Act was best suited for me and ended up with what others thought the best outcome for me at the time). My claim went all the way to the AAT and I was given a Total Permanent Disability rating of 84% (Permanent Impairment Guide) under SRCA (now DRCA) including the Severe Injury Adjustment (a severe injury adjustment is payable to a person who has been assessed as having 80% or more whole person impairment under section 24 of the Safety Rehabilitation and Compensation Act 1988 [SRCA]. Additionally, as the person must have suffered an injury to the brain or spinal cord resulting in paraplegia, hemiplegia, quadriplegia, an organic brain syndrome, [blindness](http://clik.dva.gov.au/%23) or a condition of similar effect).

I was also granted a Reviewable incapacity payment from Military Super called a Class A Pension, a separate claim so two reviews on my health status both temporary incapacity payments not the certainty of pension type payments. The fight was draining on myself and family leaving us all with the distinct impression that DVA hope you either give up or suicide.

I found my time under the DRCA Act which is a foundation of the MRCA act and the model you are proposing to be a nightmare of ongoing review cycles relating to my incapacity payments. It was hard to organise treatment and travel, with no Gold Card eligibility under this Act or TPI type rating ever being written into law to compensate despite such a high impairment (84% Permanent Impairment Guide), along with the uncertainty of being on reviewable incapacity payments detrimental to my health.

I have been hospitalised numerous times with extended stays under the care of mental health professionals and medical staff. The cost of fighting the claimant and repeated reviews in my opinion would be significant and I don’t understand why the commission’s report is advocating such an approach particularly for Veterans with high level incapacity. If I make it to retirement age, I will be rewarded by having my payment ( DRCA) cut. Bearing in mind I have no superannuation as the “top up super payment” given to the Class A super pension will also cease and the ability to earn has been taken away from me.

The impression that plays on my mind is veterans with minimal Superannuation due to forced medical discharge are left in an extremely unenviable position of payments ceasing and no real superannuation amount to count on as the ability to earn was forfeited in service to Australia. They will however be left with their impairments and in my case a life time of notional super payments amassing to the grand total amount of zero dollars towards my superfund, not a great morale booster.

I eventually received a Gold Card for separate operational service impairments under the Veterans act along with a disability pension of 100% (GARP).Offsetting from DRCA and Military Super Acts has stopped me from being fully in the Veterans’ Act system. The Gold card has made treatment so much easier I didn’t feel like I had won a “prize”, just relief that I could receive treatment.

I can tell you the difference in the way you are treated and benefits between the two Acts is night and day. The Veterans’ Act treats you really well with respect. The DRCA Act on the other hand does not treat you with any respect and is very hard to deal with. I am often left feeling psychically ill with its review cycles. Even at the severe Injury Adjustment level this continually occurs.

I note that the draft report recommendation (17.1) wants to choose what system multi-Act people go in and not let the Veteran choose. For me the report implies Veterans’ in my position would lose their Gold Card and Disability Pension if they were forcibly taken out of VEA and into the new MRCA Act with DRCA provisions remaining. This is detrimental and contradictory to stating that no current veteran would be worse off.

The report recommends that DRCA people still do not have a right to a Gold Card, so it’s a disadvantage. What causes major discomfort is that I stand alongside veterans with the same operational service but because my retiring impairment happened in Australia during Special Forces selection I am treated different than a Veteran who received their injury during operational service only with different levels of care being given .I have the same service with injuries from the same places but overlapping acts discriminate. The report was sparked by unacceptable levels of suicide in ex-service personnel I believe this discrimination is a factor.

I note the report recommends using the White Card model even for Veterans with Severe Incapacity.

This concerns me as I can recall a number of painful experiences of being treated under the DRCA including those outlined in the following paragraphs.

I was hurriedly admitted into psychiatric care shortly thereafter, DVA (DRCA) turned around and said my psychiatric care wasn’t covered by the Act as it wasn’t considered a side effect of the major brain haemorrhage, I had suffered. After correspondence from my lawyer and an incredible amount of stress to myself and my family, I eventually received some form of cover under the Act. I believe for part of it my treating Doctor used the Veterans’ Act to keep me in the hospital as I was also a veteran with a then white card under the Veterans’ Act.

As I reside out of a large City, my approved carer and I were forced to pay upfront for all of my long-distance travel to Brisbane to see specialists .Whilst I could claim the expenses after the travel, it was a significant financial burden often combining multiple trips totalling at times thousands of dollars prior to my claims being processed. The anxiety that my claims needed to be accepted added to the physical and emotional strain.

This approach has been directly detrimental to my health and being made to fight to have every impairment covered one by one as recommended in the report just doesn’t work particularly at high level its extremely degrading to be put through it.

Post discharge I have found the review cycle system I am subject to under the DRCA and the model you are pushing instead of a permanent impairment pension-based system I have under the Veterans’ Act, extremely detrimental to my mental health. After being hospitalised on numerous occasions into the care of mental health professionals due to being unable to cope, if it were not for the support my Uncle, a Veteran himself, helping to get me into Psychiatric care I am sure I would be dead. I certainly don’t feel that I received adequate assistance from anyone dealing with my case under the DRCA incapacity model.

Something I experienced and the Draft Report seem to avoid focusing on is the lack of assistance to Veterans offered post-discharge. I personally received next to no help post-discharge from the Army or DVA, just a deeply offensive adversarial response towards me at every turn. I felt, and continue to feel, I carry the onus to continually prove my legitimacy. I sincerely feel the Department’s attitude is that they hope you either drop your claim “Give up” or commit suicide.

In summary the report done by the Army in my case, points to why the Military is best left to do its job in the defence of Australia and is not suited to Veterans administration. The Productivity Report asks if the Defence should have a hand in looking after Veterans. The answer is clear in black and white with accounts of failings in areas to carry out duty of care.

The Veterans’ Entitlement Act with its pension-based support and Gold Card if needed is by far the best Act for caring for Veterans with very high degrees of disability. I believe from experience the approach you are proposing to be a combative adversarial system where a great deal of money is spent on reports. This productivity report should have been not have been sanctioned with an agenda of saving money over Veterans' health.

I believe that there absolutely needs to be a Royal Commission with much wider terms of reference then this upcoming Productivity Report to get the Veterans’ entitlements right. I hope my input of experience under both Acts is of some help in relation to the proposals being put forward.

This Submission was written with the Help of my mother.