**SUBMISSION ON THE**

**DRAFT REPORT BY THE PRODUCTIVITY COMMISSION INTO VETERANS**

**3 What objectives for a veteran support system?**

The overarching objective of the veteran support system should be to improve the lives or wellbeing of veterans and their families (this aligns with what participants told the Commission the objectives of the system should be, box 3). This has at its core minimising the harm from service to veterans and their families. This should be achieved by:

  preventing and minimizing injury and illness

 restoring injured and ill veterans by providing timely and effective rehabilitation and health care so they can participate in employment and life

 providing effective transition support for veterans and their families

 enabling opportunities for social integration

 providing adequate and appropriate compensation for veterans (or, if the veteran dies, their family) for pain and suffering and lost income from service-related harm.

**THE VETERAN SUPPORT SYSTEM**

**Preventing and minimizing injury and illness.**

Defence Service is unique in not only the deployed roles, but also in peace time operations. Although Defence provides training the inherent activities conducted by Defence are dangerous, risk assessments give a level of threat to an individual, however mission changes, fatigue mental and physical and simple human response can change any planned activity…..put simply Accidents can and will happen.

**Restoring injured and ill veterans by providing timely and effective rehabilitation and health care so they can participate in employment and life**

Veterans injured in Service of the country are provided the highest level of medical support and rehabilitation to return to a condition where they can return to a fighting state.

While all efforts are made to support the veteran it is inevitably about the Service and if the member falls behind in the schedule or does not respond to treatment like “everyone else” they are then pidgeon holed and medically downgraded to match a set of policy rules based on outdated and over quoted resources.

Rehabilitation is outsourced to civilian organisations that do not understand nor take into account the full nature of Service life.

Health care post Defence separation, while the required standard within the community, again does not understand the vulnerabilities of Defence members.

**Providing effective transition support for veterans and their families**

The current transition system is broken!!!!!

Members transitioning through medical separation are treated differently than those separating by own choice.

Individual Services transition members from service in different ways.

The service connection of a member runs much deeper than a uniform and an id card. The connection of family before self, the indoctrination to a specific set of values and beliefs and the lifestyle within the tight knit community of Defence cannot be replicated in everyday civilian life without specialist support. This goes not only for the member but their partner and dependents as well, who also become part of the bigger Defence Family and when a member is isolated through separation so are their immediate family.

**Enabling opportunities for social integration**

This is easier said than done, again depending on the unique Service of the member as to how socially integrated they are and also how integrated their families are.

Internal social enterprises such as Defence Community Organisation, Defence National Welfare Coordination Centre and even Unit Welfare Officers and support teams are only as effective as the personalities in the positions. By personal example, over an almost thirty year career my spouse was contacted by DCO once, received no contact or support while I was deployed twice, and no support while I was posted Member Unaccompanied on four separate occasions. Our story has many parallel in the modern Defence Community where members do not come from tight knit Arms Corp Units or units that deploy as a formed body on a regular basis. Most families now live in isolation due to the demise of Defence communities, and the requirements for members to live further and further away from their workplace.

Most Defence members do not have a wide social basis outside of work, this insular connection especially at the junior ranks means that members separating literally feel the door slam behind them and are thrust into the isolation of the civilian world, the anxiety of separation and the grief emotion caused by this loss are driving factors into depression and in some cases the member committing suicide or self-harm.

Connection with ex service organisations before separation, enables for the member and their family to not feel as isolated as they transition from Defence.

**Providing adequate and appropriate compensation for veterans (or, if the veteran dies, their family) for pain and suffering and lost income from service-related harm.**

DVA currently provide the compensation element for Defence. A member is encouraged to submit a claim for liability and compensation prior to separation for any service related injury or illness, however there are many caveats, time limits and policy constraints that either prevent a member from submitting a claim, or through the bureaucracy the member becomes so disheartened that they withdraw their application or do not follow through once liability has been accepted.

Since federation Defence members have been lumped under one or multiple compensation and Rehabilitation Acts. DVA has inherited a complicated and convoluted system, over the past two years the introduction of the My Service Application has simplified the process and displayed a side of DVA that was rarely seen in the past, that of human interaction.

The complicated system of multiple Acts of compensation applied to varying conditions of employment over multiple generations of Service personnel will take more than a quick fix to sort out.

The retrospective application of a new Act to previous cases could develop into a loss of entitlements or exclusion from previously accepted conditions that no longer apply (eg, mustard gas exposure)

The Veterans Entitlements Act (VEA), Service Related Compensation Act (SRCA), Military Rehabilitation and Compensation Act, and now the Defence Related Compensation Act (DRCA) are individual Acts that covered unique periods of Service, and as such members Service may be covered by multiple Acts, which complicates the situation further and proves that everyone cannot be tarred with the same brush.

***The only way that this system could be simplified is if all members received a Veterans Gold Card on separation from Defence to cover all medical expenses, whether Service related on not, the same as level of medical care provided while the member was serving.*** Compensation could then be looked at on an individual basis as no two members have experienced the exact same service conditions throughout their entire period of service.

**Box 3 A focus on wellbeing and rebuilding lives**

The Department of Defence said that the priority objectives for veterans’ support should be: … to **ensure the long-term wellbeing, successful rehabilitation and transition for veterans into civilian life**.

The Air Force Association: Any compensation and rehabilitation system for veterans and their families must be ‘fit for purpose’, **recognising the unique nature of military service**. Its principal aim is to return the veteran who has suffered injury or illness due to service duty to his/her former physical and/or mental health state and when this is not possible provide life-long treatment and financial support.

The Defence Force Welfare Association: If the member was broken due to military service to the Nation, then **the Nation has a moral obligation to restore and financially support the person to an ‘as new’ condition as possible**.

RSL Australia National Office: The primary objective for an ADF member who has suffered an injury or disease should always be a return to health and a return to work, as this is the best outcome for the member’s physical and mental health, their family, the ADF and any future employers.

Stephan Rudzki: … soldiers wish to be rehabilitated and **return to some form of productive work**. Having a job is a **very important component of overall health and mental well-being**.

Mates4Mates: It is important that veterans, their families and the whole community understand that despite a physical or psychological injury, veterans have the capacity to lead very active, purposeful and fulfilling lives … Research indicates that **employment can be a restorative psychological process.** There is no substitute for what employment offers in the way of **structure, support and meaning.** Positive and meaningful employment experiences are linked to improved **self-esteem, self-efficacy and high levels of personal empowerment** — all of which have a positive effect on mental health and wellbeing.

**Figure 5 Life stages of full-time military personnel**