Submission to Productivity Commission – by Lieutenant General John Caligari, AO, DSC (Ret'd)

This submission is based on my understanding of the veterans' support system based on my involvement with, and living within, the large ex-ADF community in Townsville. In Townsville, those who serve, have served, and their immediate family number about 40,000 and represent 20% of the population. I served a 36-year career in the ADF and for one-third of my career was posted to Townsville. Since retiring in August 2015, I have been active in this ex-ADF community. I am Chair of The Oasis Townsville, a veteran charity working with ESOs in Townsville to assist the transition, connection and integration of ex-ADF members and their families; Chair of the Department of Health Ex-ADF Members and Families Suicide Prevention Trial (locally known as Operation COMPASS); Patron of Townsville Legacy and the 1RAR Association. These views are my own.

Perception and Cultural are at the root of the problem with the veteran support system administered by DVA. It is entirely a matter of trust. It boils down to people who are inculcated with Service values having to deal with an organisation that treats them in a bureaucratic transactional way after they leave the ADF with an expectation they deserve better. Many Service men and women have made claims and when knocked back, for want of knowing astute ways to answer questions, will just drop the issue, having been accustomed to 'a decision by the boss is final'. It would be interesting to know how many people have applied to DVA for support, been denied help and never came back. They would be among for the 2/3 of veterans of which DVA has no knowledge. When a veteran is denied a claim and does not accept the DVA decision, the process of dealing with the Department often consumes the veteran's life to the extent that DVA becomes the enemy and winning is the goal, not necessarily rehabilitation. An indicator of how DVA has viewed the veteran sector is that they do not know how many veterans there are in Australia, only the number of clients who have been successful in lodging a claim. Despite 10 years of inquiries the cause of elevated suicide rates and poor mental health among the veteran community is still not understood. It is not my intent to accuse or blame DVA. We are were we are for many reasons, some outside DVA control. We must build trust.

There are many issues in the report, but I believe addressing the lack of trust is paramount:

- 1. Assuming to treat the different types of veteran as one is unjust. Serving on operations where your life is at risk from an enemy whose intent is to kill you, or being engaged on any operational mission at the direction of the Australian Government, is not the same as never having left Australia or served for only one day, notwithstanding some horrific accidents in training. Unique service is respected now and must remain, albeit it is eroding and could be tidied up. Perhaps the answer is classes of 'Veteran' like: 'Service Veteran', 'Combat Veteran', and 'Operational Veteran' based on location, an enemy and the environmental hazard. It boils down to how decision making is affected when decisions need to be made often in contravention of sound WHS policy. Dealing with three types of veteran might be as simple as better managing the current practice of differentiating on the standards of proof.
- 2. The solution needs to take account of the changed and changing nature of veterans. Younger veterans with families and career expectations do not see compensation and rehabilitation the same as retired veterans, which is where most of our advocates come from. It is apparent that some veterans are turning to NDIS where they believe they will get better help rehabilitating. They recognise waiting for DVA to 'make the right decision' prevents them from moving on with life. Whatever the solution it needs to be adaptive as one thing is for sure there will be more changes in the nature of Service and veterans over time, and if nothing else, DVA have an appreciation of that.

I don't think 'moving the deck chairs' is a good solution. Rearranging roles and responsibilities and changing organisational structures and reporting is a red herring. Having all veterans' affairs dealt with by one Government department is a sound principle. DVA should not be dismembered because it is struggling to change its culture and its priorities. The need is to identify the constraints that make the Department behave the way it does and address them. I am sure these are well known in DVA senior leadership circles. I am pleased to hear our Federal politicians discount this recommendation already.

Changing the relationship between DVA and veterans is what is needed. It must restore trust which will mean being more personable and empathetic. My first thoughts are that in order to build the trust veterans are familiar with, there is a need to: decentralise the front office and professionalise advocacy. I believe these two changes are mutually supporting.

The face-to-face culture of the ADF needs to be reproduced in the way DVA deals with veterans. There needs to be more staff in the outposted offices of DVA, not fewer. If we want to be veteran centric then face the veteran where he or she is. This proposal could work well with a professionalisation of advocacy services. Volunteer advocate numbers are shrinking for many reasons. Primary among them is that the cohort of veterans that took up the task is aging and is less inclined to jump through the new certification hoops. Younger veterans have families and need an income. We should not be dependant on TPI veterans, who are not permitted to work for more than eight hours a week, being the mainstay of the advocacy force. The emerging emphasis on wellbeing could be handled by professionally trained, qualified and paid advocates working independent of, but with, DVA to better understand the whole-of-veteran concerns, including his or her family. Individuals specialising in transition would be very powerful. But they need to work hand in glove with DVA, as a concierge service in the interests of the veteran and family, and not be lawyers (as per the Canadian bureau) but be veterans first.