

# Female Veterans & Veterans' Families

POLICY FORUM

14 – 15 AUGUST 2019



Australian Government  
Department of Veterans' Affairs

transforming  
**DVA**



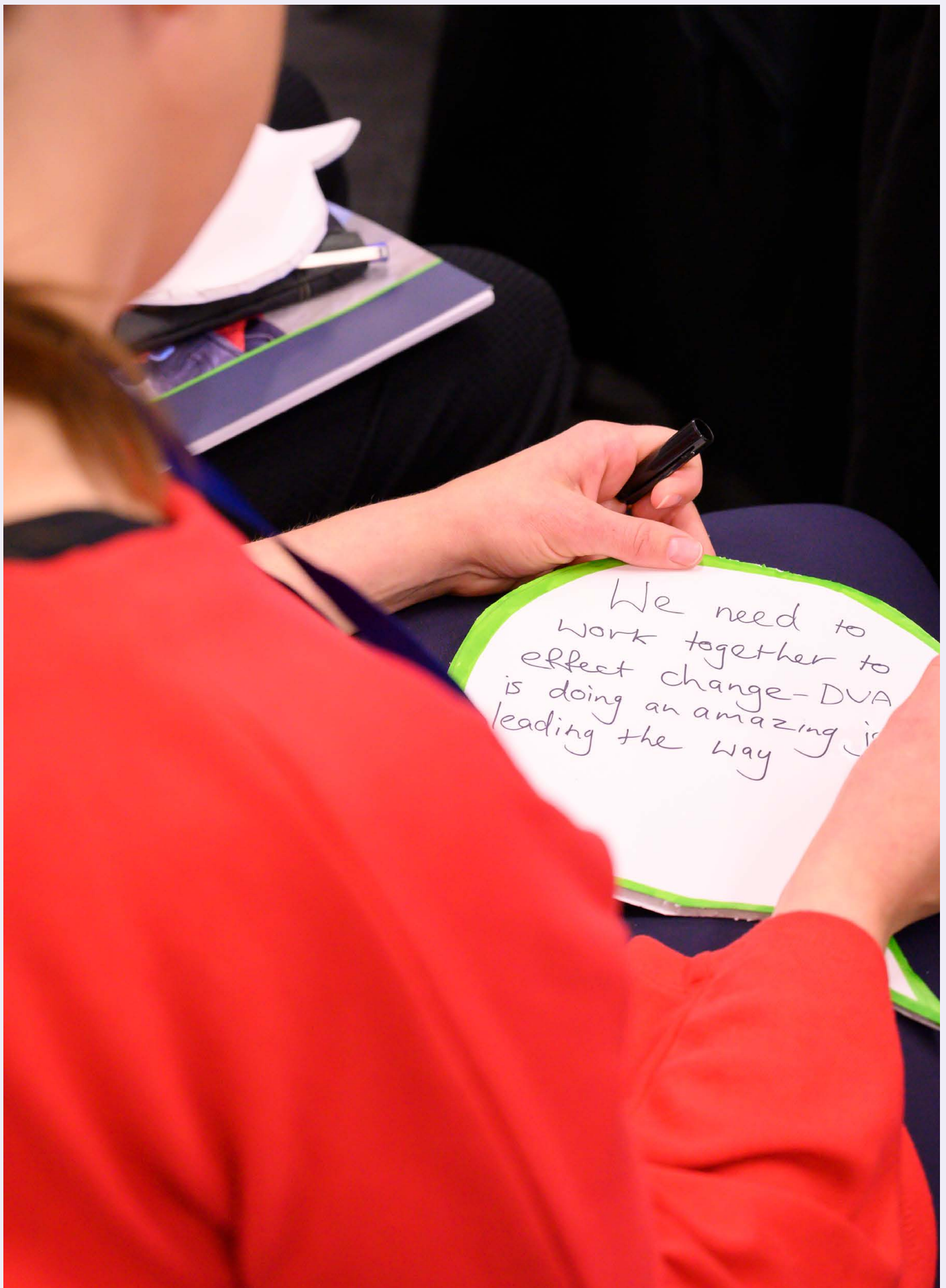
The Department of Veterans' Affairs would like to thank the participants of the 2019 Female Veterans and Veterans' Families Policy Forum for the perspectives, ideas and experiences they shared during the Forum, and their ongoing contribution to the veteran community.

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The fourth meeting of the Female Veterans and Veterans' Families Policy Forum (the Forum) was convened on 14–15 August 2019 in Canberra, with 83 female veterans and veterans' families participating in the event.

The Forum leverages the lived experiences of female veterans and veterans' families to inform future Department of Veterans' Affairs (DVA) policy and service delivery options.

*“It is fantastic to feel that the voices of [female veterans and veterans' families] are not only being heard, but are valued. It was an honour to be ... surrounded by so many wonderful women, all connected by defence service.”*

*“You can actually see the changes that are being made... Actually seeing that change has been quite rewarding.”*

Representatives from DVA business areas attended various sessions of the Forum in an observer capacity. The feedback and ideas generated are being used to inform DVA projects and ongoing work.

## OBJECTIVES

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The Forum objectives were to:

- Renew the group and build a network of engaged female veterans and veterans' families.
- Increase awareness and update knowledge of DVA Transformation.
- Leverage the groups' knowledge and lived experience to inform specific potential policy options.
- Explore how the Forum can best support other consultative fora.

## STRUCTURE

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The Forum was highly participative and solutions focused, with participants engaging in a range of activities and discussion topics. The Forum was comprised of the following sections:

- Minister's Address & Secretary's Address: DVA and Transformation
- Learning Circles
- Domains of Wellbeing
- Policy Challenges & Developing Solutions

## THIS REPORT

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This report provides a high level summary of the feedback and ideas raised at the Forum. Quotes included in the report have been de-identified and are verbatim.

Relevant DVA business areas have been provided with additional detail to inform current and proposed projects.

## MINISTER'S ADDRESS

Hon Darren Chester MP — Minister for Veterans and Defence Personnel

Minister Chester addressed the Forum. He:

- Recognised the unique nature of military service, saying *“We need to tell [veterans’] stories, and to appreciate their service by supporting them and their families.”*
- Emphasised the importance of co-designing policy and services with veterans and their families, saying *“You bring remarkable lived experience. Hearing these experiences at forums like this is how we fill the policy gaps.”*
- Stated the importance of supporting the mental health and wellbeing of veterans and their families, highlighting work currently occurring in this space.
- Thanked the participants for their feedback and ideas. *“We need positive, practical and determined people. We’ll do it better when we’re together, rather than divided.”*

Minister Chester also addressed questions from participants regarding the Council for Women and Families United by Defence Service and the Prime Minister's Veterans' Employment Awards.





## SECRETARY'S ADDRESS: DVA & TRANSFORMATION

Ms Liz Cosson AM CSC — DVA Secretary

Ms Cosson opened the Forum with an Acknowledgment to Country spoken in Ngunnawal language. She provided participants with an overview of the department and the work underway as part of the transformation, she:

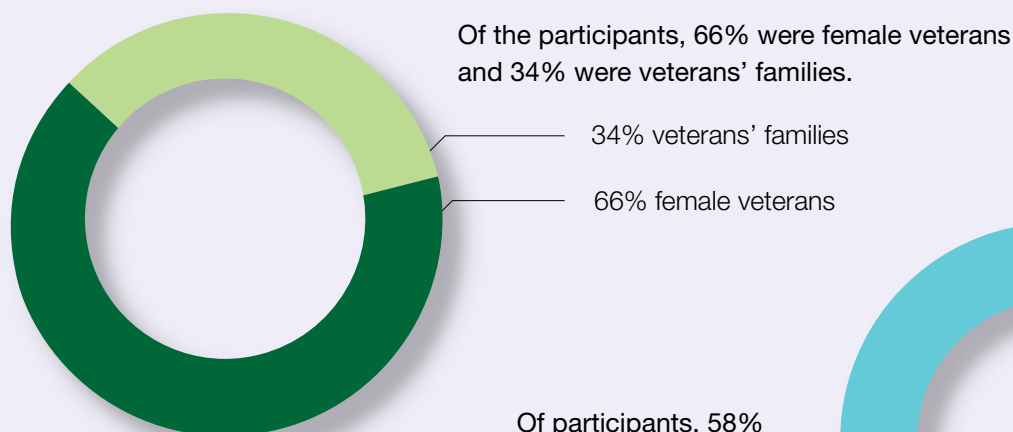
- Thanked participants for their contributions at the Forum, saying *“I’m very passionate about this Forum. You will give us ideas on what we need to take on board, and you’ll have the ear of the people of this department.”*
- Highlighted the importance of proactively engaging with veterans and their families. *“We [DVA] now know and connect with veterans as they leave the ADF [Australian Defence Force]. We’ve been doing a lot to engage with them earlier – but we know we need to do more.”*
- Emphasised the importance of supporting the wellbeing of veterans and their families, saying *“I believe that the focus should be on ‘serving well, living well, and ageing well.’”*
- Provided detail about reviews and reports regarding the welfare of veterans. *“We want to make a difference for veterans and veterans’ families. We can never lose sight of these reviews and reports, we need to shape and influence the outcomes together.”*



## ABOUT THE PARTICIPANTS

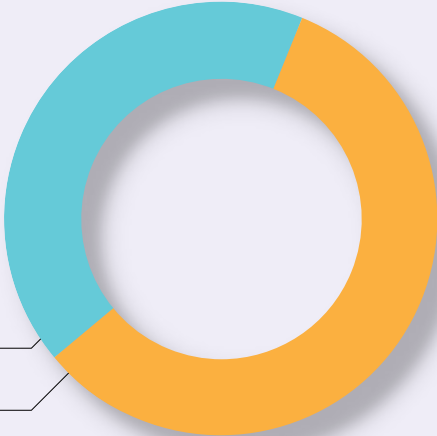
Eighty-three female veterans and veterans' families attended the 2019 Forum, almost double the size of previous Forums. These women had a diverse range of lived experiences, with one thing in common: an understanding of the impact of military service on veterans and their families.

To ensure 'grass roots' representation, the Forum was advertised through various mechanisms – including DVA social media platforms, Veteran Organisations and attendees from previous DVA engagements.

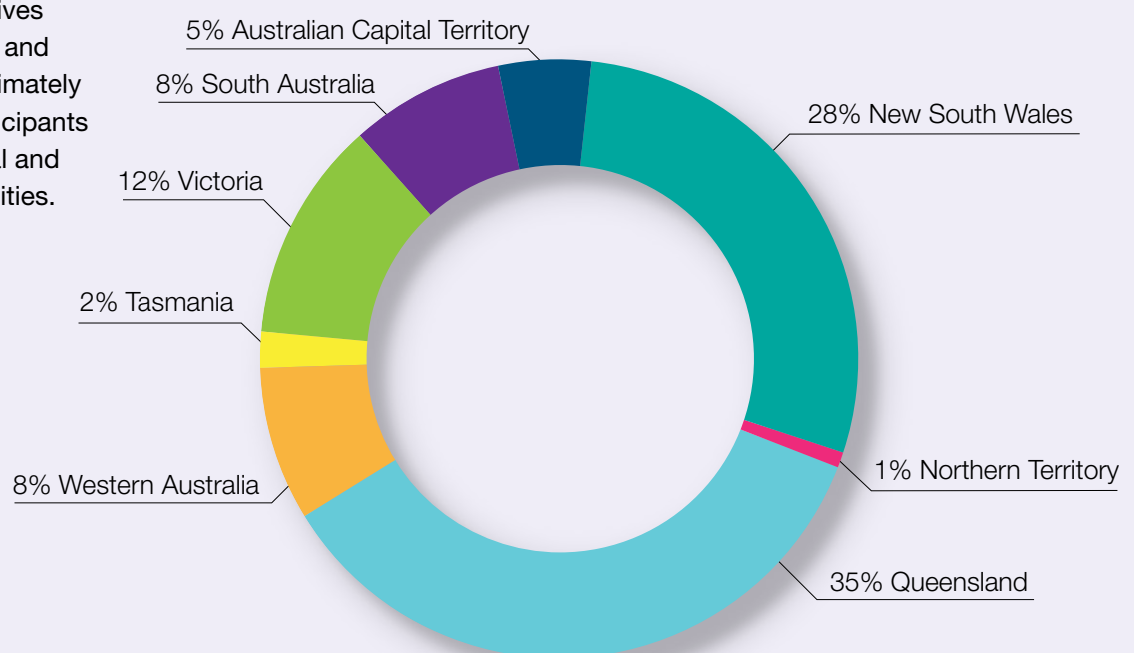


Of participants, 58% had not attended a previous Forum.

42% returning attendees  
58% new attendees

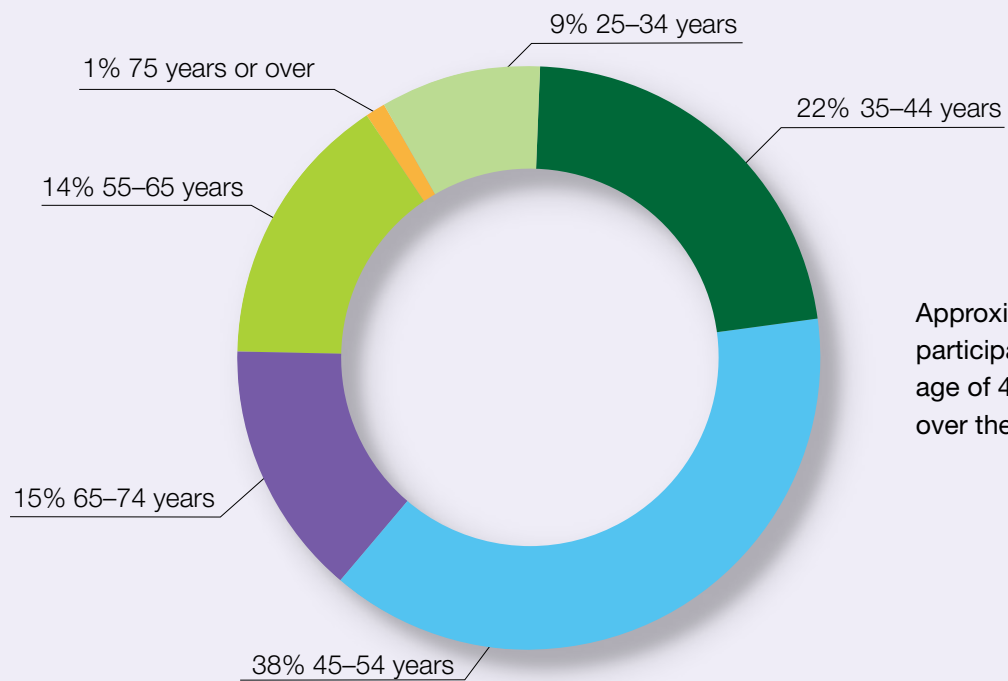


Participants were drawn from around Australia, with representatives from every state and territory. Approximately one third of participants represented rural and remote communities.



\* Percentages shown in graphs are rounded.\*





Approximately one third of participants were under the age of 45, and one third were over the age of 54.





Prior to the Forum, participants provided a short one-line description of themselves, along with a recent photo. The above image depicts the 'Wall of Wonderful Women'—a visual representation of these profiles.







# FOREMOST THOUGHTS

At the beginning of the Forum participants had the opportunity to write down the thought or issue that was foremost on their minds. These are summarised below.

A  
VOICE FOR  
FEMALE  
VETERANS!

OVERCOMING  
MENTAL HEALTH  
STIGMA ??

Female Veterans  
Still requiring to justify  
their service  
(Despite previous  
campaigns).

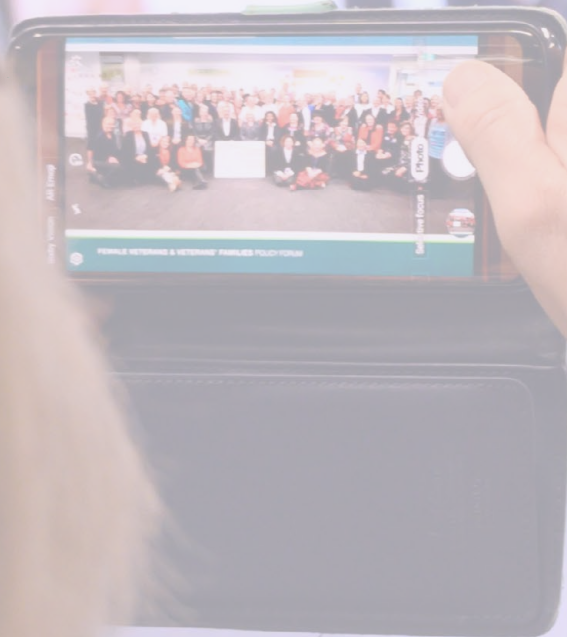
What is DVA  
doing/changing to  
better support veterans  
and their families?  
Including those in  
rural areas.

POSITIVE  
IMPROVEMENT  
TO MOVE  
FORWARD & FURTHER  
ASSIST  
VETERANS

How can we stop  
Veterans and their  
families getting to  
breaking point?  
Easily accessible  
support.

DVA-  
Processing Too  
Long!!!  
Causing, increasing,  
Mental Health  
Difficulties  
ACCESS

women veterans'  
health and wellbeing  
are we moving  
forward with this?





VOICE OF  
FAMILIES OF  
LIVING  
VETERANS

MEANINGFUL  
EMPLOYMENT  
FOR OUR VETERANS AS  
IT STARTS AT TRANSITION  
AND HOW CAN WE HELP

How best can I help  
other veterans - with mental  
health and transition to  
civilian life? How do we  
become part of our community  
and retain our identity?

Great opportunity to move  
forward.

DVA processes +  
interconnectivity of  
services for Veterans  
especially during transition.

EFFICIENT  
MENTAL HEALTH  
SUPPORT FOR INDIVIDUALS  
AND THEIR FAMILY

FEMALE VETERANS  
UNIQUE PERSPECTIVES

Female Advocates  
Do they need different  
tools?  
To better support females  
& families

holistic ways of  
improving wellness for  
veterans and their families  
inclusive of the make up  
of the family. ☺  
☺

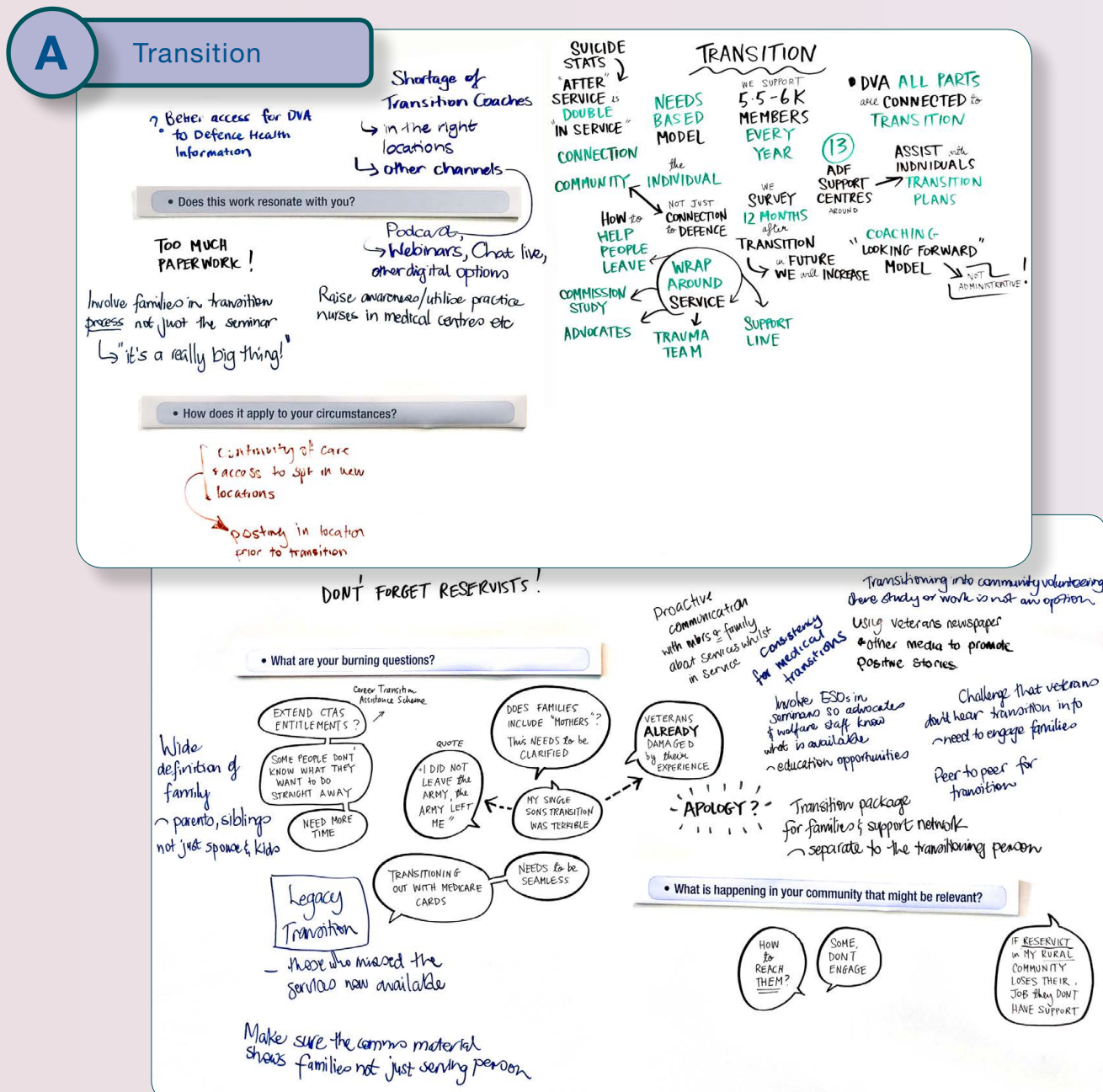
Building networks  
across generations to  
help inform DVA  
of our ongoing needs.

# LEARNING CIRCLES

During the Forum participants received information on work currently underway to improve the wellbeing of veterans and their families. To do this, participants broke into five Learning Circles on the following topics:

- Transition
- DVA Claims Processing
- Navigating the Veteran Ecosystem
- Incentivising Wellness
- Future of Advocacy

Participants first received information from senior DVA and Department of Defence (Defence) representatives before providing input into each topic. The following images summarise the outputs from each Learning Circle.





## B

## DVA Claims Processing

o Defence Recruiting  
on different messaging  
system - needs OBAS  
consideration.

OBAS → Community  
welfare

• What is happening in your community that might be relevant?

o NLHC - not communicated  
widely enough

↳ Vets Recognition Card summary to new vets  
↳ info also needed for current vets

- Communication!!  
↳ important that veterans are informed of  
delays, requirements, etc  
- Needs assessment needs to happen  
 ASAP after initial liability is accepted.

• How does it apply to your circumstances?

- Quality of the delegate  
- Every veteran believes their claim is a priority  
↳ we need to acknowledge this

A. YES! DOCTOR AWARENESS → LOGGING INJURY/ILLNESS  
AS SERVICE RELATED

Q. eg INJURIES DURING  
SERVICE can they be  
PUT INTO PROGRESS  
BEFORE DISCHARGE?

WHEN DOES  
the CLAIMS  
PROCESS  
START?

ARE THEY  
QUALIFIED?  
UNIT  
WELFARE  
OFFICER

• What are your burning questions?

CONCERN → CURRENT DELAYS → PLEASE COMMUNICATE  
EVERYONE CONSIDERS DELAYS!!  
their claim to be URGENT  
DELAY can cause STRESS  
LETTERS in PLAIN ENGLISH  
STILL NOT HAPPENING  
CAN ADVOCACY HELP to MANAGE EXPECTATIONS?

IDEA  
INFORMATIVE  
VIDEOS?  
INSTEAD OF  
LETTERS?

## C

## Navigating the Veteran Ecosystem

• How does it apply to your circumstances?

"This Booklet has  
actual new info  
not the same old  
stuff"

• What are your burning questions?

and VETERAN CENTRIC REFORM → WHY is this ONLY RECENT?  
WHAT'S to STOP IT GOING BACKWARDS?  
IDEAS for DISTRIBUTING BOOKLETS??  
FELT LIKE DVA DIDN'T WANT to HEAR  
SHARING of STORIES  
My SON HAD a BAD EXPERIENCE  
FELT VERY EXPOSED  
DO YOU ONLY WANT to HEAR the GOOD STORIES?

Booklets  
- Self care  
- Resource for teachers  
- Supporting kids in  
School

### NAVIGATING the VETERAN ECOSYSTEM

RAISING PROFILE of VETERANS in the COMMUNITY  
Getting info out to schools  
streamlining  
VETERAN CENTRIC  
Improve Automation  
Chatbot  
NOT asking the SAME QUESTIONS  
BETA (PRACTICE)  
Website up and RUNNING  
Service Details NOT JUST Health  
"Feminise" DVA Comm's  
WE WANT DVA  
OPEN CHANNELS of 2 WAY COMMUNICATION  
CLIENTS



# D

## Incentivising Wellness

### • Does this work resonate with you?

- YES!**
- Consider expanding White Card services to include wellness/wellbeing activities  $\Rightarrow$  considered "entitlement"
  - Intervention should be individually tailored  $\Rightarrow$  choice
  - DVA needs to look at alternative arrangements to promote wellness outside the medical setting  $\Rightarrow$  funding flexibility required
  - Wellness includes much more than diet + exercise
  - Veteran + family aware services would provide reassurance
  - Provide financial incentive - \$ is powerful incentive
  - DVA wellness stand at transition seminars would be useful
  - Female health publication is required (or gender-neutral)
  - Dedicated information resources required
    - Tax-deductible wellness activities
    - Reward program
    - Wellness subsidy per year for DVA client

### • What are your burning questions?

- Are we talking about females only? There will be gender-specific barriers e.g. work/life balance, caring responsibilities for women.
- Is there future consideration for alternatives to allied health providers such as EPs + dietitians?
- How can we promote whole-of-life approach from Defence  $\Rightarrow$  Transition  $\Rightarrow$  DVA for wellness
- Can eligibility for the Heart Health Program be expanded?
- How do we engage the younger veterans?
- How can we use research/evidence base better?
- Can we establish more effective quality assurance for current programs?

APPS for PEOPLE to ACCESS COMMUNITY?

### • How does it apply to your circumstances?

- Hard to convince partner to change habits.
- Mental illness  $\Rightarrow$  mood drops, unhealthy behaviours kick in  $\rightarrow$  consider online platforms/telehealth
- Issue with access to services in regional areas  $\rightarrow$  education is as important as incentivising
- People don't fully understand the impacts of good or poor choices
- Questions from home assistance programs are useful
- Clients need to be proactive in knowing what's available
- Other supports vary by location + time restrictions
- Mindset. Potential drag down effect of negative media rhetoric about the Veteran community
- Heart health camaraderie continued after the 12 months ended

### • What is happening in your community that might be relevant?

- Group classes are beneficial + cost effective
- Lack of awareness of DVA entitlements by medical practitioners
- Sick people being around sick people
- Economic background + can be hard to know how to eat healthily on a low budget.
- Less incentive to cook healthy meals when living alone
- Certainty assurance of service provision
- Mobile van model
- Isolation
- Transition is risk factor  $\Rightarrow$  education is key
- Self-perception of wellness not always accurate
- Group/peer support is powerful incentive

## INCENTIVISING WELLNESS



# E

## Future of Advocacy

- \* Trust + accept own applications.
- \* Improve process (simplify + fix root cause) (acts)
- \* Independent professional advocacy agency
  - proper trq
- \* More mobile + better technology to work from anywhere.

\* No advocacy needed!

- \* Not just volunteers / MORE PAID ADVOCATES
- \* FURTHER TRAINING / MANDATORY BASIC Training - education of mbs/claimants
- \* Professional body (for advocates)
  - paid
  - unpaid
- \* Small body to deal with appeals
- \* Better PR for DVA system
- \* Better education on what DVA do!
- \* Hearts & mind campaign.
- \* ATPD
- \* Consideration for level 4 advocates

Can we encourage the <sup>families</sup> spouses of veterans be trained to be advocates  
 "employed and able" "we already do this!!"

Make it easier to engage with DVA

- ADTP - Employed advocates  
 You don't need to be a Veteran to be an advocate.
- Advocates sometimes have their own issues and may need more support.

- 70% Mentee/Mentor.

Advocates need Mental Health/Suicide training  
 and DVA needs to make sure this is standardised.

Q-learning! He training

- \* EASIER TO BECOME AN ADV. ↑
- \* DEFENCE SYSTEM - ADP MEMBERS OBAS →
- \* ROLL OUT MORE BROADLY
- \* ADVOCATES & DELEGATES TO WORK/TEAM TOGETHER
- \* ENSURE RIGHT PEOPLE ARE RECRUITED.

• Does this work resonate with you?

• What are your burning questions?

• How does it apply to your circumstances?

• What is happening in your community that might be relevant?

• What do you think the future of advocacy looks like?

### YOUR RECOMMENDATIONS

- DR. PENSION & WELFARE ADVOCACY 30 YRS PLUS → MORE IMPORTANT THAN FILLING OUT FORMS
- NOT JUST COMPENSATION! → WELLNESS UNDERPINNING ALL
- ADVOCATE TRAINING → INSURANCE AVAILABILITY
- ESO <sup>understanding</sup> ACROSS ALL SUPPORT AGENCIES <sup>ESO affiliation or not</sup>
- MORE WELLNESS SUPPORT
- MORE ACCESS to ADVOCATES ACROSS COUNTRY  
 ↳ GOOD ONES!
- ENGAGE NON-SERVICE MEMBERS (OBAS)
- LOOK at CAREER PATHS POST SERVICE  
 ↳ Advocacy?
- ENGAGE YOUNGER ADVOCATES → MORE CONTEMPORARY SERVICE EXPERIENCE
- REINFORCE VETERAN HUBS to HELP YOUNGER VETS  
 ↳ Very SUPPORTIVE

# DOMAINS OF WELLBEING

DVA has developed a wellbeing model (or wheel) which is based on the Australian Institute of Health and Welfare's (AIHW) person-centred wellbeing model, relevant to all Australian citizens.

This model has seven domains of wellbeing, including recognition and respect—a domain added to the AIHW model to more closely align to veterans' and their families unique military circumstances and wellbeing needs.



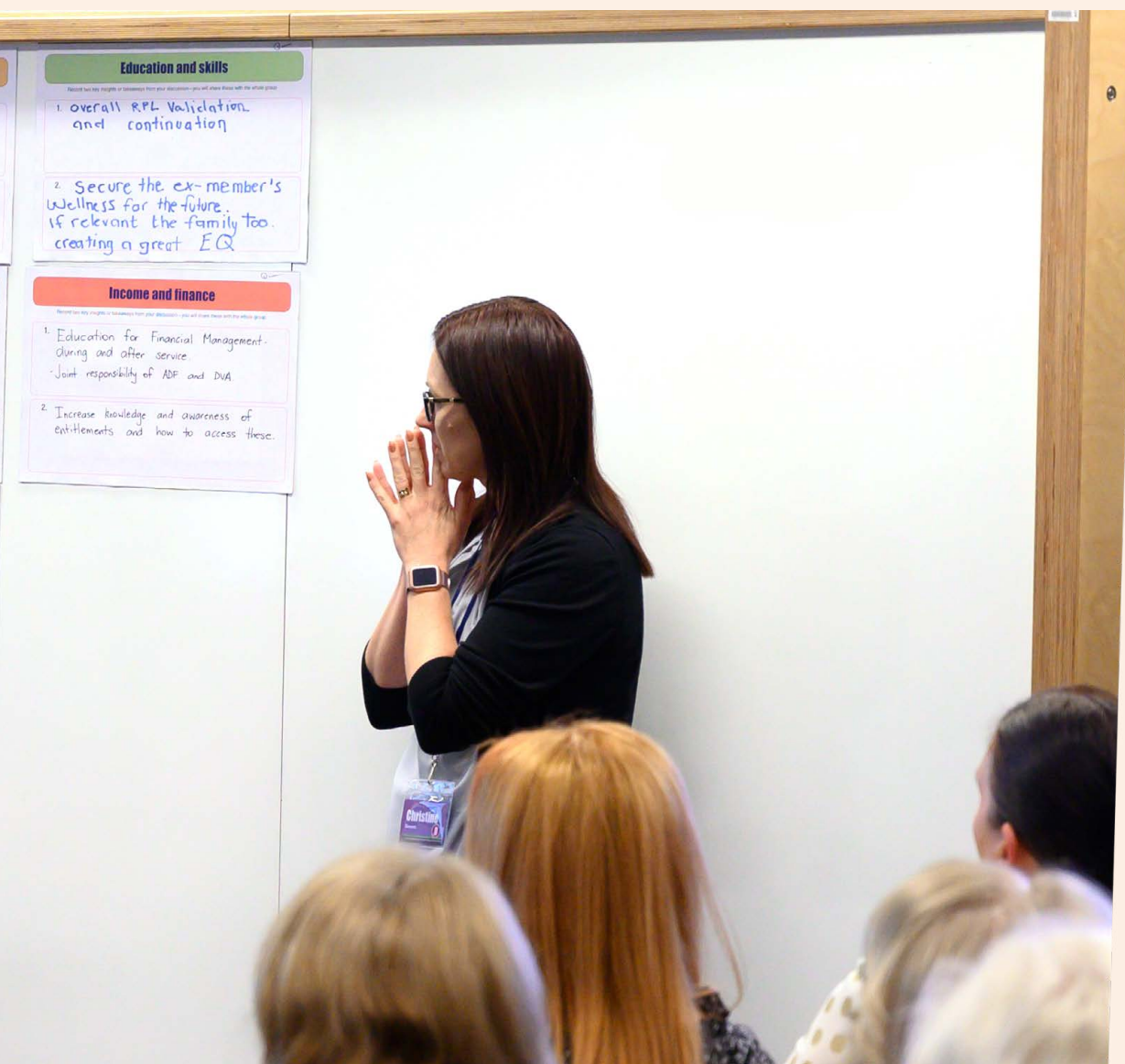


DVA has the ability to influence wellbeing in some areas (e.g. income & finance, health) and has a duty to connect clients to service providers, including other government services and ex-service organisations (ESOs), that are able to assist in domains of wellbeing.

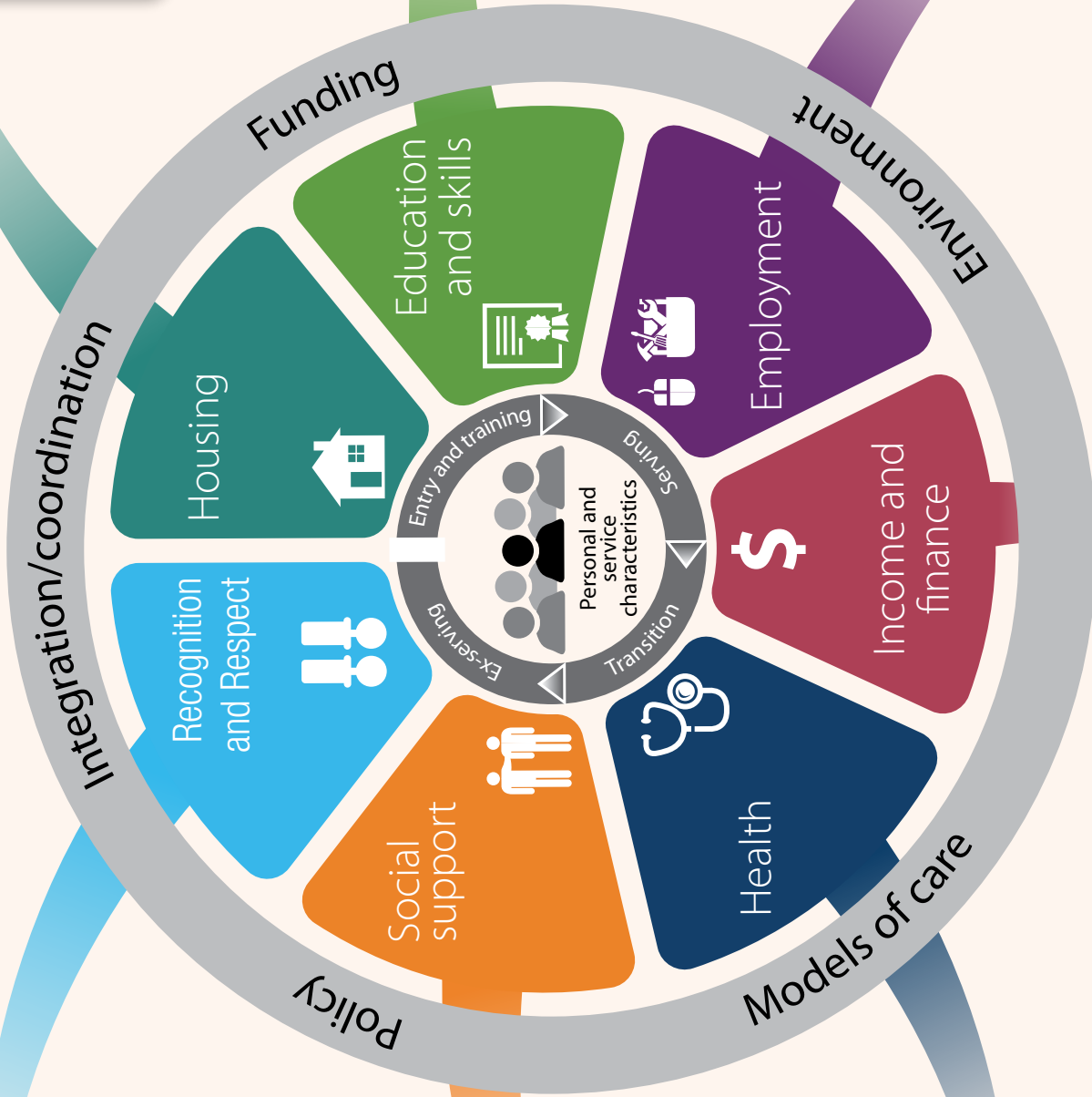
It is important to consider all aspects of wellbeing when thinking about how we influence wellbeing outcomes for veterans and their families.

Participants provided feedback and suggestions for each of the seven domains and reported key points back to the group.

The outputs from the group work are summarised on the following page.



DOMAINS OF WELLBEING  
KEY TAKEAWAYS



**Housing**

Record two key insights or takeaways from your discussion—you will share these with the whole group

1. Better access to information re existing services with State wide relevance.
2. FIT FOR PURPOSE (DVA Disability Service Annoucs)

3. Accessibility + Affordability (eligibility)

**Education and skills**

Record two key insights or takeaways from your discussion—you will share these with the whole group

1. overall RPL Validation and continuation
2. Secure the ex-member's wellness for the future. If relevant the family too. creating a great EQ

**Employment**

Record two key insights or takeaways from your discussion—you will share these with the whole group

1. Communication Plan
2. Needs Based Systems Model

**Income and finance**

Record two key insights or takeaways from your discussion—you will share these with the whole group

1. Education for Financial Management. During and after service.  
- Joint responsibility of ADF and DVA.
2. Increase knowledge and awareness of entitlements and how to access these.

**Recognition and Respect**

Record two key insights or takeaways from your discussion—you will share these with the whole group

1. Recognition by ALL of Value of Service and How that relates to Self Esteem and Purpose
2. Promotion of Wellness vs Sickness

**Social support**

Record two key insights or takeaways from your discussion—you will share these with the whole group

1. NEEDS ARE DIVERSE & INDIVIDUAL  
SUPPORT SHOULD BE AS ABOVE
2. EDUCATION, TRAINING + AWARENESS

Pauline + Lyndy

**Health**

Record two key insights or takeaways from your discussion—you will share these with the whole group

1. Tailored Family Support Funding model  
to be specific for your family  
(Expand Family Support package)
2. Identifying suitable health services & encourage vets to actively seek assistance  
(heart foundation tick)







## POLICY CHALLENGES & DEVELOPING SOLUTIONS

The Forum provided an opportunity for participants to develop potential solutions to significant challenges impacting their community. The challenges included:

1. How could we maximise the effectiveness of the Veteran (and families) Mental Health and Wellbeing Strategy?
2. How could we leverage available options (including alternative therapies) to maximise wellbeing?
3. How could we maximise the effectiveness of the Veterans' Wellbeing Centres (including the role of the Community Peer Advisor, addressing homelessness and domestic violence)?
4. How could we maximise the effectiveness of the Family Support Package?

Prior to the Forum, participants self-selected the Challenge they wanted to work on. Each syndicate group was asked to: design a policy, service, product, payment or information campaign to address their challenge. They were invited to also consider whether there were existing opportunities for DVA to work in partnership with existing community services or organisations.

Syndicate groups created a 'billboard' to document the key components of their ideas, which they presented to a panel of senior DVA, Defence and external representatives. The executive representatives included:

Name	Organisation	Position
Ms Liz Cosson AM CSC	Department of Veterans' Affairs	Secretary
Ms Kate Pope PSM	Department of Veterans' Affairs	First Assistant Secretary Veterans' Services Design
Commodore Michelle Miller AM	Department of Defence	Chief of Staff of the Australian Defence Force
Ms Gabby Costigan MBE	Council for Women and Families United by Defence Service	Chair

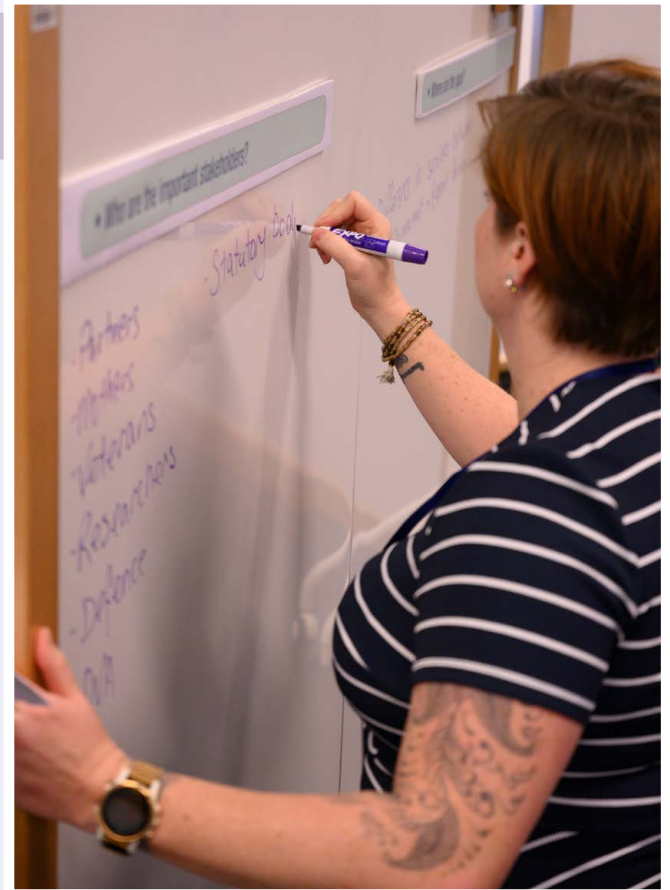
Topic overviews, key takeaways from each group's panel presentation, and a photo of their billboard are included in the following pages.

# CHALLENGE 1

## MENTAL HEALTH AND WELLBEING

### Background

- At the Veteran Mental Health and Wellbeing Summit (the Summit) on 26 June 2019, the Minister for Veterans and Defence Personnel committed to reshaping the 10-year Veteran Mental Health and Wellbeing Strategy (the Strategy); and to developing a National Action Plan (the Plan) to improve the mental health and wellbeing of veterans and their families, and to significantly reduce suicide.
- During the Summit, it was acknowledged that there is good work being done to support the mental health and wellbeing of veterans and their families. However, a more collaborative approach is needed to move from an illness model to a model that promotes and supports wellness.
- The Summit identified four critical priority areas:
  - Top quality, evidence-based, accessible and tailored health care.
  - Supporting veteran and their families during transition.
  - Partnerships across government, business, service providers, communities, researchers and ESOs.
  - Engagement, communication and education.
- Work has started to redesign the Strategy and Plan with a key focus on local engagement with veterans and families. Feedback and insights from veterans and their families is invaluable to shape the future of these initiatives.



### Key Takeaways

- The importance of effective crisis support for veterans and their families.
- The importance of relationships in maintaining mental health, and supporting families to support veterans.
- Descriptive data that accurately portrays the veteran community will allow targeted services and support systems.
- The importance of early intervention and treatment for mental health conditions.
- A flexible delivery approach that accommodates individuals' unique needs and circumstances would be beneficial.
- The importance of effective communication across government to support veterans and their families.
- Many veterans and their families have difficulty understanding what services and support they are entitled to receive. Communication that is clear, consistent, targeted and timely would be beneficial.





*“Being able to reach out to someone to get an intervention during a crisis situation is very important.”*

*“We need to start looking in the early intervention space and addressing some of those issues [trauma sustained in the ADF] quickly.”*

*“One of the key things is understanding our veteran population and sharing that data across systems and across government.”*

*“We need to make sure that the help matches the place the client is in at that time in their life.”*

## CHALLENGE 2

### MAXIMISING WELLBEING

#### Background

- In broad terms, wellbeing can be described as the quality of a person's life. The concept of wellbeing is not new, and there is much evidence to show how it links with a person's state of happiness and health.
- The National Health and Medical Research Council defines alternative therapies as an alternative to, and can be used instead of, conventional medicine and therapies. These therapies include, but are not limited to, yoga, equine therapy, acupuncture and art therapy.
- Some veterans find alternative therapies beneficial, especially when they feel uncomfortable with existing conventional treatments.
- DVA is currently investigating the option for DVA's grants programs to include the provision of alternative therapies for veterans with mental health conditions. Funding options will need to be considered.

*“We need to reframe [treatment] into maintaining health and wellness.”*

*“Empowerment through choice.”*

*“It’s important there is education on what services are available.”*

*“Being proactive is better than being reactive and dealing with injuries and illness.”*

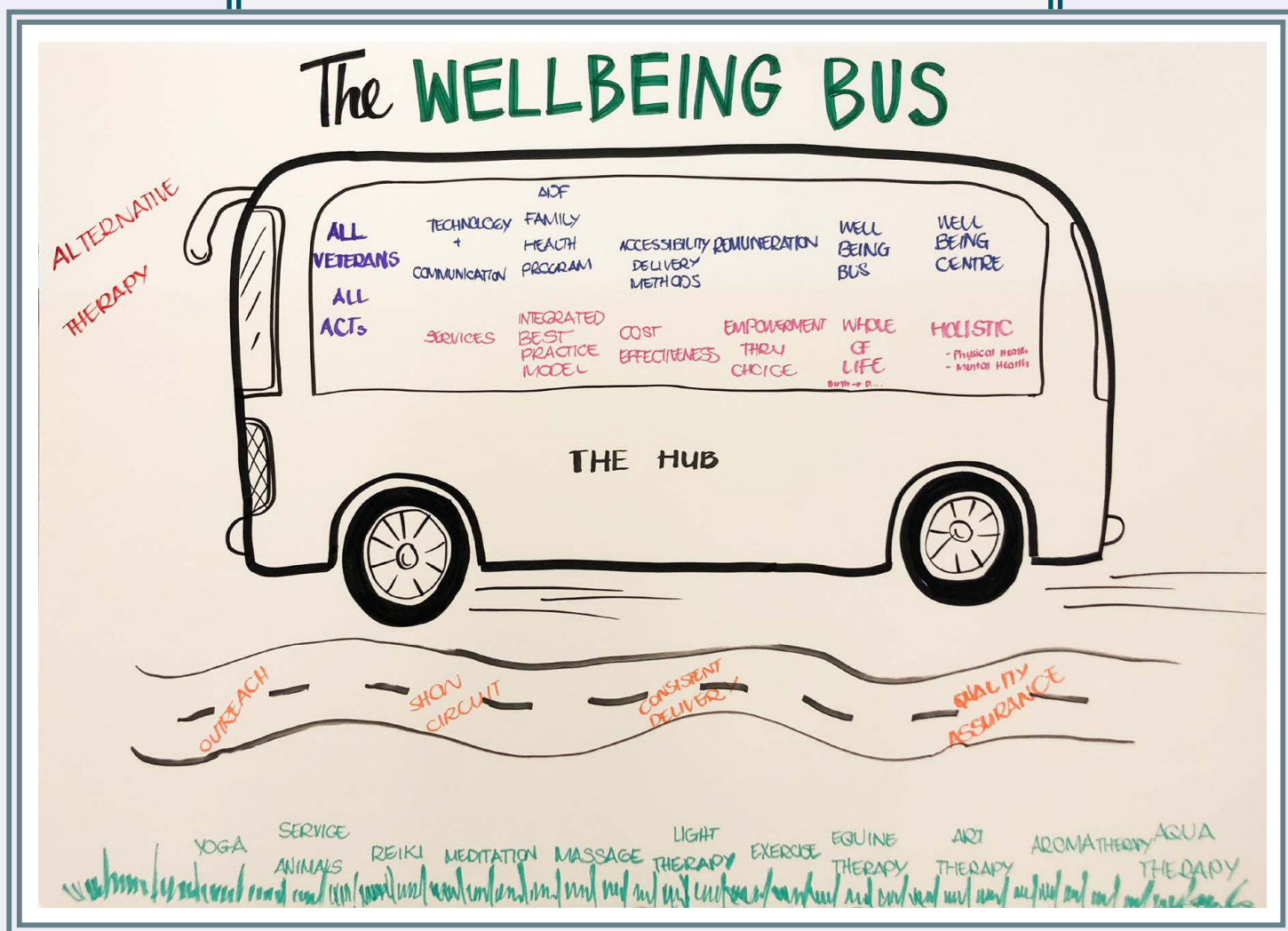
*“[The Wellbeing Bus] could provide the accessibility of delivering these [alternative] therapies out further.”*





### Key Takeaways

- Providing veterans with different treatment options can empower self-reliance.
- Clear and consistent policy regarding alternative and complementary therapies would standardise processes.
- Many veterans and their families have difficulty understanding their entitlements. Communication explaining entitlements, especially regarding alternative and complementary therapies, would be beneficial.
- The importance of proactively managing health and wellbeing and providing ongoing care.
- Service delivery options could include Veterans' Wellbeing Centres and a 'Wellbeing Bus' (depicted below).



## CHALLENGE 3

### VETERANS' WELLBEING CENTRES

#### Background

- In May 2019, the Government announced an investment of \$30 million (\$5 million each) in a network of six Veterans' Wellbeing Centres in locations including Townsville, Perth, Adelaide, Nowra, Darwin and Wodonga.
- Once established, these Veterans' Wellbeing Centres will serve to facilitate and enable integrated government and non-government support for veterans and their families; and provide simple and seamless access to services, and collaboration between veterans, the community and government services to meet local needs and opportunities.
- DVA is exploring options which would include a range of essential services (within the Veterans' Wellbeing Centres), desirable services (based on local need and opportunity) and connected services (facilitated through Veterans' Wellbeing Centres).

*“There should be a service map or directory where veterans and their families and go to find services in their area. It should explain to them ‘this is where you go, and this is how you can do that.’”*

*“We need to strike a balance between consistency and local needs for the people in the area [where the Veterans' Wellbeing Centre is located].”*

*“There should be a strategy for communication on how to use the services, with a contact in place at each location.”*

*“A starter pack, some guiding principles [for the Veterans' Wellbeing Centres] is needed. We need national consistency and to manage expectations of the veteran community.”*





### Key Takeaways

- There is a need to coordinate, integrate and promote available services as many veterans and their families are not aware they can access support.
- Effective services and supports already exist in different communities. The Veterans' Wellbeing Centres should link in with these existing services to not duplicate effort.
- Each community has unique needs. Understanding these communities will ensure that the services that are linked through the Veterans' Wellbeing Centres meet the communities' unique needs.
- The importance of ensuring national consistency as well as meeting the unique needs of different communities.
- There is interest in accessing further information about the Veterans' Wellbeing Centres. A national communication strategy that provides clear and consistent information would be beneficial in managing expectations.



## GUIDING PRINCIPLES

### STANDARDS

- ↳ state
- ↳ national
- ↳ professional - case management



### for the Wellbeing Centres

### SERVICE MAPPING

- ↳ consolidate efforts
- ↳ guidelines - 'how to'
- ↳ key/critical stakeholders
- ↳ avoid replication/streamline

### COMMUNICATION GUIDELINES

- ↳ considerations
  - demographics
  - needs
  - localisation
- ↳ strategies - incl. digital
- ↳ template suggestions
  - records
  - personal map

### BRAND

- ↳ key rhetoric + messages
- ↳ positive/fun name

### SCOPE

- ↳ target markets
  - mobility
  - technology
- ↳ rural coverage
- ↳ streamlined referral process
  - families
  - veterans
- ↳ clearly defined scope of services
- ↳ social/capability-centric

## CHALLENGE 4

### FAMILY SUPPORT PACKAGE

#### Background

- The Family Support Package (the Package) provides support to Military Rehabilitation and Compensation Act (MRCA) veterans participating in a rehabilitation program, and their families, and their widowed partners.
- It provides targeted support that responds to recommendation 19 of the Senate Foreign Affairs, Defence and Trade References Committee report *The Constant Battle: Suicide by Veterans*.
- The services available under the Package aim to reduce barriers to a veteran achieving their rehabilitation goals, and to support their family in managing their life circumstances following the veteran's ADF service. It recognises the key role families have in recovery.
- The Package also aims to provide practical support to widowed partners at a time when individuals are managing grief and loss, as well as maintaining their family priorities and responsibilities.
- Implemented 1 May 2018, it is time to consider how we can maximise the effectiveness of the Package.

*“I don’t know of an issue that you can have fixed in four counselling sessions. It would be fantastic to get another four counselling sessions included.”*

*“I don’t need childcare, I need tutoring – I have a 12 and a 14 year old. The last three years [my child has] spent looking after his Dad and now he is failing classes.”*

*“Expanding [the Package] from rehabilitation to crisis support would be helpful. We might need food, we might need transport. We need to know help is there.”*

*“We [my family] don’t fit into the guidelines of the Package – the definition needs to be widened and restrictions removed.”*





## Key Takeaways

- Every family is unique, and therefore it is difficult to define 'family'. Expanding the definition of 'family' to include partners, widows, mothers, children, sisters and 'non-traditional' family arrangements would be beneficial.
- The current eligibility criteria means that some families may 'fall between the cracks'. Expanding eligibility could allow more families to receive the support they need.
- A needs-based model would ensure that the individual needs of each eligible family member is catered for.
- A 'crisis' can be the point of change for a family – crisis focussed support is of high priority.
- Many veterans' families are unaware that they are able to get support through the Package. Effective targeted communication about entitlements and the support available through the Package would maximise uptake.



**4 Family Support Package**  
CLIENT CONTEXT TO DRIVE SERVICE

**Why?**  
**TOO RESTRICTIVE**

- ♥ - widen definitions - family ★
- ★ - remove restrictions - all service included ★
- age dependents ♥
- rehab only ★
- time frames ★
- number of ... ▲

**What?**

- ★ Access to other therapies
- ★ Crisis counselling and practical solutions
- ◆ Other services but not limited to:
  - ★ transport
  - ★ household duties
  - ★ respite
  - ★ support persons
  - ★ in home care
  - ★ meals
  - ★ delivery, shopping, prep
- Supplementary education (1°, 2° & 3°)
  - ★ incl - HECS debt, tutoring

**How?**

1. Fix Policy (investigated, food, accom, transport)
2. Communicate
3. Tech Solution - Omni channel flexible, individual PRACTICAL SOLUTIONS
4. Feedback to DVA on outcome
5. Open arms across all reaches
  - ★ DVA → family → DEFENCE ★

Checklist:

- ☒ mmm
- ☒ mmm
- ☒ mmm
- ☒ mmm
- ☒ mmm
- ☒ mmm

## CLOSE

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After the panel, Ms Liz Cosson closed the 2019 Forum. She congratulated the participants on their presentations, highlighting that they included relevant and practical ideas and recommendations.

She thanked participants for their commitment to the veteran community, for their hard work and their contributions throughout the Forum.

*“Thank you for your frank and fearless advice - we take it to heart. Together we can make a difference.”*

*“I am committed to driving the change with my leadership team. We will take away your ideas and feedback and use it to design policies and strategies for the future.”*

*“We need to work together to make a difference for our veterans and our families – for today and the future.”*

## FORUM EVALUATION

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Participants had an opportunity to provide feedback on their Forum experience. Of the respondents:

- 89% indicated that the Forum was a worthwhile use of their time.
- 57% rated their overall Forum experience as ‘excellent’, with a further 32% rating this as four on a five point scale.
- 33% rated the Forum’s pace as ‘just right’, with 23% rating this as ‘too fast’. A further 42% rated the pace between ‘just right’ and ‘too fast’.
- 70% responded with four or above on the five point scale when asked ‘to what extent did you have the opportunity to participate and contribute’.
- 95% rated the DVA delivery team as ‘excellent’.

*“It is really encouraging to be aware of, and part of, such committed individuals who genuinely want to make a difference for all.”*

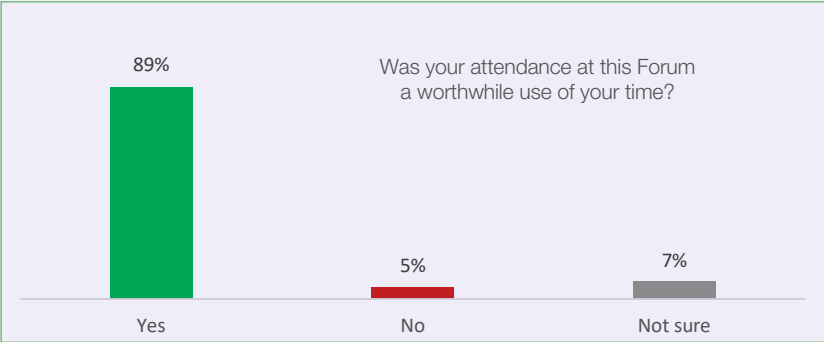
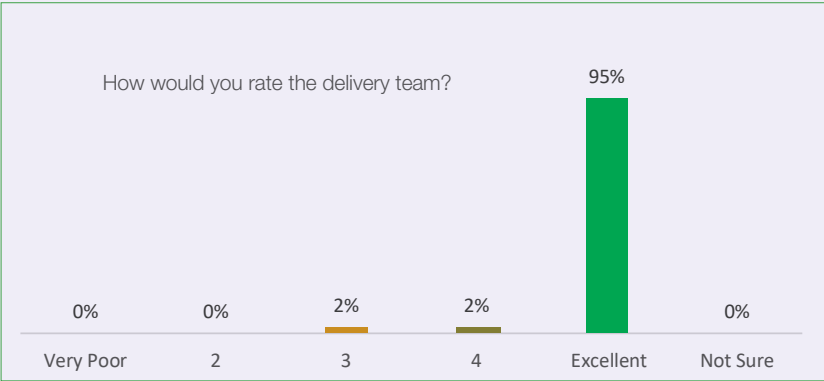
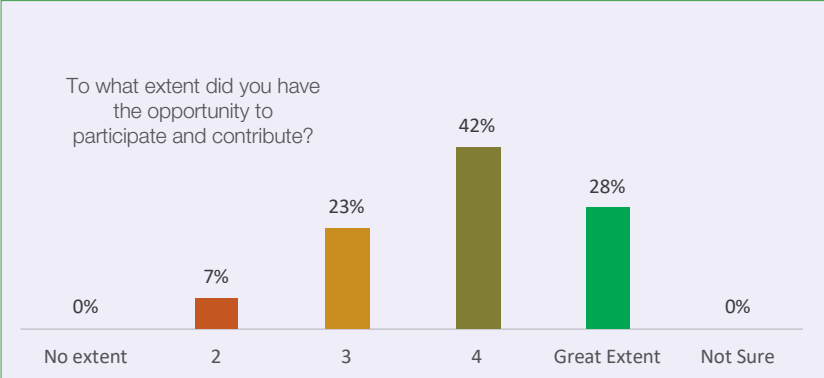
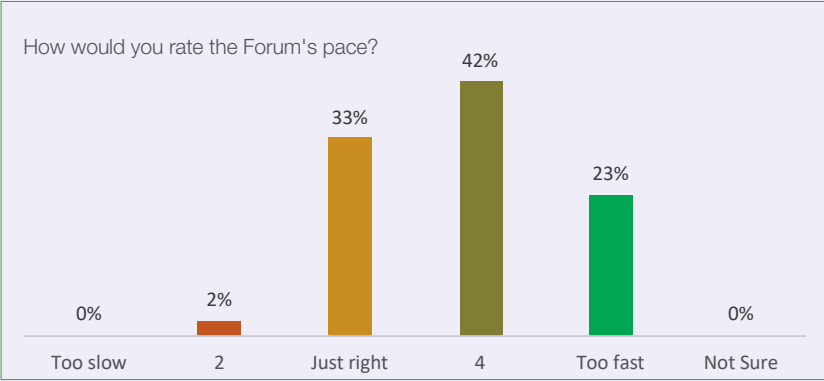
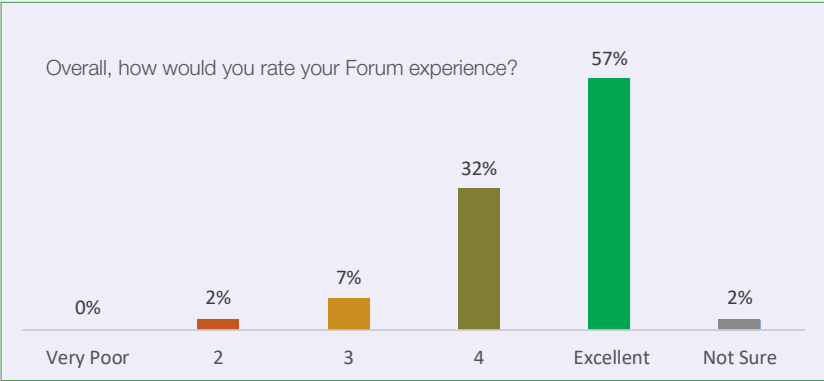
*“I rated this so highly, I came back to work feeling like I have achieved future policy changes... so thankful for the experience!”*

*“Great mix of women and well worth the time spent in Canberra. Thank you all.”*

*“It was fantastic to be able to speak to the executive team and share ideas and experiences.”*









# FEMALE VETERANS and VETERANS' FAMILIES

## POLICY FORUM

### Final Comments



At the conclusion of the Forum participant had the opportunity to make a final comment. These are summarised above.



