



Australian Government

Department of Veterans' Affairs

Submission to the Productivity Commission Review of the National Housing and Homelessness Agreement

March 2022

Contents

Executive Summary.....	3
Introduction	4
Legislative and Policy Context.....	4
Homelessness in the Veteran Community.....	5
Support available from DVA and Open Arms – Veterans & Families Counselling.....	7
Reviews and Inquiries	9
Intergovernmental collaboration	11
Conclusion.....	11

Executive Summary

The Department of Veterans' Affairs (DVA) supports the wellbeing of those who serve or have served in the defence of our nation and their families. The veteran community is a diverse group with DVA clients spanning all generations and life stages. This includes current and former serving Australian Defence Force (ADF) members, veterans, and their families. DVA administers a wide range of supports and services including income support, compensation, health, rehabilitation, aged care support, transport, employment and education support, home insurance as well as delivering commemorative activities.

While the veteran experience of homelessness is very similar to the general homeless population, there are a number of unique characteristics that can face the veteran community, including rapid entry into rough sleeping; complex physical and mental health issues; disengagement from mainstream services; and housing affordability following transition from active service to civilian life.

Although DVA does not have legislative authority to provide housing and homelessness services to DVA clients, many supports are available to address the risk factors that can lead to veteran homelessness. This support includes free, lifetime mental health care for anyone with a single day of continuous full time service in the ADF, immediate financial support for those submitting mental health claims, assistance following transition, support to find civilian employment and crisis accommodation through Open Arms – Veterans and Families Counselling.

Two recently published reports have also highlighted housing and homelessness vulnerabilities experienced by veterans. The interim National Commissioner for Defence and Veteran Suicide Prevention's preliminary interim report¹ considered the issue of veteran homelessness in the context of its correlation with veteran suicide. Relevantly, the interim National Commissioner recommended (9.5) that the National Housing and Homelessness Agreement should be updated to include veterans as a priority cohort. Additionally, the interim National Commissioner recommended that the Australian Government and state and territory governments should agree on targets to reduce veteran homelessness and develop an ongoing data collection process that enables an accurate understanding of the extent of veteran homelessness.

DVA is committed to working and partnering with states and territories, homelessness and housing sectors and the broader veteran community to ensure veterans have a secure and safe place to live, whether through buying, renting or social housing. DVA welcomes initiatives by state and territory governments to provide housing and homelessness support to veterans.

¹ Interim National Commissioner for Defence and Veteran Suicide Prevention, Preliminary Interim Report (2021) <https://www.nationalcommissionerdvsp.gov.au/publications/interim-national-commissioner-defence-and-veteran-suicide-preventions-report>

Introduction

The Department of Veterans' Affairs (DVA) welcomes the opportunity to provide a submission to the Productivity Commission's review of the National Housing and Homelessness Agreement (NHHA).

DVA notes that the interim National Commissioner for Defence and Veteran Suicide Prevention's preliminary interim report recommended that veterans be considered a priority cohort under the NHHA.²

This submission presents information on veterans in the context of housing and homelessness support, as well as DVA's understanding of homelessness in the veteran community. As part of the issues paper for this review, DVA notes that key issues being examined include the priority homelessness cohorts and policy areas under the NHHA. As veterans are not currently considered a priority cohort, the submission includes information on the veteran experience and housing and homelessness vulnerabilities which can be experienced upon transition from the Australian Defence Force (ADF).

Legislative and Policy Context

DVA's role and functions

The purpose of DVA is to support the wellbeing of those who serve or have served in the defence of our nation and their families. The veteran community is a diverse group with DVA clients spanning all generations and life stages. This includes current and former serving ADF members, veterans, and their families. DVA administers a wide range of supports and services including income support, compensation, health, rehabilitation, aged care support, transport, employment and education support, home insurance as well as delivering commemorative activities. DVA works closely with the veteran community including ex-service organisations, advocates and veteran support organisations.

DVA estimates that, as at 30 June 2020, there were approximately 622,500 living Australians who had served, or were serving, in the ADF, either full-time or in the reserves. As of 30 June 2021, DVA estimates that there were approximately 240,231 veterans known to DVA, and 96,179 clients classified as dependants.

Housing and Homelessness

States and territories have primary responsibility for housing and homelessness services. As a Commonwealth agency, DVA does not have legislative authority to provide housing and homelessness services to DVA clients. As such, DVA's focus is to gain a better understanding of the prevalence of homelessness in the veteran community, address the risk factors associated with veteran homelessness and ensure support is available following transition from the ADF. DVA welcomes initiatives by state and territory governments to provide housing and homelessness support to veterans.

² Interim National Commissioner for Defence and Veteran Suicide Prevention, Preliminary Interim Report (2021) <https://www.nationalcommissionerdvsp.gov.au/publications/interim-national-commissioner-defence-and-veteran-suicide-preventions-report>

Veteran Mental Health and Wellbeing Strategy and National Action Plan 2020-2023

The Veteran Mental Health and Wellbeing Strategy and National Action Plan 2020-2023 (the Strategy) sets out DVA's priorities and actions to improve the mental health and wellbeing of veterans and their families. In shifting from an illness focus to a wellness focus, the DVA wellbeing model comprises seven domains: health, income and finance, employment, education and skills, housing, social support and connection and recognition and respect.

Priority three of the strategy focuses on enhancing partnerships across government, communities, business, service providers, researchers and ex-service organisations to improve mental health and wellbeing outcomes for veterans and their families. Under this priority, DVA has committed to two specific actions which are relevant to the domain of housing through targeting veteran homelessness.

- Objective 3.1: Continue to enhance collaboration across government, particularly between Defence and DVA, to ensure the mental health and wellbeing needs of veterans and their families are supported across their lifespan:
 - Action 3.1.4 – Collaborate with Defence to explore tools which can help assess the wellbeing risks and vulnerabilities that transitioning members might face, for example, homelessness, prior to transition in order to take action to mitigate the risks.
- Objective 3.7: Create opportunities for networking and collaboration across sectors, including empowering the development of local solutions:
 - Action 3.7.2 – Harness DVA's role as an influencer, connector, and funder of services to work with state and territory governments, and specialist homelessness service providers to tailor programs and services to reduce homelessness for veterans and their families.

Although DVA's role in housing and homelessness services is limited, DVA understands that safe, secure and affordable housing is key to ensuring the overall wellbeing of individuals. DVA is committed to working and partnering with states and territories, homelessness and housing sectors and the broader veteran community to ensure veterans have a secure and safe place to live, whether through buying, renting or social housing. The identification of veterans as a priority homelessness cohort under the NHHA would ensure that each state and territory includes this cohort in their homelessness strategy, and would assist with ensuring that the needs of veterans are met, including through the provision of tailored services and support as well as appropriate referral pathways.

Homelessness in the Veteran Community

Although there is no single source of data on homelessness in the veteran community, DVA's understanding of the veteran experience of homelessness is informed by three reports (two released in 2019 and one released annually in December) and consultation with relevant service sectors and the broader veteran community. There are a diversity of views, and while the reports are not directly comparable, they each provide insight into homelessness in the veteran community.

The inclusion of a question on ADF service in the 2021 Australian Census is anticipated to provide better information about the incidence of homelessness in the veteran population.

While the veteran experience of homelessness is very similar to the general homeless population, there are a number of unique characteristics informed by research and consultation undertaken with the homelessness and veteran service sectors and with veterans with lived experience of homelessness:

- **Rapid entry into Rough Sleeping:** Military training makes rough sleeping an option, not a last resort. Veterans will often delay help until a crisis point is reached.
- **Complex Issues:** Veterans with a medical or administrative discharge due to mental health face high levels of risk.
- **Lack of Life Skills:** Veterans report they do not have the life skills they need to manage when a crisis occurs post-service, such as unemployment, financial stress, and relationship breakdown or domestic/family violence. Veterans can feel socially isolated due to the loss of 'defence' family and minimal community connections during service.
- **Disengagement from Services:** Veterans believe mainstream services will not understand them, or do not want to engage with the ADF or the DVA due to a negative discharge experience.
- **Housing Affordability following transition:** Discharge into a high cost rental market, cessation of Defence Rental Allowance, having no rental history and a reluctance to move away from existing medical providers may entrench housing unaffordability. Mental health and anger issues may result in difficulties with sharing housing or accessing residential aged care.

Homelessness amongst Australian Veterans – Australian Housing and Urban Research Institute (AHURI); released in 2019³

This research examined the extent and nature of homelessness amongst former members of the ADF.

Extrapolating the results of the Transition and Wellbeing Research Programme,⁴ AHURI estimated that approximately 5,800 contemporary veterans may have experienced homelessness over a 12-month period. This equates to approximately 5.3 per cent of all veterans who have left the ADF since 2001.

The AHURI research also identified that the strongest risk factors for veteran homelessness were higher levels of psychological distress during service, and relationship breakdown and unemployment following transition. Other identified risk factors include lower education levels, being single, being unemployed, experiencing financial strain, having mental health issues, having less contact with family/friends, engaging in risky behaviours, being arrested or convicted for a crime and experiencing a greater number of lifetime traumatic events.

Military service and transition risk factors associated with increased odds of becoming homeless include higher post-traumatic stress disorder and psychological distress symptoms, higher alcohol

³ Hilferty, F., Katz, I., Zmudzki, F., Hooff, M., Lawrence-Wood, E., Searle, A., Evans, G., Challinor, B., and Talbot, A. (2019) Homelessness amongst Australian veterans, Australian Housing and Urban Research Institute (AHURI), <https://www.ahuri.edu.au/research/research-papers/homelessness-amongst-australian-veterans>

⁴ The Transition and Wellbeing Research Programme is the most comprehensive study undertaken in Australia that examines the impact of military service on the mental, physical and social health of serving and ex-serving ADF members and their families [Transition and Wellbeing Research Programme | Department of Veterans' Affairs \(dva.gov.au\)](https://www.dva.gov.au/transition-and-wellbeing-research-programme)

consumption, higher anger levels, operational deployment, being discharged at a lower rank, being unemployed following transition and relationship breakdown following transition.

Use of Homelessness Services by Contemporary Ex-serving ADF Members 2011-17 – AIHW; released in 2019⁵

This research matched specialist homelessness services (SHS) data to PMKeyS (defence personnel records) data to identify as accurately as possible, ex-serving defence personnel who have used SHS services. The report looked at six years of SHS service usage by veterans who had transitioned from the ADF since 2001.

The report found from 2011-2017 SHS usage among ex-serving contemporary ADF members was 1.1 per cent, which was lower than the general Australian population at 3.4 per cent.

Specialist Homelessness Services Annual Report 2020-21 – Australian Institute of Health and Welfare (AIHW)⁶

Released annually by the AIHW, this report provides insight into usage of SHS by current or former serving ADF members. The report has included an ADF identifier since 2017-18.

The 2020-21 report found that 1,300 clients who identified as current or former serving members of the ADF were assisted by SHS. Fifty-four per cent of these were homeless when seeking support and 46 per cent were at risk of being homeless.

Support available from DVA and Open Arms – Veterans & Families Counselling

DVA's focus is on addressing the causal risk factors associated with veteran homelessness. Services and support which are available include:

Health Treatment

- **Non-Liability Health Care:** Access to free mental health care for life to any veteran who has served a single day of continuous full time service in the ADF. Treatment can be received for all mental health conditions without the need for the conditions to be accepted as related to service.
- **Provisional Access to Medical Treatment:** Provides eligible veterans who have submitted a claim to DVA with access to medical and allied health treatment on a provisional basis for the 20 most commonly accepted conditions while their claim is being processed.
- **Veterans' Health Check:** Fully-funded, comprehensive annual health checks from a general practitioner for the first five years after transition.
- **Treatment for accepted conditions:** Provision of medical treatment for conditions that have been accepted as service related.
- **Rehabilitation:** Targeted rehabilitation programs to support vocational and non-vocational outcomes.

⁵ AIHW, Use of Homelessness Services by Contemporary Ex-serving ADF Members 2011-17 (2019), <https://www.aihw.gov.au/reports/veterans/homelessness-services-ex-serving-adf-11-17-summary/contents/summary>

⁶ AIHW, Specialist Homelessness Services Annual Report 2020-21 (2021) <https://www.aihw.gov.au/reports/homelessness-services/specialist-homelessness-services-annual-report/contents/summary>

Open Arms – Veterans and Families Counselling Service (Open Arms) has provided veteran mental health support for more than 40 years. Open Arms (formerly Vietnam Veterans' Counselling Service) was founded by Vietnam Veterans and is a nationally accredited mental health service that provides 24-hour free and confidential mental health support.

Any ADF member with one day full time service can access support through Open Arms, as can their partner and children. Where there has been a death of a service person, parents and siblings can also access the service.

Open Arms services include:

- Counselling for individuals, couples and families;
- Coordinated care for clients with complex needs;
- Group programs to develop skills and enhance support;
- Lived experience mental health peer support services;
- 24/7 telephone counselling;
- Suicide prevention training;
- Mental health literacy and awareness training;
- Information, education and self-help tools; and
- Referral pathways to specialist treatment.

Safe Zone Support is a free and anonymous counselling line, available for veterans and their families by calling 1800 142 072. This service is available 24/7 and provides access to specialised counsellors, with an understanding of military culture and experience. The service offers care without the need for individuals to identify themselves or be concerned that their call will be recorded.

Open Arms Crisis Accommodation Program (CAP) aims to provides short term crisis accommodation to eligible Open Arms clients for up to five days. It is available to any person with eligibility for Open Arms services, who is in need of brief, alternative accommodation in a crisis and meets the criteria. CAP aims to enable access to care coordination, facilitates time for management of factors contributing to the crisis situation and aims to reduce exposure to risk.

The Community and Peer Program brings a lived experience of military services, either personally or as a family member, and recovery from mental health issues. Peers are embedded in regional teams and work alongside clinicians to improve mental health outcomes for Open Arms clients, particularly those at risk of suicide or with complex needs. Peers connect with veterans and their families to promote early engagement and help seeking behaviours, providing a bridge to clinical services.

Case Management

- **Triage and Connect:** A single 'front door' for DVA staff to escalate complex and high-risk-clients for assessment and a tailored response to their needs. Triage and Connect operates in conjunction with other DVA functions including coordinated client support and Open Arms.
- **Coordinated Client Support:** Takes the majority of referrals from Triage and Connect and provides assistance and tailored support to complex and high needs clients.
- **Wellbeing and Support Program:** Tailored, intensive case management to support veterans and their families who have complex medical and non-medical needs.
- **Transition support:** Needs-based support during transition from military to civilian life, including issuing a DVA White Card to transitioning members and access to DVA's veteran support officers on many ADF bases around the country.

Financial Support

- **Veteran Payment:** Provides interim financial support to veterans who are unable to work more than 8 hours per week and have lodged a claim for a mental health condition under either the *Military, Rehabilitation and Compensation Act 2004* (MRCA) or the *Safety, Rehabilitation and Compensation (Defence-Related claims) Act 1988* (DRCA), while the claim is being determined.
- **Incapacity Payments:** Compensation for economic loss due to the inability (or reduced ability) to work because of an injury or disease that has been accepted as service related under the MRCA or the DRCA.
- **Compensation:** Compensation for injuries or conditions that have been accepted as service related.
- **Income support:** Provision of pensions or benefits for eligible persons.
- **Commonwealth Rent assistance:** As part of a 2020-21 Budget measure, the disability pension is now exempt from the Social Security Act income test and the rent assistance test under the *Veterans' Entitlements Act 1986*, enabling more veterans to access Commonwealth Rent Assistance.

If relevant agencies are able to identify their veteran clients and know how to refer them to DVA or other veteran-specific support services, this would provide their veteran clients with the ability to link-in with and access tailored support and assistance.

DVA is continuing to work with the housing and homelessness sectors to identify opportunities to further support veterans. This includes two current initiatives:

RSL Care SA – Andrew Russell Veteran Living

In partnership with RSL Care SA, DVA is trialling 'an assertive in-reach program pilot' supporting veterans residing in the Andrew Russell Veteran Living Centre in Adelaide. The pilot aims to explore the impact of a multi-disciplinary team approach, including mental health nursing, Open Arms Community and Peers and DVA case coordination resources, in addressing the mental health needs of vulnerable veterans at risk of homelessness. The pilot also aims to enable veterans to develop skills and networks for ongoing support through community-based agencies and providers.

Community Housing Industry Association

DVA has engaged the Community Housing Industry Association to develop a veteran-specific toolkit, training materials and industry standard to improve outcomes for veterans and their families living in community housing. The resources will assist community housing providers across Australia to understand unique veteran risk factors and equip them with a better awareness of appropriate referral pathways. The project is informed by an advisory group of experts from across the community housing, veteran and homelessness sectors and is designed to help veterans and their families obtain and maintain community housing tenancies and improve veteran housing outcomes.

Reviews and Inquiries

In 2021, both the interim National Commissioner for Defence and Veteran Suicide Prevention and the Parliamentary Inquiry into Homelessness, released reports which considered homelessness in the veteran community.

Preliminary Interim Report – Interim National Commissioner for Defence and Veteran Suicide Prevention⁷

As part of the Interim National Commissioner for Defence and Veteran Suicide Prevention's preliminary interim report tabled in Parliament on 29 September 2021, the issue of veteran homelessness was considered in the context of its correlation with veteran suicide. Consistent with DVA's understanding of veteran homelessness, the interim National Commissioner noted that homelessness does not typically become an issue until a veteran transitions out of the ADF.

The interim National Commissioner also examined the NHHA and observed that under the current NHHA, veterans are not considered a priority cohort. The interim National Commissioner noted that, from their discussions with state and territory representatives, there were varying levels of focus on veteran homelessness across Australia, and was concerned that a veteran's ability to access support is determined by where they live.⁸ It was also noted that the Australian Government has limited levers in relation to supporting veterans experiencing homelessness.⁹ Five recommendations were made focusing on veteran homelessness, with the below two recommendations targeting government support at the federal and state levels and the NHHA:

- Recommendation 9.4: Funding from the Australian Government and state and territory governments should be made available to support appropriate community projects that provide crisis, short-term and long-term housing for veterans and families so as to avoid veteran homelessness;
- Recommendation 9.5: The NHHA should be updated to include veterans as a priority cohort. Through the NHHA, the Australian Government and state and territory governments should:
 - Agree on targets to reduce veteran homelessness
 - Develop an ongoing data collection process that enables an accurate understanding of the extent of veteran homelessness.

The Australian Government is currently considering the report and its recommendations.

Parliamentary Inquiry into Homelessness in Australia¹⁰

The House of Representatives Standing Committee on Social Policy and Legal Affairs (the Committee) recently held an Inquiry into Homelessness in Australia. The Final Report was released on 4 August 2021, and considered veteran homelessness. The Committee identified veterans as a vulnerable group, and made the following recommendation:

- Recommendation 26: The Committee recommends that the Australian Government, in cooperation with state and territory governments, fund data collection and research to address gaps in evidence relating to the prevalence of homelessness and demand for support services among specific vulnerable groups, including but not limited to:
 - older women;

⁷ Interim National Commissioner for Defence and Veteran Suicide Prevention, Preliminary Interim Report (2021) <https://www.nationalcommissionerdvsp.gov.au/publications/interim-national-commissioner-defence-and-veteran-suicide-preventions-report>

⁸ Preliminary Interim Report, Paragraph 103.

⁹ Preliminary Interim Report, Paragraph 104.

¹⁰ The House of Representatives Standing Committee on Social Policy and Legal Affairs, Inquiry into Homelessness in Australia (2021) https://www.aph.gov.au/Parliamentary_Business/Committees/House/Social_Policy_and_Legal_Affairs/HomelessnessinAustralia/Report

- people living in regional, rural and remote areas;
- veterans; and
- LGBTIQ+ people.

The Australian Government noted this recommendation in its response to the Final Report.

Intergovernmental collaboration

Collaboration between DVA and state and territory governments is key to ensuring that veterans receive the services and support that they need. Homelessness is a standing agenda item for the National Federation Reform Council's Veterans' Wellbeing Taskforce, which is chaired by the Australian Government Minister for Veterans' Affairs, as well as the Commonwealth, States' and Territories' Committee which sits underneath the taskforce. Membership is comprised of state and territory representatives with responsibility for veterans' affairs and presents an opportunity to discuss and address veteran issues.

Conclusion

As a result of their service, veterans can face unique risk factors that can lead to homelessness or being at risk of homelessness. DVA is committed to working with states and territories, the housing and homelessness sectors and the broader veteran community to ensure that housing and homelessness support that meets the needs of veterans and their families is available.

Recognising veterans as a priority cohort under the NHHA would help to:

- increase awareness among homelessness service providers of the nature of military service and veteran-specific needs and support;
- ensure tailored services and support can be provided, including referral to services provided by DVA, Open Arms and the broader veteran community; and
- help to breakdown barriers faced by veterans accessing mainstream services.