

*Tabled 3/6/14
FADT Committee
by Senator Ronaldson
Minister for
Veterans' Affairs*

**Opening Statement – Budget Estimates
Tuesday, 3 June 2014, Main Committee Room**

Tackling the mental health challenges facing veterans and their families is a key pillar of the Government's plan for veterans' affairs.

These are not just words. As Minister, I take this commitment very seriously and, over the last nine months, have set about to ensure that this Government delivers improvements for mental health services to veterans and their families.

This Government is determined not to repeat the mistakes made in the past. This means we need to keep up our efforts to reduce stigma around mental illness and we also need a collaborative effort.

This issue is attracting attention in the media and across the community. As a society we have an obligation to care for those who serve their nation at their nation's request.

But commentary is sometimes misleading, and this may mean young men and women with mental health concerns are discouraged from taking action when they need to.

The discussion our nation has should be conducted respectfully.

My priority is to ensure that we have in place the mental health services and supports that are needed. I wholeheartedly believe that early intervention is key. The quicker a veteran can access their healthcare and entitlements, the better their chance of leading a productive and fulfilling life.

We have a comprehensive service system that stands ready to provide effective treatment. But we need to continue reaching out to the contemporary cohort and to vulnerable groups, continue to refresh our service delivery platforms to provide

effective, evidence-based treatment, and ensure greater access to mental health services for those in need.

Defence and DVA are working together to improve transition and aim for as seamless a process as possible. More work is required, but it is happening.

Our emphasis as a Government, Department and society should always be on encouraging our veterans to have rewarding post-service lives. In this context rehabilitation should be the key focus of all we do with the payment of any pension being only one part of the overall support we provide to help facilitate veterans' return to the workforce. The government will always be there to provide support – financial and otherwise – when a veteran needs it.

The Government's Budget delivers additional funding for veterans' advocacy, welfare and pension support under the Building Excellence in Support and Training (BEST) programme. This funding – supporting a programme which I consider to be the glue that holds the veteran community together – is essential to provide independent support, advice and information to veterans and their families when making claims for compensation to the Department of Veterans' Affairs.

Engaging with contemporary veterans

We know that young men and women are technology savvy , sourcing information on-line, often using mobile devices. They are digitally connected and share their experiences via social media networks. Contemporary veterans share the strong bonds of military experience with veterans of the past, but contemporary veterans have also joined and served the military in different social and economic circumstances.

This is why my Department is ramping up its on-line and social media presence. Recently, a Facebook advertising campaign was launched to help promote the mental health support that is available to contemporary veterans. The first three Facebook

ads launched in May and have received more than 1.9 million views since the campaign commenced. They have generated over 300 comments, been shared almost 1,300 times and increased followers on the DVAAus Facebook page by more than 300 per cent - from 2,500 to 8,300 in less than one month.

On 27 May, I announced a new mobile version of the *At Ease* web portal to give smart phone users easier access to mental health information and support . More apps and on-line products are on the way, including an app with information about suicide prevention and an e-companion to the Mental Health Advice Book for doctors.

I am also continuously looking at ways to modernise the online presence of the Department, increasing pathways for younger veterans to access mental health support when they need it.

These planned releases will add to the wealth of on-line tools and products now available on the *At Ease* web portal, such as the PTSD coach app which helps manage symptoms of PTSD, the Right Mix app which lets the user track drinking and spending on alcohol and the impact it is having on wellbeing and fitness, and YouTube videos of real veterans talking about their mental health recovery.

On-line tools will never replace face to face services. But they can be used as a way to improve mental health literacy, assist with self management and provide contact information and referral pathways for those in need. Our challenge is to ensure that information which is available is accurate, reliable and reputable as well as easy to access, informative and appealing.

Vulnerable groups

Our effort needs to focus on vulnerable groups who may have high level and complex needs, they might be hard to reach, or they might experience barriers to effective treatment.

Suicide prevention is a key focus. There has been much media and public comment about suicide in the ex-service community. Regrettably, much of this has been inaccurate.

Let me stress - any suicide is tragic. We know that suicide is the leading cause of death in the Australian community for men under 44 years and women under 34 years. Serving and ex-serving personnel are not immune from this.

Rightly, my Department's focus is on programmes to help prevent suicide, build resilience and provide information on how and where to seek help in a timely manner.

Recent suggestions that my Department is 'covering up' rates of suicide in the veteran community are simply not true.

Any member of the veteran community concerned about mental health should call the Veterans and Veterans Families Counselling Service (VVCS) to discuss support options. Free and confidential, VVCS provided support to over 20,000 members of the veteran community in 2012-13, over half of whom were family members.

VVCS offers individual, couple and family counselling, after-hours crisis telephone support and group programs. VVCS can help address concerns such as relationship and family issues, anxiety, depression, anger, sleep difficulties, PTSD, and misuse of alcohol or other substances. VVCS also runs Operation Life workshops nationally - these are free suicide prevention workshops for people concerned about family, friends, or mates in the veteran community.

Effective treatment for alcohol and substance use disorders is another focus. We are keen to address the risk of clients "re-cycling" through programs, effectively "drying out" while being treated and then relapsing afterwards. My Department has recently appointed a drug and alcohol treatment services adviser, who will add to the Department's capacity and experience in this area.

Times Taken To Process

I can report to the Senate that the Department has made progress on the Times Taken To Process compensation claims. As you would be aware, 12 months ago when I was the shadow minister I identified this issue as one requiring urgent action. It was the first concern I raised with the Secretary following my swearing in.

At Senate Estimates in February the Secretary gave an update about process changes the Department has put in place to improve these times. I am pleased to say that, over the last nine months, there has been an improvement in claims processing times under all three Acts. Whilst the improvements are small and claims processing times are still too high, they are an improvement on the past and I want to thank those staff in DVA who have been working hard to improve these times.

I want to acknowledge the link between the swift resolution of a claim, or access to treatment, and the associated benefits for a veteran and their family. My focus on driving down claims processing times is driven by the need to give veterans and their families certainty about what they are entitled to receive from the Australian Government.

I want to remind veterans at risk that they can seek treatment for mental health conditions without the need to lodge a compensation claim with DVA. My Department will pay for mental health treatment for eligible veterans and peacetime members without the need to establish that their mental health condition is related to service. Currently, these arrangements cover diagnosed post traumatic stress disorder, anxiety, and depression. From 1 July 2014, we will also pay for treatment for diagnosed alcohol and substance use disorders, and an increased number of individuals with peacetime service will also become eligible.

Current and former members of the ADF with the following types of service will be eligible for treatment under these arrangements:

- service in World War II;
- operational service; including Korea, Vietnam and contemporary conflicts
- warlike and non-warlike service
- peacekeeping service
- hazardous service
- British Nuclear Test Defence Service
- 3 years' continuous full-time peacetime service from December 1972; and
- and those with less than 3 years' continuous full time service, but who discharged on the grounds of invalidity or physical or mental incapacity to perform duties.

In addition to accessing mental health care through this pathway, The VVCS is another, specialised service where veterans can seek help which is free and confidential.

Evidence-based treatment & research

The evidence shows that we can effectively treat mental health conditions especially where intervention occurs early, with many able to make a full recovery from their condition and live fulfilling and meaningful lives. We need to keep working with mental health providers – to make sure that veterans can access evidence-based treatment which will help them towards recovery.

Last month, I launched a free, innovative online training program for health practitioners who provide treatment to veterans with mental health disorders. *The Online Case Formulation Training Program* will help practitioners to make better sense of the often complex needs of veterans, and to develop a "road map" for effective treatment. This resource has been developed through partnership with the Australian Centre

for Posttraumatic Mental Health, and it is available through the *At Ease* web portal.

A range of other resources are available, including assessment and outcome measurement tools, treatments options, patient resources and the latest research in military mental health.

I am determined that we keep up the effort on effective research on veteran mental health, which will help continue our improved understanding of mental health and to effectively treat mental health disorders. Later this month, I expect to make an announcement about a significant new investment in veteran mental health research.

Greater access to services

We have a range of new measures starting in July, subject to the passage of legislation, which will mean greater access to mental health services. This process was started by the previous Government, and on this I am happy to show collaborative and bipartisan support.

This includes:

- Greater access to arrangements under which DVA will pay for mental health treatment, without the need to establish that a mental health condition is related to service.
- Greater access to the Veterans and Veterans Families Counselling Service (VVCS), with new personnel and family groups eligible.
- A new physical and mental health post-discharge assessment to be conducted by GPs, to be funded under Medicare.

I note that this legislation passed the House of Representatives last Thursday and I trust Senate colleagues will give the Bill a similarly speedy passage later this month.

Existing system of care

The initiatives I have outlined are on top of a comprehensive service system that stands ready to meet the mental health needs of the veteran and ex-service community.

In the 2014-15 Budget, my Department will spend more than \$5.4 billion on health care treatment for veterans and dependents, as well as \$6.7 billion on compensation and income support assistance. Our \$12.3 billion appropriation is the same as was forecast last year.

Our repatriation system is world-leading and this Government is determined to continue strengthening it to ensure it stays that way.

The Government spends around \$166 million a year on meeting these mental health needs. This includes funding for GP services, psychologist and social work services, specialist psychiatric services, pharmaceuticals, posttraumatic stress disorder programs, and in patient and out-patient hospital treatment. This also includes services provided through the VVCS. The Government's funding for this treatment is demand driven, and it is not capped - if treatment is needed, it is funded.

I would like to make it clear that the Government's funding commitment to the Anzac Centenary Program is not at the expense of expenditure on mental health services. Any allegations that state the contrary are misguided and completely incorrect.

Over the next four years, DVA will spend more than four times the amount on mental health than it will on commemorating the Anzac Centenary. That is \$145 million on the Centenary programme for 2014-2018, compared with the more than an estimated \$664 million to be spent on mental health services over this same period. I again note that this amount is uncapped.

As many of you would know, earlier this year I announced the establishment of a new Prime Ministerial Advisory Council with a focus on veteran mental health. The PMAC exemplifies this Government's commitment to this important issue and to valuable consultation.

I note in passing the upcoming 70th anniversary of D-Day, where over 3,000 Australians were involved – including 2,500 air force personnel who provided air support for the Allied landings and 18 were killed in action.

I note that seven of the D-Day veterans are returning to Normandy for the commemorations. These seven veterans are attending as guests of my Department and will be joined by the Prime Minister.

Closing comment

As I said in my opening, this Government is determined not to repeat the mistakes made in the past. Tackling the mental health challenges facing veterans and their families is a key pillar of this Government's plan for veterans' affairs.

Thank you.