

Stakeholder
Engagement: What we heard about veteran mental health and wellbeing

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Acknowledgements

We gratefully acknowledge the more than 1400 people from veteran community groups, organisations and individuals who responded to our survey, participated in group discussions, had a telephone conversation with us, and wrote to us, and everyone else who gave so generously of their time, knowledge and experience.

We humbly acknowledge the generosity of the traditional custodians who welcomed us onto their ancestral lands and pay our respect to Elders past and present. We recognise and celebrate Aboriginal and Torres Strait Islander people as the First Peoples of Australia and their continuing spiritual and cultural connection to land, sea and community. We acknowledge the many First Nations people who have served in the Australian Defence Force and their families.

Military Service

The nature of military service has significant differences to civilian employment and places unique demands on, and requires sacrifices from, both ADF members and families. We would like to acknowledge and thank those who serve for their commitment to protecting Australia.

Help is available for you, or someone you know.

In the case of an emergency call 000.



If the content of this document raises any concerns for you, call <u>Open Arms - Veterans and Families Counselling</u> 24-hours helpline on **1800 011 046** for support. Open Arms provide free and confidential counselling to anyone who has served at least one day in the ADF, and their families.

If you or someone you know is distressed, please consider contacting one of the following services.

Lifeline Australia 13 11 14

Suicide Call Back 1300 659 467

Kids Help Line 1800 551 800

BeyondBlue 1300 224 636

1800 Respect 1800 737 732

MensLine Australia 1300 789 978

<u>Life in Mind</u> Suicide Prevention Portal

Executive Summary

This report is a summary of what the veteran community told us in our consultations about what is important to be considered for the new Defence and Veteran Mental Health and Wellbeing Strategy.

In all, we heard from more than 1400 participants including veterans, community groups, peak bodies, government agencies, and more. People got in touch with us by e-mail and telephone, social media, joined us in group conversations, and participated in an online survey. We promoted the consultation widely, taking care to reach as many people as possible across the country.

We have used direct quotes throughout this report to reflect the insights and thoughts that the veteran community shared with us through the consultation. Please note that the content and language used in these quotes is that of people's direct experience and may be distressing to some readers. Reading about mental health and wellbeing can raise all sorts of feelings; if you are worried about how you are feeling and would like to talk to someone, at the beginning of this report we have provided details of some places you can contact for support.

Introduction

The Department of Veterans' Affairs (DVA) is currently working with the Department of Defence (Defence) to develop the new joint Defence and Veteran Mental Health and Wellbeing Strategy (the Strategy).

DVA has been undertaking extensive stakeholder engagement with groups including veterans, their families, Ex-Service Organisation (ESO) groups, service providers, DVA staff with lived experience, and internal DVA policy and program teams.

Consultation has included a veteran specific survey, a roundtable event with mental health experts, internal webinars and workshops, and live public webinars advertised through DVA social media.

In total, around 1,400 individuals have been involved in consultations for the Strategy.

The information below summarises the individual consultations to date and the key themes. Feedback from consultations is being used to guide the development of the Strategy and action plans.

The Mental Health Roundtable

A roundtable with mental health experts was held at Parliament House, Canberra, on Monday, 7 August 2023, 9:00am – 11:30am led by Minister Keogh. Twelve (12) mental health experts attended and were asked to provide contribution to guide the development of the Defence and Veteran Mental Health and Wellbeing Strategy (the Strategy). Specifically, they were asked to comment on:

- Their 'top three' priorities to shape the new Strategy
- Issues and limitations with existing strategies and opportunities for improvement; and
- Opportunities to improve the mental health and wellbeing supports (individual and organisational) for defence members and veterans across the lifespan.

Key themes from the roundtable included:

- Evidence-based care and using data already collected
- A connected, coordinated system of care across Departments and disciplines
- Cultural expertise in military and veteran life and healthcare
- Embedding lived experience voices and co-design in the Strategy
- Transition and maintaining connections outside of Defence
- Incorporating the social determinants of health

The Veteran Survey

A survey was released on 31 July 2023 to seek the veteran community's views on priorities for inclusion in the Strategy. The survey closed after four weeks on 28 August 2023.

We heard back from 1274 participants through our survey, of which 80% were former serving ADF members. Participants included 24% females, 74% males. Other participants chose to not identify their gender.

Current Strategy

46% of participants were not familiar at all with the Veteran Mental Health and Wellbeing Strategy 2020-2023 (the current Strategy), which suggest we need to do more to make the new strategy more accessible. Of those who were familiar with the current Strategy, 48% of participants agreed or strongly agreed that the current strategy covered what's important for the mental health and wellbeing of veterans and their families. Again, of those participants who were familiar with the current strategy, supporting veterans and their families to transition well from military to civilian life was ranked as the most important of the four current priorities listed in the strategy.

Mental Health Support

When asked what kind of mental health support is most important to you, the majority of participants indicated that professional support from psychologists and psychiatrists, etc., was their first preference. Informal support from family, friends and the community was the second preference and peer support the third. A total of 42% of participants indicated that they currently sought help through DVA funded services, 27% tapped into informal community and family support, and 27% indicated that they were not currently accessing any supports. For those who responded yes to the question about accessing mental health and wellbeing supports, 59% responded that the support did not fully meet their needs.

New Strategy

When asked about the key priorities for the new Strategy, the majority of participants identified that having access to mental health and wellbeing services where and when people need them was their first preference. Reduced system and process barriers and involving individuals with lived experience and their families when designing mental health and wellbeing programs, policies and initiatives were ranked as second and third preferences for priority areas.

Live Webinars

Live webinars were held from 6-7pm on the 5th and 9th October and ran for one hour. Registrations were open to the public for approximately 1.5 weeks and were communicated through relevant DVA media channels. Each registered attendee was provided with event details and links.

5th October 2023

There were 38 registered participants for the live webinar and around 10 attended. The panel included representation from both DVA and Defence.

Participants were provided background on the Strategy and the context behind the development of a joint strategy which take a whole-of-life approach. Participants were walked through themes raised throughout consultation to-date and were asked a number of questions regarding: their priority areas for action; their views on what more can be done to ensure supports are meeting the needs of veterans and their families; and barriers for accessing care and ideas to address these.

Key questions raised from participants included:

What is the role of mainstream health/mental health services in supporting veterans?

Will the strategy also consider the mental health of spouses and family members?

How will you promote the strategy to ensure current and ex-serving personnel and their families are aware of it?

What actions will be taken to improve access to psychologists who understand the veteran community?

Key Themes raised

Questions posed in the chat	Themes from participants
What are your top two actions you think DVA and Defence should focus on for the new Mental Health and Wellbeing Strategy? In your view, what more can be done to ensure supports and services	 Teams across Australia who can provide holistic ongoing case work services to Veterans and their families A coordinated system of care Veteran centric care and mental health support services Community based mental health service support services (that are separate to ESOs and fill a huge gap that currently exists) DVA/Open arms should not be a service provider, they should be a service facilitator Industry standards should include collaboration with other service providers to create a net of care around the veteran
meet veterans and families' needs? What do you think are the barriers for accessing mental health support and services?	 The need to get a GP referral to access support services Hard to access crisis care

Questions posed Themes from participants in the chat Can we simply access support services by showing our gold or white card How can we address these barriers? **Questions that** What is the role of mainstream health/mental health in supporting veterans? came through Will this strategy also look at improving mental health of spouses and family from the public members? How will you promote the strategy to ensure and encourage our Veteran Community to learn more about it and how it will hopefully help them and their families - covering all current serving and former serving ADF members and their families across Australia? What actions are you going to take to improve access to psychologists who understand veterans?

9th October 2023

In all, 67 participants had registered for the event, with around 20 attending the webinar.

The panel included representation from both DVA and Defence.

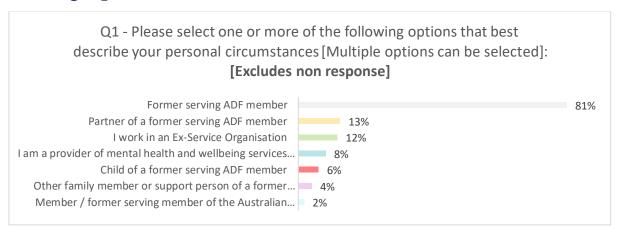
The content mirrored the webinar on the 5th Oct session in that participants were provided background on the strategy and the context behind the development of a joint strategy which take a whole-of-life approach. Participants were walked through themes raised throughout consultation to-date and were asked a number of questions regarding: their priority areas for action; their views on what more can be done to ensure supports are meeting the needs of veterans and their families; and barriers for accessing care and ideas to address these.

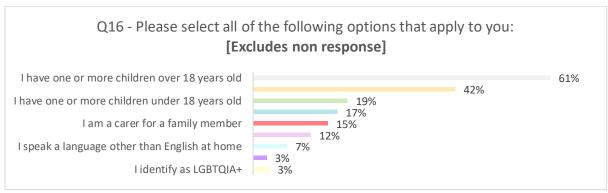
Key themes raised

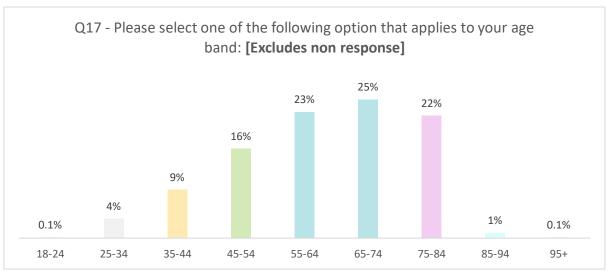
Questions posed in the chat	Themes from participants
What are your top two actions you think DVA and Defence should focus on for the new Mental Health and Wellbeing Strategy?	 Access to services and support in rural and remote areas Mental first aid course to all members and veterans Funding for families travelling with veteran to access support Greater education on Mental health resilience Employment after service
In your view, what more can be done to ensure supports and services meet veterans and families' needs?	 A Strategy that reflects the diversity of veterans and families Location and accessibility to services Support for families
What do you think are the barriers for accessing mental health support and services?	 Access and accessibility Funding for the DVA fee schedule Stigma and implications of disclosure
How can we address these barriers?	 Better communication about available services and supports Support during transition Making the strategy public and open for co-design from the community
Questions that came through from the public	 Will there be additional funding for the actions or is this strategy guiding the use of existing funding? And from which FY/budget? How will we know of progress? Will there be public reporting? How will DVA be monitoring the effectiveness of the Veteran and Family Wellbeing Centres (which seem to be a key policy position)?

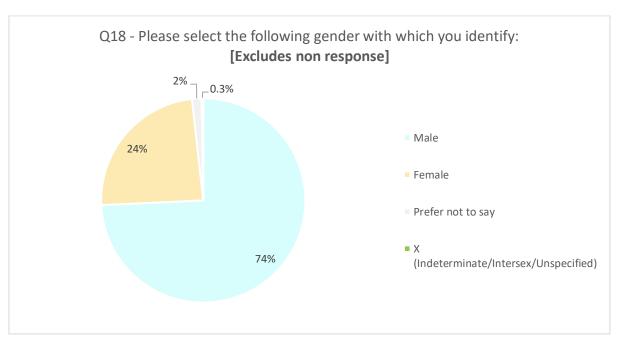
What We Heard: In Detail Survey

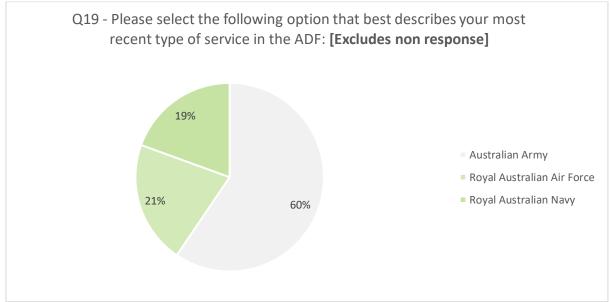
Demographics

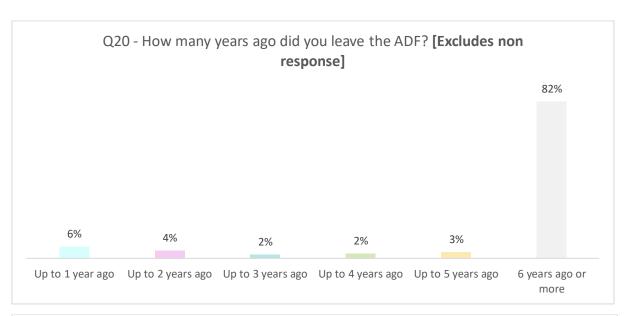


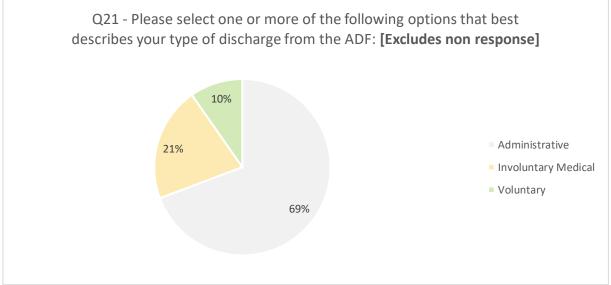


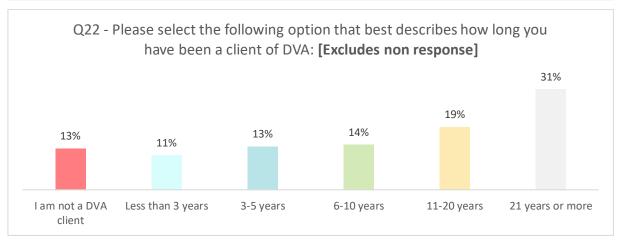


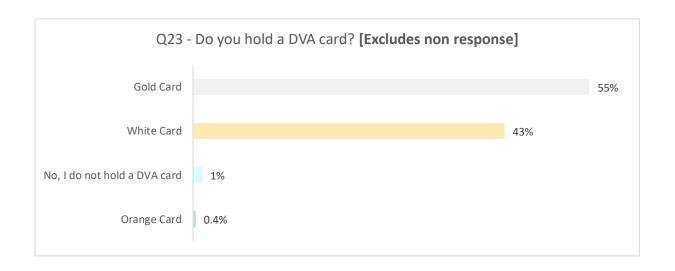






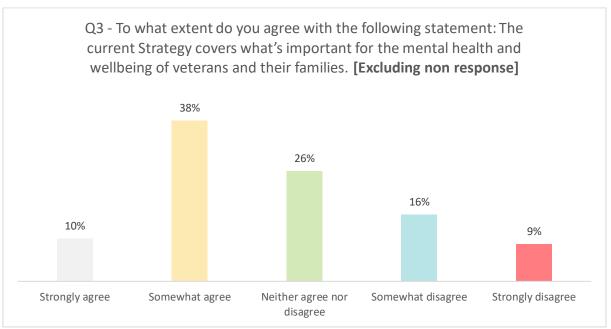


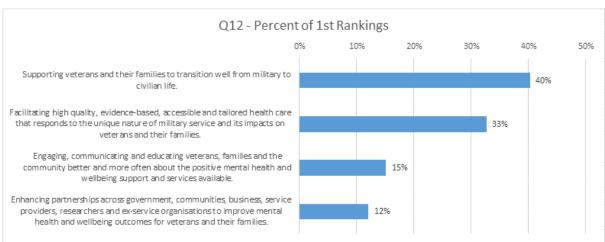




About the Current Strategy:







New Joint Strategy:

Q11 - When thinking about the development of a new strategy, what are your key priorities from the below
options? Please Drag and Drop to rank from 1 'Highest Priority' to 11 'Lowest Priority'

First Preferences	Number of	Rankings
	1st	Received
	Preference	
Having access to mental health and wellbeing services where and when people need them	1st	194
Reduced system and process barriers	2nd	192
Involving individuals with lived experience and their families when designing mental health and wellbeing programs, policies and initiatives	3rd	92
Having access to a workforce who are knowledgeable and can respond to the unique needs of veterans and their families	4th	63

Q11 - When thinking about the development of a new strategy, what are your key priorities from the below options? Please Drag and Drop to rank from 1 'Highest Priority' to 11 'Lowest Priority' Having flexible support for veterans and their families throughout life stages 5th 58 and identifying and addressing mental health and wellbeing risk factors Tailored supports that reflect the needs, values, and priorities of the Defence 6th 53 and veteran communities Better case management, client coordination, and counselling services 7th 47 Supports that help foster self-agency in people to help them make good choices 8th 32 and manage their own mental health and wellbeing 24 New evidence-based and innovative support, services and programs 9th Support and services that are culturally and psychologically safe and responsive 10th 22 Continuously improving supports and services though better data collection, 11th 11 evaluation of what works and transparent reporting of evidence

Q14 - What changes relating to mental health and wellbeing support would you like to see to improve the experiences for veterans and their families?

Overview of key themes	Count	% of respondents to Q14	% of total respondents
A= Access to services	214	40%	17%
B= Wait time/Timeliness	85	16%	7%
C= Regional/Remote Access	21	4%	2%
D= Clarity of info/Comms/Knowledge of serv	62	12%	5%
E= Empathy/Understanding	62	12%	5%
F= Families involved	61	11%	5%
G= Case Managment/Individualised service	34	6%	3%
H= Funding/Fees/Pay	39	7%	3%
I= Engagement	11	2%	1%
J= Employment/Education	19	4%	1%
K= ADF	39	7%	3%
L= Recognition	11	2%	1%
M= DVA staff	25	5%	2%
N= ESOs	32	6%	3%
X= Other	41	8%	3%

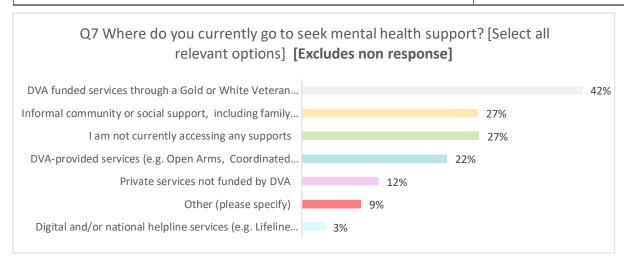
Mental Health Support

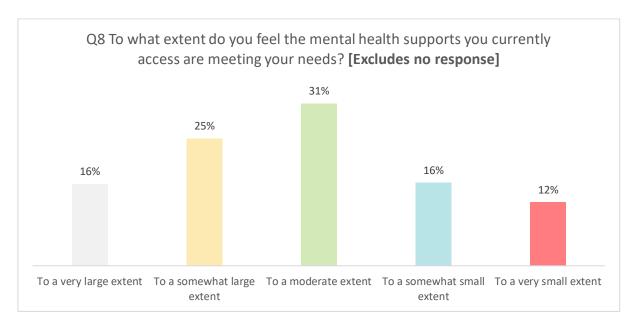
Q11 - When thinking about the development of a new strategy, what are your key priorities from the below options? Please Drag and Drop to rank from 1 'Highest Priority' to 11 'Lowest Priority'

First Dusforonces	Number of	Dankings
First Preferences	Number of 1st	Rankings Received
	Preference	Received
	Preference	
Professional support (e.g. GP, Psychologist, Psychiatrist)	1st	578
Informal support (e.g. family, friends, community)	2nd	245

Q11 - When thinking about the development of a new strategy, what are your key priorities from the below options? Please Drag and Drop to rank from 1 'Highest Priority' to 11 'Lowest Priority'		
Peer support	3rd	88
Online support (Lifeline Australia, MensLine Australia, Headspace)	4th	29
Other	5th	19

Of the free text options, the following themes have been identified:	Count
DVA Services	39
Informal/Peer Support	28
Professional Support	19
Misc	14
ADF Services	13
Exercise/Alternative Therapies	11
Veteran Organisations	9





Q9 - Please briefly describe why your current supports do not fully meet your needs.

Overview of key themes	Count	% of respondents to Q9	% of total respondents
A= Availability/Limited/Access	161	35%	13%
B= Wait-times/Delays/Complex Processes	69	15%	5%
C= Cost/Expense	35	8%	3%
D= Regional/Remote	44	10%	3%
E= Lack of Military/Mental Health Understand	87	19%	7%
F= Limited services for Families	33	7%	3%
X= Other	85	18%	7%