

Service needs and experiences of culturally and linguistically diverse veterans

Final Report

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Prepared for:

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Acknowledgement of country

We value the cultures, knowledge and practices of Aboriginal and Torres Strait Islander Peoples and how this contributes to quality research. We are committed to not perpetuating harms that have been caused by research on and about Indigenous Peoples. We embrace and honour Indigenous knowledges and continue to learn from Indigenous Peoples where we work.

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Disclaimer

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Glossary and definitions

The following definitions are used in this report:

ADF	The Australian Defence Force, comprising the Royal Australian Navy, the Australian Army, and the Royal Australian Air Force.
CALD	<p>CALD – culturally and linguistically diverse – is a term used by governments in Australia to identify people from different cultures and language backgrounds. The Australian Bureau of Statistics (ABS) uses a multidimensional approach to understand CALD in Australia, considering country of birth, language spoken at home, English proficiency, or other characteristics (including year of arrival in Australia), parents’ country of birth, and religious affiliation. Country of birth is often used in data collections.</p> <p>The definition and use of the term CALD is often contested and not recognised within the community. For the purpose of this study, on the advice of the CALD veteran advisory group and DVA project management team (see Section 1.1.1), CALD is defined as someone being from a migrant or multicultural background who is either first-generation Australian (someone born overseas) or second-generation Australian (someone born in Australia who has at least one parent born overseas).</p>
CALD veteran	For the purpose of this study, a CALD veteran means a veteran with a migrant or multicultural background who is either a first-generation Australian (someone born overseas) or second-generation Australian (someone born in Australia who has at least one parent born overseas), who has separated from full-time ADF service.
CALD Veteran Advisory Group	The CALD Veteran Advisory Group was established by the research team to co-design this study to ensure the research was relevant to CALD veterans (as defined in this study). Membership of this group was approved by the DVA Project Management Team. The group consisted of three CALD Veterans – one from each ADF service – and an external researcher with experience of providing services to ex-ADF members and people from CALD communities.
Cultural responsiveness	An approach that acknowledges the importance of cultural diversity which goes beyond mere tolerance of differences and involves actively engaging with diverse cultural perspectives and ensuring that all individuals feel valued and included.
Defence	Australian Government, Department of Defence
DFTP	Defence Force Transition Program
DVA	Australian Government, Department of Veterans’ Affairs
Ex-service organisation (ESO)	Any organisation providing support to veterans and/or their families.

Of migrant and multicultural background	This term was identified by the Advisory Group as the preferred language to engage participants in the study as opposed to the term CALD. Hence, this term was used in all participant-facing materials (invitations to participate, information statement and consent forms, discussion guides). The term CALD is used throughout the report as this is the term used by governments.
Royal Commission	The Royal Commission into Defence and Veteran Suicide.
Separation	The <i>Veteran Transition Strategy</i> (Defence et al., 2023) defines ‘separation’ as the cessation of all forms of ADF service.
Transition	Consistent with the <i>Veteran Transition Strategy</i> (Defence et al., 2023), ‘transition’ is defined as the journey of a veteran and their family from an ADF service-centred life to a predominantly civilian life. Transition spans before, during and after a veteran leaves the ADF and its length may vary from person to person. It is a journey of identity, emotional and cultural adjustments, and the evolution of familial and social relations.
TIS	Translator Interpreter Services
Trauma-informed	A trauma-informed approach is a framework for designing services, policies, workplaces, and interactions that is grounded in an understanding of how trauma affects people, and that intentionally works to promote safety, reduce harm, avoid retraumatisation, and support empowerment and recovery.
Veteran	In Australia, ‘veteran’ generally means a person who has served, or is serving, as a member of the ADF, including the Reserves. However, for the purpose of this research study a ‘veteran’ is defined as a former permanent member of the ADF who has separated from full-time ADF service.
Veteran support system	The veteran support system comprises supports, programs and services targeted to veterans and their families across the veteran ecosystem. This includes those provided by both Government (e.g. DVA, Defence, State and Territory Governments) and non-government organisations, including ex-service organisations (ESOs), veteran support organisations, health and community organisations, and industry/employers.

Content warning

This report discusses the experience of culturally and linguistically diverse Australian Defence Force veterans returning to civilian life. The report contains references to:

- **Racism**, including direct and covert forms of racisms and micro-aggressions
- **Mental health challenges**, including anxiety, depression, PTSD, suicidal thoughts, and trauma
- **Emotional responses** such as isolation, grief, identity struggles and loss of purpose
- **Social and systematic barriers**, including difficulties finding employment, financial stress, family adjustment, and navigating veterans' services and benefits.

The authors acknowledge that this topic can be deeply personal and may be distressing for some readers. Please take care while reading. You can also reach out for support at:

- **Open Arms**: 1800 011 046 (24-hour mental health support for Navy, Army and Air Force personnel, veterans and their families)
- **Lifeline Australia**: 13 11 14 or text 0477 13 11 14 (24-hour crisis support service)
- **Beyond Blue**: 1300 224 636 (24-hour counselling service)

Executive summary

In September 2024, the Australian Government Department of Veterans' Affairs (DVA), commissioned the Social Policy Research Centre, University of New South Wales (UNSW) Sydney, to design and conduct an exploratory qualitative research study to better understand culturally and linguistically diverse (CALD) veterans' service access needs and experiences, and the enablers and barriers to engaging with the veteran support system. This study was conducted between September 2024 and November 2025. This report synthesises the key insights from 38 in-depth interviews.

In this report, 'CALD veteran' means a veteran with migrant or multicultural backgrounds who is either first-generation Australian (someone born overseas) or second-generation Australian (someone born in Australia who has at least one parent born overseas), who had separated from full-time ADF service. (see Section 1.1.1)

While the cultural diversity within the Australian Defence Force (ADF) is significantly lower than the broader Australian population, the cultural diversity within the ADF is increasing and is therefore expected to translate into an increase in CALD veterans over time (Section 1.1.4). The intersection between cultural identity and the experience of service in the ADF could potentially affect support needs, access to, and response of services within the veteran support system (Section 1.1.5). At the same time, there is an opportunity to contribute to inform the design of veteran supports as DVA and Defence, and other organisations in the veteran support system, respond to the recommendations of the Royal Commission into Defence and Veteran Suicide (Section 1.1.2).

Purpose of this study

This exploratory study aimed to provide DVA and other stakeholders with insights into CALD veterans' needs and experiences of the veteran support system, and some initial considerations about how the veteran support system may better meet the needs of CALD veterans and their families. The research was guided by the following research questions:

1. What are the service access needs and experiences of CALD veterans and families when accessing and engaging with the veteran support system?
2. What are the enablers that support CALD veterans when accessing and engaging with the veteran support system?
3. What are the barriers CALD veterans face in accessing and engaging with the veteran support system?
4. How could the veteran support system better meet the requirements of CALD veterans and their families?

Approach and methodology

The research took an exploratory approach to understand the needs of CALD veterans (Section 2). Exploratory research is used to investigate a problem that is not clearly defined and is the first step to

understand a topic. This study used qualitative methods which help understand how systems work by capturing people's perspectives and experiences of a specific system or context. This enabled the researchers to explore *how* participants' needs and experiences of services link to their combined CALD and veteran identities, as well as other aspects of their identity. The study was approved by the Departments of Defence and Veterans' Affairs Human Research Ethics Committee with oversight from a DVA Project Management Team and a CALD Veteran Advisory Group established by the research team with membership approved by DVA. This study involved:

- a) Reviewing the existing academic and practice literature relating to supports for culturally diverse veterans to understand what was already known and help develop the interview guides.
- b) Conducting in-depth interviews with CALD veterans (n=25), family members (n=1), and government and non-government stakeholders involved in providing services (n=12).
- c) Analysing interview data and triangulating findings from different participants.

CALD veterans who participated in this study varied in cultural identity, age, sex, service type, rank, time since separation, and experiences of military service, which created different service needs.

Summary of findings

Question 1: What are the service access **needs** and **experiences** of CALD veterans and families when accessing and engaging with the veteran support system?

This study identified different service access needs and experiences of CALD veterans and families (Sections 3 and 4) and found that:

- CALD veterans had some **similar support needs to other veterans** arising from service.
- Some CALD veterans had support **needs arising from their cultural identity** due to identity-related issues, including overt and covert instances of racism and moral injury arising from service.
- Cultural identity also affected or shaped **if and how support services were accessed and experienced** by many (but not all) CALD veterans.
- Experiences of the veteran support system varied – many **services were not considered accessible or culturally responsive**.
- **Poor experiences** with the veteran support system related to culture and identity created additional needs or left needs unmet.

Question 2: What are the enablers that support CALD veterans accessing and engaging with the veteran support system?

This study identified different **factors that enabled** CALD veterans to access the veteran support system (Section 5.1) and found that:

- For some CALD veterans, their **military identity, rank and experience** within the ADF were **sometimes an enabler** to accessing services particularly during the transition process which then

helped them transition relatively smoothly back to civilian life.

- For some CALD veterans, their **cultural identity** was a **protective factor** and an enabling factor when accessing supports during the transition process. DVA and ADF chaplains had a growing role in pastoral care.
- **Other social identities**, statuses and circumstances also **interacted with CALD identities**, some of which also offered protective factors or enabled CALD veterans to access services.
- **Maintaining or rebuilding individual identities** was considered **important during transition** and impacted CALD veterans' needs and experiences accessing services.
- **Culturally responsive services** that also understood both veteran experiences and DVA processes were preferred by CALD veterans.

Question 3: What are the **barriers** CALD veterans face in accessing and engaging with the veteran support system?

This study identified **individual and systemic barriers** for CALD veterans when accessing the veteran support system and systemic barriers to providing supports to CALD veterans (Section 5.1.5) and found that:

- **Negative experiences within the ADF**, with transition, or prior experience of the veteran support system itself, often acted as a barrier for CALD veterans to accessing the veteran support system. This may relate to CALD veterans experiencing racism or discrimination, a perception of the veteran support system as an extension of the ADF (in terms of both workforce and culture), and the perception that the veteran support system is geared towards the historical majority – white, male and older veterans – rather than the more diverse contemporary cohort of veterans.
- The veteran support system lacks **information about the cultural and linguistic diversity** of the veteran population and its different social identities, which hinders its capacity to respond to the diversity of needs or understand whether it is meeting the community's needs.
- The **organisational culture of services** within the veteran support system was highlighted as problematic from a diversity point of view, and not seen by those involved as responsive to the needs of more contemporary veterans. This included the needs of CALD veterans, but also female veterans, and the families of veterans.
- The **language used** in the veteran support system, particularly associated with DVA's compensation processes, was considered inaccessible to highly educated second-generation CALD veterans and a barrier for first-generation CALD veterans or family members where English was not necessarily spoken as the first language.

Question 4: How could the veteran support system **better meet the requirements** of CALD veterans and their families?

Participants in this study identified potential opportunities for the veteran support system to better meet the requirements of CALD veterans and their families (Section 6):

- At the **system level**, considering reviewing relevant policies and/or legislation to ensure that no unintentional bias exists that may affect support to CALD veterans and their families exists;

administrative issues such as data and administrative processes; and links to other services and systems to ensure these reflect contemporary attention to issues of multiculturalism (including promoting understanding of the specific needs of veterans to other systems and services, and learning from others about culturally responsive systems).

- At the **organisational level**, ensuring organisations within the veteran support system (including DVA and the ADF) are more culturally responsive to improve their capacity to be accessible and recognise the different identities and needs of an increasingly diverse veteran population. This includes diversity across organisations and process improvements. This may be encouraged when outsourcing services to other organisations.
- At the **workforce level**, considering recruiting more diverse staff and educating and training staff in culturally responsive service delivery.
- At the **individual veteran level**, providing specific support for CALD veterans to access and navigate the support system.

Implications

Together, these findings show that:

- Consistent with the recommendations of the Royal Commission (2024) that highlight the experiences of minority groups in the ADF, some **CALD veterans have specific support needs** arising from their cultural identity, and some CALD veterans may benefit from the veteran support system taking cultural identity into account when responding to those and other needs.
- There is an opportunity to consider how the veteran support system can be **more inclusive of families' needs** – with a broader consideration of what family looks like.
- There is an opportunity to consider encouraging the veteran support system to become **more culturally responsive and inclusive**, as well as **trauma-informed**, to ensure the needs of veterans are met and no further harm is experienced when accessing supports.

Further, the findings indicate that the needs and experiences of CALD veterans were not determined only by being from a CALD background and being a veteran. Thus, **there is an opportunity across the veteran support system to consider taking an intersectional approach** (Bates et al., 2024) to ensure the system has capacity to address these layers of identity and their interaction, and how they are experienced in different contexts and power relations.

This study contributes to the evidence base and the understanding of cultural identities of veterans and the diversity within them, as well as to better understanding power and context in relation to CALD veterans. However, more accurate data on the cultural backgrounds of veterans and other identities is required for the veteran support system to better respond to the needs of this cohort and understand whether it is being effective in its response.

Veterans do not only access veteran specific services, and participants indicated that mainstream services, in particular health services, need to provide services that are not only sensitive to cultural identity, but are also aware of the specific needs of veterans. There is potential for the veteran support system to continue to engage with other service systems, such as health services and housing, to

continue to build awareness of the particular needs of veterans, including CALD veterans.

This exploratory study confirms CALD veterans may have additional support needs arising from service experiences and cultural identity which may shape how support services are accessed and experienced. Further research is required to understand the extent and variation of the CALD veteran population and the extent and variation of these experiences across this population. While the experiences recounted in this study are about individual service needs, the experiences shared by interviewees also point to the potential opportunity to examine the broader veteran support system to ensure the needs of CALD veterans and their families are understood and responded to.

Study limitations

All research is subject to limitations. In this study, findings were triangulated in interviews with stakeholders and are therefore robust. However:

- Opt-in research is subject to response bias, and this study may exclude CALD veterans who have disengaged from the veteran support system due to previous experiences or lack of need for services.
- Determining if the study participants' experiences truly reflect the range of experiences within the broader CALD veteran population is challenging.
- Family members are under-represented in this study.
- The term CALD was considered not to be suitable for use in veteran facing research materials by the CALD Veteran Advisory Group. Instead, the term 'from migrant or multicultural backgrounds' was used to recruit participants to this study. This was open to interpretation and was understood differently by participants and organisations.

Potential for future research

Future research could explore several areas, including:

- Understanding the characteristics and diversity within the CALD veteran community.
- Determining whether the support needs and experiences found in this study among CALD veterans and their families are similar across the wider CALD veteran population.
- Examining how various identities interact with different aspects of the veteran support system, such as filing claims for rehabilitation or compensation and analysing the nature of those claims.
- Investigating what leads to separation and how transition experiences vary based on those reasons; these insights may reveal strengths and weaknesses in current transition support and help guide the ADF's efforts to build a more inclusive workforce.
- Assessing how culturally responsive the veteran support system is towards CALD veterans and their families.

1. Introduction

In September 2024, the Australian Government Department of Veterans' Affairs (DVA) commissioned the University of New South Wales Sydney (UNSW Sydney) to design and conduct qualitative research to better understand how culturally and linguistically diverse (CALD) veterans' access and experience the veteran support system. This exploratory study investigated CALD veterans' service access needs, their experiences navigating support services, and the enablers and barriers affecting their engagement. The research sought to gather these insights to identify future research needs and to identify potential opportunities for improvements across the veteran support system. This report presents and discusses findings from this study.

1.1 Background to the study

1.1.1 Definitions

It is important to define CALD veterans for this study. However, there are inherent issues when using this term. As stated by the Australian Public Service Commission, '*the appropriateness of the term culturally and linguistically diverse (CALD) is contested, and there are alternative terms which are preferred by some groups to highlight specific aspects of identity*' (APSC, 2025). The term CALD does not recognise the diversity within this group (Diversity Council Australia, 2023) – including 'differences in cultural and ethnic identity, language, country of birth, national origin, heritage/ancestry, race and religion' (APSC, 2025) – or distinguish between economic or family migrants, and humanitarian migrants, which may shape someone's identity, experiences, and how they access services and systems. The Diversity Council Australia, recognising the evolving nature of language in the context of diversity and inclusion, suggest shifting away from 'catch-all terms like "culturally and linguistically diverse" (CALD)' (Diversity Council Australia, 2023; Sawrikar & Katz, 2009).

Given the broader discussion by policy makers and researchers around the suitability of the term 'CALD', terminology used in participant facing materials in this study was discussed with both DVA Project Management Team and the CALD Veteran Advisory Group to ensure the language used was relevant and meaningful to participants. It was agreed to use the term '**veterans with migrant or multicultural backgrounds**' instead of CALD in all *participant-facing materials* (invitations to participate, information statement and consent forms, discussion guides). The inclusion criteria for participation for veterans with migrant or multicultural backgrounds was either first-generation Australians (someone born overseas) or second-generation Australians (someone born in Australia who has at least one parent born overseas). Given the audience of this report is primarily government departments, we use the administrative term 'CALD' throughout the report.

For the purpose of this study, 'CALD veteran' means a veteran with migrant or multicultural backgrounds who is either first-generation Australian (someone born overseas) or second-generation Australian (someone born in Australia who has at least one parent born overseas), who has separated from full-time ADF service.

1.1.2 Operational and policy context

DVA's purpose is to support the wellbeing of those who serve or have served in the defence of Australia and their families' (DVA, 2024b:3). DVA provides a wide range of supports to current and former ADF members and their families in three key areas: financial wellbeing (including income support and compensation); physical and mental wellbeing (including access to health and other care services); and delivering meaningful commemorative activities (DVA, 2024a).

These supports are delivered through a network of partnerships across the veteran support system, which is made up of numerous services and programs across Commonwealth, state and territory governments, the private sector and the non-profit sector, including ex-service organisations (ESOs). For example, veterans primarily access health services through state and territory government providers and private providers, sometimes at reduced or no cost (DVA, 2024a). Current and former ADF members may also access specialist services and supports through ESOs.

A key partnership within the veteran support system is between DVA and the Australian Government Department of Defence (Defence). They share responsibility for the care and support of current and former ADF members and their families, formalised through a Memorandum of Understanding (MoU) (DVA, 2024c). Defence leads in the care and support of serving members, while DVA leads in the care and support of war widow(er)s, dependents and wounded, injured or ill ex-service members (DVA, 2025a). Both agencies have responsibilities through the period of transition and separation, and Recommendation 80 in the Royal Commission's final report (2024, Volume 1) advocates for DVA to take responsibility for supporting ADF members as they transition out of service through the establishment of a new agency focussing on veteran wellbeing. DVA is also responsible for providing compensation, rehabilitation and other supports to eligible current and former ADF members (DVA, 2025a).

1.1.3 The Royal Commission's recommendations

The Royal Commission, and the Australian Government's commitment to implementing most of the 122 recommendations has been instrumental in setting the current reform agenda for both agencies. Recent research (Varker et al., 2023) and the Royal Commission's final report (2024) both emphasise the importance of providing specific support to veterans during and after their transition from service. DVA and Defence have collaborated on several initiatives to provide a coordinated approach to improving the wellbeing of current and former ADF members during this transition period. These include:

- *Veteran Transition Strategy*, a joint initiative between Defence, DVA and Commonwealth Superannuation Corporation (Defence et al., 2023)
- *Defence and Veteran Mental Health and Wellbeing Strategy 2025–2030* (launched in September 2025) (Defence and DVA, 2025a)
- *Defence and Veteran Family Wellbeing Strategy 2025-2030* (Defence and DVA, 2025b).

Additionally, DVA is establishing a new agency dedicated to veteran and family wellbeing

(Recommendation 87 of the Royal Commission, 2024, Volume 1). The consultation and co-design process undertaken for the development of the wellbeing agency (Phase 1), confirmed barriers to veteran and family wellbeing previously identified by the Royal Commission. This included the difficulty in adjusting to civilian life - including the loss of identity and purpose when moving from a military culture to civilian life, and the challenges navigating a complex support system (DVA, 2025c). The co-design resulted in draft principles to improve service experience of veterans and families, including the principle of being 'safe to engage'. This principle recommends that the agency be trauma-informed, have cultural competency and be inclusive, with a commitment to doing 'no further harm' (DVA, 2025b:24).

While the Royal Commission's final report makes limited reference to the specific needs of CALD veterans, where such references occur, they provide important context for understanding the support needs and barriers identified in this research. The Royal Commission recommended improving organisational culture and leadership accountability to increase ADF member wellbeing and safety (Recommendation 9). It identified ADF culture as one of multiple institutional factors that contribute to elevated suicide and suicidality rates among current and former ADF members (2024, Volume 1, para 68). It also found there was growing evidence that core military values, while vital for military capability, can create harmful insider/outsider divisions when applied inflexibly (2024, Volume 1, para 70). It was further identified that the mentality of insiders and outsiders can play out between:

...people of majority cultures and sexualities and those of minority cultures and sexualities. While identifying as part of these 'tribes' can offer belonging, support and connection, being on the outside of them can engender exclusion, harassment and assault. These experiences, particularly when the victimised person doesn't perceive them to be well handled by Defence, are risk factors for suicide and suicidality. (2024, Volume 1, para 172)

Those perceived as being in some way different to the norm were often singled out for violence and abuse 'on account of their race, gender identity or sexual orientation. This included being subjected to racial slurs and discriminatory treatment, offensive and derogatory comments, and threats of violence and threatening behaviour' (2024, Volume 1, para 148). The Royal Commission also recommended Defence establish a strong culture of reporting unacceptable behaviour, including proactively identifying, among other factors, at-risk cohorts (Recommendation 26).

These findings provide some context to consider the service needs and experiences of CALD veterans as discussed in this report. As the policy context evolves in response to the recommendations of the Royal Commission, there is an opportunity to ensure that emerging reforms account for the specific needs and experiences of CALD veterans and their families.

1.1.4 Diversity of the veteran population

The Australian population is diverse in cultures and ethnicities. Data from the 2021 ABS Census of Population and Housing shows that more than 1 in 4 (28%) of the population were born overseas, and more than 1 in 5 (23%) speak a language other than English at home (AIHW, 2024c). As of 30 June 2024, it was estimated that 31.5% of Australia's population was born overseas, with England, India,

China and New Zealand being the countries of birth with the largest populations (AIHW, 2025a).

Although the ADF is still far from reflecting the diversity of the Australian community, its composition is becoming increasingly diverse. More than half a million Australians (581,000) have ever served in the ADF, of which 15% (84,900) are currently serving ADF members (60,300 permanent and 24,600 reservists) (AIHW, 2024b). The most recent Australian Defence Force Census is from 2023, and it reports that the majority of permanent ADF members (84%) were born in Australia, down from 87% in 2019 and 2015 but higher than the national figure of 72% (Defence, 2024b). According to the 2023 Australian Defence Force Census, the non-Australian-born permanent ADF members were mostly from the UK (4%), New Zealand and India (each 1%), and the Philippines, China (PRC including Hong Kong), and South Africa recording just under 1% (ADF, 2024; 2023 Census:11). The ADF is planning to increase its workforce through both improving recruitment, retention and culture (Defence, 2025a). Defence also recognises the importance of attracting and retaining an increasingly diverse workforce.

A recent report by AIHW, drawing on the 2021 ABS Census of Population and Housing, provides deeper insights about the health and welfare characteristics of CALD veterans (AIHW, 2025b). In comparison to this report, the AIHW utilises ABS data that categorises individuals who are currently serving or have previously served as veterans. It further defines those from CALD backgrounds as individuals born overseas in countries where English is not the primary language spoken. According to the AIHW report, 14% of veterans were born overseas, 4% used a language other than English at home, and CALD veterans from non-English speaking backgrounds were less likely to be employed after separation (AIHW, 2025b). While the interest in this population is promising, the current data does not provide the veteran support system with sufficient information to inform service delivery. However, future reports tracking change over time will be informative of trends emerging in this population.

The ADF is planning to increase its workforce by both improving recruitment, retention and culture (Defence, 2025a). The ADF recognises the importance of attracting and retaining an increasingly diverse workforce, and that people from CALD backgrounds can:

Increase capability and deepen cultural understanding. This helps to build effective relationships with counterparts and allies. Defence aims to provide an inclusive working environment that respects, values and utilises the contributions of people with different cultural backgrounds, experiences and perspectives. (Defence, n.d.)

To support this, the ADF has opened its ranks to non-citizens through the Five Eyes nations program (Canada, the United Kingdom, New Zealand, the United States, and Australia), which may include people from other diverse backgrounds (Defence, 2024a). While DVA has data on current and recent former serving members of the ADF (including First Nations status but no other cultural identities), there are gaps in knowledge of the more historic former serving ADF members and the cultural diversity of this group. However, the increasing diversity within the ADF is expected to be slowly reflected within the population of former service members as members separate.

1.1.5 Impact of different identities on accessing services

Recent research found that **people from CALD backgrounds are less likely to access supports and**

services in the broader community (AIHW, 2024a; Khatri & Assefa, 2022; Royal Commission into Violence Abuse Neglect and Exploitation of People with Disability, 2021). For example, health research suggests people from CALD backgrounds experience several barriers to accessing services and supports, including cultural misunderstandings, lack of culturally responsive services, stigma associated with seeking help (both from their family and community, and from services), limited knowledge of available services, inadequate interpreter services, social exclusion, and potentially language particularly for family members (arising from difficulties communicating effectively with service providers) (AIHW, 2024a). While there is no specific evidence on the extent to which CALD veterans and their families access veteran support services, or on access barriers related to their cultural and linguistic background, it is feasible to assume that some of the challenges experienced by the broader CALD population may also pertain – at least in some ways – to veterans and their family members.

Veterans have unique military identities and cultural practices, beliefs and norms developed through their military training and service. Further, veterans have unique experiences during service and specific support needs arising from their service. Veterans often experience barriers to accessing systems and services (both mainstream and veteran specific) that are not responsive to their specific support needs or contexts. A review by Prevett et al. (2025) describes the institutional and structural barriers experienced by veterans when accessing health, social and community services, especially by groups at high risk of disengagement such as younger veterans, women veterans, and those who choose not to engage with traditional ESOs. Other studies show veterans are less likely to access services and supports, and may only access services when needs become critical (Hilferty et al., 2019). This was also identified in evidence presented to the Royal Commission into Defence and Veteran Suicide (Volume 1, 2024). While some mainstream service providers may have a strong understanding of the needs of veterans and the veteran support system, others may lack this understanding.

As identified in the final reports of the Royal Commission into Defence and Veteran Suicide (2024, Volume 3: paras 34-35):

Historically, serving members who were perceived as being in some way different to the norm were often singled out for violence and abuse [...] these personal characteristics included age (being younger or much older than your cohort); perceived physical weakness, including injury or illness; race; religion; and sexuality and/or perceived sexuality.

The **interaction between cultural and veteran identities is therefore expected to create unique experiences of service and support needs** (Bates et al., 2024). This interaction is also likely to create additional considerations when accessing and delivering support services to veterans in different contexts (Varker et al. 2023); specifically, these services need to be culturally safe *and* knowledgeable about the specific needs of veterans seeking support. There is little understanding of this interaction between veteran and cultural identities, or indeed its intersection with context and power relations (see Box 1 for an overview of intersectionality). There is also limited information on the number of CALD veterans, their experiences when accessing the veteran support system, or the enablers and barriers they are likely to encounter when accessing services nor how the veteran support system

responds to the specific needs of CALD veterans.

Box 1 Intersectionality

'Intersectional theory recognises inequity is rarely the result of one social identity; social identities, and their interaction with context and power relations, offer some protective factors, while marginalises others' (Bates et al. 2024:1). Policies and programs are not experienced the same way by all populations – differences need to be considered when developing and implementing public policy (Hankivsky & Cormier 2011). Ignoring how social identities, context and power interact can lead to unequal outcomes and marginalisation (UNPRPD & UN Women, 2022).

This study specifically focuses on two key social identities and their interaction with each other, and with context and power relations – veterans and people from CALD backgrounds. **For this study:**

A 'veteran' is a person who has served one day or more of full-time service with the ADF and has separated from full time service.

A person from a 'CALD' background is someone with a migrant or multicultural background, who is either first-generation Australian (someone born overseas) or second-generation Australian (someone born in Australia who has at least one parent born overseas).

This study recognises the diversity within each of these groups. Diversity within veterans includes type of service, rank, duration of service, period served, experiences while serving, date of separation, and reason for separation. Diversity within CALD communities includes countries of birth, race, ethnicity, religion, language, and migration experiences (economic, humanitarian), shaping both identity and how services and systems may be accessed. This study also recognises that other identities (e.g. age, gender, ethnicity), statuses (e.g. marriage, family, employment), and life circumstances (e.g. rural/remote, socio-economic, experiences) 'contribute to multidimensional layers of identity which, in combination with power and context, may be associated with a positive or negative outcome' (Bates et al. 2024:6).

1.2 Purpose of the study

In supporting individuals separating from the ADF, it is desirable that the veteran support system provide inclusive supports and services that meet the needs of all veterans, including people from CALD communities. Identifying and addressing the service needs and experiences of veterans from CALD communities may help ensure they have equal access to services, and these services are inclusive and enhance their overall wellbeing.

This study seeks to understand the service needs, experiences, and perceived enablers and barriers for CALD veterans in accessing services. This will increase understanding of how the veteran support system can better meet the need of CALD veterans and their families.

This study sought to answer the following research questions:

1. What are the service access needs and experiences of CALD veterans and families when accessing and engaging with the veteran support system?
2. What are the enablers that support CALD veterans accessing and engaging with the veteran support system?
3. What are the barriers CALD veterans face in accessing and engaging with the veteran support system?
4. How could the veteran support system better meet the requirements of CALD veterans and

their families?

1.3 Structure of this report

The remainder of this report is structured as follows. Section 2 presents the approach, methodology, and limitations to this study. Sections 3 – 6 present the findings from those who participated in the study, using direct quotes to illustrate key points.

- Section 3 describes the **support needs** of CALD veterans and families when accessing and engaging with the veteran support system (Question 1)
- Section 4 discusses the **experiences** of CALD veterans and families when accessing and engaging with the veteran support system (Question 1)
- Section 5 identifies the **enablers** and **barriers** that support CALD veterans accessing and engaging with the veteran support system (Questions 2 and 3)
- Section 6 identifies **potential opportunities** for the veteran support system to better meet the requirements of CALD veterans and their families (Question 4)

Section **Error! Reference source not found.** summarises the findings, implications, study limitations, and identifies future research opportunities.

2. Approach and methodology

This section presents the approach and methodology used to explore the service needs of CALD veterans and their families, their experiences, and enablers and barriers to engaging with the veteran support system following ADF service.

2.1 Approach

This research used an exploratory, incremental, qualitative approach to understand the needs of CALD veterans. Exploratory research is used to investigate a problem that is not clearly defined and is the first step to understand a topic. Incremental design is in line with ethical requirements for human research to minimise participant burden; incremental steps are used to build understanding – starting by investigating what is known – and building on that knowledge. Qualitative inquiry helps understand how systems work (or do not work), by capturing people’s perspectives and experiences of a specific system or context (Patton, 2015). Qualitative research using in-depth, in this case semi-structured, interviews is the most appropriate methodology for exploratory studies such as this, as it allows researchers to examine the complexities of the experiences of research participants over time, and the links between their experiences as CALD veterans and the context in which their needs arose (DFAT, 2019). This enables the researchers to explore *how* participants’ needs and experiences of services link to their combined CALD and veteran identities, as well as other aspects of their identity, in relation to the context and different power relations that exist (see Box 1 – Intersectionality).

The study commenced with a scoping review of the literature to understand what was already known about the needs and experiences of CALD veterans (reported in Section 2.2). This informed qualitative data collection (Section 2.4). The research was collaborative, engaging with both the DVA Project Management Team and the CALD Veteran Advisory Group (Section 2.3) established for this study throughout its design, implementation, analysis, and reporting. This approach helped to maximise engagement with the target cohort as well as maximise the impact of research on service provision.

The study was approved by the Departments of Defence and Veterans’ Affairs Human Research Ethics Committee, and this approval was ratified by UNSW Human Research Ethics Committee.

2.2 Scoping review

A scoping review of academic literature was undertaken to identify what is known and not known to inform this exploratory qualitative research (Arksey & O’Malley, 2005). Scoping reviews are suited to research that seeks to understand the extent, range and nature of research in a field to map what is known; research that seeks to summarise and disseminate research findings to inform policy or practice; and to identify research gaps – all of which relate to this study. This scoping review asked: *What is the existing evidence on service access needs, experiences, and barriers of CALD veterans since leaving the permanent force?* Consistent with the overall research questions, the review also sought to identify service access needs and experiences, and enablers and barriers CALD veterans experienced when accessing and engaging with the veteran support system. Recognising the term

CALD is mostly used in Australia and not elsewhere, the review used a range of expressions used for cultural diversity used both in Australia and elsewhere.

Four library databases were searched (ProQuest databases, Web of Science, SCOPUS, and APAFT: Australian Public Affairs Full Text) using variations of search terms known to be used to identify CALD veterans in other countries. The searches retrieved a total of 455 papers, of which 282 duplicates were removed. The remaining 173 papers were retained for title and abstract screening by both Bates and Badu (using Covidence software), resulting in 36 peer-reviewed publications for full text analysis. These papers were supplemented with grey (practice) literature from government and non-governmental sources that focused on CALD veterans.

All but one study identified in the academic literature was conducted in the US, with the remaining study being conducted in the UK. No peer reviewed articles were found relating to Australian CALD veterans, confirming the exploratory nature of this study. Most papers (20) presented quantitative studies using administrative data, including cross-sectional studies, randomised control trials, and a retrospective cohort study. Eleven studies used qualitative approaches, including workshops, focus groups, and semi-structured interviews. US studies used quantitative data from the Veteran Health Administration to understand the racial/ethnic disparities in service access among minority veterans in the US. Veterans from ethnic backgrounds or black/minority veterans reported some challenges when accessing the Veteran Health Administration system, including **challenges in building therapeutic relationships** (Barker et al., 2023; Campbell et al., 2024; Carey et al., 2023; Dawson et al., 2024; Eliacin et al., 2016; Olmos-Ochoa et al., 2023; Pearson et al., 2022), **limited availability of services** (Carey et al., 2023; Izquierdo et al., 2018), **limited accessibility of services** (Izquierdo et al., 2018; Kaufmann et al., 2014), **perceived discrimination** (Burgess et al., 2014; Campbell et al., 2024; Carey et al., 2023; Dawson et al., 2024; Izquierdo et al., 2018), and their **individual vulnerability** (Carey et al., 2023; Dawson et al., 2024; Eliacin et al., 2016; Izquierdo et al., 2018; Tsai & Kelton, 2023). The services identified from the review largely focused on mental health, primary health, and community-based services. Although several Australian Government strategies identify people from CALD backgrounds as a priority population (AIHW, 2024a), no study has used a qualitative approach to explore the service needs and experiences of CALD veterans specifically in the Australian context.

A review of the practice (grey) literature was also conducted to identify factors that potentially promote access to services by CALD veterans. The search identified 25 sources, only two of which referred to CALD veterans specifically. These references were the “Open Arms 2023-24 Model of Care” (Open Arms, 2024) and the final report of the Royal Commission into Defence and Veteran Suicide (2024). The first source relates to the DVA’s Open Arms program, which provides a range of military aware and trauma-informed services and supports for veterans and their families. Their *Model of Care* identifies critical considerations that can enhance access to services for CALD veterans (Open Arms, 2024). The model of care stipulates that providing services to people from CALD backgrounds requires sensitivity to the cultural, gender, religious, and spiritual needs of people and their families (Open Arms, 2024). In the Model of Care, Open Arms highlights that providing services to people from CALD backgrounds includes:

- ‘Delivering services that are sensitive to the social, religious and cultural beliefs,

values and practices of those from CALD backgrounds.

- Recognising culture as a protective factor where a strong connection between culture and positive wellbeing exists. This includes acknowledgement of the influence culture has on explanatory models of mental illness/disorder, including its causes and the manner in which it presents.
- Supporting ongoing training for staff to maintain and improve cultural competency and reinforce sensitive practice.
- Communicating with people in language that is easily understood, free from medical jargon and using interpreters whenever and wherever required.
- Increasing access to written materials in languages other than English.’ (Open Arms, 2024, p. 21).

The second document relates to the Royal Commission into Defence and Veteran Suicide (2024). The Commission used a trauma-informed approach based on the following principles:

- ‘safety – focusing on what would make it ‘safe enough’ (physically and psychologically) for a person to share their experiences
- empowerment and choice – providing options for participants to be heard and enabling choice around the level of engagement that worked best for them, including the choice to remain anonymous
- collaboration – working in partnership with participants to identify and deliver a personalised engagement experience, recognising and valuing their input and resilience, and enabling ongoing support
- trust – building trust through respectful and timely engagement, being transparent about our processes and activities, sharing information in multiple formats to enable greater accessibility and being clear about how we would maintain confidentiality
- cultural responsiveness – recognising the importance of culture in shaping identity, being alert to the impacts of structural inequality and experiences of racism and discrimination that may exacerbate trauma, and consulting with communities to develop culturally appropriate engagement strategies.’ (Royal Commission into Defence and Veteran Suicide, 2024, Volume 1)

The Commission reported the exposure to unacceptable behaviour experienced in service, including due to race, ethnicity and religion:

In the submissions to this inquiry, current and former ADF members described having been belittled, verbally abused and ostracised by their peers. We heard from members who were targeted for harassment on account of their race, gender, identity or sexual orientation. This included being subjected to racial slurs and discriminatory treatment, offensive and derogatory comments, and threats of violence and threatening behaviour. (2024, Volume 1, para 148).

In Volume 4 of the final report, *Health care for serving and ex-serving members*, the report recognised

the additional considerations for supporting a CALD family postvention, noting:

Various factors must be considered before initiating a conversation with culturally and linguistically diverse families and communities following a suicide death. This includes understanding community conceptions of suicide and whether community members experience heightened risk of suicide. Other considerations include cultural taboos around suicide; stigma associated with mental ill health; protocols for discussing sensitive subjects; traditional cultural treatments for mental ill health; intergenerational trauma and impacts of racism and discrimination; and concerns around confidentiality. (Para 131, Volume 4, Royal Commission into Defence and Veteran Suicide, 2024)

Volume 6 of the report presented advice from the National Suicide Prevention Adviser, highlighting that certain population groups may benefit from earlier and more targeted interventions based on their identified suicide risk.

These groups include adult and older men; First Nations people; people from the lesbian, gay, bisexual, transgender, intersex, queer and questioning, and other sexual identities (LGBTIQ+) community; culturally and linguistically diverse people; women; and veterans. (Para 37, Volume 6, Royal Commission into Defence and Veteran Suicide, 2024)

However, data about potentially vulnerable populations required to inform early intervention, particularly post-separation, is limited.

Prior to the Royal Commission, the Federation of Ethnic Communities' Councils of Australia (FECCA, 2021) highlighted the need to align regulation across aged care, disability support and veterans care to build a care system that understands numerous intersections among people from CALD backgrounds needing and being provided care, supports and services. Their submission to the Regulatory Alignment Taskforce (FECCA, 2021) highlighted that people from CALD backgrounds may experience care systems very differently from other populations and the experiences within this group are vastly different; for example, veterans born overseas will have vastly different experiences to second-generation migrants born in Australia whose primary language is English. FECCA (2021) also highlighted the lack of data to understand the health and welfare needs and outcomes of CALD veterans and how they compare with the broader veteran population.

Other research looking at the service needs of people with disability from the CALD community highlights the similarities between trauma-informed practice and culturally responsive practice (Bates et al., 2023). Given the trauma experienced by some veterans, a trauma-informed approach to supporting the needs of CALD veterans may also respond to their cultural needs given both approaches recognise life experiences and identity shape a person's needs and how they interact with support systems, avoid re-traumatisation and harm from having to continually retell their experiences of trauma or cultural experiences, and therefore potentially enhance engagement and outcomes from services.

While there is some literature from the US and the UK on CALD veterans' services and barriers, no empirical study has attempted to document the needs and experiences of CALD veterans when

accessing services in Australia. This review confirmed the critical gap in the literature and the need to explore the needs and experiences of CALD veterans in Australian veteran support systems to inform policy and service provision. This study aims to start to address this gap.

The research questions, along with the insights gained from the academic and practice literatures, were used to draft initial discussion guides to build understanding of CALD veteran support needs and experiences. The discussion guides were further refined in consultation with the CALD Veteran Advisory Group (discussed next) and the DVA Project Management Team.

2.3 Co-design process

The research team established a **CALD Veteran Advisory Group** (the Advisory Group) to advise on the design of the project, identify recruitment pathways for CALD veterans to participate in the study, validate findings, and promote findings. Members of the Advisory Group were recruited by the research team using recommendations from other established links to the veteran community. None of the veterans on the Advisory Group were known to the research team prior to the study. DVA approved all members of the Advisory Group. The Advisory Group comprised three CALD veterans – with each having served in each of the forces – and an external researcher with experience of providing services to ex-ADF members and people from CALD communities. The group was facilitated by one of the researchers (Bates) to ensure the small number of advisors could participate equally.

The Advisory Group met after the literature review was complete to discuss how qualitative data would be collected: specifically, the language used in the recruitment materials, the scope and language used in the discussion guides, and how to recruit participants to the study. The group agreed to correspond by email after the initial meeting to support any further design and implementation issues, and reconvene to provide feedback on the draft report. Updates were provided to ensure the group remained engaged throughout the project.

The Advisory Group discussed at length the language used in participant-facing materials – particularly as the language used in the community often differed from the language used by government administrators and researchers. For example, the group advised that the term CALD is not used by veterans or others in the community, the word ‘support’ was preferred to service (which could also be confused with military service), and the word ‘separation’ was considered an administrative term. Therefore, the term ‘CALD’ was replaced in participant facing materials with the expression ‘migrant and multicultural communities’; ‘service needs’ was replaced with ‘support needs’; and ‘separation from service’ was replaced with ‘transitioned out of full-time service’ which were terms considered more explicit in meaning for this group. The Advisory Group also amended and simplified the questions and language used in the discussion guide to better reflect the needs and experiences of CALD veterans. This included the importance of understanding diversity in rank and service, reasons for transitioning out of full-time service, the different experiences of younger veterans, regional/rural veterans, and the importance of family connections. The Advisory Group also provided advice on how to recruit participants – through their own connections with different communities, through social media (including LinkedIn), and through specific ESOs. This was supplemented by a strategy developed by DVA to support promotion of the study (see Section 2.4.1).

2.4 Data collection

All participant-facing materials were developed based on the research questions and literature review and further co-designed with the Advisory Group to ensure the questions and language used were relevant to potential participants (reported in Section 2.3 above).

2.4.1 Participant recruitment

A communication plan was developed by DVA, with input from the research team, to leverage established veteran support system networks to promote recruitment to the study.

For CALD veterans and family members, the DVA communication team distributed study advertisements through multiple established communication channels, including internal communications (e.g. Connect News and VAN Hub News), external communications (e.g. DVA Vetaffairs), and established external organisational networks such as the ESO Round Table (ESORT) or Veterans' and Families' Hubs. The research team directly contacted some additional identified ESOs and family organisations identified by the lead researchers and the Advisory Group who were not members of ESORT (e.g. Women in Defence Association), and Advisory Group members promoted the study through their own networks.

Anyone interested in participating in the study was asked to contact the research team (i.e. opt in). Inclusion criteria for veterans to participate in the study were defined as:

- 18 years and above
- Living in Australia
- A veteran from a migrant (first or second-generation) or multicultural background who had transitioned out of the full-time Australian Defence Force. (inclusion criteria, CALD veteran Participant Information Statement and Consent Form)

Eligibility for family members of veterans to participate in the study was defined as being:

- 18 years and above
- Living in Australia
- A family member of a veteran, where the veteran or the family member is from a migrant or multicultural background. (inclusion criteria, Family Member Participant Information Statement and Consent Form)

Participants were reimbursed for their time with a \$50 voucher.

The target number of interviews for CALD veterans and families was 40 participants, including up to 10 family members. At the end of an interview, participants were asked if they could share the study advertisement with anyone else they thought would be eligible (i.e. snowballing).

For stakeholders, the research team used purposive sampling and snowballing techniques. Potential stakeholders were identified by the DVA Project Management Team, the Advisory Group, and through the research team's existing connections from prior research. Stakeholder recruitment was limited to

those within the veteran support system, rather than broader services that veterans may access (such as primary care and hospitals) and excluding current serving ADF members.

The DVA Project Management Team initiated contact with internal DVA business areas and stakeholders they identified as potentially providing services to, or supporting, CALD veterans. This involved providing background information and the purpose of the research project, along with the opportunity to opt out if they did not wish to be contacted by UNSW. All other stakeholders were invited to participate directly by the research team. Anyone interested in participating in the study was asked to contact the research team (i.e. opt in). At the end of each interview, participants were asked if they knew of any other organisations or individuals the research team should contact or share the study advertisement with. Eligibility for stakeholder to participate in the study was defined as being:

- 18 years and above
- Living in Australia
- Providing services to or being involved in supporting veterans, either during transition or following their military service (this may include staff working in government agencies or staff and volunteers from ex-service organisations or other service providers). (inclusion criteria, Stakeholder Participant Information Statement and Consent Form)

2.4.2 Consent process

Potential participants who responded positively to the recruitment advert were sent a *Participant Information Statement and Consent Form*, explaining the purpose of the study and what was required from participants. Consent was either provided in writing and/or verbally at the start of the interview. Consent was checked throughout the interview and participants were offered the opportunity to stop at any time.

2.4.3 Interviews

Given the exploratory nature of the study, semi-structured interviews (a form of in-depth interviews) were used to identify the service needs and service experiences of CALD veterans and their families in relation to the veteran support system. Semi-structured interviews, following an interview guide, allow a set list of issues to be explored in an interview while also allowing issues to be explored or probed to gain a better understanding in a conversational style (Patton 2015). The interview guide also acts as a checklist to ensure the relevant topics are covered and ensures interviews are systematic, consistent, and comprehensive, exploring each of the research questions (Patton 2015).

Interviews were conducted either online via Microsoft Teams or by telephone, lasted approximately 45 minutes, and were all recorded with consent from the participant. Interviews were led by highly experienced qualitative researchers who are experienced in interviewing both veterans and people from CALD communities. Some interviews were conducted in pairs.

The scope of veteran/family interviews included:

- An explanation of the study, expected benefits and potential risks, and assurance of

confidentiality and privacy – including that their ‘answers will not in any way affect any pension, benefits or health services which you are entitled to from DVA or to which you may become entitled in the future’ (participant information statement and consent form)

- Confirmation of consent to be interviewed and for the interview to be recorded
- Demographic questions including their cultural identity and circumstances
- Type and length of service, including rank and years since separation
- Service needs from the veteran support system
- Experience accessing and using services
- Any barriers to accessing or using services
- Any changes required to the veteran support system and the way services responded to the needs of CALD veterans.

Stakeholder interviews included:

- An explanation of the study, expected benefits and potential risks, and assurance of confidentiality and privacy
- Confirmation of consent to be interviewed and for the interview to be recorded
- Understanding the organisation and their role
- Services provided to veterans
- Services provided to CALD veterans (if different)
- Their approach to ensuring services are culturally responsive (and any enablers/barriers)
- Any suggestions as to how services may better engage with CALD veterans and their families in the future.

The interview guides are presented in full in Appendix A.

The personal experiences of veterans are reported directly in this report as shared with the research team based on their unique lived experiences. The research team did not ask about CALD veterans’ experiences in the ADF; however, all veterans reported on their experiences in the ADF and in the process of transitioning out of full-time service, which influenced their willingness to engage with the veteran support system as well as their service needs and experiences. This was recognised by DVA in its original request for quotation that recognised ‘experiences during military service can impact veterans’ engagement with and trust in the veteran support system’ (DVA 2024d:3).

2.5 Summary of participants

Twenty-five CALD veterans participated in interviews. One CALD family member of a veteran was also interviewed. In addition, 12 stakeholders participated in the in-depth interviews. Summary data of veteran and family, and stakeholder (government and non-government) participants is provided in Table 1 against the target sample for this study. Some stakeholders interviewed also had experience in the ADF, as full time members and/or reservists, and all but one of those with service experience also identified as being from a CALD background. Equally, some veterans interviewed also worked for or volunteered with the veteran support system, and some were family members of other ADF

members or veterans. In this report, participants are identified as veterans, family members, or stakeholders based on the primary reason they were recruited to the study.

Every effort was made to reach the target number of interviews. This included advertising the study through multiple formal (DVA) and informal (Advisory Group, Research Team, and other participants) channels, and extending the data collection period for the study to allow for repeated efforts to engage participants. However, the target, particularly for family members, was not met. The authors are unsure whether the lower than anticipated engagement with this study by CALD veterans was due to population size, recruitment pathways (such as through ESOs often associated with earlier generations of white male veterans), or willingness to engage in this research. Similarly, those who did participate are likely to have selection bias because of their existing connections to the veteran support system (evidenced by their recruitment pathways).

Table 1 Study participant groups (target and interviews completed)

Participant group	Target number of interviews (n)	Interviews completed (n)
Veterans and families	40 (up to 10 of which family)	25 CALD veterans 1 family member
Stakeholders	10	7 government (n=3 also veteran) 5 (n=1 also veteran)
Total	50	38

Table 2 below provides more detailed characteristics of CALD veterans who participated in this study to demonstrate the diversity of participants. Just over half (n=14) were first-generation migrants and most (n=11) spoke a language other than English as their first language. Those who were second-generation (n=11) predominantly spoke English as their first language (n=9). To protect the identity of study participants, their country of birth (first-generation veterans) or that of their parents (second-generation veterans) is aggregated using the Standard Australian Classification of Countries (Major Groups) (ABS, 2016). Using this classification, the study included representatives from most broad geographical regions. Some participants had multiple cultural identities and were classified based on their identity most associated with experiences of marginalisation. First-generation migrant veterans came from each of the geographical regions identified in Table 2, aside from Southern and Eastern Europe and Oceania. Over half of the veterans identified as having a faith (n=15), with Christianity (n=11) and Islam (n=2) being the dominant two religions.

In terms of service, half served in the Army (n=13), followed by equal representation from Navy (n=6) and Airforce (n=6). Over half (n=15) had separated from the ADF within the past 10 years. There was a broad representation of ages; and males represented three-quarters of participants (n=19). The family member was a first-generation migrant from Asia, who spoke a language other than English as their first language.

Table 2 Detailed characteristics of veteran participants

Participants	n
Gender/Sex	
Male	19
Female	6
ADF service type	
Army	13
Navy	6
Air Force	6
Rank band	
Other ranks/Junior Non-Commissioned Officer	11
Senior Non-Commissioned Officer/Warrant Officer	2
Junior officer	7
Senior officer	5
Religion	
Christian	11
Muslim	2
Other religion	2
No religion	10
Aggregated country of origin (to deidentify participants)	
North African and Middle Eastern	4
North-West European	3
Southern and Eastern European	7
North-East Asian	1
South-East Asian	1
Southern and Central Asian	6
Oceanian	1
Sub-Saharan African	2
First language spoken	
English	12
Other	13
Generation migrant	
1 st	14
2 nd	11
Age	
30-39	5
40-49	7
50-59	6
≥60	7
Time since separating from full time service in ADF	
<12 months	2
1–2 years	4
3–5 years	5
6–10 years	4
11–15 years	2
16–20 years	0
>20 years	8

While DVA promoted the study through the development and implementation of a communication strategy, this relied on existing communication channels with the veteran support system that operated on pre-defined publication timeframes which did not necessarily align with the timeframe of this study. Recruitment was also facilitated through pathways identified by the Advisory Group and the two lead researchers. This provided a faster mechanism of recruitment however also had limited success. Difficulty recruiting participants was always an identified risk to this study given the

expected low numbers of CALD veterans and the proportion of veterans in contact with the veteran support system. Recognising this difficulty, the research team checked with participants which channel of advertisement they were responding to in order to understand the effectiveness of the recruitment strategies used. Older veteran cohorts, particularly those who had separated from the ADF more than 10 years prior, were more likely to be recruited through DVA communication channels, while veterans who had seen operational service more recently were more commonly recruited through the Advisory Group's broader networks.

While the current ADF population is more culturally diverse than earlier, the ADF population is not as diverse as the broader Australian population (Section 1.1.4). The cultural diversity of the veteran population is unknown as there is no data about the diversity of the former ADF members' cohort, but this is assumed to reflect the earlier ADF population – i.e. CALD veterans make up a very small proportion of the overall veteran population. The absence of comprehensive demographic data of veterans prevents meaningful comparison between our sample of CALD veterans and the broader veteran population.

The research aimed to include 40 participants with lived experience of the veteran support system comprising CALD veterans and up to 10 family members. Twenty-five CALD veterans participated in this study, just five short of the target of 30 veterans. However, only one family member participated which was significantly below the target. This possibly reflects the small population of CALD veterans, their willingness to engage with the veteran support system, and the focus of the veteran support system on veterans rather than family members, resulting in family members being a step removed from the direct recruitment strategies. Yet, the composition of the CALD veteran cohort who participated in interviews shows diversity across multiple factors of interest including type of service, rank, age, culture, gender, and time since separation. Each interview also generated in-depth data about needs and experiences of the veteran support system. Combined, this slightly smaller sample size of in-depth interviews from a diverse cohort of CALD veterans from a likely to be small overall population is justified (Patton 2015). The lack of family members participating in this study is a limitation. While the authors do not know the reason for this, it could be inferred that this may be indicative of a service system focused on veterans rather than veteran and families.

The research also aimed to include 10 stakeholders from the veteran support system. This was exceeded (final sample, n=12).

2.6 Analysis of data

All audio files were transcribed and any identifying information removed. The transcripts were then uploaded into NVivo (qualitative coding software) and coded thematically (open coding). Open codes were grouped into broader categories based on service needs and experiences across time (serving, transitioning and after transition from the ADF) and the key research questions (enablers and barriers, improvements):

- Cultural identity and family circumstances
- Service support needs arising from service

- Transition process and experience
- Support needs following transition
- Enablers to accessing support
- Barriers to accessing support
- Suggestions for potential improvements to the veteran support system.

Within each theme, data was then analysed inductively to search for patterns in data from different participants. Quotes are used to illustrate the findings in the report, identified by the participant group and participant number. Every effort has been made to deidentify quotes. Gendered pronouns are only used when gender is relevant to the quote being made – otherwise we have used the singular pronoun ‘they’ to deidentify participants.

2.7 Research limitations

This research is subject to several limitations.

- The number of CALD veterans participating in this study was lower than planned (n=25, or n=28 if including stakeholders who were also CALD veterans, compared to target of n=30) despite extended efforts to advertise this study through existing DVA communication channels, ESO channels, the networks of the research team based on prior research with the veteran community, and promotion of the study by Advisory Group members.
- The limited data on the diversity of the veteran population makes it challenging to determine how our sample of CALD veterans compares to the broader group or reflects its diversity.
- Family members are under-represented in this study (n=1 compared to target of up to 10). This could be for several reasons, all potentially associated with the veteran-centric nature of the veteran support system where services and supports are largely targeted at or through the veteran. CALD veterans interviewed were asked if they would also share the invitation with family members; this recruitment method was unsuccessful. We do not know whether this invitation was passed on, or whether the family member declined to participate. This reduced what could be reported about the experience of family members beyond what was shared by veterans themselves or by stakeholders who had supported veterans and their families in the veteran support system.
- Overall, stakeholders participating in this study highlighted the limited data collected about the veterans’ cultural background by veteran support organisations. Stakeholders who participated in this study were often those who could specifically recall examples of working with CALD veterans. Some stakeholders declined to participate because they did not have experience working with this specific cohort.
- Finally, the commonly used and contested definition of culturally and linguistically diverse (CALD) was deemed to be unsuitable by the Advisory Group for participant facing material as it is an unfamiliar and unrelatable term in the broader community; instead, in all community facing materials, we used the term ‘from migrant or multicultural backgrounds’ to recruit participants to this study which was considered to be language more familiar to potential participants. However, this expression was also open to interpretation and was understood differently by participants and

organisations. For example, it did not exclude migrants from an English-speaking background or from an Anglo-Celtic cultural background.

These limitations provide the context for these research findings and learnings for future research in this field.

3. The support needs of CALD veterans and families when accessing and engaging with the veteran support system

This section reports the **support needs of CALD veterans and families**, as identified by participants in this study, when accessing and engaging with the veteran support system (Question 1, part 1).

CALD veterans' support needs reflected their multiple identities – as veterans, as individuals from diverse cultural backgrounds, and due to other aspects of their identity.

Some factors were protective, while other factors contributed to support needs. For some, cultural identity was the driver of support needs. For others, cultural identity factored alongside other service needs that may be common across the veteran population. While the researchers did not specifically ask about ADF service experiences, all participants consistently raised them as being foundational to understanding their support needs.

In reporting these findings, the report focuses specifically on where participants identified their CALD veteran identity as impacting their needs rather than documenting every experience related to their veteran identity more broadly. This includes where CALD veteran identity directly drives needs and where it shapes how other needs are experienced.

Support needs are reported first around experiences within the ADF, then in relation to transitioning out of the ADF, and finally other factors – all of which may be protective or harmful. Section 4 then describes veteran experiences with the support system in addressing these needs.

3.1 Support needs arising from experiences within the ADF

Understanding CALD veterans' support needs requires examining their ADF experiences, as these directly drive claims for rehabilitation and compensation under the veteran legislation, other service needs, and potentially shape CALD veterans' trust of and engagement with veteran support services more broadly (see Section 1.1).

CALD veterans participating in this study shared their experiences of navigating the relationship between their service identity and their cultural identity, particularly when the latter was less visible within the ADF context. As one stakeholder explained, the ADF's operational culture reflects a particular cultural heritage that provides important context for understanding how people from CALD backgrounds experienced their service:

Defence is culturally a very conservative organisation. Traditionally it's been predominantly Anglo-Saxon and male in nature, and it has a strong Christian underlining within the organisation. That has been the ADF for generations.
(Stakeholder 10)

The Royal Commission into Defence and Veteran Suicide Final Report (2024, Volume 1: 9) noted that

the ADF has a 'hierarchical structure of command under which they [service members] are required to follow orders and submit to military law and discipline'. While this structure may be crucial for building and sustaining military capability, the Royal Commission identified that it can also lead to negative outcomes, including the experience of othering, particularly for individuals who do not fit the dominant cultural profile, including 'those of minority cultures' (Royal Commission into Defence and Veteran Suicide, 2024, Volume 1: 244). Participants identified this othering as racism in the CALD context. As Stakeholder 10 elaborated:

Racism... You'll find that a lot of veterans will say that it doesn't exist in the military because the military breaks everyone down regardless of your background, shaves your head, puts you all in one uniform, you know, and refers to you all the same way [...] but you look at who is imposing the equality on those people and they're generally Anglo-Saxon male, so it's about imposing [one] culture on someone else. (Stakeholder 10)

While the ADF's expectation of uniformity applied to all service members, CALD veterans' experience of conforming to this dominant Anglo-Saxon male Christian culture – and the personal cost of doing so – varied considerably. The degree to which cultural identity shaped ADF experiences depended on which part of the world they or their family originated from, what religion they practiced, and whether they were first- or second-generation migrants. One veteran of Middle Eastern descent described the collective benefits of having diversity within the ADF, something also recognised by Defence (n.d.):

In the military you just don't really talk about your cultural background, it doesn't really matter because your allegiance is to Australia, right? So, if your allegiance is to Australia, then your cultural diversity is like just an annoyance, right? It's like a secondary thing. I think that's wrong and I think that cultural diversity makes us a stronger, more lethal military because we're able to bring different perspectives to things. [...] Decision-making for militaries is about lethality and decision-making comes from diversity of thought. (Veteran 25)

However, this same veteran also described the personal costs incurred when their cultural identity was overlooked in interpersonal or organisational communication.

I'm very white presenting, right, like I just am a normal kind of white chick [...]. I've got a weird name, but I can assimilate really, really well, and I've grown up here. [...] but it's still – I deeply feel othered when I'm in [a situation where middle east conflict and military tactics are discussed, and views are expressed about targeted operations] and how that is still really, very, very othering for me [...]. I have to hide it, and I feel like I can call out the sexism, but I can't call out the racism. (Veteran 25)

These experiences occurred despite efforts by the ADF to address cultural reform. The ADF has introduced multiple measures to develop a culture that embraces equity and diversity as core values. In their response to an audit of Defence's second five-year cultural change strategy, *Pathway to Change: Evolving Defence Culture 2017-2022*, Defence acknowledged that while there has been an increase in the diversity of serving ADF members, cultural reform across such a large institution takes time (ANAO, 2021). The gap between policy intentions and lived experiences – as illustrated by the above testimony (Veteran 25) and described by other participants – speaks to the ongoing difficulty CALD veterans face in reconciling their service identity with their cultural identity.

One stakeholder, who acknowledged the gap between policies and practice argued that alongside clearly articulated processes and policy, there was also a need for strong leadership, 'leaders that are absolutely committed to not being a bystander when they see inappropriate behaviour' (Stakeholder 10).

Despite all the best intentions and the best policies, it's practical application time and time again has shown to be wanting ... there will someone who will say and do something stupid - people will laugh, but there will be a casualty, there'll be somebody who will be deeply, deeply impacted by that. (Stakeholder 10)

The extent and nature of these challenges varied considerably across participants. Not all CALD veterans reported experiencing discrimination based on their cultural identity. Some interviewees experienced derogatory name-calling but were not adversely impacted, attributing this to being part of the 'military experience' (Veterans 21, 23). For older veterans, and veterans who had transitioned out of the ADF more than 10 years ago, having a name that was 'different' could be enough to provoke experiences of bullying or harassment, even if they were second-generation migrants who were born and raised in Australia. Younger CALD veterans who were second-generation migrants - veterans who, by their own description, spoke 'with a broad Australian accent' or were able to 'assimilate' into the mainstream ADF culture - less commonly experienced overt bullying or harassment based on their cultural identity, or non-Anglo sounding names.

First-generation migrants, particularly those who looked visibly different, spoke with accents, or had (or were assumed to have) differing religious beliefs, had a more varied experience. This appeared particularly true for veterans of North African, Middle Eastern, or Central Asian descent, whose service often coincided with ADF operations in regions with which they shared cultural or religious ties. One stakeholder from a North-East Asian background, who served in the Reserves, described observing this pattern firsthand. While noting greater cultural diversity within the Reserve Forces, they explained that some cultural groups experienced particularly severe discrimination:

People who were from Muslim backgrounds, they copped it much, much worse, I think, because obviously our contemporary engagements at the time, are sort of based in those areas [...] It's kind of like the typical story of racism where, depending on your race, it's a different experience. With black and brown people, it's a lot more overt, and then with Asian people, it's a bit more covert [...] We're talking quite violent and quite consistent, you know, just consistent threats or implications, purposefully talking up killing brown people or shooting brown targets [...] purposefully in front of them. (Stakeholder 5)

This geopolitical dimension – where veterans' cultural backgrounds aligned with operational focus areas – further complicated the reconciliation of service and cultural identities. As one veteran from a North-East Asian background explained, the need for CALD veterans to navigate these dual identities may be more or less challenging based on recent or current geopolitical tensions and ADF's operational focus. This veteran described his own time in service as a 'unifying experience' but recognised that this experience likely varied for colleagues from Middle Eastern backgrounds, given the ADF's combat operations in that region. Significantly, this veteran, who planned to return to serving in the ADF, acknowledged that his own experience within the ADF, and that of his colleagues

from Asian backgrounds, might change if the focus of conflict moved to focus on China and the Pacific:

A lot of my peers who are either Sri Lankan, Indian, Chinese Malaysian, Vietnamese, Lao, Cambodian, Thai Australians – so they're all hyphen Australians ... I think a lot of them have just plugged on working and not really had to reconcile what their heritage means to operational service ... but every now and then someone is like a bit shocked, or a bit taken aback that it will complicate things. It might not be now, but it will be in seniority, or it will be in security clearance, or it will be on promotion... I'm like really cognisant that this isn't just a job or a project, [in ADF combat] you are trying to go after a problem that affects people who look like you but just did not get born in Australia like you did. (, Veteran 1)

This highlights how CALD veterans' experiences of identity reconciliation are not static but contingent on shifting operational contexts and geopolitical relationships.

3.1.1 Career impacts

As noted by Veteran 1, beyond the personal costs of navigating cultural identity, CALD veterans reported that their backgrounds also shaped their experiences and career trajectories within the ADF. Several participants described how their cultural identity – or others' perceptions of it – directly affected their career progression, in some cases leading them to leave the ADF earlier than planned.

Some CALD veterans gave examples of tracking their own progress against peers – both in the Permanent Forces and Reserves (Stakeholder 5) – observing differences they attributed to their cultural identity. One CALD veteran, who had separated 6–10 years ago, reflected on his career progression and noted:

All of my peers got to be at least one more rank and, in a lot of cases, two more ranks than I was. (Veteran 8)

Another CALD veteran, who had recently transitioned (within the last 12 months) and felt they had been overlooked for deployment opportunities, shared a reoccurring theme from conversations among CALD veterans of the same faith:

So every complaint that's ever come [...] is usually discrimination related stuff and people have been denied postings and promotions simply because they're Muslim or they want to grow their beard. [...] It's a reoccurring pattern. (Veteran 2)

For this group of veterans, their service coincided with military operations targeting communities with which they shared religious and potentially cultural ties, which may have amplified their experience of being othered within the ADF.

Career progression within the ADF is facilitated through promotions, courses and training opportunities. Some participants felt they were sometimes denied access to these opportunities which directly impacted their career advancement:

I would get passed over for specific marksmanship awards, that would go to [others...]

who performed not too much worse, but notably worse. You could tell this was happening when opportunities would come up for promotional courses as well. (Stakeholder 5)

Another veteran described being excluded from professional development opportunities offered to peers:

Unlike other officers, I wasn't offered, mid-career, 'go off and do this master's degree fully paid for'. I did that in my own time ... I took that on as an extra burden on top of my normal workload. (Veteran 14)

For some veterans, these barriers to career progression meant leaving the ADF sooner than anticipated. As Veteran 14 reflected:

We should ask ourselves questions. Why not ask - how many people from culturally and linguistically diverse or culturally and racially marginalised people join the Defence Force? How long do they stay? Why it is they are not retained? How many of them are actually at senior levels within Defence, having done long careers, and why is that so? How have they gone in terms of their sponsorship during their career? Because you don't become a senior leader capable of leading at the highest levels if you have not been supported, mentored and developed along the way so that you can be prepared for the higher level jobs. (Veteran 14)

These accounts suggest that perceptions of cultural identity may influence career progression for some CALD veterans, affecting not only their advancement opportunities during service but also the circumstances and timing of their separation. Experiences of career discrimination may shape CALD veterans' trust in government institutions and their willingness to engage with DVA services during and after transition.

Further research could explore whether veterans who experienced career barriers require different support approaches during transition, and how support services might build trust with CALD veterans whose service experiences included discrimination from institutional authorities.

3.1.2 Psychological harm

Both CALD veterans and stakeholders described psychological harm experienced by some CALD veterans related to their cultural identity during service. Stakeholders provided examples of CALD veterans from various diverse backgrounds whom they had supported, describing psychological harm ranging from 'digs and remarks at your racial background' and 'accusing you of working for the enemy or something' (Stakeholder 5) to long-term bullying that the veteran endured and did not challenge, that 'led to a psychotic break [where the veteran] was medically discharged very quickly' (Stakeholder 6).

One non-government stakeholder, a psychologist working with veterans, explained that experiences of racism frequently emerged in their therapeutic practice with CALD clients:

What I've noticed is racism tends to come up, in terms of their experiences in Defence [ADF], tends to be something that we have to address and talk about at some point,

whether it's specifically labelled that by clients, or just that they experience things differently from colleagues [...] for some clients, it is their presenting concern and for others, it just comes up as a part of whatever their presenting concern is. (Stakeholder 7)

One stakeholder acknowledged that the racism experienced by CALD veterans during their service is often a reflection of the racism present in the broader community but 'is intensified in a high-pressure work environment where there is no respite or escape at the end of the working day – such as when working away from home on deployment' (Stakeholder 10).

One older CALD veteran, who had left the ADF 6–10 years ago, described continuity between bullying and harassment they experienced in school due to their Eastern European background and the way they were ostracised in the ADF when they joined – noting it 'wasn't just from my peers and the other students, it was from instructors' (Veteran 8). Feeling othered by peers, superiors, and even support staff can create lasting distress, particularly when coupled with implicit or explicit questioning of CALD veterans' allegiance to Australia. As one veteran of Southern European descent explained:

In my experience, they didn't understand that I was loyal to Australia – you know this is my home. This is my kids' home. My flag is the Australian flag. Some of the senior officers I had above me just didn't really get that. They thought, 'oh, but you're a wog'. (Veteran 22)

Some CALD veterans reported that these experiences during service continued to affect them long after separation, including impacts on their ability to form trusting relationships and their willingness to engage with the veteran support system (Veteran 4).

The severity of discrimination ranged from microaggressions to sustained harassment. Some CALD veterans reported that conditions had improved since their service, but during their time, racism and bullying were pervasive. One veteran of Middle Eastern background who had separated 6–10 years prior explained:

There was also a lot of cultural reasons behind some of the issues that I had, such as experiencing quite severe – moderate to severe racism and bullying [...] from what I hear, things are different these days, but when I was in – no, it was quite rampant. ... It was quite bad and quite intimidating. When you're on your own and very young, it's scary. (Veteran 7)

In some cases, discriminatory treatment came directly from those in power – training officers or commanding officers – leaving junior personnel with little recourse given the hierarchical structure of command in service. As Veteran 7 went on to explain:

I tried to stand up for myself once... because of that, I got sent down to clean the bilges. With rank, it's like there's nothing you can do about it, so you just shut up and put up. (Veteran 7)

In another example, harm came through broad derogatory comments about a CALD veteran's cultural or religious identity made in public professional settings, with no regard for who was present. As the veteran, at the time a serving officer of Muslim faith, described:

Sitting at a captain's table when I was a young officer and we were having a dinner ... the base captain – I'm a junior officer – he starts a conversation about the evil and barbaric Muslims and the threat that they pose to our safety and way of life. As a young person in the [Australian] Defence Force and having the most senior person you've got to look up to and that kind of culture and that mentality just – and I was shattered ... these are my lived experiences, and these leave indelible scars that you never forget. (Veteran 14)

The cause or effect of racism within service were not necessarily addressed at the time. Several CALD veterans said they did not want to put in a mental health claim or access supports while serving due to the associated stigma or its potential impact on their career (Veteran 2, Veteran 18).

I faced endless instances of racism and discrimination, and I faced a lot of bullying, and I just felt so weak and hopeless at times ... I was just so scared to even go in and see the psych and tell them all these things that I've been going through and make sense of it. Out of the fear and the stigma that's attached to it, I think I just avoided it. (Veteran 2)

This research suggests several areas warranting further investigation in supporting CALD veterans who experienced discrimination-related psychological harm during service. Participants' accounts indicate that some CALD veterans may experience trauma from both operational experiences and racism within the ADF, with the experience of racism potentially representing unacknowledged trauma. The Royal Commission into Defence and Veteran Suicide (2024, Volume 1) found that when experiences of victimisation as a 'outsider' - including being an outsider to the majority culture within the ADF - are not perceived to be well handled, this constitutes a risk factor for suicide and suicidality. This points to the need to further explore whether current supports for CALD veterans adequately address the lived experience of racism related harm.

3.1.3 Moral injury

Military service can present ethical and moral challenges for members where individual's values are constantly challenged. Military service may include different activities, from humanitarian aid, border protection, peacekeeping and combat, as well as training to carry out these roles. Those serving may witness immoral acts of others, fail to stop immoral acts of others, or be required to perpetrate acts themselves, leading to moral injury.

There is potential for military personnel who are involved in events that transgress deeply held moral convictions to experience suffering and enduring harms to psychological, social, and spiritual health as a result. This phenomenon has been termed moral injury, and in the past decade, research into the concept of moral injury has exploded. (Metcalf et al., 2022:11)

A review by Phoenix Australia distinguished moral injury from other trauma as being the difference 'between traumatic events that involve *life threat* and those that involve *violations of moral code* by self or others' (Metcalf et al., 2022:11). While moral injury is 'not considered a psychiatric disorder in itself, it can lead to psychiatric disorders such as depression and PTSD and can be associated with suicidality' (Metcalf et al., 2022:10). The review identified four domains of moral injury:

- Emotional – enduring shame, guilt, anger, disgust
- Intrapersonal – self-criticism, self-blame; beliefs of being bad, unworthy, unlovable or unforgivable; self-handicapping behaviours
- Interpersonal – loss of faith in people; avoidance of intimacy; lack of trust in authority figures
- Spiritual/religious – existential changes associated with shattered beliefs about morality and humanity (Metcalf et al., 2022: Table 1).

The impact of moral injury is being increasingly recognised within the military and may be particularly acute for CALD veterans in several ways (Hosein, 2019). As noted earlier, military operations may target or involve communities with which CALD ADF members share cultural, religious, or ethnic ties, creating conflicts between their service identity and their cultural identity. Additionally, CALD veterans may experience moral injury not only from operational events but also from racism and discrimination within the ADF itself. Family histories of conflict, displacement, or oppression may also shape how CALD veterans interpret and experience military operations (Hosein, 2019).

Some CALD veterans spoke about doing or witnessing things during their service that were incongruent with their values or beliefs – this had a very deep impact on their mental health and sense of wellbeing. One veteran from a North African background, deployed during the Iraq conflict and various border protection deployments, described the fundamental conflict between service duty and personal values:

I joined to defend my nation. What I ended up finding myself expected to do by the democratically elected governments of the day was to be involved in operations that really, from a cultural, racial, and religious perspective, were challenging for me and my family. (Veteran 14)

This veteran noted that while moral injuries affect all veterans, recognition should be given to the deeply personal impact of following directives that are incongruent with one's sense of what is right and wrong, their moral code – 'they do it in good faith, but what has that actually done to them in the process?' (Veteran 14).

For some CALD veterans, moral injury was compounded by experiences of racism from peers. One CALD veteran who was himself a refugee from the Middle East and had joined the Navy to 'give something back', described his experiences during border protection operations:

The worst of it was when I was doing border protection operations [...] so I was boarding party, boarding vessels, being an interpreter, being that face, and being an immigrant myself I would empathise with them. But that was a double-edged sword because the people at sea – my oppos essentially, they'd make comments, and some more serious than others that, 'hey, we should just shoot all these people' [...] 'Anyone who's an immigrant, we'll just throw them overboard', and things like that. (Veteran 7)

For this veteran, moral injury operated on multiple levels: he witnessed treatment of asylum seekers that conflicted with his values, while simultaneously experiencing racism from peers directed at people who shared his own lived experience as an immigrant and refugee.

Family histories of oppression and displacement also shaped how some CALD veterans experienced

their service. A second-generation migrant from the Middle East spoke of how her family's lived experience and cultural identity affected her perception of military operations:

My identity, my cultural identity comes from a lens of understanding oppression and oppressors and how governments and militaries manipulate narratives to win hearts and minds [...] When I was in Afghanistan, there was a lot of moments where I thought like, shit, are we the bad guys? ... Certainly, when I was on [a politically and culturally sensitive mission], I don't think that we're meant to be doing this [...]. I got diagnosed with PTSD, but what I've come to learn is its actually moral injury [...] Would I have had that same experience [if I had a different cultural identity]? (Veteran 25)

Addressing moral injury in CALD veterans may require rethinking how military service is framed. One veteran spoke of the need to shift narratives about war to acknowledge diverse cultural and religious perspectives::

This whole construct of what you do in war can be justified and legal. [...] My [specific religious] perspective – I have a different view of war and what we do in war [...] Some things you do in war can never be good [...] If we really want cultural diversity, our cultural perspectives being valued, then let's have a discussion about what is the value of human life, what are we doing in war that actually integrates different perspectives. [...] I think that would help on the back end of people dealing with themselves and their actions. Because they're not feeling like it was justified. I think that would be a significant shift, but that's a very big thing. (Veteran 12)

Moral injury is an emerging field requiring greater understanding by veteran support services, both during ADF service and once veterans have transitioned to civilian life. Research suggests that moral injury may require tailored therapeutic interventions that differ from other more traditional treatments such as those for PTSD, potentially including both psycho-social response and spiritual responses – including chaplaincy (Carey & Hodgson, 2018). Further research may help improve this understanding, specifically regarding whether, and to what extent, CALD veterans (and other marginalised groups) are impacted compared to the broader veteran population, and to identify ways to mitigate and respond to moral injury (Hosein, 2019; Metcalf et al., 2022; Williamson et al., 2025). Additionally, research examining the effectiveness of culturally competent mental health services and culturally appropriate chaplaincy for both current and former ADF members would strengthen understanding of how to support CALD veterans experiencing moral injury (Hosein, 2019).

3.2 Support needs arising from transitioning out of the ADF

Reasons for leaving the ADF varied – some CALD veterans were medically discharged (sometimes associated with psychological harm experienced in the workplace), some resigned due to limited career prospects (see Section 3.1.1) or as a result of so-called 'peace dividends' and broader cuts to defence (Veteran 23), others due to increased outsourcing of jobs that could be done by civilians (Veteran 20, 23). Some left for family reasons – to support their partners' careers or provide stability for their children (Veteran 13, 17, 20), or to be able to actively support their aging parents (Veteran 24). Some veterans transitioned from the ADF directly into newly created civilian roles contracting back to ADF (Veteran 20,23). The autonomy of the decision to leave defence impacted on the transition needs

and experiences. Not all transitions were straight forward or well-managed; for example, with files ‘just basically [going] missing’ and feeling ‘like you’ve been ostracised, outcasted’ during that transition period (Veteran 24).

Consistent with research and the findings from the Royal Commission into Defence and Veteran Suicide (2024), CALD veterans described transition as involving a fundamental shift in identity. How veterans experienced this shift – moving from their role as active ADF members and adjusting to civilian life – varied, but all grappled with questions of who they were outside the military structure that had defined their lives. Given CALD veterans' extensive discussion of transition experiences, this section first addresses shared experiences relevant to the broader veteran population before discussing examples of how cultural identities shaped their transition experiences.

Several CALD veterans described the challenges of transitioning from a context of shared experiences and collective decision-making to one of individual responsibility. As one CALD veteran explained:

I enjoyed my time in [the ADF]. I loved the camaraderie ... I still miss my mates from there. But at the same time, there is a reason why those bonds are created, because everyone is under duress. ... So, the interdependency makes you value other people's support. When it comes to the time that you're no longer with the team, you're basically just left alone the whole time and that can be really difficult for some people, some veterans or people who are transitioning to accept that. (Veteran 24)

Another highlighted how the intensive military training process fundamentally changes individuals, making the return to civilian life ‘whereby nobody tells you “start”, “stop”, “this is what you do”’ feel ‘very daunting’ and lonely (Veteran 18).

Several veterans (Veterans 6, 12, 13, 14) described the complexity of what was required during transition and argued the veteran support system needed to provide more assistance with this identity shift during this critical period. One veteran contrasted the extensive induction process with the minimal support at exits at separation, spoke of the veteran support system needing to do more to assist during this critical period:

You spend weeks and months being inducted into Defence and then you get transitioned out and then it's basically on your own lap to sort it out. There isn't a de-induction process where they take you through deliberately and with the time, like they would when they incorporate you [into the ADF] ... What I've found is that you are disentangling Defence from every aspect of your life and your family's life ... I think if we were to put the same level of care as we do into recruit training as to the back end of Defence, then maybe we'd see some more healthy people walking out. (Veteran 12)

Another emphasised the need for ‘deconditioning and deprogramming’ noting that ‘the [ADF] is really good at creating people that aren’t in tune with their emotions, who don’t use their emotions to make decisions ... But upon leaving, there is no reintegration, really’ (Veteran 6). These accounts highlight a fundamental imbalance: ADF invests heavily in reshaping individuals from civilian identities into military identities, but the process of moving from a military identity back to a civilian identity receives less support.

Several participants noted that recently there has been improvement in transition support, particularly since the Royal Commission. Currently, within the veteran support system, ESOs and mainstream psychology services provide support in this area, and DVA also has Veteran Support Officers (VSO) that assist with transition.

As one stakeholder, a psychologist, noted:

Identity is a big part of a lot of the work we do in that transition space and trying to fill that void [...] or figuring out what other aspects of their identity we're trying to basically grow or that sort of thing, to make sure that that process is as smooth as possible. (Stakeholder 7)

Several stakeholder's felt further improvements were likely to result from joint initiatives between Defence and DVA, including the planned Wellbeing Agency (DVA, 2025c).

While CALD veterans experienced many challenges during transition common to all veterans, their cultural identities also shaped their transitions in distinct ways. Some veterans described their cultural identity as protective during this period, while others reported that discrimination experienced during service continued to impact their wellbeing and support needs during transition.

Some CALD veterans found that their cultural and religious identities provided a protective buffer during transition. One veteran explained:

Having a very decent church network here and serving at a local church, knowing all kinds of people. I'll probably come back to one of the differences with a lot of transitioning veterans who do find it hard is that I never solidly define myself only by my rank or my role or my status as a Defence member. (Veteran 1)

Similarly, another veteran emphasised how maintaining a strong cultural and spiritual identity throughout service provided continuity during transition:

I'd say, first and foremost, I walked into Defence with a self-respect and a strength of just knowing who I was. A really well-formed sense of identity, as who I am. I think, even though Defence really tries to strip you of that identity and shape you and normalise you, I remained true to myself throughout my 20 years of service, and I weathered that. [...] my sense of respect for myself, my sense of worth and my values, were those cultural and spiritual values that helped me through in my stepping out of Defence. (Veteran 12)

For these veterans, cultural and religious identity served as an anchor – providing continuity, community, and self-worth that existed independently of military service. This suggests that transition experiences may differ for some CALD veterans with strong cultural foundations, who may experience transition as a rebalancing of multiple identities rather than the loss of their military identity.

However, for other CALD veterans, experiences of discrimination during service also shaped the circumstances of their departure. One senior officer of North African descent and Muslim faith described being pressured to retire after years of feeling overlooked for advancement opportunities (see Section 3.1.1.). The veteran attributed this to their cultural and religious identity:

There was a period of time there where potentially I could have been promoted ... and there was a period of time where there weren't many promotions – people just held their position for long periods of time at the ranks above. Then, all of a sudden, it got to a point of, 'well, now you are no longer – we've got other people that are coming up from lower level' – how can I put it – less experienced, less time in rank, that are more suitable for – 'a better fit' - was the kind of language that was used. (Veteran 14)

This experience of feeling sidelined and eventually pushed aside due to not fitting the norm within the ADF was traumatising, leaving the veteran feeling undervalued. Beyond the circumstances of departure, this veteran described what they needed, but did not receive, during the transition process to address discrimination-related trauma. As they explained:

I think we steer away from the important issues for people who are culturally, racially, religiously or any other form of diversity type within the DVA claims process, – we don't talk to the issues that affect those people. Everything is medically related. We don't talk about racism because that's not something we talk about. It's just like – it doesn't happen, apparently. It's not something that's questioned. It's not something that people are asked questions about. It's not something that people want to listen to – to say that they've suffered trauma because of – we've gradually become better at talking about misogyny and sexism for women within Defence. We haven't gotten there for racism, which is another huge thing. (Veteran 14)

The compounding effects of discrimination on transition were also evident for veterans whose service experiences forced premature departure. Another CALD veteran, of Middle Eastern descent, spoke of having been medically downgraded due to mental health issues and physical limitations, but felt unable to remain as a serving ADF member in an environment where they had been subjected to substantial bullying and harassment:

I had to try to force my upgrade in order for them to let me discharge. Otherwise, they wouldn't let you leave [the ADF] unless they medically discharge you - in which case it will take a lot longer for that to happen, and I just – I needed to leave. (Veteran 7)

As the veteran felt compelled to leave before completing the medical discharge process, they missed the opportunity to access additional wraparound supports provided by DVA to veterans who are recognised as having higher support needs, such as complex case management. The veteran continued to access beneficial psychological support but otherwise 'the only support was my friends, the people that I served with ... absolutely nothing from DVA or Defence' (Veteran 7).

The next section of this report provides examples of the experiences CALD veterans and families had when accessing and engaging with the veteran support system.

4. The experiences of CALD veterans and families when accessing and engaging with the veteran support system

This section reports the service **experiences** of CALD veterans and families who participated in this study when accessing and engaging with the veteran support system (Question 1, part 2). As reported in Section 3, CALD veteran support needs were driven both by experiences within service and at transition. For some CALD veterans, cultural identity was the driver of service access needs due to their experience in service, and for others their cultural identity factored alongside other service access needs. Study participants were asked about experiences of the supports they received to assist with transitioning to civilian life (Section 4.1), as well as ongoing supports post transition (Section 4.2).

4.1 Experiences of transition supports

Separation is the point at which military service ends. This is a single event, such as retiring, resigning or being discharged, that formally ends a member's service with the ADF on a specific date. Historically, separation involved very little support or input from the ADF; one veteran described it as a 'discharge interview, and it took about five minutes, and I walked out the gate' (Veteran 4). Another said, 'there was no transition support when I left ... I was lucky I had family support [emotional and financially]' (Veteran 22).

In recent years, recognising that leaving military service is a journey, a longer-term process of adjustment, supports have been introduced that are activated prior to separation to prepare service members for this process, and continue after separation. ADF and DVA staff work together to help ADF members prepare for separation (Stakeholder 3, 8). ADF members are now required to attend mandatory appointments and are provided with events and training prior to separating from the ADF (Veteran 2). The transition program is designed to help members prepare for separation, connect them with DVA support services and into rehabilitation programs as needed, and help address other vulnerabilities the veteran may be facing (Stakeholder 8). DVA Veteran Support Office staff work on ADF bases, seeing 'about 2,500 members every year' (Stakeholder 8). While they actively engage with members who are medically or involuntarily separating, the support is open to any serving member.

Stakeholders acknowledged the process and language involved in accessing veteran supports can be difficult to understand – and even more so for someone from a non-English speaking background (Stakeholder 3, 8).

If we're finding that someone is not comprehending or is having difficulties in understanding what steps they need to go through, then we will have multiple appointments with them to make sure that they are coming through ... I suppose from my perspective is the language differences and the language that DVA uses makes it very difficult for [people from non-English speaking backgrounds]. (Stakeholder 8)

The experiences of transition shared by CALD veterans who participated in this study were mixed.

Experiences of transition were positive when initiated by the veteran, when the process leading up to transition was supported by a commanding officer and progressed in a timeframe and in a way that suited the veteran (Veteran 1, 9, 13) – and were negative when it was not supported, not desired, or was either hastened or delayed (Veteran, 3, 7, 24). Similar to Section 3.2, given CALD veterans' extensive discussion about their transition experiences during interviews, this section first addresses shared experiences relevant to the broader veteran population before discussing examples of how cultural identities shaped their transition experiences.

The support provided by the ADF during transition was often described by participants as administrative, a 'checklist' or 'tick and flick' exercise (Veterans 13, 14) – or as one person described it, 'making sure you've paid your mess bill' (Stakeholder 8). Members were offered transition seminars, professional development, and other resources to support leaving the ADF, many of which they only learnt about via word of mouth (Veterans 5, 6, 8, 13). CALD veterans noted there was an issue in knowing what was available:

I know there is a lot of support, but no-one knows about it, and if no-one knows about it, then what's the point of it? (Veteran 7)

One stakeholder noted that while the Veteran Support Office have been actively raising their profile with ADF members it would be beneficial to have the option to 'see a Veteran Support Officer on that [ADF] tick and flick sheet' (Stakeholder 8) given its role in linking ADF members to DVA and the broader veteran support system.

CALD veterans also expressed concerns about who was providing the ADF transition supports (seminars, professional development, and other resources) on offer, and questioned whether they were specifically tailored to the individual and of reliable quality:

With the transition piece, we've outsourced our accountability, our responsibility. Just like recruitment [...] I was lucky that I had a good transition coach, but it can be a hit and miss. As an organisation we've just outsourced that problem, so to speak. (Veteran 12)

It's formulaic. It's non-personal [...] it's not trauma informed, is probably a way I would describe it. (Veteran 14)

There was also concern expressed as to whether the transition supports could be accessed by all serving members.

Two CALD veterans of officer rank, who participated in several transition support programs and found them beneficial, described their gradual approach to separation – which they described as having been possible due to their rank, their role, and/or the support from their superiors:

I took a year of leave without pay which then turned into a transition ... I wasn't planning necessarily on transitioning. [...] So, if I took the leave without pay, it was a nice, soft way of doing that. [...] So, I had to make a decision, do I come back, or do I stay out? [...] I didn't run away from anything. I ran towards something instead, is how I like to think about it. (Veteran 25)

First of all, I was an Officer, and second I had access to a computer [...]. I gave myself a full year to transition which is a lot longer than most people. [...] I had a pretty supportive chain of command and direct access to a Lieutenant Colonel. That's important because a Lieutenant Colonel is the minimum rank to sign a lot of things. I was at the right rank and the right place at the right time to really make the most of a planned transition. Whereas I know a lot of people don't get the same experience. I'm quite conscious that I'm really privileged to have done that. (Veteran 1)

Concern was expressed that more junior members of the ADF might not be able to benefit from the suite of programs offered by the ADF to support transition as 'their time is not their own. They're just going to get ridden hard until they're done, and then everything is in their own time' (Veteran 12).

While challenges with transition supports affected all veterans regardless of cultural identity, as outlined in Section 3.2, cultural identity provided a lens through which these experiences were shaped and, for some, intensified. One CALD veteran of Central Asian descent described her recent experience attending a compulsory face-to-face transition seminar event in civilian clothes:

Everywhere I went, [...] virtually every single one of them [at the event] failed to recognise me, failed to actually register in their little brain that yes, you can be a Muslim, yes, you can be of olive complexion, yes, you can have a hijab, and yes, you can be serving in this military. You know, the first thing that you want is a bit of an acknowledgement, but they were like, 'Oh, who's the member? Are you here with a member?' It's like they literally failed to recognise me as a member. (Veteran 2)

Experiences like the one reported above suggest there is an opportunity to assess how current transition supports are culturally responsive, or whether transition supports are targeted to a particular demographic profile. If the latter is the case, this could potentially give rise to feelings of cultural invisibility for some, creating potential barriers to engagement. Veteran 2 shared repeated experiences where her veteran identity and cultural identity were not recognised as coexisting, which eroded her trust in the veteran support system:

How can I then go back and engage with all these organisations? It's like the whole system is designed to serve a different purpose, a different demographic of people based on their looks. (Veteran 2).

Also, as discussed in Section 3.2, some CALD veterans spoke of needing the harm or trauma they experienced due to racism to be better supported as they transitioned out of service. One veteran explained how this need could be better met:

The openness and the ability to actually have targeted questions to really explore this with – as you want to call them, CALD members or veterans – and the appropriate supports that make sure that they have access to [supports] that are not just to do with wartime PTSD. People get PTSD from other things. People get depressed from other things. People have anxiety from other things. [...] I think there's an overemphasis within the support mechanisms that relate to medical impairment. There isn't adequate coverage of other forms of damage and things that inhibit a person's ability to function well and to move on later in life post that transition. (Veteran 14)

This veteran's explanation suggests this support is not solely about access to psychological services, which DVA does provide, but also about an **acknowledgement within the broader veteran support system that this type of harm arising from discrimination is service-related**.

This study has potentially identified an unmet need for CALD veterans transitioning from the ADF who may not have been flagged as high risk using current criteria, but had specific support needs due to circumstances associated with their separation including, but not limited to, factors leading to their separation and how their transition was managed. This group could potentially benefit from earlier targeted support.

4.2 Service experiences post-transition

As serving members transition out of the ADF, they enter a complex landscape of support services. The Royal Commission into Defence and Veteran Suicide (2024, Volume 1:67) found that there was 'a clear need for more integrated service delivery and improved coordination' to enable veterans and their families to easily access the supports they require. DVA and ESOs provide veteran-specific programs, while mainstream services deliver other supports and services (e.g. health), some of which may be subsidised through DVA. Targeted services and supports are available to veterans who separate either involuntary or on medical grounds, with DVA proactively engaging these individuals to identify support needs prior to separation (see Section 4.1). Since 2017, ADF members are now automatically registered with DVA on separation, but this does not include cultural identity (Stakeholder 8); however, DVA has no information about the broader serving or veteran population that separated prior to 2017 unless veterans had subsequently lodged a claim with them.

Services used by CALD participants depended on several factors including age, service type, time since separation, support needs, and location. For example, CALD veterans who had separated within the last 10 years spoke of the benefit of getting preliminary access to subsidised health services, such as physiotherapy or psychology, while waiting for their claims to be processed, or accessing psychology using their DVA 'white card' (a treatment card for veterans for accepted service-related injuries or conditions, which also fully funds non-liability mental health treatment). Several older veterans (Veterans 9, 10, 16) had only recently learnt they were entitled to a white card. Veterans also spoke of sometimes finding it difficult to find mainstream health services, including general practitioners (GPs), that understood the veteran experience and were willing to process DVA paperwork. Much of what CALD veterans spoke about in relation to the service system was generic to all veterans, but there were some cultural dimensions.

Stakeholders across the veteran support system, DVA and ESOs, noted that their organisations did not routinely collect information about a veteran's race, religion or cultural background. Some stakeholders argued that when supports are offered on an individual basis using a trauma-informed approach, they should be meeting individual needs regardless of background. As one stakeholder explained:

If someone puts a uniform on, they're a uniformed person. That's how we treat them. [...] they are a veteran first and foremost, and we provide support to veterans [...] if we

treat everyone the same, then hopefully we give them a good experience. (Stakeholder 8)

However, other participants (Veteran 14, Stakeholder 10, Stakeholder 11) noted that there may be gaps or omissions in a support system developed with the dominant veteran demographic in mind without identifying and recognising the needs and experiences of CALD veterans. Without collecting data about social identities, DVA and ESOs cannot identify whether certain groups access or experience services differently, or whether current supports adequately meet the needs of all veterans.

4.2.1 Experiences accessing DVA

The support organisation that all CALD veterans had interacted with, even if some time after transition for some of the older veterans, was DVA. Mostly, CALD veterans felt they had not experienced specific culturally related barriers in accessing services and supports through DVA; rather, the difficulties they experienced when accessing the DVA were considered common across the broader veteran community. This included the high administrative burden in setting up a DVA record and getting information from their ADF record to transfer across. As one veteran, who was 1-2 years post separation, described:

The initial proof of identity really surprised me because I was like, “how hard can it be to prove that I’m serving when I’m currently serving?”. It had nothing to do with cultural heritage. [...] you’re just like, “Hey, how hard it can be to link existing services with a PMKeys number and my identity with DVA? I actually went all the way into their physical office and sat with a consultant and even she couldn’t get it working. (Veteran 1)

The language used in correspondence from DVA relating to claims processes, the length of time taken and the effort involved, were factors that nearly all CALD veterans raised. Several stakeholders spoke about additional needs for veterans (and family members) where English was not their first language; however, CALD veterans argued that the **language used was inaccessible, regardless of whether English was your first language**. As one tertiary educated CALD veteran explained:

It doesn't seem to be in plain English. I don't understand any of the terminology, the language, the policy. **I've got three tertiary degrees, and I still can't figure out what the hell they're talking about [...]** It's written in amazing policy speak but, **to a person who needs to navigate the system, it's completely meaningless**. I need to spend, take some time off work and sit down over several days and quiet periods to understand what they're wanting from me, then filling out whatever paperwork I need to do, then booking in doctor's appointments and then going to those doctor's appointments and chasing people up. I just don't have that time and headspace right now. (emphasis added, Veteran 12)

The accessibility challenges, as these veterans describe, created reliance on advocates to navigate the claims process. As another tertiary educated CALD veteran explained:

I got sent a letter from DVA about my claims and I actually had no idea what the letter said. It was in a completely different language. [...] I don't understand why they

couldn't just use plain English in that letter, why it had to be in such veiled DVA terms. That almost forces people to have an advocate that speak that language. (Veteran 13)

Most CALD veterans had used advocates, both voluntary and paid, at some point in their claims process. Several older veterans had gone on to volunteer themselves as advocates to help others navigate the system. The feedback was the current claims process was too complex in its use of language, irrespective of, although **likely heightened if English was not a veteran's first language**, perpetuating a reliance on accessing advocates to decipher correspondence and complete claims.

Beyond language accessibility, participants also identified the **need for culturally informed support approaches**. One stakeholder noted that while the DVA system 'is tailored so as not be discriminatory' once accessed, cultural identity may be a barrier to accessing supports in the first instance.

Culturally, barriers would come with the way culturally you are set up in terms of asking for help, or putting your hand up if you're struggling, [...] or culturally when talking about mental health is not a thing. (Veteran 18)

This speaks to the **need for culturally informed support systems, with stakeholders being aware that CALD veterans' experiences in accessing or receiving supports can be influenced by cultural beliefs or customs**. Several stakeholders spoke about using their own CALD background and experiences to assist CALD veterans process their unique experiences, and that DVA was not yet providing adequate training for staff to build skills in this area (Stakeholder 1, Veteran 18).

A veteran from North African descent and Muslim faith explained that despite DVA serving an increasingly diverse veteran population, the **claims process** remains designed for a culturally homogenous group, **reinforcing the sense of othering** they experienced during service:

SOPs, or Statement of Principles, when we're looking at liabilities, they don't [...] It doesn't include perhaps how other types of culturally, racially, religiously diverse people may experience things and choose to cope, or their coping mechanism, or what kinds of things that they might be traumatised by. I think it's just this assumed thing that everyone is the same. (Veteran 14)

This account raises questions about the claims assessment process: if Statements of Principles (SOPs) use culturally specific markers of trauma (such as alcohol abuse) as evidence criteria, they may not recognise that CALD veterans could experience and respond to trauma differently. Some CALD veterans' service-related injuries may be less visible or more difficult to validate within a system that assumes cultural homogeneity.

The **need to apply a cultural lens to review existing policies and processes** was echoed by one stakeholder, who noted that bias, whether it be gender-based or cultural, 'doesn't have to be overt – it **can be through omission, through not including something**' (emphasis added, Stakeholder 10). This stakeholder had observed this in relation to gender, noting the current legislation was male orientated and did not consider the unique characteristics and experiences of women, recognising this could also be true for cultural diversity.

4.2.2 Experiences accessing veteran specific supports

Concerns about the **current veteran support system being tailored to the needs of the dominant veteran cohort** were raised again in relation to veteran specific supports provided through ESOs. The older cohort of CALD veterans interviewed spoke about finding important support information and assistance, as well as often a sense of camaraderie or community, through engagement with their local Returned and Services League of Australia (RSL) branch. However, many veterans noticed that this social engagement was largely with older veterans – ‘I’m one of the younger members of our branch and I’m in my 70s now’ (Veteran 16, male, more than 25 years since transitioned). Age, gender and cultural background were all noted to play a role in whether veterans engaged with RSLs, with younger cohorts of veterans reportedly shifting to alternative forms of social connections and supports:

You’ve got social media [...] When all these modern technology things were absent, people would come here to socialise. We’re seeing a huge societal change [...] I was on the committee here at this RSL branch and I said, “look, the [ADF] culture is changing. We need to change if you want to survive. The [ADF] culture is going away from drinking and alcohol. It’s no longer that sort of culture anymore” [...] I was voted down...they were just business as usual. (Veteran 8)

Participants observed that younger veterans and female veterans wanted something different from ESOs – including services that were ‘more family-focused’ (Veterans 14, 18) and feel ‘psychologically safe’ (Stakeholder 11). Several CALD veterans described their experience of reaching out to ESOs and feeling like their cultural and veteran identities were not seen as able to coexist within that context. As one explained:

It’s a bit difficult for somebody from another background to join ESO groups. There’s that cultural barrier, so to speak. You can tell by the current political climate that we have right now in Australia, that whole thing of who is Australian, who is not. There’s a bit of that in the service or the veteran world - who’s a veteran, who’s not. Some people base it on how you look, or what’s your background. (Veteran 18)

The lack of diversity within ESOs was also noted by stakeholders interviewed, where despite their potential reach, they were not meeting the needs of the younger generations of veterans.

[Organisations] are male dominated, white, cisgendered, even narrow in its kind of sense of military identity, let alone, any other diversity. They’re exclusive spaces. People don’t feel psychologically safe in them [...] there are many contemporary young serving personnel now who have no interest in joining an RSL or no interest in joining the local RSL club. Because it doesn’t speak to their values, because [the organisation’s] values haven’t kept up with society’s shift. (Stakeholder 11)

One stakeholder working as a case manager in a DVA funded support service noted that sometimes veterans and/or family members would refuse referrals made to specific ESOs to access supports. They provided examples of veteran’s experiences of feeling ‘othered’ when engaging with certain ESO’s, particularly in relation to gender but noting the same would be true for CALD veterans. The stakeholder noted that when the [ESO branding] was separated from veteran centres/hubs, they had ‘a higher strike rate, better engagement’ with the services (Stakeholder 4),

It was noted by several participants that while the female veteran experience had started to be considered within the broader veteran support system, other minority veteran groups were not yet adequately considered.

I know that DVA are doing a lot of work around ESOs and there's some new legislation that's come in that's going to be much better. And I went to the Women's Veteran Policy Forum ...and there were some women that are quite senior now in different ESOs and that made me feel okay. But that room was very white, a very, very white room. (Veteran 25)

One stakeholder explained the potential opportunity for DVA to encourage greater representation and consideration of diverse veterans in ESOs:

DVA has a real opportunity to lead because they hold a funding lever for a lot of these places. (Stakeholder 11)

4.2.3 Experiences of family members within the veteran support system

As outlined in Section 2.6, family members were under-represented in this study, with only one family member interviewed. This reduces what can be reported directly about either the needs or experiences of family members where either the veteran or the family member is from a CALD background. This section outlines what was reported by the CALD family member, CALD veterans and stakeholders when discussing the experiences of family members, much of which related to the experiences of family members more broadly, rather than specifically related to cultural identity.

Participants noted the veteran-centric nature of the veteran support system where services and supports are largely targeted at or through the veteran. As one stakeholder explained, this is particularly true of DVA:

DVA doesn't provide a lot of support to families. We'll talk about that we do, but we don't really. Your family don't get anything from DVA unless it's an eligibility from the veteran [...] we have to recognise there is a dependent, then there is support - if [a veteran is] eligible for something, that is then passed on to the child or the wife. (Stakeholder 8)

This veteran-centric support system, where 'then it's up to the veteran to then do with that compensation as they see fit' (Stakeholder 12), can be problematic given the system may have been designed for an earlier more traditional view of what a veteran's family looks like. As Stakeholder 12 explained:

Even in government legislation and things as well, it's this idea of a wholly dependent spouse, and the spouse works these days. And then there are in fact sometimes the spouse is the one that the veteran is dependent on. It's not that the man goes and serves and the woman stays home and keeps the home fires burning. And there's not a husband and wife and 2.5 children anymore. ...you'd have veterans who have multiple partners, one after the other, and have maybe children with each of them. And so, the idea of what a family is, is so different. (Stakeholder 12)

One stakeholder further noted that cultural background may also shape what constitutes “family” and “dependents” in ways not currently recognised by the veteran support system, with some cultures having broader definitions of immediate family that include extended family members and different expectations about caregiving responsibilities:

Their family structures can be very different to mine. Certainly, from our First Nations people, the way that they see family is very different to the way I see family. I'm sure that that is not unusual across many different cultural backgrounds either. There are things we can do to improve, or to recognise, what is a dependent. And how do we actually do that in a more culturally sensitive way, rather than just the [name of veteran], married with two kids? (Stakeholder 8)

This was illustrated by one CALD veteran of Southern Asian background who left the ADF due to cultural expectations around caring for parents, who were his dependents. As the veteran explained, in their culture, ‘growing up, the parents look after their kid, and it is expected that the child would look after the parent, you flip the roles [when the child becomes an adult]’ (Veteran 24). With his parents still living overseas, deployments made it impossible for him to fulfill these cultural obligations, ultimately leading to his decision to leave the ADF (Veteran 24).

The complexity of veterans’ actual family circumstances – and the disconnect with the veteran support system’s assumptions about family structure – was illustrated by the CALD family member interviewed for this study. Divorced from the veteran and with sole custody of their children, she faced financial hardship despite her children’s eligibility for financial support. Her ex-husband was assessed by DVA as having a severe service-related impairment which resulted in their children being eligible for financial assistance through the Eligible Young Person (EYP) payment. However, the payment was given to the veteran who never provided it to the ex-wife and children. The ex-wife receives very little in child support and reports that she and the children are living in poverty:

I believe a lot of veterans whose marriage broke down, if you’ve got like addiction with alcohol, probably may all go into alcohol. [...] All the support is not getting received and the kids stay poor. There is a huge gap, education gap, and everything fails through there. (CALD family member 1)

The CALD family member said her proficiency in English may cause some occasional difficulty in communicating with representatives of organisations within the support system, but it was the veteran-centric nature of DVA’s compensation entitlements that was her key source of distress. The family member explained she receives ‘\$350 a year, or about \$300 a year for the primary school children towards education’ from DVA and then accesses financial supports where she can through the broader veteran support system, including annual financial support for the children’s education expenses through a local ESO.

One female CALD veteran highlighted the role of crisis support offered to families through ESOs, identifying the critical role of diversity in ESO leadership to ensure ESOs responded to their needs – including CALD veterans and families:

I think that where the real goodness is in the RSL sub-branch services is for people that are really in crisis. That's what we've tailored a lot of our support for. I'm not in crisis, I

transitioned pretty well, so I want to make sure that those families know that services are available to help support them ...the committee is very male dominated, and they often would forget about family requirements and access that families might need in crisis, that's the side I bring to that. (Veteran 13)

The veteran-centric nature of the veteran support system was also reflected in the reasons family members accessed the Veterans' and Families' Hubs. Stakeholders noted that, while families accessed the hubs, it was often to help 'the veteran, for the most part' (Stakeholder 4) rather than their own needs:

We do get quite a lot of family members that will want help for the actual veteran, but the veteran themselves doesn't want to engage, which is really tricky. We will support them with giving them everything they need, to then relay to the veteran. Then, of course, if they need any extra support themselves, then we can refer them through to [either veteran or mainstream mental health services]. (Stakeholder 3)

Another stakeholder described the efforts that an ESO they had previously worked for, had taken to proactively engage with an identified CALD family cohort in the local area:

At Legacy, in [particular geographical area] we found there was a large Vietnamese war widow population, which is sort of I think, reflective of Vietnam veteran era veterans [...] the organisation, especially when I was there, did a lot of work with that group in particular, like we had a couple of volunteers that were Vietnamese background and spoke the language and went to different community groups to try and find them, I guess. And also, with publications and things, making sure that they were in the right language and sort of those signposts to people that we're here for you and there are services here for you. (Stakeholder 12)

While the under-representation of CALD family members in this study limits the insights and conclusions about culturally specific family experiences, the accounts above highlight challenges facing families more broadly within a veteran-centric support system. For CALD families, these challenges may be compounded by language barriers (discussed further in Section 5.1.10) and potential difficulties accessing community-based ESO supports if these organisations lack cultural diversity or language assistance. The Legacy example suggests that proactive, culturally informed outreach – including multilingual volunteers, translated materials, and engagement with cultural community groups – may help address these barriers. However, organisations first need ways to identify relevant cultural groups to target.

5. Enablers and barriers CALD veterans experienced when accessing the veteran support system

This section reports the enablers and barriers to accessing the veteran support system CALD veterans experienced (Questions 2 and 3) as reported by participants in this study. This focuses again on factors relevant to CALD veterans (and potentially other marginalised groups), noting that there may be overlaps with the broader veteran population.

5.1 Enablers

Participants in this study identified different factors that enabled CALD veterans to access the veteran support system. These included rank and experience within the ADF; cultural identity, community and chaplaincy; identities, statuses and life circumstances; and the responsiveness of services.

5.1.1 Rank and experience within the ADF

CALD veterans in this study varied in terms of their type of service, rank, duration of service, period served, experiences while serving, date of separation, and reason for separation, all of which were often affected also by their cultural identity. As outlined in Section 4.1, for some, their rank and experience, particularly during the transition process, enabled them to transition relatively smoothly back to civilian life. Some also reported finding training opportunities and services that were relevant to their cultural identity (Veteran 1). Enabling factors included having the support of their commanding officer, having access to a computer/the internet, having flexible work conditions that enables access to transition programs that were relevant to them.

5.1.2 Cultural identity, community and chaplaincy

Cultural identity itself was, for some CALD veterans, a **protective factor and also an enabling factor when accessing supports during the transition process**. As discussed in Section 3.2, some CALD veterans participating in this study described how maintaining their cultural identity during service – through church, community and family – supported them through the transition process (Veterans 1, 12). One stakeholder highlighted the broader cultural community supports available for CALD veterans when they were away from home:

My [*] client who has now discharged, his family and his community was very protective for him, but they were in [another state]. So while he was in the process of being medically discharged, he wasn't able to go down there, but he had community, from his temple – community members who took him in and looked after him until he was able to be released and go down to his family, so that was hugely protective. He had somewhere to live and he was quite unwell, so he had just like family friends or community friends just look after him. (Stakeholder 6)

This example demonstrates the potential protective value of cultural and religious community

networks when CALD veterans maintain active connection with their culture and community.

Both stakeholders and CALD veterans talked about DVA and ADF **chaplains** and pastoral care (Veteran 2, Stakeholder 6, 8, 9,10), and the benefits of ‘having conversations of a more significant and deeper and meaningful level’ (Stakeholder 8). Several participants commented on the progress within the chaplaincy in there had been more multicultural chaplains appointed within the ADF – including ‘its first female Hindu chaplain’ (Stakeholder 10). This highlights the benefit of chaplaincy reflecting the veteran population. Chaplains may also help retain connections to cultural identity which may be a protective factor. The emerging research on moral injury highlights the need for spiritual as well as psychosocial supports (Carey & Hodgson, 2018). DVA chaplains may, by providing cultural and spiritual support, also enable access to other parts of the veteran support system and help veterans and the support system better understand moral injury.

A couple of first-generation CALD veterans noted they were more confident in self-advocacy than others, which they attributed in part to their cultural identity and experiences growing up in contexts where either it was the norm to advocate for their own needs (Veteran 3), or required for basic survival.

Growing up, it was all struggle for us. We had to struggle for every single thing, even to get water, getting kerosene from like a moderation card and that kind of stuff. I grew up in slums, so yeah, it was a struggle to get from A to B. So, I think that might have been - that was my upbringing basically, fighting for every single thing. (Veteran 24)

Notwithstanding the above, CALD veterans are not one homogenous group. Consistent with prior research, this study showed clear diversity within this group in terms of countries of birth, race, ethnicity, language, and migration experiences (economic, humanitarian), shaping both identity and how services and systems may be accessed.

5.1.3 Identities, statuses and life circumstances

While this research focused on two key identities and their interaction – CALD identity and veteran identity – all participants reflected on other social identities, statuses and circumstances that interact with their CALD veteran identity. As discussed in Box 1, other identities include age and gender; statuses include marriage, family, and employment; and life circumstances include location (e.g. rural/remote), and socio-economic circumstances. For some, these other identities, statuses and life circumstances offered protective factors or enablers to service access. For example, one veteran described how their professional identity helped them transitioning from the ADF into civilian life as their professional identity was the same in their civilian life – just a different employer (Veteran 13).

Several CALD veterans talked about how they ensured they maintained their own identity, made up of multiple layers, and how this helped them when transitioning back to civilian life. One veteran talked about the effort they made in maintaining their cultural identity which then supported them when they returned to civilian life. Another talked about maintaining friendships and building professional networks outside of the ADF which helped as they transitioned out.

I have a really close group of friends that are civilians. It's been great and exciting having them support me on my transition out because they've helped me become a

civilian. [...] I didn't completely lose my identity because I had professional identities outside of the military [...] I wanted to be across things that weren't just military. I was a bit different in the army in a way that I wasn't just bleeding green the whole time. I was quite curious about what else was going on in the world, and so I went and sought out those professional networks and really enjoyed the different perspectives that they brought. (Veteran 13)

Where maintaining individual identities during service was more difficult, several participants talked about the importance of regaining their identity during the transition process – including their cultural identity – and how this was protective and/or enabled them to access and advocate for the supports they required.

5.1.4 Responsive services

The **way services were provided** also impacted on CALD veterans' ability to access the veteran support system and their experiences of it. One veteran (who was also part of the veteran support system) talked about how they provided support to another CALD veteran at transition, recognising their different cultural identity shaped how they approached mental health on top of how their military identity shaped how they approached it. This required more time and a tailored response to engage the CALD veteran to start to meet their needs (Veteran 18).

I have a [...] member [...] from an African background. I've been seeing this member for about 8 months, trying to break the barriers in terms of, okay, he's going through a mental health situation, and just trying to get him to get to a comfortable state where he can talk to me. We've gotten to that point now, but it's taken me months to get to that point. (Veteran 18)

Another stakeholder suggested that the cultural responsiveness of their team was due to luck – but this benefited the CALD veterans using their service.

Interestingly, we're quite a culturally diverse team just for some reason. One of our team members is originally from [North Africa and Middle East region], lived all around. Another family originally - a family of origin in [South-East Asia] and then so we're actually quite culturally diverse as a [name of service] team, which I find interesting. I don't know if they did that on purpose or it just worked out like that. But obviously, that sort of thing would help. (Stakeholder 6)

Having access to the **same service providers** while in service and after separation was highlighted as beneficial and provided continuity of care (Veteran 7). While the benefits of continuity of care are in no way specific to CALD veterans, continuity is a component of culturally responsive and trauma-informed care and therefore can also be considered as a specific enabler for this cohort.

Finally, participants highlighted that **culturally responsive services** were important to CALD veterans. However, it was services that **combined knowledge and understanding of the CALD veteran experience and DVA processes** that was seen as critical.

5.1.5 Barriers

Research participants identified both individual barriers to accessing the veteran support system and systemic barriers to accessing and providing supports to CALD veterans. These include cultural identity and community, visibility of culturally related service experiences, data and information sharing, organisational structure, and language.

5.1.6 Cultural identity and community

As discussed in Section 5.1, CALD veterans' support needs should be understood within the broader context of their lives, where family, cultural communities, and social networks played significant roles – often, but not always, as protective factors. For some CALD veterans, the challenge of reconciling their service identity with their cultural identity included managing ongoing tensions with family and community expectations. These tensions could begin before enlistment and continue throughout service and transition, creating additional pressures that impacted the personal supports available to them and therefore their broader support needs.

Family and community responses to military service

CALD veterans described varied family responses to their decision to join the ADF, shaped by cultural backgrounds and previous experiences with military conflict. Some families were supportive, particularly those where the parents had positive experiences serving in the military (Veteran 13); others encountered significant family resistance (Veteran 8, Stakeholder 5). As one stakeholder explained, families with traumatic experiences of conflict arising from their country of origin viewed military service through the lens of 'devastating land wars where a group of people go and most of them don't come back ... their general sentiment was just it's not a respected career, you're just going to do corrupt things' (Stakeholder 5).

A CALD veteran of Asian descent described the disconnect between how their family understood military service and the reality of serving in the ADF:

One thing to highlight is the misunderstanding of what service is for a culturally diverse family ... like a family of origin who comes from battlefield countries. ... so, when I left the ADF they were quite happy to see that transition. (Veteran 1)

First-generation migrant families also had concerns about acceptance of different cultures within the ADF.

I think racism was probably one of the most prominent concerns from my family as well. I think being first-generation immigrants, they're quite conscious that in a lot of ways you're not going to be accepted into mainstream society [...] in my experience, Reserves are really a lot more ethnically diverse, which I didn't expect. I think maybe because it's a more acceptable form of service to their families. (Stakeholder 5)

For some CALD veterans, serving in the ADF created distance from their cultural communities. One veteran of Central Asian background described feeling caught between not being fully accepted within the ADF and sensing their community's perception that military service was not a viable career option:

People only refer to Caucasian looking people as Australians, like even if you've been here for five generations, just because you're brown or you don't wear Western attire then you're not Australian ... I wish younger people in my community were looking up to [...] and would join the ADF and feel like they are defending their country. But [society] just doesn't make you feel like [you belong], so no one is putting their hand up. (Veteran 2)

These accounts illustrate how CALD veterans may navigate not only their dual identities within the military but also manage family and community perceptions that position military service as incompatible with their cultural identity.

Absence of family support

The tensions between service identity and cultural community expectations created challenges when CALD veterans needed support. Extended deployments or exercises strained family connections, with reintegration presenting additional difficulties (Stakeholder 7). More significantly, cultural stigma around mental health meant some CALD veterans could not turn to family or community for support with service-related issues:

I think from a cultural background specifically [...] except for my partner, no-one in my family or culture know that I suffer from certain issues, especially in the headspace area. Because of stigma, it's just – you just get labelled as someone crazy or whatever. So, from a cultural point, they're not part of my support group, so instead I do have to rely on professionals. Without having a successful DVA claim, then you don't get access to that professional support. (Veteran 7)

This veteran's account reveals how cultural stigma can reduce or eliminate informal support networks. For CALD veterans navigating family or community disapproval of military service, or cultural stigma around mental health, the usual protective factor of family support may be unavailable, making connection to formal support systems even more critical.

5.1.7 Visibility of culturally related service experiences

CALD veterans may face barriers to accessing appropriate supports due to the reduced visibility of culturally specific needs within the veteran support system. This visibility could be improved at multiple levels.

First, as discussed in Section 3.1, understanding the racism or 'othering' that some CALD veterans experienced during service has not, to date, been a specific focus of research or policy. The Royal Commission (2024, Volume 1) found that when experiences of victimisation as an 'outsider' – including being an outsider to the majority culture within the ADF – are not perceived to be well handled, this can be a risk factor for suicide and suicidality. This has implications for the veteran support system in terms of how it recognises, and supports, veterans with first-hand experiences of racism, or other harms experienced during military service related to the relationship between their veteran and cultural identity (e.g. moral harm).

Second, the veteran support system does not systematically collect data about veterans' cultural

identities, religion or languages spoken (see Section 4.2). Without this demographic information, support services cannot identify at a system level if they are supporting veterans from a CALD cohort, cannot assess whether particular groups face barriers to access, and cannot develop targeted outreach and supports (discussed further in Section 5.1.8).

Some CALD veterans and stakeholders observed that the organisational culture of some veteran support services were perceived as not necessarily culturally responsive or welcoming to more diverse veterans (see Section 4.2). The sense of ‘othering’ experienced during service can also be experienced when accessing the veteran support system, again, due to being perceived as an ‘outsider’ by the majority (discussed further in Section 5.1.9).

5.1.8 Data and information sharing

A key barrier identified by stakeholders was the **limited information** available about the veteran population as a whole, and specifically about the demographic characteristics of veterans – other than gender, age and service. Current data systems have structural limitations that make it difficult to capture diversity. For example, character limits on name fields that do not accommodate names beyond mainstream Anglo or European names (field length) – names sometimes being an indicator of diversity and often gender (Stakeholders 1, 5).

The information exchange agreement between ADF and DVA that forms part of the Early Engagement Model has led to improvements in the transfer of service-related information, thereby reducing complaints from veterans about ‘just constantly repeating stuff to everyone all the time’ (Stakeholder 5). However, DVA does not capture this information from data transferred from the ADF relating to a veteran’s cultural identity/identities, religion, or languages spoken, or their family structure, despite ADF reportedly collecting this information (see Section 4.2). Further, there is inconsistency between how data is collected by Defence and DVA systems making data integration difficult. As one stakeholder noted, the two data systems ‘don’t talk well enough together – for example, if someone is First Nations, ADF will ask ‘are they Indigenous or non-Indigenous?’ and DVA will ask, ‘are you Aboriginal, Torres Strait Islander or other’ (Stakeholder 8).

The limited data and information about this population makes it difficult to identify cohorts, respond to their specific needs, or develop targeted approaches, if and when, necessary.

5.1.9 Organisational culture

Some of the barriers reported relate to the broader **organisational culture of services within the veteran support system**. For example, veterans and stakeholders highlighted that veteran support organisations were often perceived as reflecting the ADF’s earlier demographic composition (‘old white dudes’, Stakeholder 12) and consequently were often perceived as not necessarily culturally responsive or welcoming to more diverse veterans.

I think a problem [...] many people in the support organisations like DVA and RSL are ex-[ADF]. They are so institutionalised and controlled by process that they have an inability to fix problems from within. (Veteran 14)

While cultural diversity within DVA is growing – with some culturally diverse public servants participating in this research and describing mechanisms introduced within DVA to support culturally diverse staff – it was unclear from this research the extent to which increasingly diverse workforces extended to other veteran support organisations.

Beyond workforce diversity, many study participants highlighted gaps in **cultural awareness within the veteran support system**. Stakeholders described receiving training in cultural safety in relation to Australia’s First Nations peoples, but this had not been extended to consider CALD veterans:

Mates4Mates has been going through crazy amounts of change in the last 10 years, and [it’s] now been reabsorbed by RSL. And they did introduce cultural awareness studies primarily through - towards Indigenous history and things like that. That’s all. I think they’re trying to get there. (Stakeholder 6)

One stakeholder wondered whether the absence of training was due to the potentially small numbers of CALD veterans

I think because these clients from these different backgrounds have never been the main part of the clients that we see [...] I think government departments such as Centrelink, Medicare or NDIS might have a bit more of a focus on it, because they deal with the whole community. Whereas we deal with, generally, just the veteran community, which has traditionally been quite an Anglo, English speaking group. (Stakeholder 2)

This gap in cultural awareness training, combined with a lack of data about the CALD veteran cohort discussed earlier, has the potential to result in **unconscious biases** at a system-level. The absence of this information, and examining processes and policies through a cultural lens, can create unrecognised challenges in seeking or providing support. As one veteran explained:

When you say, do the support agencies adequately understand or support people like myself who have, in good faith, with the best of intentions wanted to be a proud and productive Australian serving my country? The answer is they have no idea. The answer is they work within a very narrow field and templates of understanding. There’s a lot of work to be done. (Veteran 14)

5.1.10 Language

There was a general assumption from stakeholders interviewed that anyone joining the ADF has a high level of English literacy. This does not mean that English is spoken as a first language, or that even if English is a first language, that literacy levels are high enough to understand complex veteran support systems and processes. As outlined in Section 4.2.1, many participants who were second-generation and tertiary educated found they could not comprehend the language used when accessing supports through the DVA. Several participants spoke of the need for DVA to use plain English rather than ‘policy speak’ (Veteran 12) to improve accessibility.

Further, the veteran support system could also be accessed by families who may have very different proficiency in English. Therefore, **language and communication styles** was sometimes a barrier to both accessing and providing supports to both CALD veterans and their families.

Some stakeholders talked about involving other members of the family when language was a barrier to providing services (Stakeholder 2, 8). Sometimes this resulted in seeking authority to nominate a representative to talk to.

What we have, like every other organisation, is the ability to nominate a representative. So, we'll try to encourage our staff to say, [...] look, do you want to nominate your wife as [your] representative so she can come and do things on your behalf, and vice versa. So, we'll encourage that, and we'll offer them the form to fill out and sign. (Stakeholder 2)

The same stakeholder also spoke of using the Translator Interpreter Services (TIS), although also noted that this was not always ideal given the complexities of the veteran support system. This language barrier was more commonly apparent in relation to older allied veterans, or parents of a veteran who may have 'passed away due to a service-related condition' (Stakeholder 2). Sometimes language barriers were overcome using translation software (Stakeholder 2).

One stakeholder observed that communication breakdowns were occurring due to **differences in communication styles**, which went beyond word choice:

I think having that language barrier sometimes can be challenging for her to articulate with other areas or other people that she needs assistance from, without it coming across too direct. (Stakeholder 3)

6. Potential opportunities for the veteran support system to better meet the requirements of CALD veterans and their families

This section reports the potential opportunities for the veteran support system to better meet the requirements of CALD veterans and their families, as identified by study participants (Question 4). As reported above, for CALD veterans, cultural identity was not always the primary driver of support needs; however, their cultural identity was often (but not always) an additional consideration in responding to those needs. Research participants identified different ways in which services could be more culturally responsive (Section 6.1) and specific areas for improvement to help overcome the barriers CALD veterans and their families experienced when trying to access the veteran support system (Sections 6.2). Not all these opportunities are within the purview of DVA or the broader veteran support system – but are important to acknowledge and report as they were raised by research participants.

6.1 Culturally responsive services

As described in Section 3, cultural identity plays a significant role in how CALD veterans experience and seek support. In human services, providing culturally responsive services involves understanding the diversity of a community and their specific needs and is enabled by partnering with the CALD community to adapt and respond to those needs (Bates et al., 2023). Participants in this study identified several opportunities for the veteran support system to become more culturally responsive to CALD veterans and their families. They included improving legislation and policy, workforce diversity and governance, language and communication support, cultural awareness training, and understanding the intersection between veteran and cultural identities.

6.1.1 Systemic review of legislation and policy

As discussed in Section 5, there is potentially an opportunity for **broader systemic factors to be reviewed** to ensure the veteran support system is more culturally responsive to the needs of CALD veterans and their families. One participant described a current review of the **veteran legislation** to understand whether there is a male bias in it; ‘they made me see how it was male orientated and wasn’t taking into consideration the unique circumstances of females’ (Stakeholder 10). They added, ‘I think there’s probably merit in saying listen, there’s an opportunity to review the legislation to ensure there’s no unintentional bias that may preclude the provision of support to CALD minority groups’ (Stakeholder 10).

This type of review could potentially be extended to policies and processes, such as claims process, to ensure they suit an increasingly diverse veteran population. As one stakeholder noted:

We already can see the changing profile of the [ADF] workforce and therefore what we are commissioning and what we are building policy around now should be informed by that. (Stakeholder 11)

The **organisational changes** introduced in response to the recommendations of the Royal Commission, specifically the **Wellbeing Agency** (DVA, 2025c), provide another opportunity to incorporate more culturally responsive practices. One stakeholder explained, the wellbeing agency ‘will operate in that transition area, I’m hoping that the tick and flick will be softened to be more of that personal experience’ (Stakeholder 8).

6.1.2 Workforce diversity and governance

Study participants also identified the potential opportunity for **both DVA and ex-service organisations** (ESOs) to become **more culturally responsive**. Suggestions included encouraging ESOs to have **more diversity in leadership** roles to reflect membership of the ADF (Veteran 25, Stakeholder 10); having clear policies about being responsive to the diverse veteran population (as one stakeholder said, ‘making it clear that that’s the sort of organisation we want to be’, Stakeholder 6); and employing **more diverse frontline staff** to ensure CALD veterans needs were understood and responded to. Several participants suggested DVA may be able to encourage culturally responsive practices by ESOs. As one CALD veteran explained:

I think that DVA should demand diversity in the people it interacts with that represent veterans. So, I'm thinking like ESORT, I'm thinking the ESOs... I know that they're looking at having quotas of women on boards of ESOs that represent veterans. I think they should also look at that cultural diversity piece ... They're in a bit of an invisible group because no one's been asking to hear their voices. That's why it's hard to find and that's why – no one's capturing data. So maybe if I'm going to give a grant to RSL for RSL Active or whatever, I want you guys to be collecting cultural background information and showing me the breakdown of people [...] It's really hard to find these people and they don't identify [...] – they're not the ones going to the white golf days that have been funded by DVA to RSL Active. We're missing out. We're missing out on this incredible richness in our veteran community because of it. (Veteran 25)

Stakeholders also suggested veteran support services could be encouraged to have more of a **diverse frontline workforce**. One stakeholder said:

I think it would be good to have clinicians who come from certain backgrounds to provide a level of understanding, whether it's to the team as a whole or to a specific client base, like a specific client group ... there is quite a broad diversity. I think up here, potentially, the Pasifika side of things might be one that would be good. (Stakeholder 7)

This stakeholder also referred to a Health Service where Indigenous Liaison officers helped bring understanding about culture and expectations of First Nations clients which was considered to be beneficial in the transition space. They suggested a similar approach could be used for veterans with other cultural or value-based systems (Stakeholder 7).

Notably, participants in this study considered that **workforce composition alone was not sufficient for support services to be culturally responsive**. Consistent with previous research about responding to the service needs of people from CALD communities, participants suggested services also needed to be **trauma-informed**, minimising further harm from having to retell their story (Bates et

al., 2023) – something that was relevant to both the veteran and CALD identities. As one CALD veteran explained:

Again, it was still very difficult and tough to go through. Just having to relive stuff, having to rewrite things, having to just list out things. [...] I don't have the capacity to go through it. [...] It's just emotionally exhausting – it takes a toll when you have to relive everything and then try to get evidence of things, and it's just too hard, too draining. (Veteran 7)

Participants also identified risks to **cultural safety** of diverse staff when not accompanied with other reforms. For example, without other reforms, organisations may run the risk of diversity 'just being sort of tacked on' or tokenistic, with the individuals having to take on the **cultural load**. As one veteran explained:

The challenges that are encountered by people that come from migrant backgrounds that are trying to contribute to environments that are traditionally very homogenous and traditional in their customs, culture, practice, systems, that were designed for certain types of people... these newcomers are somehow expected, on their own, without too much change to systems or structures or processes, to find their way on their own, and while they're doing that, also educate everyone else on what they need to know. (Veteran 14)

6.1.3 Language and communication support

Some stakeholders also raised the diverse **language and communication needs** of CALD veterans and their families – particularly when navigating the complex processes and language associated with the compensation and support schemes and the broader veteran support system. Some participants highlighted that first-generation migrants, whose first language was not English, required additional support – not just in understanding the **language** used to access the veteran support system, but also recognising **different styles of communication and sensitivities** around some topics such as mental health. One stakeholder suggested that providing supports that factored in, not just English as a second language, but also the **cultural differences in communication**, would be beneficial, particularly when negotiating more complex issues. They explained:

Whether they offer - Defence offer - any type of support around second language ... especially for people that are - whether they're discharging or even going through a challenging experience or times. I think it would be really beneficial to know that they've got that option there [...] It's that, I guess, more cultural background, morals, personality that then really comes in. (Stakeholder 3)

6.1.4 Cultural awareness training

Stakeholders also identified opportunities to **improve understanding and education within the veteran support system** to better understand cultural differences and how to respond to them:

We talk about being culturally appropriate and culturally aware, but we don't really have – if someone comes from this multicultural background, this is some of the things, their traits, or the part of their customs and traditions that you should maybe

be aware of. We could easily look at Defence, what is the say five or six main non-Australian sort of Defence members, and then focus on those. (Stakeholder 8)

I think there's the element of your normal modules of multicultural tutorials that we have, but in my area of work, I don't think anybody has stepped in to do that particular kind of training [...] I am drawing from my own experience in terms of being a soldier and being from a multicultural background. I'm lucky in that way that I can be able to draw from those experiences. It's not something that I expect from my other colleagues to do because they might not have the same sort of experience. (Veteran 18)

Several stakeholders referred to other government departments (Centrelink, Medicare, National Disability Insurance Agency) that DVA and ESOs could probably learn from in terms of responding to the needs of culturally diverse clients (Stakeholders 2, 11).

If you work in social services or health, you kind of learn the diversity of your population that you're there to develop policy for. And so, there are natural adjustments around First Nations, culturally and racially marginalised, geographic, you know, disability, class, all of those things. (Stakeholder 11)

Stakeholder 11 went on to note that the reverse was also true, that the veteran support system could in return provide expertise to mainstream services on the veteran experience.

6.1.5 Understanding intersections: veteran and cultural identities

However, understanding cultural needs alone was not sufficient. It was also important to understand veteran experiences more broadly and how cultural identity intersected with that. One stakeholder also said it was important for staff responding to veterans to also have a better understanding of conflict zones, as well as how their cultural identity impacted that. They said, many staff 'just don't understand, because they've never been in that situation before or they haven't seen conflict' (Stakeholder 1). This seems particularly relevant in light of the observations in Section 3, that geopolitical dimensions – where veterans' cultural backgrounds aligned with operational areas – appear to influence CALD veterans' experiences, and Section 5.1.7, that CALD veterans, and/or their extended families may have first-hand experience of international conflict.

Participants in this study highlighted an opportunity for the veteran support system, including organisations working exclusively with veterans, to become more culturally responsive. Consistent with the broader literature on culturally responsive supports, participants highlighted opportunities for improvement in governance, staffing, policies and procedures, training, and ways of working, that could potentially better respond to the needs of CALD veterans and their families.

6.2 Specific improvements

In addition to improving cultural responsiveness across the veteran support system, participants in this study identified potential opportunities for improvement that could help the veteran support system become more culturally responsive. They include:

- **Improving and aligning data collection:** capturing veterans' cultural identity or 'cultural history' and other identities (languages, family structure, dependencies, and other information that may impact service access and use) using the same measures across agencies, to inform veteran support system responsiveness – doing so in a culturally sensitive way (Stakeholders 5, 6, 12)
- **Updating processes within the veteran support system** to better respond to claims involving racism, psychological harm and moral injury associated with cultural identity
- **Educating organisations, from leaders to front line supports, to improve understanding of the diversity of CALD veterans and their families** and how this may affect support needs and experiences in accessing the veteran support system (Stakeholder 10). Education has a role in helping service providers understand 'common cultural differences, common values ... get an understanding of what some of those common ones are ... to start to piece together some of those bits of the puzzle that we might be missing' (Stakeholder 7). Education needed to be done well 'to avoid pushback' (Stakeholder 5).

Participants in this study also highlighted opportunities to **improve access to the veteran support system in general** as well as specific services such as **mental health**. While this is likely to be an issue for the broader veteran population, there were additional cultural considerations to accessing mental health services, on top of other barriers, for CALD veterans. In relation to mental health services, and services more broadly, this included opportunities to overcome prejudice or discrimination (Stakeholder 5), be 'more welcoming [so that] people feel comfortable to access those services' (Veteran 24), and also recognise that support is not limited to those who have 'been in combat' (Veteran 18).

6.3 ADF as part of the veteran support system

The ADF can be seen as a part of the broader veteran support system and it has a role in supporting its members through the transition process. While outside the scope of DVA's purview, it is important to acknowledge that veteran support needs arising from cultural identity often emanate from service in the ADF or the separation process which is supported by the ADF (reported in Section 3.1).

Participants in this study highlighted there were still **opportunities to improve understanding of cultural diversity within the ADF** itself (Veteran 4), potentially incorporating education within mandatory training each year. This may mitigate some of the support needs arising due to cultural identity. As one CALD veteran explained:

Several times I've suggested that when we have our mandatory training at the beginning of the year, there should be something about Muslims in there, there should be something about multiculturalism. There's nothing. (Veteran 2)

Participants in this study gave many examples of prejudice, bullying and discrimination they experienced associated with their cultural identity, and their fear of reporting or the lack of response if they did report incidents (Section 3.1). One participant suggested there may be an opportunity to develop a confidential mechanism to record incidents to be able to access appropriate supports from

DVA later – as is the case with injuries.

Something that avoids retaliation from command and the unit [...]. Which is hard, because if that report floats up anywhere at any point, you're the one Asian bloke in a 500-person unit, I think we know who made the report. [...] A way to record incidents privately and then after service be able to use that as evidence for support afterwards, because you know, that's kind of like the system we use for everything now anyway regarding medical, psychological. If it can't be actioned now, clock it, and then when you're out, you go to DVA and they can organise referrals for you after. (Stakeholder 5)

Another stakeholder reflected on the role of leadership within the ADF and the strength of leadership in setting examples for and advocating for minority groups. This is relevant to both service and the transition process:

Having strong leaders who can set examples and advocate for minority groups, having an organisation that's aware of the different cultures within it and how things can be perceived, having leaders who are aware and are not bystanders, [who] will actively intervene when they see culturally insensitive behaviours manifesting. These are all small things at the tactical level that can have big, big and wonderful impacts (Stakeholder 10)

This stakeholder drew on their own experience to illustrate how the ADF had effectively delivered cultural sensitivity training when operating overseas. They suggested this approach could be taken across the veteran support system, particularly as current and former members of the ADF become more diverse.

[The ADF] did this massive surge in cultural sensitivity training. And the reason we did that is because the Afghans kept shooting us and killing us, and we couldn't understand why. Well, it was simple. We had this clash of cultures in a high-pressure environment [...] And Australians were being culturally insensitive, not necessarily meaning to be, but they were, and we worked very hard to increase awareness of cultural sensitivity and as a consequence of that. [...] we became very successful in mitigating a lot of those risks. [...] So educating them in relation to appropriate behaviours is a fundamental component of changing behaviour and reinforcing and enabling leaders to not be bystanders and to call out inappropriate behaviours to help mitigate stupidity. (Stakeholder 10)

Several participants in this study recognised that the ADF's **intention to increase diversity** within and across its workforce **may also help improve its cultural responsiveness**. Some participants recognised the 'marked difference' in the diversity within ADF already (Stakeholder 8), and others highlighted room for improvement – highlighting opportunities to specifically 'recruit amongst multicultural communities' and ensuring diversity also in the officer ranks (Veteran 22).

The ADF strategy also highlights the importance of not just recruiting but also retaining a diverse workforce (see Section 1.1.4). A more diverse and culturally responsive workplace may support this objective, along with a better understanding of why CALD veterans separated from the ADF (Veteran 14).

7. Findings and implications

The cultural diversity within the veteran community is significantly lower than the broader Australian population. However, the cultural diversity within the ADF is increasing and it is expected to translate into an overall increase in CALD veterans over time. At the same time, there is an opportunity to influence the design of the veteran support system as DVA and Defence, and other organisations in the support system, respond to the recommendations of the Royal Commission into Defence and Veteran Suicide.

This exploratory study aimed to provide DVA and other stakeholders with **preliminary insights** into CALD veterans needs and experiences of the veteran support system, and some potential opportunities for how the veteran support system may better meet the needs of CALD veterans and their families. The findings are based on 38 in-depth, semi-structured interviews with CALD veterans (n=25), CALD veteran family member (n=1), and government and non-government stakeholders (n=12). No data were available about the broader CALD veteran population to understand how representative our sample was.

Overall, the insights from this study suggest that, while there are some similarities across the veteran population of difficulties accessing and receiving appropriate supports, as reported at length in the final report of the Royal Commission into Defence and Veteran Suicide (2024), there are **additional needs arising from or associated with veterans' cultural identities**. This section summarises the findings to answer each research question (Section 7.1), the implications (Section 7.2), the study limitations (Section 7.3), and opportunities for future research (Section 7.4.7.2).

7.1 Summary of findings

Question 1: What are the service access **needs** and **experiences** of CALD veterans and families when accessing and engaging with the veteran support system?

This study identified a breadth of **support needs specific to CALD veterans** due to their cultural identity – although this was not the case for all CALD veterans interviewed and the experiences of CALD veterans were diverse. CALD veterans **support needs were diverse and a factor of their experiences within the ADF, their transition experience including reason for transition, and protective factors** such as faith, community and family. **Some CALD veterans had support needs arising from their cultural identity due to identity-related issues, including overt and covert instances of racism and moral injury arising from service, as well as experiencing discrimination during transition when accessing the veteran support system.**

Similarly to other veterans, CALD veteran support needs were shaped by type of service, rank, sex, appearance, duration of service, deployments, when they separated, experiences during training, the support from mentors or commanding officers, and their reason for separation. **Additional considerations for CALD veterans** could apply to each of these factors – affected by whether they were first/second-generation Australian, or whether their cultural identity was linked to or perceived to be associated with recent areas of military deployment. This finding is consistent with the work of

Campbell et al. (2024) who recognise the additional considerations in understanding the needs of and service access of under-represented groups of veterans.

This study also identified how **cultural identity affected or shaped if and how services were accessed and experienced** – for many but not all CALD veterans. CALD veterans required **specific support needs** including needs arising from racism, discrimination and moral injury. Some issues may not be recognised or responded to within some cultural groups (such as mental illness and PTSD). Cultural identities were also an **additional layer of consideration** for other support needs of CALD veterans when accessing the veteran support system. CALD veterans reported differences in their willingness to engage with the veteran support system and whether services were responsive to their needs. **Experiences of the veteran support system**, like needs, varied and depended on a range of factors including the veteran’s cultural identity, family connections and supports; existing links to the veteran community, cultural community, and the workforce; experience of service (given there may be a perception that many ESOs are an extension of the culture of Defence), their type, level and duration of service, and time since separation; whether they were deployed; their experience at separation and transition, often impacted by whether separation was planned/unplanned, whether it was for medical reasons; and their post separation experiences. Experiences were also driven by the **cultural responsiveness** of the veteran support system and whether the system was safe to access for the veteran. Poor experiences of the veteran support system could also create additional needs – or leave needs unmet.

Question 2: What are the enablers that support CALD veterans accessing and engaging with the veteran support system?

This study identified different factors that enabled CALD veterans to access the veteran support system. First, for some CALD veterans, their military identity, their rank and experience within the ADF were sometimes an enabler to accessing services particularly during the transition process which then helped them transition relatively smoothly to civilian life. For some, this included finding culturally relevant training opportunities and services. For others, this involved enablers such as having support of their commanding officer, having access to a computer, and having access to flexible work conditions that allowed them to access transition programs.

Second, for some CALD veterans, their cultural identity was a protective factor and an enabling factor when accessing supports during the transition process. This included drawing on their faith, drawing on their broader cultural community supports (particularly when away from home), and drawing on support of their family. DVA and ADF chaplains had a growing role in pastoral care and provided veterans with opportunities to have meaningful conversations that were important particularly around moral injury, and helped retain connections to cultural identity. CALD veterans are not one homogenous group and there is increasing diversity in the chaplaincy within the ADF. Other social identities, statuses and circumstances also interacted with CALD identities, some of which also offered protective factors or enabled CALD veterans to access services.

Third, insights from participants highlighted the importance of maintaining or rebuilding individual identities and how this impacted their needs, access to, and experiences of the veteran support

system.

Finally, the way services were provided impacted on CALD veterans' ability to access the veteran support system and their experiences of it. For example, being responsive (in terms of understanding, time and approach) to how different cultures understand and experience mental health supports, having diverse support providers, and having continuity in services across transition that were both culturally responsive and trauma-informed. Most importantly, the key enabler identified by participants in this study was having veteran support services that had the combined understanding of the CALD veteran experience and DVA processes.

Question 3: What are the barriers CALD veterans face in accessing and engaging with the veteran support system?

This study also identified different individual barriers to accessing the veteran support system and systemic barriers to accessing and providing supports to CALD veterans. First, the key barrier to accessing the veteran support system was CALD veterans' experiences within the ADF, with transition, or prior experience of the veteran support system itself. This may be related to the unresolved service-related psychological harm due to racism, the perception that the veteran support system is an extension of the ADF (in terms of both workforce and culture), and the perception that the veteran support system is geared towards the historical majority – white, male and older veterans – rather than the more diverse contemporary cohort of veterans.

Second, the key barrier for the veteran support system to respond to the needs of CALD veterans is the lack of information about the veteran population and the different social identities and experiences of this population.

Third, the organisational culture of services within the veteran support system was highlighted as problematic and not seen by those involved as responsive to the needs of more contemporary veterans. This included the needs of CALD veterans, but also female veterans, and the families of veterans.

Finally, the language used in the veteran support system, particularly associated with DVA compensation processes, was considered inaccessible to highly educated second-generation CALD veterans and a barrier for first-generation CALD veterans or family members where English was not necessarily spoken as the first language.

Question 4: How could the veteran support system better meet the requirements of CALD veterans and their families?

Participants in this study identified potential opportunities for the veteran support system to better meet the requirements of CALD veterans and their families.

At the system level, potential opportunities for improvement were identified in terms of considering reviewing relevant policies and/or legislation to ensure that no unintentional bias that may affect support to CALD veterans or their families exist, for example in veteran rehabilitation and

compensation; administrative issues such as data, administrative processes, and funding; and links to other services and systems (including promoting understanding of the specific needs of veterans to other systems and services, and learning from others about culturally responsive systems).

At the organisational level, potential opportunities for improvement were identified in terms of ensuring organisations within the veteran support system (including DVA and the ADF) are more culturally responsive to ensure they are accessible to and recognise the different identities and needs of the increasingly diverse veteran population. At present, participants indicated there was limited training for DVA staff on cultural safety, and few veterans' services we spoke to provide cultural safety training for their staff. While study participants from the veteran support system suggested CALD veterans were currently a small minority of service clients, this cohort is likely to grow over the next few years given the increase in diversity within ADF. It is therefore timely that organisations become more culturally responsive, from a governance and policy point of view, to front line service delivery. Training for DVA and service providers may be developed to address this gap, noting that, as indicated above, training should take an intersectional approach as veterans all have multiple identities which may affect their engagement with services. DVA has an opportunity to address this issue, including, for example, in the funding of ESOs and other veteran organisations which could be encouraged to become more diverse and culturally safe environments for veterans.

At the workforce level, potential opportunities for improvement were identified in terms of recruiting diverse staff and educating and training staff in culturally responsive service delivery.

At the individual veteran level, in terms of supporting veterans to access and navigate the support system. CALD veterans in this study came from very different cohorts of veterans – both for their service and time since separation. Older veterans who had separated more than 10 years ago had little support at separation/transition – equally they were also less diverse and more likely to be second-generation migrants where the main identifier of their cultural identity was their name. Younger veterans who separated more recently were more culturally diverse had higher needs arising from their time in service – many associated with their cultural identity; they talked about the supports being available at separation/transition but also commented on them being largely administrative, not person-centred, and not responding to them as CALD veterans. It is important to note that although participants indicated that cultural background was associated with many CALD veterans experiencing barriers to service engagement, some participants also drew strength and support from family and their cultural communities, and therefore services need to engage with these strengths and supports, rather than viewing culture as a need or source of harm.

The diversity within the veteran population is not understood by the veteran support system. If this absence of data continues, the veteran support system may need to consider other ways to identify and inform service delivery such as by engaging with veterans to better understand their needs.

7.2 Implications

Overall, these findings show that:

- Consistent with the recommendations of the Royal Commission into Defence and Veteran Suicide (2024) that highlight the experiences of minority groups in the ADF, some CALD veterans have specific support needs arising from their cultural identity, and some CALD veterans may benefit from the veteran support system taking cultural identity into account when responding to those and other needs.
- There is an opportunity to consider how to make the veteran support system more inclusive of families' needs – with a broader consideration of what family looks like.
- Consistent with the recommendations to establish the Wellbeing Agency (DVA, 2025c), there is an opportunity to consider encouraging the veteran support system to become more culturally responsive and inclusive, as well as trauma-informed, to ensure the needs of veterans are met and no further harm is experienced when accessing supports.

This study focused on the interaction between veteran and cultural identities and CALD veterans' needs and experiences accessing the veteran support system. However, needs and experiences were not determined by the interaction of these two identities alone. As one veteran said, 'we all wear the same uniform but there's so many layers underneath' (Veteran 25). Different layers of social identity were raised by every participant in this study – whether cultural identity, gender, family circumstances, support needs, or other factors related to military service (e.g. rank) – each of which impacted both positively or negatively on service need and experiences of services. The data highlight veterans are each unique, comprise of multiple layers of identities, and consequently veterans' experience of services and systems can be impacted by those identities, experiences, as well as the context in which they live. The evidence from this study suggests that **there is an opportunity across the veteran support system to consider taking an intersectional approach** (Bates et al., 2024) to ensure these layers of identity and their interaction, and how they are experienced in different contexts and power relations, is understood.

Taking an intersectional approach:

- Recognises policies do not work in isolation
- Requires skills, time, and resources to implement
- Requires an evidence base (data about different social identities within the population)
- Requires understanding of social identities, the diversity within them, as well as an understanding of power and context
- Can risk further marginalisation
- Requires translation into service delivery (Bates et al., 2024)

This study contributes to the evidence base and the understanding of cultural identities of veterans and the diversity within them, as well as an understanding of power and context in relation to CALD veterans. However, more accurate data on the cultural backgrounds of veterans, and other identities, is required for the veteran support system to better understand and respond to the needs of this cohort and understand whether it is being effective in its response.

Veterans do not only access veteran specific services, and participants indicated that mainstream services, in particular health services, need to provide services that are not only sensitive to cultural

and migrant backgrounds, but are also aware of the specific needs of veterans. There is potential for the veteran support system to also engage with other service systems, such as health services and housing, to help them better understand the particular needs of veterans, including CALD veterans.

This exploratory study confirms CALD veterans may have additional support needs arising from service and cultural identity which may shape how services are accessed and experienced. Further research is required to understand the extent and variation of the CALD veteran population and the extent and variation of these experiences across this population. Similarly, while the experiences recounted in this study are about individual service needs, the experiences shared by interviewees also point to the potential opportunity to examine the broader veteran support system to ensure the needs of CALD veterans and their families are understood and responded to.

7.3 Study limitations

All research is subject to limitations and therefore the findings should be interpreted with caution. DVA commissioned a small-scale qualitative study to increase understanding of CALD veterans' needs and experiences of the veteran support system. Findings were triangulated in interviews with stakeholders and are therefore robust. However:

- All opt-in research is subject to response bias. This study may not include insights from CALD veterans who have completely disengaged with the veteran support system either because of high needs that were not responded to or the absence of support needs and no reason to engage with the veteran support system.
- It is difficult to know whether the experiences of the study participants capture the diversity of experiences of the broader CALD veteran population.
- Family members are under-represented in this study which limited what could be reported about the experience of family members beyond what was shared by veterans themselves, or by stakeholders who had supported veterans and their families in the veteran support system.
- The term CALD was considered not to be suitable for use in veteran facing research materials by the CALD Veteran Advisory Group. Instead, the term 'from migrant or multicultural backgrounds' was used to recruit participants to this study. This was open to interpretation and was understood differently by participants and organisations.

Notwithstanding the above, this exploratory study provides rich insights into the breadth of needs and experiences of a diverse group of CALD veterans which build on the evidence reported to the Royal Commission on Defence and Veteran Suicide.

7.4 Potential for future research

This study was exploratory. The findings provide insights and additional understanding about the needs and experiences of CALD veterans when accessing the veteran support system. The extent to which these experiences are shared by other CALD veterans may be explored further through population-wide surveys. Specifically population surveys may assist to **understand the extent to**

which the support needs and experiences identified by CALD veterans and their families in this study are shared by other CALD veterans – and potentially other marginalised groups. Additional research may consider exploring:

- The nature and diversity of the veteran population including different social identities beyond that currently collected and reported by the ABS and AIHW.
- The extent to which different cohorts access different aspects of the veteran support system, compared to the overall veteran population, including submitting claims for rehabilitation and compensation and the nature of those claims.
- The reasons for separation and how the experiences of transition differ in relation to the reasons for separation – this may identify any strengths or weaknesses of the current transition supports, as well as inform ADF's work around recruiting and retaining a more diverse workforce.
- The cultural responsiveness of the veteran support system to both CALD veterans and their families.

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Appendix A Interview guides

A.1 Interview guide – CALD veterans

The first questions allow us to find out a little bit about yourself – things that may affect the types of services you need, area available to you, and how they might be best provided.

1. What was your sex recorded at birth?
2. How do you describe your gender?
3. What are your family circumstances? *Prompt: are you married/de facto, have kids living at home*
4. What is your migrant or cultural background? *Prompt: e.g. first/second-generation Australia, Vietnamese, Indian, Lebanese*
5. What religion do you practice, if any? *Prompt: for example, Christian, Muslim, Hindu*
6. How old are you? *Prompt: Feel free to give an age range.*
7. What state do you live in?
8. Do you live in a metropolitan, regional or remote location?

Tell me about your type of service in the ADF. Note this is high level – no specific or operational questions will be asked.

1. What branch of the ADF did you serve in? *Prompt: Navy, Army, Air Force (multiple answers possible)*
2. What was your rank when you transitioned out of full-time service? *Prompt: Officer, or other rank*
3. How many years did you serve? *Prompt: Can be approximate*
4. Were you deployed during your service? *Prompt: yes/no*
5. Approximately when did you transition out of full-time service? *Prompt: within the last 5 years, 5-10 years ago, more than 10 years ago*
6. Was your transition out of full-time service voluntary or involuntary?

Many veterans receive support from their family and other community members, including other veterans.

1. Have you received support or advice from family or community members? [not quite right – please revise]
2. Has your family or the community provided you with support directly or helped you access other supports since transitioning out of full-time service?

We recognise that support needs vary for all veterans. This next section is about what formal supports [this means help offered by veteran organisations like DVA or Open Arms, as well as things like counselling, housing, medical support, financial assistance, or community services] you may have needed since you transitioned out of full-time service, the types of supports that you accessed, and your experience of those supports.

1. Are you familiar with the supports made available to veterans either directly through veteran focused organisations (DVA, Open Arms, and ex-service organisations) or indirectly through subsidised mainstream services?
2. Did you use any veteran support services:
 - a. At the time of separation (discharge)?
 - b. In the (approximately) 5 years post separation (discharge)?
 - c. If you separated (discharged) from service more than 5 years ago, have you used services since?
3. If you have used veteran support services:
 - a. What types of services did you use? *Prompt: veteran specific services either from DVA and/or ex-service organisations, or other service providers*

- b. Were your needs met? How? *Prompt: Were services personalised to your needs?*
 - c. What helped you find the services you used? *Prompt: Colleague, family, DVA, other organisation or support.*
 - d. Did you feel the service understood or responded to your cultural background or needs? Can you share an example?
 - e. Was there anything about the service you were not satisfied with or thought could be better?
 - f. Did you feel comfortable approaching services? [prompts, safe, trust]
4. If you have not accessed veteran support services, have you ever needed services?
 - a. If yes, what prevented you from accessing them? *Prompts: not knowing what services were available, not being able to access services at a time and place needed, not being able to access culturally appropriate services*
 - b. How do you think these barriers be resolved?
 5. Do you have anything else to share about your experience, or how supports could work better for veterans from all backgrounds in the future?

A.2 Interview guide – Family member

The first questions allow us to find out a little bit about yourself and your relationship with the veteran from migrant or multicultural backgrounds - things that may affect the types of services you need, area available to you, and how they might be best provided.

1. Are you or your family member a veteran from a migrant or multicultural backgrounds? (IF No, Stop interview)
2. What was your sex recorded at birth?
3. How do you describe your gender?
4. What is your relationship to the veteran from migrant or multicultural backgrounds? *Prompt: spouse/de facto, child, other family member*
5. Are you also from a migrant or multicultural background? If so,
 - a. What are your ancestry or cultural origins of your ancestors? *Prompt: e.g. Vietnamese, Indian, Lebanese*
 - b. What religion do you practice, if any? *Probe: Christian, Muslim, Buddhist, None*
6. How old are you? *Prompt: Feel free to give an age range.*
7. What state do you live in?
8. Do you live in a metropolitan, regional, or remote location?

Tell me about the type of service you or your family member completed in the ADF. Note this is high level – no specific or operational questions will be asked.

1. Which branch of the ADF did your family member serve in? *Probe: navy/army/air force?*
2. What was their rank at separation? *Prompt: Officer, other rank*
3. How many years did they serve? *Prompt: can be approximate*
4. Were they ever deployed during their service? *Prompt: yes/no*
5. Approximately when did they separate (discharge) from the ADF? *Prompt: within the last 5 years, 5-10 years ago, more than 10 years ago*

We recognise that service needs vary for all veterans and families. This next section is about what services you and your family member may have needed since they separated (discharged) from the ADF, the types of services accessed, and your experience of those services.

1. Are you familiar with the services available to veterans and their families either directly through veteran focused organisations (DVA, Open Arms, and ex-service organisations) or indirectly through subsidised mainstream services?

2. Did you or your family member use any veteran support services?
 - a. At the time of separation (discharge)?
 - b. In the (approximately) 5 years post separation (discharge)?
 - c. If you have been separated (discharged) from service more than 5 years ago, have you used any of the services?
3. If you or your family member has used veteran support services:
 - a. What types of services did you/they use? *Prompt: veteran specific services either from DVA and/or ex-service organisations, or other service providers*
 - b. Were your/their needs met? How?
 - c. What helped you/your family member find the services you used? *Prompt: Colleague, family, DVA, other organisation or support.*
 - d. What did the service do to ensure it met your/your family member's needs as a veteran from a migrant or multicultural background?
 - e. Was there anything about the service you or your family member were not satisfied with, or thought could be better?
4. If you or your family member have not accessed veteran support services, have you or your family member ever needed services?
 - a. If yes, what prevented you/your family member from accessing them? *Prompts: not knowing what services were available, not being able to access services at a time and place needed, not being able to access culturally appropriate services*
 - b. How do you think these barriers be resolved?
5. Do you have anything else to add about service needs for veterans from migrant or multicultural backgrounds and how they might best be met?

A.3 Interview guide – Stakeholder

Tell me about yourself

1. What organisation do you work for?
2. What is your role?
3. How long have you been in your organisation and the role?

Services for veterans from migrant or multicultural backgrounds

1. What services does your organisation offer veterans and families?
2. What proportion of your clients are veterans and or from CALD backgrounds
3. What do you think are the specific needs of veterans from migrant or multicultural backgrounds and families?
4. Do you think your organisation tailor's services to meet the needs of this group? If yes, how does this work in practice?
5. What do you think your organisation does to ensure services are culturally responsive? *Prompts: Governance, staffing, policies, supervision.*
6. Are there any barriers you see that your organisation faces to ensure that services are culturally responsive? *Prompts: Legal, resources, workforce*
7. How do you think services might better engage with this cohort in the future?
8. Do you have anything else to add?