

Veterans' Families

POLICY FORUM

11 OCTOBER 2017



Australian Government
Department of Veterans' Affairs

transforming
DVA



Thank You

The Department of Veterans' Affairs would like to thank the participants of the 2017 Veterans' Families Policy Forum for the perspectives, ideas and experiences they shared during the Forum, and their ongoing contribution to the ex-service community.

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The second meeting of the Veterans' Families Policy Forum (the Forum) was convened on 11 October 2017 in Canberra, with twenty-two veteran family members participating. Some of the veterans' family members had also served, or were currently serving in the Australian Defence Force (ADF).

The Forum was established to provide an opportunity for veterans' families to engage with Government and the Department of Veterans' Affairs (DVA) about their needs and experiences. This is in recognition of the significant impact that military service can have on the family unit, as well as the important role that veterans' families play in supporting veterans.

OBJECTIVES

The Forum objectives were to:

- Build a strong network across representatives from veterans' families.
- Develop ideas and potential solutions to complex challenges facing veterans' families.
- Connect participants to DVA's Veteran Centric Reform and the progress made since the inaugural Forum.
- Connect senior DVA and Government representatives to the experiences of veterans' families and their suggested solutions to the complex challenges.

STRUCTURE

The Forum was highly participative and solutions focussed, with participants engaging in a range of activities and discussion topics. The Forum comprised of five sessions:

Session 1: Introductions and networking

Session 2: Veteran Centric Reform and MyService

Session 3: Policy Challenges and Developing Solutions

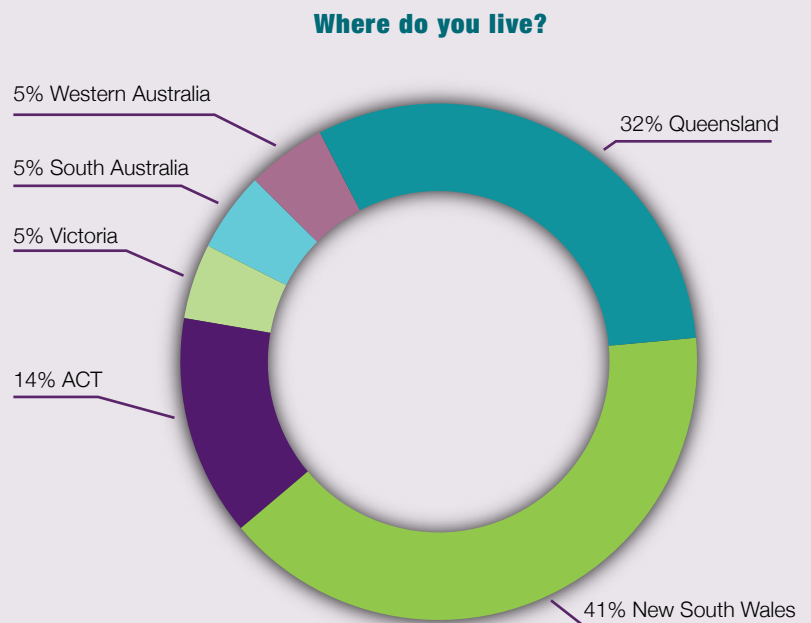
Session 4: Presenting suggested solutions to a panel of senior DVA and Department of Defence (Defence) representatives

Session 5: Future of the Forum and final comments

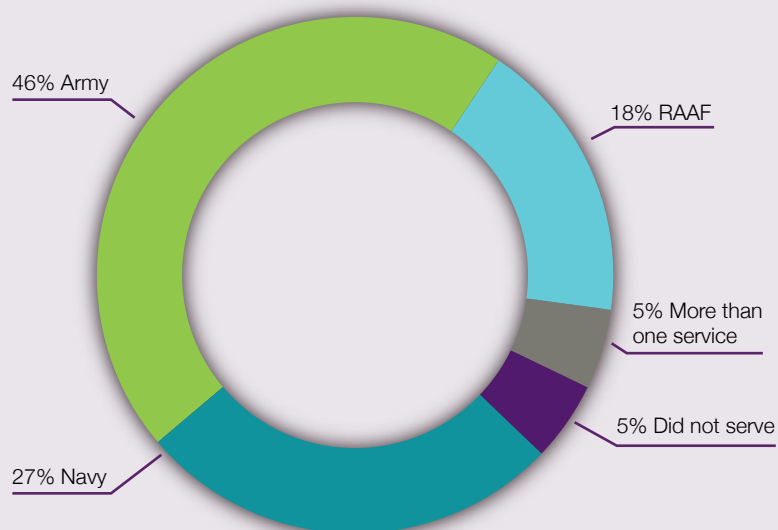
Most time was allocated to Session three.

ABOUT THE PARTICIPANTS

Participants were drawn from around Australia with the majority of participants coming from New South Wales.



Which ADF service did your family member serve in?



Family members of veterans from all three services attended the Forum. The majority had family members who had served in the Australian Army (Army).

Around three-quarters of the participants also attended the 2016 Forum.

WHAT HAS CHANGED?



As part of the introductions, participants reflected on the changes and achievements they had experienced in their personal, professional or volunteering roles over the previous twelve months.

VETERAN CENTRIC REFORM

Ms Liz Cosson, DVA Chief Operating Officer, addressed the group and provided an overview of the work underway as part of DVA's Veteran Centric Reform (VCR). Ms Cosson noted that DVA was provided with \$166 million in the 2017–18 Budget to improve the DVA client service delivery experience by investing in a transformation of DVA's ICT, processes and culture.

Ms Cosson provided detail of the work underway, including:

- Improving the connections between DVA and Defence, specifically determining what information needs to be shared between both agencies in order to improve outcomes for veterans and their families.
- Making the support available across Defence, DVA and Ex-Service Organisations (ESOs) services clearer to current and former serving ADF members.
- The establishment of a Transition Taskforce to identify the barriers to effective transition and recommend actions to improve the transition experience for ADF members and their families.
- Supporting the role of the family in supporting currently serving/transitioned ADF members and veterans.
- Simplifying DVA's complex claims process.
- Recognising the unique needs of veterans and veterans' families.

Ms Cosson also noted that DVA is focused on better understanding the voice of the 'client' through a range of forums and workshops, and using the insights from these events to connect staff with the client experience.

Ms Cosson highlighted that feedback from the first Forum has directly influenced the focus of the VCR program.

'Veterans' families are an extension of the veteran and you experience what the veteran experiences.'

'We're reaching out to the States and Territories—Minister Tehan met with his colleagues and Simon [Lewis] (DVA Secretary) chaired a State and Territories meeting to talk about how we communicate and share information with families so that you know how to connect to services across the country.'

'Minister Tehan launched the book "Do You Still Love Me? Because I Really Love You", which is a great book for kids. I know that there are challenges when you're growing up in a service family, and we're looking at ideas to promote awareness and education for those intergenerational issues.'

MYSERVICE

DVA representatives Mr Mark Travers and Mr Josh Spencer provided an overview of the development of MyService. MyService is a simple, digital solution that redesigns the initial liability process so that clients can obtain the assistance they require more quickly and easily. Mr Travers and Mr Spencer highlighted that:

- MyService was designed in collaboration with current and potential DVA clients. It was released to a small group in October 2016 for further testing and refinement. In April 2017 the public version was released.
- MyService has reduced claim questions from 36 in the paper process to between three and seven intuitive questions in the on-line MyService. The questions were co-designed with clients to optimise information collection upfront.
- As at 10 October 2017, there had been 436 registrations and 352 claims made. Of those 352 claims, 139 claims had been determined, with an average processing time of 29 days. This is around 25% of the average time taken to process a some initial liability claims submitted through traditional channels.
- MyService has also simplified the needs assessment process, with questions now asked at the initial liability claim. This will help DVA provide information earlier, and help to ensure that assistance is tailored to clients' needs. On the policy front there has been eight conditions approved to use the ADF basic training regime and service related information as a basis for delegates to approve the condition without further investigation. These are referred to as Decision Ready Processing (DRP).
- Since the 1 August 2017, DRP conditions have been built into MyService. For clients, the experience is a shorter claim process. For DVA delegates, the experience is a shortened decision making process.

Participants discussed with the presenters opportunities to expand MyService and the further streamlining of claims.



WORKING ON THE CHALLENGES

The Forum provided an opportunity for participants to develop potential solutions to address significant challenges impacting veterans' families. These challenges included:

- A. How might we support veterans' families experiencing domestic violence?
- B. How might we better understand and address service gaps to respond to emerging needs in veterans' families?
- C. How might we respond to families' needs, to reduce the risk of intergenerational mental health issues?
- D. How might we improve ageing related support and services, for veterans' families and female veterans?

Participants worked in four groups and presented their ideas to a panel of senior DVA and Defence representatives. Participants were asked to design a policy, service, product, payment or information campaign to answer their challenge. They were invited to consider whether there are opportunities for DVA to connect with services or organisations that already exist in the community. Each group created a 'billboard' to document the key components of their ideas.

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

CHALLENGE A:

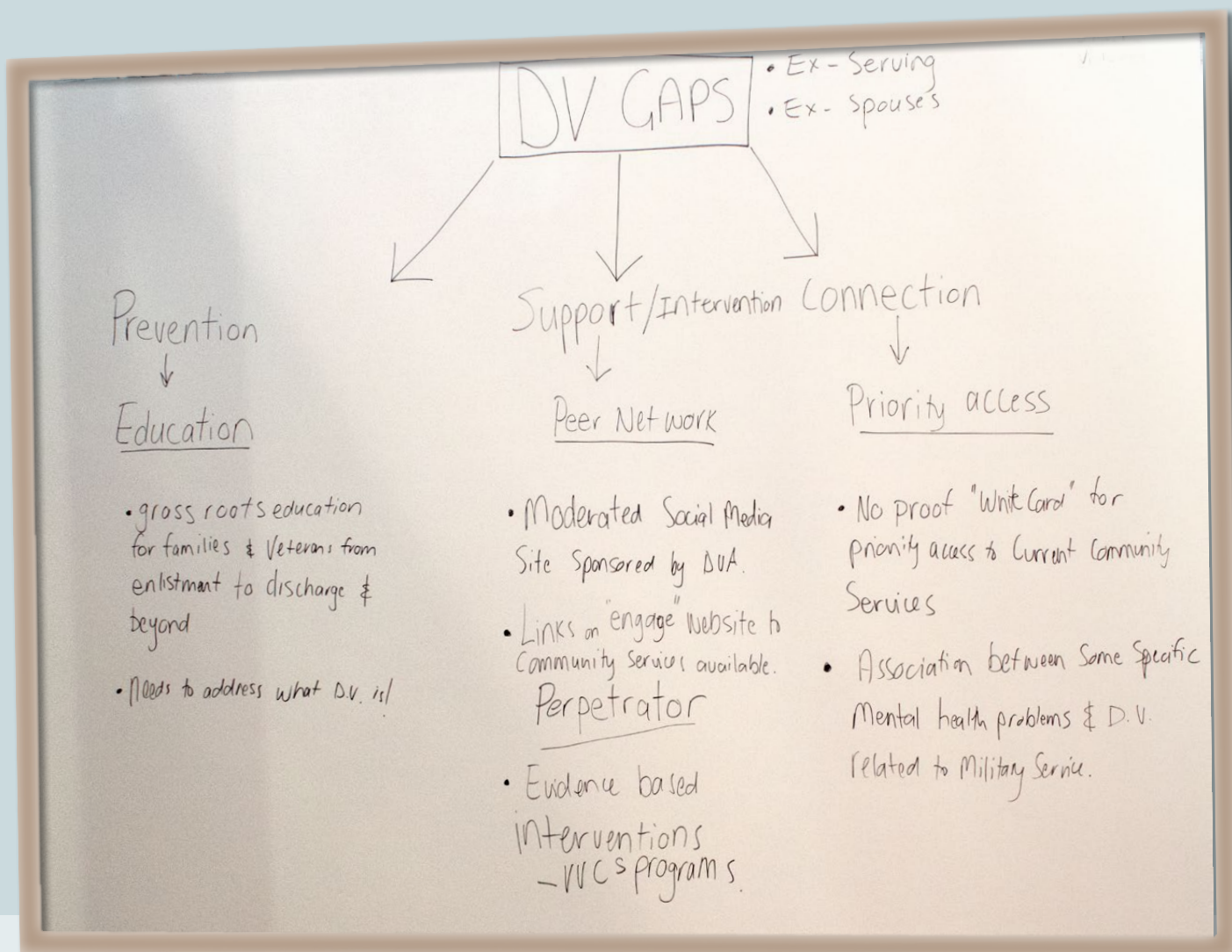
HOW MIGHT WE SUPPORT VETERANS' FAMILIES EXPERIENCING DOMESTIC VIOLENCE?

TOPIC OVERVIEW

Domestic and family violence is a serious problem, affecting all demographics in Australia and negatively impacting the health and wellbeing of those who experience it. Australian police deal with 5,000 domestic and family violence matters on average every week—one every two minutes.

People who are experiencing domestic violence may fear that reporting the violence may have negative impacts on themselves, their partner or their family.

DVA support the health and wellbeing of current and former serving members and their families and carers through a range of services and payments (including ongoing or one off payments).



Summary of Presentation by Group A

Ideas and Solutions

The group's solution focused on three aspects: prevention, support and connection. The group suggested that each of these aspects was interconnected, so action was required on all three to achieve a positive outcome.

Prevention

Provide 'grassroots' education from enlistment and beyond to educate members and families about domestic violence, including what constitutes domestic violence.

'It's not just physical violence, it's also financial and emotional violence.'

The group considered that recognising the many forms of domestic violence and its consequences was one of the first steps in addressing this societal issue.

Support

The support interventions the group suggested included:

- A DVA-sponsored social media site for peer support.
- Update Defence's *Engage* portal to include links to existing domestic violence services. Providing these links on *Engage* would signal Defence's concerns for addressing domestic violence. It would also expedite access to assistance.
- Focus on perpetrators—addressing this issue requires interventions for both survivors and perpetrators. It was recommended that Veterans and Veteran Families Counselling Service (VVCS) establish evidence-based treatment and rehabilitation for perpetrators.

Connection

- The group highlighted the importance of easy access to support services, particularly those related to mental health. Participants suggested that there is a correlation between domestic violence and some mental health problems. The group also noted that, for some, deployments can adversely affect mental health.

'If you're deployed, it's not your family that's changed, it's you.'

They also indicated that once there is a diagnosis of a mental health condition, such as posttraumatic stress disorder (PTSD), family dynamics can change.

'You might accept behaviours from your partner that you wouldn't normally.'

The group highlighted the need for more research into the relationship between military service, mental health issues and domestic violence.

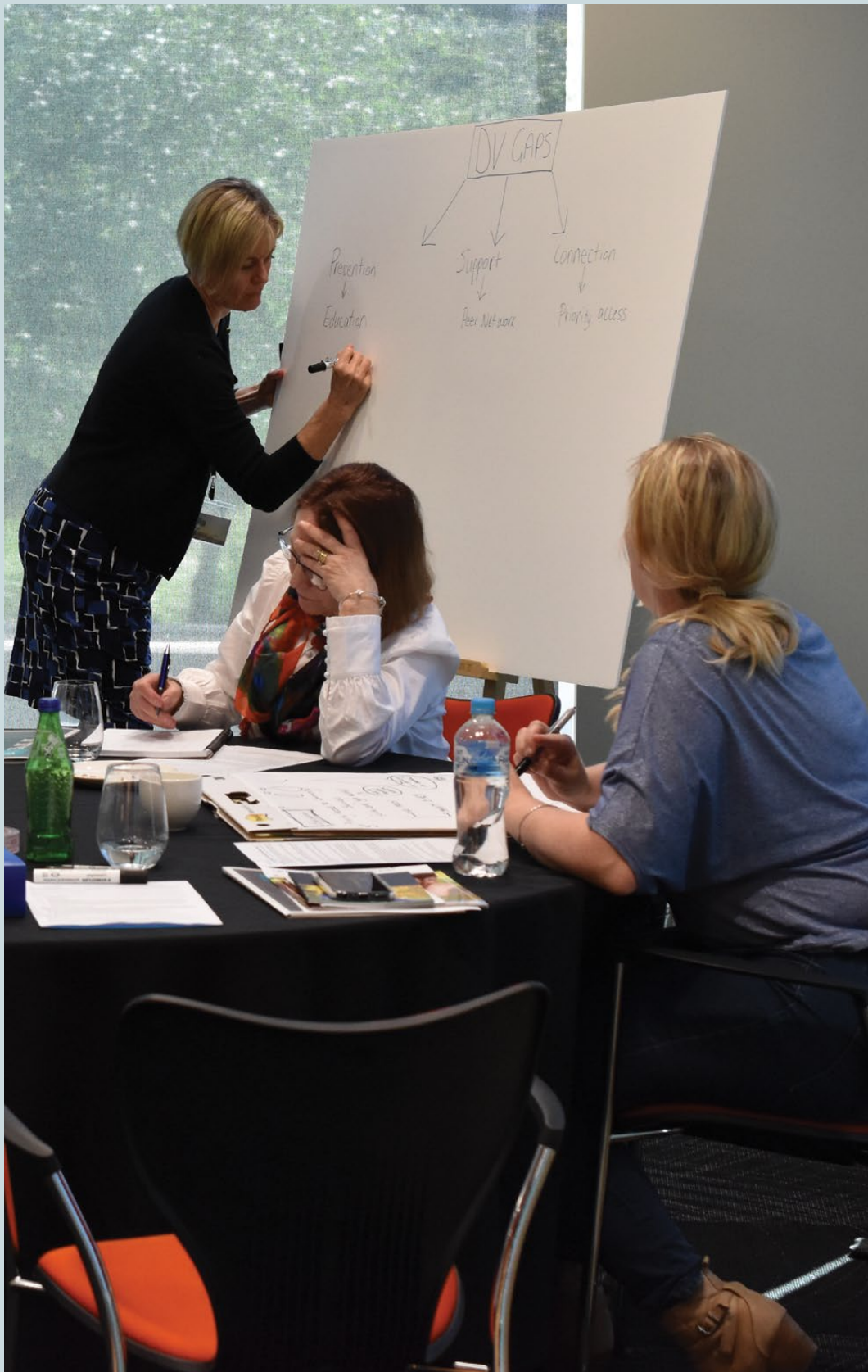
- The group noted that while families may be able to access support while the member is still serving, this is not always the case post service. Veterans' families need priority access to safe house accommodation after the member has separated from the ADF and the family is no longer connected to Defence services.
- Providing families with a 'no proof' White Card would support priority access to domestic violence services. The group was particularly concerned about ex-service families and ex-partners of ADF members.

'Someone who is part of the ADF network has access to Defence Community Organisation (DCO) support, those outside of it don't.'

- The group reflected that there are a lot of good services available in the community, including VVCS. Better promotion of, and easier access to, existing services was considered essential.

Panel Feedback

The panel acknowledged the group's insightful consideration of this complex issue, and the potential of the proposed solutions. The panel agreed that there was potential for DVA and Defence to better leverage existing domestic violence services. The panel also identified two additional topics for further exploration: whether services more tailored to the veteran community are required; and service provision where domestic violence occurs in Defence housing.



CHALLENGE B:

HOW MIGHT WE IMPROVE AGEING RELATED SUPPORT AND SERVICES FOR VETERANS' FAMILIES AND FEMALE VETERANS?

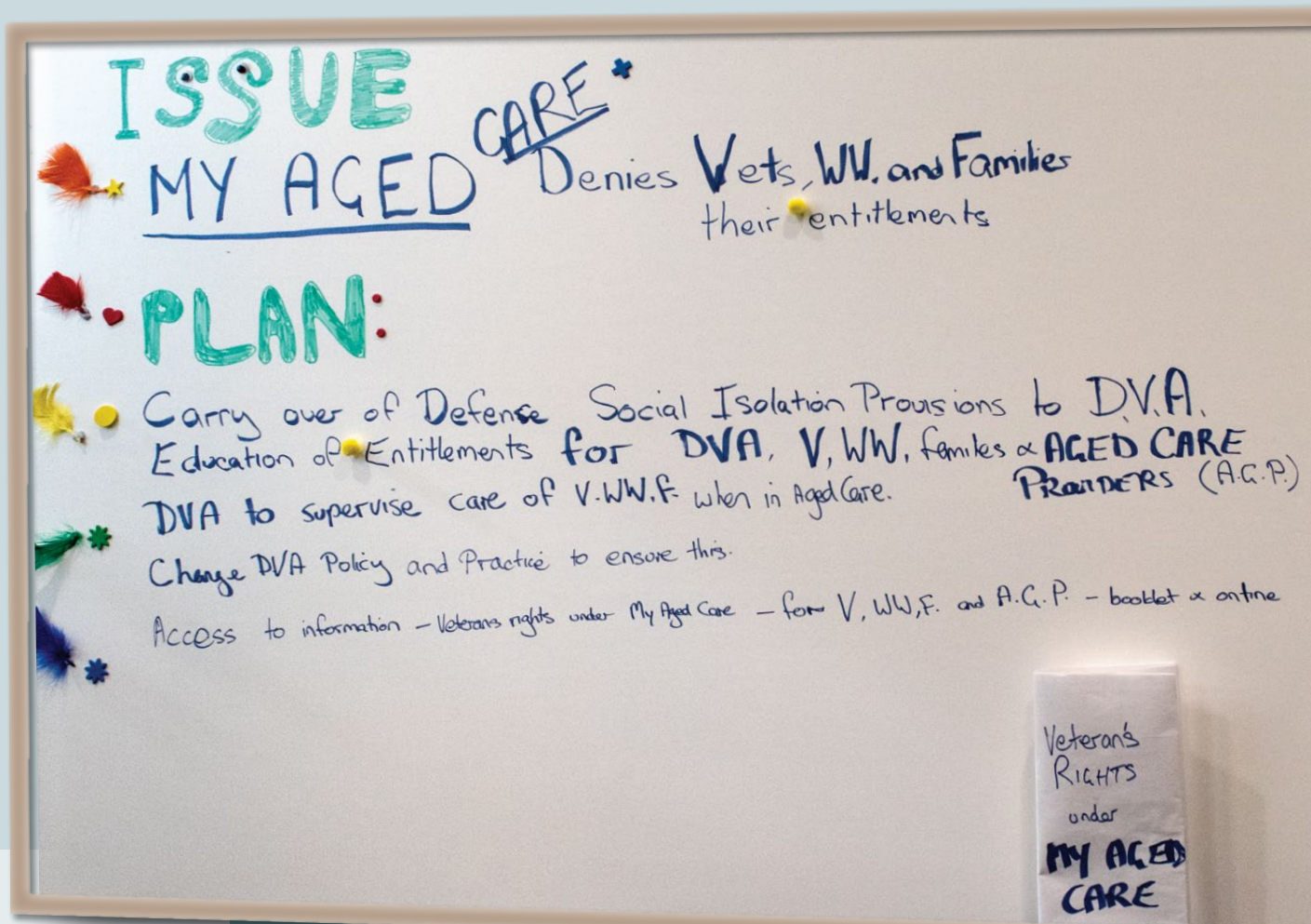
TOPIC OVERVIEW

Australia's older generation (those aged 65 and over) continues to grow and is projected to more than double by 2057. It's important to consider health and wellbeing for our ageing population to ensure that growing older is a positive experience.

Government reforms have focused on changing aged care support to provide choice and flexibility, so that people may live independently and in their home and community for longer.

DVA provides support to veterans and war widows/ers for wellbeing in older age and wants to ensure this meets the needs of recipients. Widows/ers are around 82,000 of the approximately 291,000 people the DVA supports.

The Department of Health is responsible for the administration of the *Aged Care Act 1997* for all Australians, including veterans and war widow/ers—this Act covers residential aged care. As this is an opportunity to influence DVA, focus your outcome on support and services that DVA controls, rather than the Commonwealth funded residential aged care system.



Summary of Presentation by Group B

Context

- Since February 2017, the DVA website refers veterans, war widows/ers, and their families who are looking for information about aged care to the Department of Health's My Aged Care program.
- The group identified issues arising when care of the veteran or war widow/er is taken over by My Aged Care, for example, being unable to access their treating health practitioners. They suggested that currently, if the aged care provider uses a particular physiotherapist, the veteran and war widow/er has to use them instead of their previous health practitioner.
- The veterans and war widow/er access to DVA travel entitlements are also lost.
- The group believed that these practices prevent World War II, Vietnam Veterans and war widows/ers from accessing their entitlements and having choice in treatment.

Ideas and solutions

The potential solutions developed by the group comprised three areas: access to entitlements, information and connection to community.

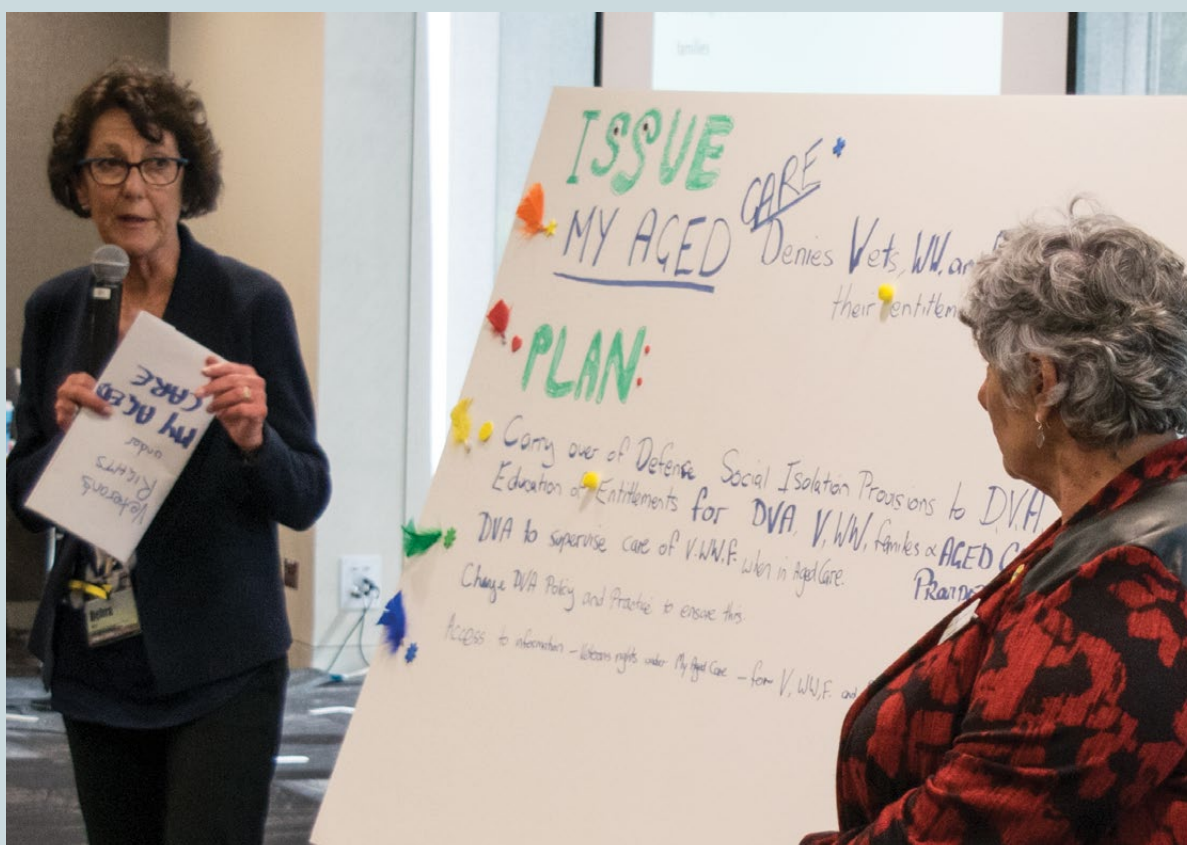
Access to entitlements

- Change in DVA policy to ensure entitlements continue once the veteran or war widow/er enters an aged care facility.
- Aged care providers need to be educated about what entitlements DVA clients have. DVA should be working with aged care providers to ensure veterans and war widows/ers are accessing the care that they are entitled to.

Information about entitlements

Veterans' families need information about the services and support they are entitled to. They need to know what their aged parent or partner is entitled to. To achieve this the group recommended:

- A national road show to educate elderly veterans and their children about their entitlements.
- Develop an information booklet so veterans, war widows/ers and their families can access information about entitlements more easily. A booklet, rather than an internet based product, was preferred as not all older people have internet access. The group suggested the booklet could include:
 - The pros and cons and what to expect when moving into a residential facility or moving in with family.
 - Information about grief counselling, as this might be needed by the family to address any psychological issues associated with moving an elderly person into residential care.



Connection to community

- The group recognised that military life supports the social connectedness of serving ADF members. On leaving the military, some members experience social isolation. This isolation can be exacerbated as they are no longer able to access ADF support and services. The group highlighted the need to expand social isolation prevention support and services to the ex-service community.
- With My Aged Care, some elderly people who are isolated from their support networks are issued with a tablet so they can keep in contact with their family and friends. The group recommended that DVA provide interested elderly veterans and war widows/ers with tablet/computers to reduce social isolation.
- The group also recommended that aged care facilities could implement programs that allow residents to feel a part of society and not 'shut away'.

Panel Feedback

The panel thanked the group for their careful consideration of a complex issue. In the panel's discussion with the group, the high cost of aged care was also raised and the subsequent need for families to get financial advice. The panel suggested that financial advice needs to be available to families to allow for pre-planning. These products could be similar to DVA's 'Planning Ahead' materials.



CHALLENGE C:

HOW MIGHT WE RESPOND TO VETERANS' FAMILIES NEEDS, TO REDUCE THE RISK OF INTERGENERATIONAL MENTAL HEALTH ISSUES?

TOPIC OVERVIEW

The impacts of military service on the mental health of veterans are well recognised. DVA provides a wide range of psychological support to veterans to manage these impacts.

The impacts of military service on the families of veterans are less well recognised by the Australian community, particularly the intergenerational impacts of military service. Researchers focused on mental health impacts of military service write:

'The extent and nature of the intergenerational impact of trauma is still being investigated and understood... Evidence suggests that the children of some veterans experience poorer mental and physical health. These consequences may be related to parental trauma or PTSD, or to the prolonged parental absence associated with deployment.'

(Phelps et al 2016 'Military and Veteran Mental Health Annual Literature Scan 2015').



Summary of Presentation by Group C

Context

- The group highlighted the need to acknowledge the impact that military service can have on the mental health of the whole family.

'The veteran comes back from deployment and they are different to what they were like before.'

- The children of veterans are a unique group.

'My children have only ever known life as part of a military family. Their life has been all about military service, whereas I came into it as an adult.'

'My partner is scared that if he loses his temper it will affect the children, so he withdraws. But withdrawing also has an effect, so the children experience that too.'

'We call it "walking on eggshells". These kids have walked on eggshells all their lives.'

Ideas and solutions

- The group considered that the impact of such experiences on veterans' children necessitates more support services. They suggested the following:
 - Expand the face-to-face and online peer support programs that DVA and other organisations, like Overwatch, provide to veterans to also support veterans' children.

'Kids will open up to their peers, bring military children in to support each other.'
 - Looking at alternative ways to provide support in regional and remote areas, where VVCS has limited psychology services available for children.

'I have approached VVCS to support my children [in my regional town], but they can't. Child psychology isn't their area of expertise.'

VVCS could offer peer support groups to support veterans' children.
 - DVA could help educate the pastoral care staff in schools to support veterans' families by providing education and webinar training on the unique needs and experiences of this group.
 - Using pets as therapy.
 - Hold family open days on military bases to help demystify military life and connect families. The group said that veterans' children may not visit their parents' military base as a result of heightened security, and may not know what their serving parents do.
- The group also stressed the importance of focussing on the positives, i.e. identify and leverage strengths and positive psychology. The military is skilled at using positive psychology during service, so we need to investigate how positive psychology can be used to help military children.

Panel Feedback

The panel supported the need for a greater focus on the children of military families. The panel commended the group's ideas, including the use of educational webinars and positive psychology approaches to support veterans' children.

The panel asked whether the group thought that serving families, transitioning families and post-service families had differing needs. The group indicated that they thought the same principles apply to military children during service, transition and post-service. They highlighted the need to teach military children resilience.

'If we can teach these young people resilience, they'd go out in the world and make their own wellness.'

CHALLENGE D:

HOW MIGHT WE BETTER UNDERSTAND AND ADDRESS SERVICE GAPS TO RESPOND TO EMERGING NEEDS IN VETERAN FAMILIES?

TOPIC OVERVIEW

Veterans' families are impacted by the veteran's military service and may need support to respond to these challenges.

DVA provides support and services to veterans and their families, but DVA's client cohort is changing. By 2020, one-third of DVA's clients will be aged under sixty, and twenty per cent will be aged under fifty. The new and emerging needs of veteran families may not be fully understood, which could limit the tailoring of services for this group. These clients and their families may want different support and have different needs, compared to what DVA has provided in the past.



Summary of Presentation by Group D

Context

- The group identified that there is a myriad of services being provided to the veteran community, and their own individual and personal experience of accessing services varied markedly.
- The group identified a lack of consistency in services accessed and provided. They also noted a lack of effective communication about what services are available, and how to access these services.

Ideas and solutions

The potential solutions developed by the group focussed on three areas: education/inclusion, information and access. The group's ideas are summarised below.

Education/inclusion

- DVA's legislation needs to be adapted to broaden support and service provision to spouses and partners.
- To provide accountability to families, the family directive that the Special Operations Command developed in July 2017 needs to be expanded to the wider ADF.
- Implement preventative health and mental health activities.

Information

- Deployment information needs to be provided to families in a timely manner.
'In the unit that I'm familiar with, this year many families received no information or received it after deployment.'

Access

- The Geckos Family Centre model that is operating at Lavarack Barracks in Townsville should be replicated nationwide. The Centre fosters connections with DCO, DVA, ESOs and the units, with 1,200 spouses attending the Centre per month. The group acknowledged that some of the success in Townsville was due to the individual manager's capacity, energy, skill and passion.
- Create paid family advocate roles within each unit, similar to the Navy Ombudsman program, to connect the unit with the families.
- Provide consistent access to youth counselling.
- Make Kookaburra Kids accessible to all military children, not just the children of those with mental health issues.

Panel Feedback

The panel recognised the group's lived experience of this challenge, and thanked them for their informed consideration of potential solutions. The panel reflected that Defence is working to improve the education and communication provided to families, as well as improve the consistency of services and communication messages.

The panel also noted the increased challenge of building social connectedness due to the greater geographical dispersion of military families living away from bases. The panel recognised the need to identify creative ways to foster a sense of community.

MOVING FORWARD

Participants were provided an opportunity to identify topics the Forum could focus on, or suggest ways the Forum should operate into the future. Where multiple participants identified an identical topic or way of working, this has only been included once.

FUTURE TOPICS:

SUICIDE PREVENTION AND SUPPORT

- Suicide caused by military service.
- Rural community support after veteran suicide.

BEREAVEMENT RELATED SUPPORT

- Support for families after the death of a veteran.
- Education for families about services available if the service member dies.
- Support for war widows and their families where the death is not during deployment.
- Support the extended family in serious/fatal circumstances.
- Contemporary widows and their issues.
- Better education for kids—adult children about what their entitlements are in a single parent environment if the parent dies.

EXPANDED ASSISTANCE FOR, AND INCLUSION OF, VETERANS' FAMILIES

- Legislation.
- Family member card for accessing DVA services, not just 'the veteran'.
- Issues related to Reserve Defence members—they are more isolated from the Defence community, with fewer resources. They have less community than regular Defence members.
- Spouses to be more accountable/involved and 'informed', including being a part of Post Activity Reports (PARs).

TARGETED SUPPORT AND CONNECTIVITY FOR CHILDREN

- How to use apps and social media to help facilitate connections?
- Specific services for children and positive psychology.
- Support for children of all ages: programs, community and in a timely manner.

IMPROVED SERVICE PROVISION

- Quality checks—better service from service providers.
- Accountability and timeliness access to current active services—HELP NOW.
- Problems specific to disparate housing and how to promote community.

TRANSITION FROM THE ADF

- How do/should veterans' families plan for life after permanent service?

WAYS OF WORKING

- Mixing female veterans and veterans' families at the one Forum is beneficial.

FINAL COMMENTS

Participants reflected on the Forum and recorded comments to share with the group:

Brave wonderful women so committed to helping others, often to help them avoid the difficulties they have personally experienced.

Thank you for listening.

Look after our War Widows young and old, no one should be made to move in the first twelve months [post-bereavement].

Thank you for listening and for the opportunity to participate. I am confident that we are on the way to a better world for veterans and their families. My second time here and once again I have met some wonderfully inspiring women.

Preventive measures for mental health (ADF wide): intervention, education, and rehabilitation. Mental health issues can be fully recovered from.

Even though it was the wrong day, I still got something out of being here.

Keep our families informed and up to date.

Families need information and to plan for post-military life even if the member goes to the APS or reserves.

Inspiring women, a privilege to meet so many.

Transparency of policy, clear communication about services and their limitations is key to expectation management. Thank you.

Great to be part of a problem-solving group. Many motivated women thinking for the future.

Will you be publishing [the] Forum challenges and future suggestions like last year?

It is very encouraging that DVA and associated Departments are being proactive, positive to expanding/consolidating what works and doing the best possible to improve what they can.

Ability to learn from others.

Common theme throughout the groups e.g. positive psychology and not reinventing the wheel, helping improve what we have.

Thank you Lindsey for helping with accommodation and travel.

Brave wonderful women
so committed to helping
others, often to help them
avoid the difficulties they
have personally experienced

KEEP OUR
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DATE

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Thank You for a most interesting
and well run day.
It is good to network, sharing
of ideas can make a difference
and cause change.

I am so pleased we spoke about issues/services that are in the 'Defence' space that affect families. We need to be talking about prevention, education and connectedness. There must be consistency across the country.

There needs to be more consistency from all forces and providers. We are all but one.

Improve consistency of service delivery from all support agencies.

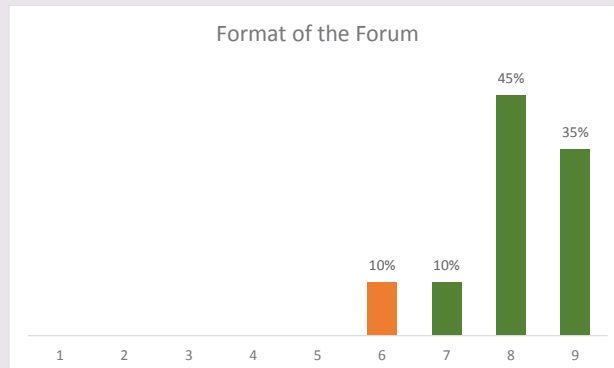
Review the training of DVA delegates and ensure refresher training is undertaken regularly.

Thank you for the most interesting and well-run day. It is good to network, sharing of ideas can make a difference and cause change.

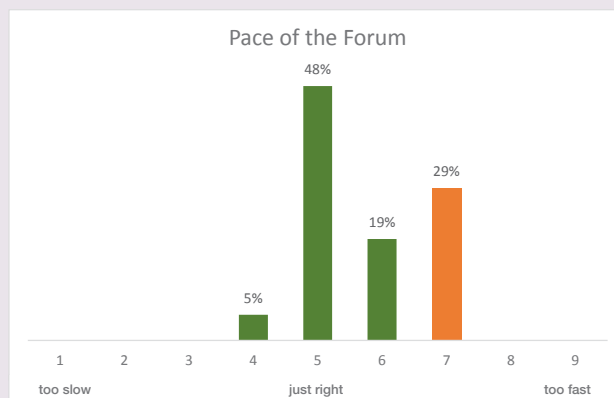
Communication and consistency are key.

EVALUATION

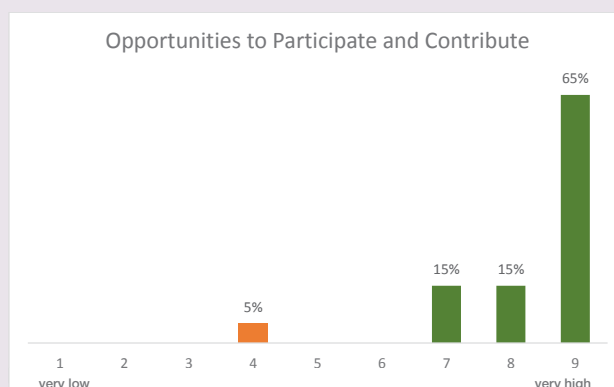
Overall participants were very positive about the Forum's format.



Most participants thought the pace of the Forum was 'about right', but 29% of participants considered the pace was a little too fast.



Most participants thought they had an opportunity to participate and contribute during the Forum.



90% of the participants considered the Forum to be a worthwhile use of their time.

CLOSE

Ms Liz Cosson closed the second meeting of the Veterans' Families Policy Forum by reflecting to participants their presentations contained many achievable recommendations that DVA could explore.

Ms Cosson asked that the participants continue to stay engaged with DVA.

Ms Cosson also thanked participants for their service in supporting their veteran family members.

'The military family is more than just the veteran.'







