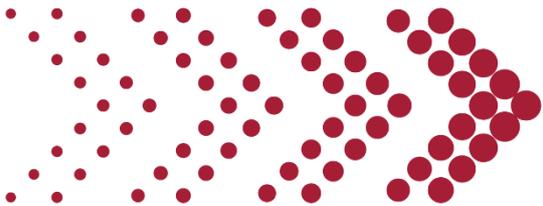


**Respectful Submission to  
the Consultation to Inform  
the Terms of Reference for  
the Royal Commission into  
Defence & Veteran Suicide**

**SOLDIER**  
 **ON**



21 May 2021

Dear Minister,

Soldier On supports the Royal Commission into Defence and Veteran Suicide. This submission provides Soldier On's contribution to the development of the Terms of Reference for the Royal Commission.

Soldier On seeks a broad and inclusive Terms of Reference to allow a full examination of the myriad of issues that contribute to defence and veteran suicide and the actions and strategies necessary to prevent defence and veteran suicide.

## BACKGROUND

Soldier On is Australia's only national, fully integrated and holistic support service provider for veterans and their families. Established in 2012 as a not for profit, we support serving and former serving members of the Australian Defence Force and their family members. Soldier On delivers an integrated model of services in all states and territories. At present we support with over 5,000 veterans and their family members, and over 11,000 participants have engaged in Soldier On Activities in the past 12 months. We hear of their concerns on a daily basis.

Our services aim to help individuals build resilience and create, and expand meaningful connections with family, community, and employers.

All Soldier On programs are informed by the principles of Trauma Informed Care including safety, trustworthiness, choice, collaboration and empowerment.

Soldier On provides support for serving and ex-serving veterans and their families to enable them to thrive.

We currently provide a connected and holistic **HELP** model of support which includes:

### **Health and Wellbeing**

Including evidence-based, trauma-informed psychology services and ongoing support and mentorship opportunities, as well as health programs incorporating fitness, yoga, nutrition and physical wellbeing programs;



## **Employment and Transition Programs**

Linking a network of employment and transition coaches across Australia to assist veterans and their families gain meaningful employment following service, together with over 200 corporate and government partners providing employment opportunities for veterans;

## **Learning through Education and Vocation Training Programs**

Equipping veterans and their families with the necessary skills and qualifications to be more broadly employable, with the support of over 40 educational organisations who have partnered with us to create opportunities; and

## **Participation in our Social Connection Activity Programs**

Encouraging an active lifestyle and to promote social connectivity with family, friends, other peers and the community at large.

Soldier On supports serving and ex-serving personnel and their families as they transition to successful futures. These participants express pressures and complications across both their serving, transition and broader life experiences that contribute to mental ill health and a decreased sense of wellbeing.

## **BROAD SCOPE REQUIRED**

A broad and wide-ranging Terms of Reference is necessary to identify the barriers veterans and their families encounter in their pathway to wellbeing and also the obstacles to accessing services necessary to provide resources and assistance. The Terms of Reference must be broad enough to encompass the myriad of attributes affecting the ongoing mental health and wellbeing of our serving and ex-serving personnel and their families. Soldier On recommends the Terms of Reference must be framed to ensure the deliberations of the Royal Commission cover the following factors:

## **PRE-ENROLMENT FACTORS**

No person comes to military service as a blank canvas. Each applicant brings past experiences, physical, psychological, and emotional aspects of themselves which contribute to their suitability for military service and the rigours that it will bring. An examination of the selection, recruitment and training processes is recommended.

## EXPERIENCE DURING SERVICE

Serving and ex-serving defence personnel face unique experiences in their careers, whether or not they undertake deployment. These experiences may result in additional support requirements in terms of both possible trauma responses and development of skills that will allow wellbeing outside of the military environment.

## TRANSITION POST SERVICE

Recent research identifies that many of the risks for defence members occur after they transition out of the military. In the first 12 months after transitioning, at least 50% of members will struggle with mental health, socialising, building relationships, adjusting to civilian life and difficulties in gaining employment. These stresses unmanaged can lead to severe mental health problems including suicide. The statistics show that it is not dependent on whether a military member has seen operational service in combat as to whether they struggle with their mental health during and following transition, and those who experience non-voluntary transition from the Australian Defence Force (ADF) are particularly vulnerable.

In the experience of our participants, they have highlighted the following areas as some of those that contribute to “transition distress”. They should be considered by the Royal Commission.

### **Impact of Department of Veterans Affairs (DVA)**

Many Soldier On participants have reported their concerns around the Department of Veterans Affairs (DVA) not performing in a manner that has provided the assistance they have needed in appropriate timeframes, and that the assistance is often unsuitable for their needs. Based on previous experiences, participants frequently express the need to utilise external service providers, in the Ex-Service Organisation (ESO) community and private spheres.

It is recommended that the implementations of the Shepherd Productivity report are examined by the Royal Commission.

Difficulties have been reported from veterans regarding ways to re-engage with DVA if contact has not been initiated upon transition, or when concerns arise sometime after leaving service. Veterans need to be able to stay connected, engaged, contactable and supported upon discharge.



It is recommended that the roles, structure, functions, processes, culture, and resourcing of the Department of Veterans Affairs be examined by the Royal Commission.

## **Social Isolation**

A significant factor associated with mental health issues and increased risk of suicide in veterans is social isolation. Those that experience a higher degree of social connectedness report lower levels of mental health problems such as depression and anxiety but more importantly social connectedness has been shown to have a significant positive impact on emotions. This needs to be considered as part of the Royal Commission.

## **Employment**

In a survey undertaken of the veterans who have sought support from Soldier On and interacted with our programs, almost all highlighted their need for support during their (and their family members) employment transitions. This is inclusive of support for partners and family during service, relocations and following discharge from service. Employment stress may contribute to a sense of loss of purpose, financial pressure and is a contributing factor in relationship breakdown and mental distress.

Soldier On recommends the employment in the military is examined broadly, and also includes the expectation may veterans express, but many do not achieve, that of life-long service/employment.

The lack of personal recognition of workplace skills and achievements also needs to be investigated as a contributing factor in mental well-being when discussing employment. A process for national recognition/accreditation for transferrable skills developed in the military into the civilian employment environment needs also to be addressed.

## **Financial Wellbeing**

Other aspects of financial wellbeing can also contribute to concerns about what the future may look like for veterans and their families.

Specifically, an opportunity for the role of Commonwealth Superannuation Corporation in contributing to financial distress should be considered.



## NEEDS ACROSS ALL OF LIFE

### (Pre, Enrolment, Training, Active and Post-Service)

#### Support Services

A significant number of veterans express a distrust of DVA, or a dissatisfaction in their interactions with the department. Many prefer to deal with more accessible tailored and local organisation. The Royal Commission should examine the role of non-government in supporting veteran wellbeing during and post service.

The Terms of Reference should examine whether these organisations are being adequately resourced to fulfill their substantive role supporting veterans who will not actively seek assistance from DVA.

The Royal Commission should provide the opportunity to explore:

- How veterans and their families are best supported by these organizations.
- Whether funding to these services is adequate and consistent to meet the need.
- Which organisations have the geographic distribution and capacity resourcing to best deliver services and support.
- Achievement in consistency of results.
- Trust in the veteran community
- The best way to harness, co-ordinate and fund ESO's and community organisations to best serve the veteran community.
- Collaborative possibilities.



## **Sense of Purpose**

Serving and ex-serving members of defence, as all human beings, find value in purpose, and seek respect, participation, meaningful employment, sustaining relationships and a sense of wellbeing and safety. A lack of purpose can be seen as a key symptom of mental ill health.

## **Family and Personal Relationships**

Service has been highlighted as a key additional stressor on partnerships and other family relationships, contributing to increased rates of marriage breakdown and stress/anxiety and depression in both the veteran and the partners/family, as well as other social relationships.

It is recommended the role of veteran partner/family as “carer” must be included in the Terms of Reference as they often express their role in “keeping family members alive” and may acknowledge the feelings of frustration and hopelessness. The inclusion of discussion around the mental health and wellbeing of family members of those serving and suicidal ideation by related family members is also long overdue.

## **Influences and Contributing Risk Factors such as of Gambling and Substance Abuse**

Soldier On recommends the role of mal-adaptive coping mechanisms and risk factors such as gambling and substance abuse are thoroughly investigated in relation to their impact on veteran mental health.

## **Access and Mobility Between Military and Civilian Access to Mental Health Services**

The inability to access the right care both in a crisis and the ongoing care and treatment can leave veterans feeling unsupported and hopeless.

No division should exist for access to civilian mental health funding for those in or transitioned from military. Many men and women who have transitioned from the military may no longer want to access military based support for mental health issues for a variety of reasons often associated with trauma, mobility between the two systems is essential. Determining the best way of support should be examined.



Programs are also required specifically aimed at the needs of trauma as the needs of veterans may be very specific and additional services other than generalist civilian psychological support.

## **Capturing Information**

Examination of the processes to capture appropriate information to inform mental wellbeing are required, incorporating the flow of this information through and post service, and in and between other invested departments and organisations including Health and ESO's etc.

## **Structure and Organisation**

Examination of the structure and organisation of the Defence Force and their processes that may contribute to suicide risk factors.

## **OTHER ASPECTS OF RELEVANCE**

### **Family Inclusive Approach**

The National Mental Health Commission's "National Framework for Recovery-Oriented Mental Health Services: Policy and Theory" highlights the essential nature of the involvement and opinion of carers, partners, and family of those with mental illness. The Australian Government's mental health reform announcement in November 2015, aligns with these strategic directions. This approach has been adopted by the Department of Health and incorporated into all aspects of mental health support to achieve the best outcomes for the individual and the community.

"In 2013, the Government committed to the adoption of a Recovery Framework for service delivery where all staff, consumers and carers have the opportunity to participate as equal partners in the delivery of care for people with a mental illness. The Government's reform plan recognises the need to involve and support carers."

Carers, partners and families MUST all be given a supported voice in these proceedings. Soldier on would recommend the terms of reference to directly include and investigate factors affecting and connecting the family and their veterans.

Inclusion in the language utilised in the Terms of Reference to include understanding the importance of the family/partner experience of service and their relationship and supporting the voice of partners and families on this issue is essential.

The Terms of Reference must also be broad enough to examine to cost of family as carers – the mental ill health affects not only the veteran but those that care, support and live with them. The cost of caring can be enormous, and carers are at particular risk for developing mental health disorders themselves.

### **Trauma Informed Approach**

A Trauma Informed Approach to all proceedings must occur and be incorporated when undertaking all communications and development of the terms and guidelines, as the wellbeing of veterans and their families must be the paramount in this undertaking.

### **Review of Other Studies**

There needs to be coordination of other suicide studies completed and being undertaken to determine other societal risks and emerging factors to provide a comprehensive review.

Other examinations of studies and commissioned reviews of areas of association such as the Shepherd Productivity Review should be accessed.

### **Conflict of Interest**

To ensure faith in the system, The Royal Commission must operate in a transparent manner that acknowledges any conflicts of interest that may arise.

## **FURTHER CLARITY REGARDING RECOMMENDATIONS**

### **Best Practice**

The Royal Commission must be given scope to ascertain how to assess and determine the best, most proactive models of practice, support and resourcing. This may need to incorporate the performance of Allied Nations supporting their Veterans beyond those mentioned in the themes.

## Restorative Engagement

Where cases that may arise where the Commission is satisfied that abuse is reasonably likely to have occurred within the defence force, an opportunity for restorative engagement should be offered to complainants/families. This may look like a “restorative engagement conference” (or similar approach) as outlined in Ombudsman Regulations 2017 where “restorative engagement conference” means a process facilitated by the Defence Force Ombudsman or another person in which a complainant engages with a member of Defence to have their complaint of abuse acknowledged.

## Oversight and Monitoring for Implementation of Recommendations

As important as the Terms of Reference, is the need to formalise an enduring implementation plan for the recommendations made by the Royal Commission that is monitored and assessed. This implementation phase should be assessed and monitored by a Ministerially appointed panel with the authority to gather information from the most senior officials of DVA. The model to be used is the implementation plan for the First Principles Review of the Department of Defence.



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