

# Female Veterans & Veterans' Families

POLICY FORUM



Australian Government  
Department of Veterans' Affairs

transforming  
**DVA**





## CONTENTS

EXECUTIVE SUMMARY	3
OBJECTIVES	4
THIS REPORT	4
ABOUT THE PARTICIPANTS	5
STRUCTURE OF THE FORUM	7
PRESENTATIONS	7
MINISTER'S ADDRESS	8
ASSISTANT MINISTER'S ADDRESS	8
SECRETARY'S ADDRESS	10
POLICY CHALLENGES AND DEVELOPING SOLUTIONS	12
FUTURE SUPPORT NEEDS OF VETERANS	13
DRAFT VETERAN FAMILY STRATEGY	15
RESEARCH IN THE VETERAN AND FAMILY LANDSCAPE	17
FUTURE OF MENTAL HEALTH SERVICE DELIVERY	22
SERVICE AFTER SERVICE	26
PARTICIPANT-LED CONTENT	28
WILDCARD TOPICS	34
FINAL COMMENTS	36
FORUM EVALUATION	37

© Commonwealth of Australia 2022. This work is copyright. Apart from any use as permitted under the Copyright Act 1968, no part may be reproduced by any process without prior written permission from the Commonwealth. Requests and inquiries concerning reproduction and rights should be addressed to the Transform, Engage, Design Team (TED), Department of Veterans' Affairs or emailed to [engagement@dva.gov.au](mailto:engagement@dva.gov.au).

Published by the Department of Veterans' Affairs, Canberra, 2022.





## EXECUTIVE SUMMARY

The Female Veterans & Veterans' Families Policy Forum (the Forum) was established in 2016 to provide a platform for female veterans and female veteran family members to raise issues directly with the Australian Government and the Department of Veterans' Affairs (DVA), and to create new channels of communication between DVA and the veteran community. The Forum is one way the Government and DVA are listening to female veterans and veterans' families, and using their feedback to inform DVA's transformation, other business reforms and to co-design future policy and program options. DVA uses the information and insights from the Forum to inform DVA policy and programs and the wider transformation of DVA policy and services.

The 2022 Forum was the first in-person event since 2019 due to the COVID-19 and associated limitations placed upon in-person gatherings. Forum related activities were moved to virtual platforms during 2020 and 2021. These sessions were an opportunity to keep DVA connected to the community, understand how COVID-19 was impacting the Australian veteran community, and generate community feedback on new initiatives.

The Forum is a high-profile event, garnering considerable interest across the veteran community and within DVA. In 2022, 42 community members participated.

Regular consideration is given to the composition of Forum participants, to ensure the Forum remains representative of the diverse Australian veteran community and includes participants who can contribute in a fast-paced and solutions-focused collaborative design environment.

In addition to Forum participants, senior leaders from DVA and the Australian Defence Force attend the Forum to hear first-hand from female veterans and veterans' families. In 2022, this included the DVA Secretary, the Hon. Matt Keogh MP Minister for Veterans' Affairs and Defence Personnel, and the Hon. Matt Thistlethwaite MP Assistant Minister for Veterans' Affairs, Defence and the Republic, all of whom attended and addressed the Forum.

Key topics explored at the 2022 Forum included future support needs of veterans, the Veteran Family Strategy, research in the veteran and family landscape, and future mental health service delivery options.

The Forum generated a broad range of suggestions including:

- Greater consideration for female veterans' unique health issues;
- Targeted research and supports for veterans' children through all life-stages;
- Removal of discriminative practices for female veterans while serving;
- Demand-driven funding to ensure that service provision is matched to demand;
- Greater emphasis on access to services in rural and remote locations; and
- Increased opportunities and recognition of the value of 'service after service'.

Further details on the discussions and suggestions generated through this activity are included in the body of this report.

DVA has consistently received very positive feedback on the Forum, and would like to thank the 2022 participant group for the time, energy and passion they brought to this important event.

# WELCOME to the FEMALE VETERANS & VETERANS' FAMILIES POLICY FORUM

The 2022 in-person meeting of the Female Veterans & Veterans' Families Policy Forum (the Forum) was convened on 15 – 16 June in Canberra, with 42 female veterans and female veteran family members participating in the event.

The Forum leverages the lived experiences of female veterans and veterans' families to inform future Department of Veterans' Affairs (DVA) policy and service delivery options. The Forum provides a platform for the voices of these communities to be heard, and a space for networks to be fostered.

*"Together we can have an impact on change for veterans and their families."*

*"DVA have a genuine willingness to adapt and improve. Since 2019 a lot of the issues that were brought up in the Forum have been appearing everywhere, whether online, in the Census, the veteran newspaper. I've got the feeling that a lot of the topics that were brought up in the Forum were carried out."*

*"Everyone needs a sister ... We're not in the same boat, but we are in the same storm."*

Representatives of DVA policy, program and service delivery areas, as well as representatives from the Department of Defence, the Australian Institute of Family Studies, and the Royal Commission into Defence and Veteran Suicide, attended Forum sessions, to hear from female veterans and veterans' families first-hand. The feedback and ideas generated at the Forum are being used to inform new DVA projects and ongoing work.

## OBJECTIVES

For 2022, the Forum objectives were to:

- Renew the group and foster an engaged network of female veterans and veterans' families.
- Leverage the group's knowledge and lived experience to:
  - Inform specific policy and service delivery options;
  - Explore options to better support health and wellbeing in the future;
  - Refine how veterans and their families should be considered, included and supported in future policy and service delivery settings; and
  - Explore areas of known knowledge gaps, through which research can be an effective policy tool to support veterans and their families.
- Develop a shared understanding of the veteran and family support landscape through DVA and participant-led sessions.

## THIS REPORT

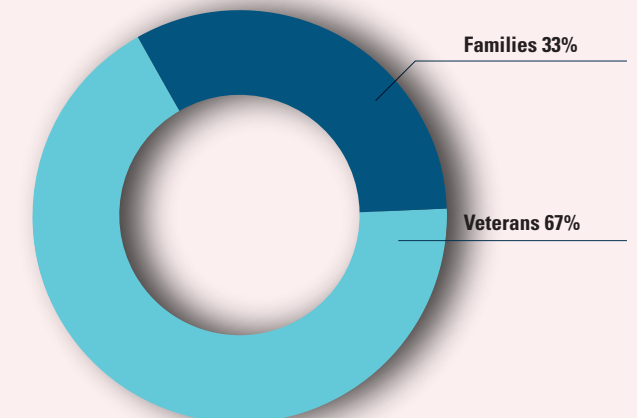
This report provides a high-level summary of the feedback and ideas raised at the Forum. Quotes included in the report have been de-identified and are verbatim.

Relevant DVA business areas have been provided with additional detail to inform current and proposed projects.

## ABOUT THE PARTICIPANTS

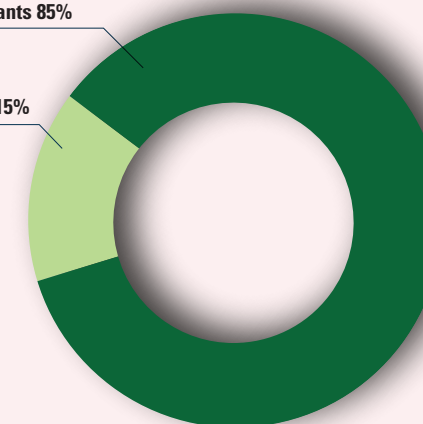
In 2022, 42 female veterans and female veterans' family members attended the Forum. These women had a diverse range of lived experiences, with one thing in common: an understanding of how Defence service can affect veterans and veteran families.

Of the participants, 67% were veterans or current serving Australian Defence Force (ADF) personnel, while 33% were veteran family members.



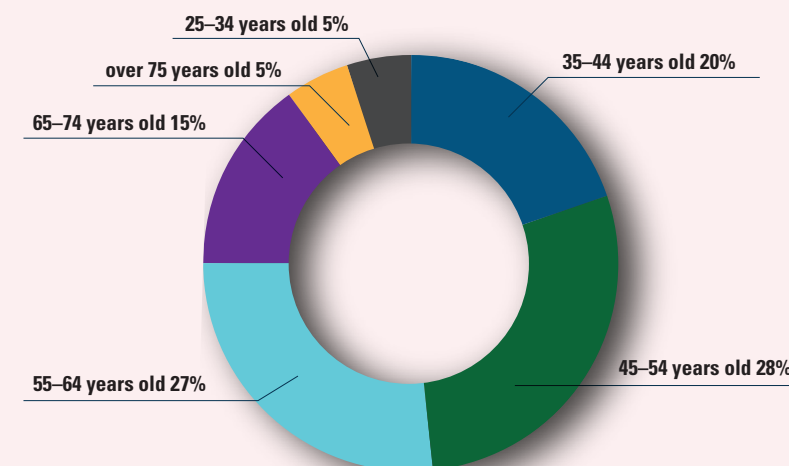
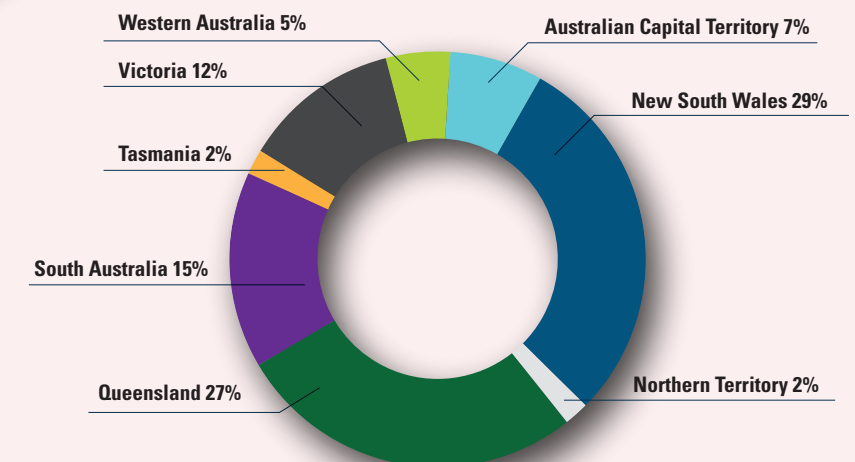
Returning Participants 85%

New Participants 15%



Of the participants, 85% had attended a previous in-person Forum (most recently in 2019), while the remaining 15% had either engaged in virtual Forum activities only, or were entirely new to the Forum setting.

Participants were drawn from around Australia, with representatives from every state and territory. 51% of participants identified as being from metropolitan areas, while 49% reported they were from regional or remote parts of Australia.



The Forum also captured diverse views by including participants from a range of ages. As shown here, a majority of participants were between 45 and 64 of age, while 25% were under the age of 45.





## STRUCTURE OF THE FORUM

The Forum is designed to be highly participative and solutions focused, with participants engaging in a range of collaborative activities and discussion topics. For some activities, all participants worked as one group, while for other activities female veterans and veterans' families worked separately to focus on their unique perspectives. The 2022 Forum was comprised of the following types of activities:

1. Presentations;
2. Policy Challenges and Developing Solutions; and
3. Participant-Led Content.

## PRESENTATIONS

In acknowledgement of the significance of the Forum as a key platform to provide direct community feedback to the Australian Government, senior Government representatives attended the Forum to address the participants and engage in discussions on some of the issues that matter most to the community.



## MINISTER'S ADDRESS

**The Hon. Matt Keogh MP**

**Minister for Veterans Affairs' and Defence Personnel**

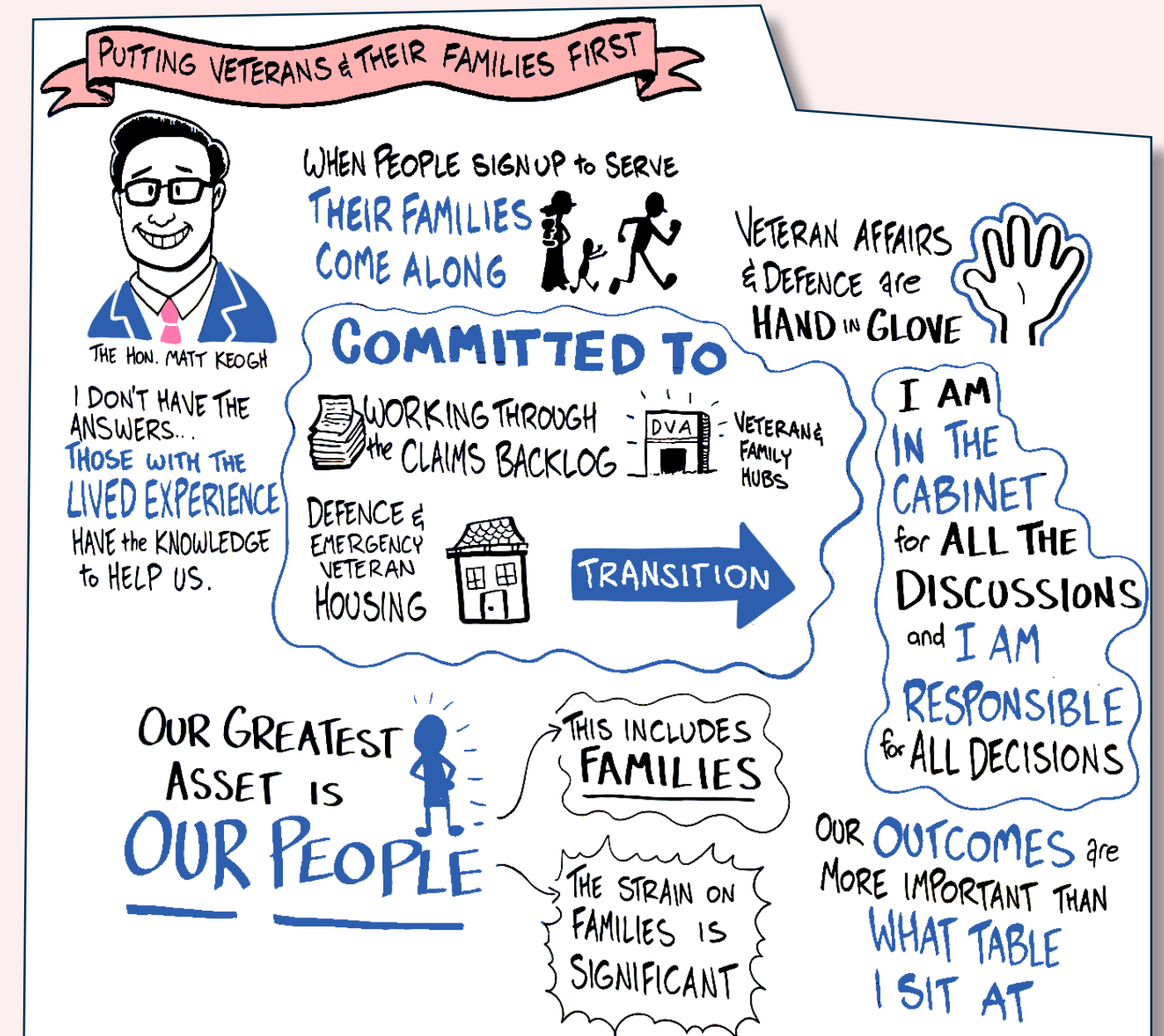
Minister Keogh took the opportunity to officially open and address the Forum. He outlined his personal reflections on his new role as Minister for Veterans' Affairs and Defence Personnel, the priorities of the Australian Government following the 2022 Federal Election, and took questions from the Forum participants. Some of the key messages from Minister Keogh were:

The value of listening to the community – “I don't profess to come into this with all the answers because I know that through Forums like this, the individuals that live the experience, they actually have most of the answers, because you've gone through it and you can see where most of the problems are. So let me know what those [problems] are, and if you can see solutions or things that can be changed for the better ... please let me know.”

Acknowledging the service and sacrifice of veteran families – “When people sign-up to serve, their families come along for the journey with them, whether they like it or not, and everything that entails. Our veterans' families are, very often, if not almost always, the first responder to that veteran in whatever time of crisis they might find themselves, and in managing their process of re-integration into civilian life.”

Commitment to addressing the DVA claims backlog – “As the title suggests, Veterans' Affairs and Defence Personnel are really 'hand-in-glove' portfolios because, if you like, Veterans' Affairs picks up what we don't get right in Defence Personnel and the more we can do well there with our service members and their families, the easier things should be at the other end when we come to supporting our veterans and their families. I absolutely want to get [the claims backlog] addressed as quickly as possible.”

Veteran and Family Hubs – “The other thing is our commitment to 10 Veterans and Families Hubs, getting those expanded and implemented around the country. We've seen good examples of those. I was at Veterans' Central in Perth just last weekend as a great example. We've got the Oasis as well in Townsville. There are others. We want to see more of these rolled out across the country to support our veterans and their families.”



## ASSISTANT MINISTER'S ADDRESS

**The Hon. Matt Thistlethwaite MP**

**Assistant Minister for Veterans' Affairs, Defence and the Republic**

Assistant Minister Thistlethwaite joined Minister Keogh to open the Forum, and re-iterated the importance of supporting veterans and their families for the sacrifices they have made for the nation. Some of Assistant Minister Thistlethwaite's key messages included:

“The work that you do is vitally important to ensuring we get the message about how Government can assist in making life better for veterans and their families.”

“Minister Keogh is the lead Minister and I'll be assisting him, because we know the importance of the work that you're doing and the magnitude of the work that's coming up in Veterans' Affairs.”

“I'm in regular touch with people working in the barracks but also the Defence families that live in and around that community. And when you are a Member of Parliament, you gain an appreciation for the important work that the ADF personnel do and how that work is related to the effect it has on family.”

“It's also vitally important, that we, as Members of Parliament, understand that there is an impact on that family, that life is tough for that family and we must provide as much support as possible to ensure that those Defence Force personnel can continue to do that important work on behalf of our nation. And that's why Forums like the one that you're about to embark on over the next couple of days are so important. So I thank you for the work that you're doing ... my office is certainly open to your suggestions.”



## SECRETARY'S ADDRESS

**Ms Liz Cosson AM CSC**  
**DVA Secretary**

The Secretary of the Department of Veterans' Affairs, Liz Cosson AM CSC, addressed the participants to kick-off Day Two of the Forum. Secretary Cosson spoke candidly about the successes, opportunities and challenges facing DVA and the broader Australian veteran support system. The Secretary's Address covered:

- The significance of continuing to serve the community after leaving military service.
- The importance of connecting with the community through the Forum.
- Acknowledging the important role played by veteran families.
- The role DVA as part of the broader veteran support system.
- Resourcing to address backlogs at DVA.
- Veteran and Family Hubs.
- Transition.
- Mental Health.
- The Royal Commission into Defence and Veteran Suicide.

"I want to thank each and every one of you for your [to the Forum] ... Whatever you are contributing through the sessions is helping what's next and leaving the legacy for those who come after us as veterans and families."

"Family members are first responders. I look at my family and I know when something is not quite right, or I know where they may just need a bit of extra support. It's important that we recognise and acknowledge, not only those of us who served but also those who have families who are first responders and that's one thing we've focused a lot on in recent years."

"DVA is a bureaucracy and some people aren't going to want to come to our Department. I want them to be able to connect in a safe place with mates, where they know someone cares and can connect them with the support they might need. We need to invest in that voice out there in the community."

"Transition from service. That to me is the most critical part ... We need to connect more in service and in that transition piece. And we have done a lot, if you look at the Joint Transition Authority that is stepping up, the Early Engagement Model where we have now engaged nearly 35,000 veterans when they enlist, welcomed them to DVA. But they are not getting the awareness, nor are their families, in service."





# POLICY CHALLENGES AND DEVELOPING SOLUTIONS

Central to the purpose of the Forum is the opportunity for community members to work collaboratively with each other and with DVA to explore policy areas of significance and develop community-driven solutions. This work is prioritised by DVA in acknowledgement that those with lived experiences of Defence, veteran and veteran family life are the experts in these experiences and can provide insights no one else can.

At the 2022 Forum, participants were asked to explore five policy areas with current significance for DVA:

1. Future Support Needs of Veterans (female veterans cohort);
2. The draft Veteran Family Strategy (veterans' families cohort);
3. Research in the Veteran and Family Landscape (both cohorts);
4. The Future of Mental Health Service Delivery (both cohorts); and
5. Service after Service (both cohorts).

Throughout the two days of the Forum, participants worked on these topics with support from DVA senior leaders. The Forum culminated in a Feedback Panel, where participants reported their key findings on these topics to senior DVA and Defence leaders.

The following section of this report presents the prominent feedback generated through this process of collaborative design, including key themes, supporting quotes, and relevant content presented to the Feedback Panel.

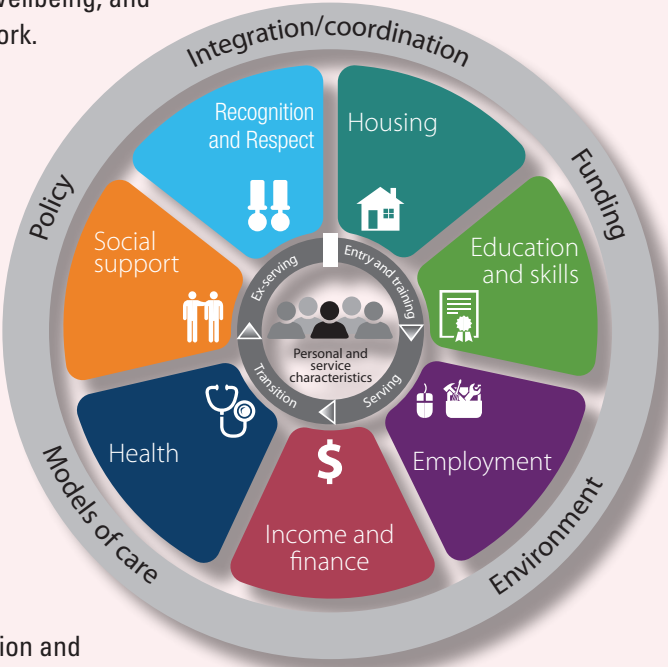


# FUTURE SUPPORT NEEDS OF VETERANS

This session asked the female veterans cohort of participants to explore issues around their support needs at different life stages and in different wellbeing domains. This session utilised two DVA frameworks (shown below); the Domains of Wellbeing, and the Serving Well, Living Well, Ageing Well framework.

## Suggestions from Female Veterans:

In reporting to the Feedback Panel, the female veterans highlighted the following key points about how they could be better supported in the future, or how younger service personnel could be supported through and beyond their Defence career.



- Improved female specific health services and representation:
  - Health – e.g. gynaecology, pelvic floor, menopause and perimenopause;
  - Education and training – access to education and recognition of prior qualifications;
  - Safe spaces – female specific health supports, mental health support, emergency housing; and
  - More representation by women as decision makers, policy writers and service providers.





*"I found out you can't choose your own gynaecologist now. You go into the public hospitals and that choice is removed ... If you don't want a gynaecologist, picking a midwife or something like that. It's just having more choice ... Yes, we can go into the greater community, but when you join the military, you join that family and then when you have babies, you have to then go and be a part of that family, which is all outside of the military. I think it's really important to bring back the idea that by joining Defence you are always included."*

*"Females are told not to mention PTSD in their medicals as it is only for males."*

*"I have guys that can't get rentals because incapacity payments are not accepted."*

- Mandatory transition information at both pre and post-service milestones:
  - 5, 3, and 1 year/s prior to discharge or otherwise as required;
  - Follow-up seminars for those who have recently separated; and
  - Increased representation from service providers at transition seminars (e.g. Medicare, Centrelink).

*"I had gone to three [transition seminars] before I left...it shouldn't be the last thing you do, it should be the first thing. If you don't do this early, you are going to come across blockers."*

*"Being discharged because of mental health, the transition presentation was overwhelming, I didn't have the mindset to ask questions."*

*"We have very different needs to those of our male counterparts. We sit very much in our masculine energy while we serve, and we don't really transition that back to that feminine energy when we leave."*

*"Transition is so quick. How you transition will affect the rest of your life."*

- Improved entitlements and access to services for female veterans:
  - Increased health and social supports under the Veterans' Entitlements Act (1986);
  - Review caps on medical services;
  - Increase mentoring opportunities for female service personnel and veterans;
  - Access to subsidised or free financial management services; and
  - An increased focus needs to be placed on the training of female advocates to support female veterans.

*"Veterans don't understand the differences between each of them [Acts], how are they going to explain the legislation to the doctor?"*

*"Mentorship needs to be present at every stage of a veteran's life, and change as they progress through their career, particularly someone transitioning out of service."*

*"At an RSL I mentioned I'd like to see an advocate. I didn't want compensation, I wanted better wellbeing, but they didn't know how to help me."*

## DRAFT VETERAN FAMILY STRATEGY

This session asked the veterans' families cohort of participants to discuss the draft DVA Veteran Family Strategy. Central to this discussion was exploring the Strategy's proposed 'Focus Areas', which were grouped under the four themes of 'Know', 'Connect', 'Support' and 'Respect'.

### Suggestions from Veterans' Families:

In reporting to the Feedback Panel, the veterans' families highlighted the following key points about how the draft Veteran Family Strategy could best support Defence and veteran families.

- A strategic inclusion of families:
  - Development of a Children's Strategy focusing on the impacts of service on the development of children; and
  - Development of an Education Strategy. Focus on educating school staff and other agencies that support children through schools. Include tick box on enrolment to indicate 'veteran family'.

*"Half of the problem I had in the past is that families' perspectives are not sought out. We are not told. We are an afterthought."*

*"This Strategy is only for veterans and families after service."*

*"We understand this work on a Family Strategy at the moment, but it does need to be recognised that children have a completely unique set of needs because the impact starts so early in life. So the impact of service is impacting their ability to develop, to reach milestones and to thrive. Are they going to be able to do what they need to do? So we'd like a Children's Strategy as well."*

- Acknowledgement of the diversity of families and care-givers, and the whole-of-life impacts of being a veteran family, through:
  - ADF Family Health Card to becoming an AVF (Australian Veteran Family) Health Card;
  - Being the focus of research highlighting family demographics, health trends, social issues; and
  - Proactive engagement with families from Defence, DVA and other agencies.

*"There are two different lots of families – as a parent, I had no income. My husband lost their job and I was a full time care-giver. My job was picking [our son] up out of the gutter. We sold our house to survive. Partners and spouses have some sort of recognition, but parents have nothing. The care-giver role is huge, but not recognised."*

*"Triage and Connect will call a family and engage with the family. There's no legislation but they do it. DVA has gone beyond their remit to support."*

*"I'm in a boat with my children beside me, and the veteran in the front with one oar going in circles."*



Know

A data-driven approach to ‘knowing’ veterans and families, needs to be:

- Widely communicated through community organisations;
- Gathered through multiple sources, including secondary data; and
- Represent older and rural/remote communities who may be less digitally connected.

“Actively call on the families and seek out their opinions. Checking-in after the deployment.”

Connect

For DVA to be well connected to families, communication from DVA should occur:

- Early – Prior to a veteran discharging.
- Sensitively – Acknowledge that language needs to be tailored and contact from DVA can be triggering.
- Accurately – Are the staff making contact able to access all relevant information prior to initiating contact?
- Through the best channel – Understand a family’s preferred method of communication.

“What are the families’ views on what is happening? There could be high-level management of cases to catch people upstream before they jump in the river. Sit down and have a chat about how they are going. DVA doesn’t have GP or Psych contacts to do this. VSOs need to proactive engage with families.”

Support

To support veteran families, family participants suggested:

- Legislation – More inclusive of the diversity of families.
- DVA staff – Having appropriate resources available and people in client-facing roles with an appreciation of veteran families’ challenges.
- Health services – Expanded funding for a veteran family health card system.
- Support for children – Resources for schools and counsellors to support veterans’ children, and a focus on children in mental health research.

“Teachers have no idea how to support children of veterans. It is almost like the child has a disability. There are constant emails – it is really hard when teachers don’t understand. We’ve got to educate the educators.”

Respect

For Forum participants, respect for families can look like:

- Public recognition of family sacrifices to support a service personnel/veteran.
- Including families in legislation.
- Including families in the Veterans Covenant.
- DVA staff responding empathetically and in a timely manner.
- An Australian Veteran Family Health Card.
- Tailored transition supports for families.

“We need acknowledgement in legislation, as parents and as a family. If we are not supported by policy, it doesn’t have value. The medal and policy has to come at the same time.”

*“We would like to talk to you about what a veteran’s family is. And a veteran’s family is anyone that a veteran says it their family. So it’s not just the spouse and the children. It’s the parents, friends, cousins, and former partners of the veterans. If a veteran still considers them family, then they are family.”*

*“We want the ‘pause’ removed and that’s really important to us. Everything we see says ‘Veteran ... and their Family’. We are a ‘veteran family’. If there is a veteran in our family, we’re a ‘veteran family’. We want that pause removed.”*

*“The other question we asked ourselves was ‘what do we as families deserve?’ ... And it’s:*

- The expansion of services to include the whole family;*
- It’s the engagement with us that’s sought after and deliberate and purposeful and valued; and*
- It’s understanding that we are the subject matter experts on our veteran.”*

### RESEARCH IN THE VETERAN AND FAMILY LANDSCAPE

This session asked both cohorts to discuss their perceptions of research on/with veterans and families broadly, followed by a more focused discussion on a specific DVA research project seeking feedback; the Strengthening and Protecting Veteran Family Relationships research project.

#### Suggestions from Female Veterans and Veterans’ Families:

In reporting to the Feedback Panel, the Forum participants highlighted the following key points about research in the veteran and family landscape including research gaps and considerations around communicating research.

- Holistically researching veterans’ children at all life stages, including children of Vietnam veterans through to modern day, including:
  - Educational outcomes;
  - Social outcomes;
  - Mental health outcomes;
  - The effects of direct and intergenerational trauma;
  - Evaluating the benefits of health and social support programs for children; and
  - The effects on children of regular relocations and other disruptions due to a parent’s Defence service.

*“Sporting teams. If you’re a Defence child, you won’t go on the team because you will leave soon.”*

*“I met a man and his child, who was 17 or 18, had survived a suicide attempt. I asked whether they were a veteran and they said ‘yes’, and I said ‘You realise your child can access mental health?’ He did not know this.”*

*“Open Arms would see my son in the city, but he hardly leaves the house so there was no other option.”*



*"If there are two service parents in the family, what happens when they are both f\*\*\*\*d up? It's more accepted for the man to have trouble and PTSD, but when the female is suffering who can they go to? Who is helping their kids?"*

*"I have also seen the struggles that my children have gone through when my young child, who was greatly affected by my deployment, talked about suicide. He wasn't experiencing suicidal thought, but that anxiety he has now, those are learnt behaviours from me."*

- Targeting research for female specific health issues during and post-service, including:
  - The effects of stress on female physiology;
  - Understanding the relationship between Defence service and health outcomes around menopause, bone density, joints, incontinence, fertility, pregnancy, miscarriage, and the musculoskeletal system;
  - The most common conditions for female serving members and veterans, to be reflected in DVA's approach to streamlining the processing of common conditions; and
  - Relationship between mental health and menopause.

*"One of the things that was brought up today, which is crucially important, is that when they decided to have children, they were either ostracised by Defence and told to get out, or ostracised by their Unit."*

*"Incontinence is not in the Top 20 Conditions list, however it is a big issue for females."*

*"Pregnancy is technically not an illness, but they treat you like it is an illness."*

*"We also want to see specific research into female health issues and the effect of stress on physical conditions. I was shocked to have a look at the SOP reviews, what's currently up at review on the RMA website and see that fibromyalgia wasn't one of them. Yet ask any Rheumatologist and women are more likely to develop fibromyalgia. Of the female veterans that I know, they cannot get it approved because of the SOP they don't meet the specific requirements in there, but they all suffer, and that is constant pain."*

*"Post-natal depression and pelvic floor recovery. There are female specific medical needs that aren't provided for."*

- Understanding other whole-of-life and career impacts of service for female Defence personnel, including:
  - The disproportionate limitations on female serving members for promotion, posting and deployment opportunities within Defence in comparison to male colleagues;
  - The economic impacts of career interruptions (e.g. lower superannuation);
  - Trauma as a result of bullying, harassment and abuse; and
  - Gendered differences in preparing for transition out of Defence service.

*"My promotion got pulled because I was pregnant. The promotion to Sergeant was taken away."*

*"Being a female, we take on so much. Housework, kids, not getting promoted or postings. Everything becomes a pressure."*

*"Trauma is trauma, does not matter if you were shot at or sexually assaulted."*

*"These veterans are sick of being told their medals are on their wrong side, so they don't go to Anzac Day services anymore. Others look forward to being told that the medals are on the wrong side so they can tell them they don't know shit."*

- Exploring the impacts of Defence service on families and care-givers, including:
  - The effects of secondary and intergenerational Post-Traumatic Stress;
  - The effects of other mental health issues on the whole family;
  - Applying a whole-of-life and a whole-of-family view;
  - Understanding how a veteran in supported (a broad definition of family); and
  - The impacts of isolation for families when a Defence member is posted to a new location or is deployed.

*"For research, it is really important to have everybody under the one umbrella. And that includes veterans, their families, serving members, external supports from Centrelink, employment agencies, community support groups, hospitals, nursing homes."*

*"Kids are sick, and superiors don't believe it while serving in Defence. When this got really bad, it was just easier to take sick kids to work to prove they are throwing up."*

*"A 17 year old visited [the ESO] and asked me how to help his Dad. Here's this kid that is suicidal because of his Dad's PTSD. His Dad wakes him up in the middle of the night and he's like, 'How can you help my Dad? Because I'm not sure if he's going to kill me, or I'm going to kill myself'."*

*"I truly believe we need to look of how ADF service and post-service life affects the partner economically, physically, mentally."*

*"I know that this is something we're all really passionate about, is ensuring that around the effects of PTSD, and not just PTSD but mental health generally, there is a lot of research done into that. We need to really look at the impact it's having on current and past care-givers, families and anyone associated with a veteran. We need to make sure that any research includes the effects of secondary PTSD as well."*

*"A veteran's family is anyone that the veteran thinks is their family ... The important thing is to remove the traditional and any definition of family, and allow the veteran to determine themselves who that family is and add people along the way as they go through their journey."*

- Understanding the efficacy of preventative and alternative health interventions, including:
  - Treatment through both medical and non-clinical options for best possible outcomes;
  - Peer programs for veterans, children of veterans and other types of family;
  - Wellbeing to form a primary focus for DVA and Defence, as oppose to fixing problems once they arise;
  - Adaptive coping strategies such as music, art and creative writing therapies; and
  - The preventative benefits of social connections for veterans, children of veterans, spouses of serving personnel and veterans, and other family members.



*"We need to expand the services, both clinical and non-clinical."*

*"We need to focus on prevention. Prevention through both medical and non-clinical options."*

*"Research into programs with children and their effectiveness, like Kookaburra Kids and others programs for children."*

*"Building and maintaining social relationships must be a focus."*

- Other considerations for research with Defence, veteran and veteran family communities, included:
  - The need for longitudinal, intergenerational and gender specific studies;
  - The need for the community to be able to access, understand and disseminate research findings;
  - The need for the community to inform research during its development;
  - The existence of security and privacy concerns for some when considering participating in research activities;
  - A perception that others in the community may lack incentives to participate in research;
  - The need for research institutes and funding agencies to collaborate, prominently Defence and DVA; and
  - The difficulty in accessing veteran and family participants, due to:
    - Limited public identifiers (e.g. emergency admissions, schools, other State government systems);
    - Those who do not wish to identify as a veteran; and
    - Those who perceive participation as too stressful.

*"We need to publish the available research so that people can formulate a question to do the next research on. Without a hub of the scholarly research, we can't find it or look at it ourselves to form the next question."*

*"We want to make sure that there's a collaboration between all the different research agencies. It's really important that if Defence is doing research on PTSD that they're speaking with DVA and it's all working together and we need to make sure that there's currency around that research."*

*"One of the things we don't do very well is actually publish the research that's available so that people can actually form the right question to do the next piece of research, because that's what's where the gap is."*

*"If [Defence and DVA] come up with some research and some possible impact strategies, we need to make sure they're implemented as quickly as possible. So that it's not five years after the research was conducted that we're going to start then putting in place some strategies."*



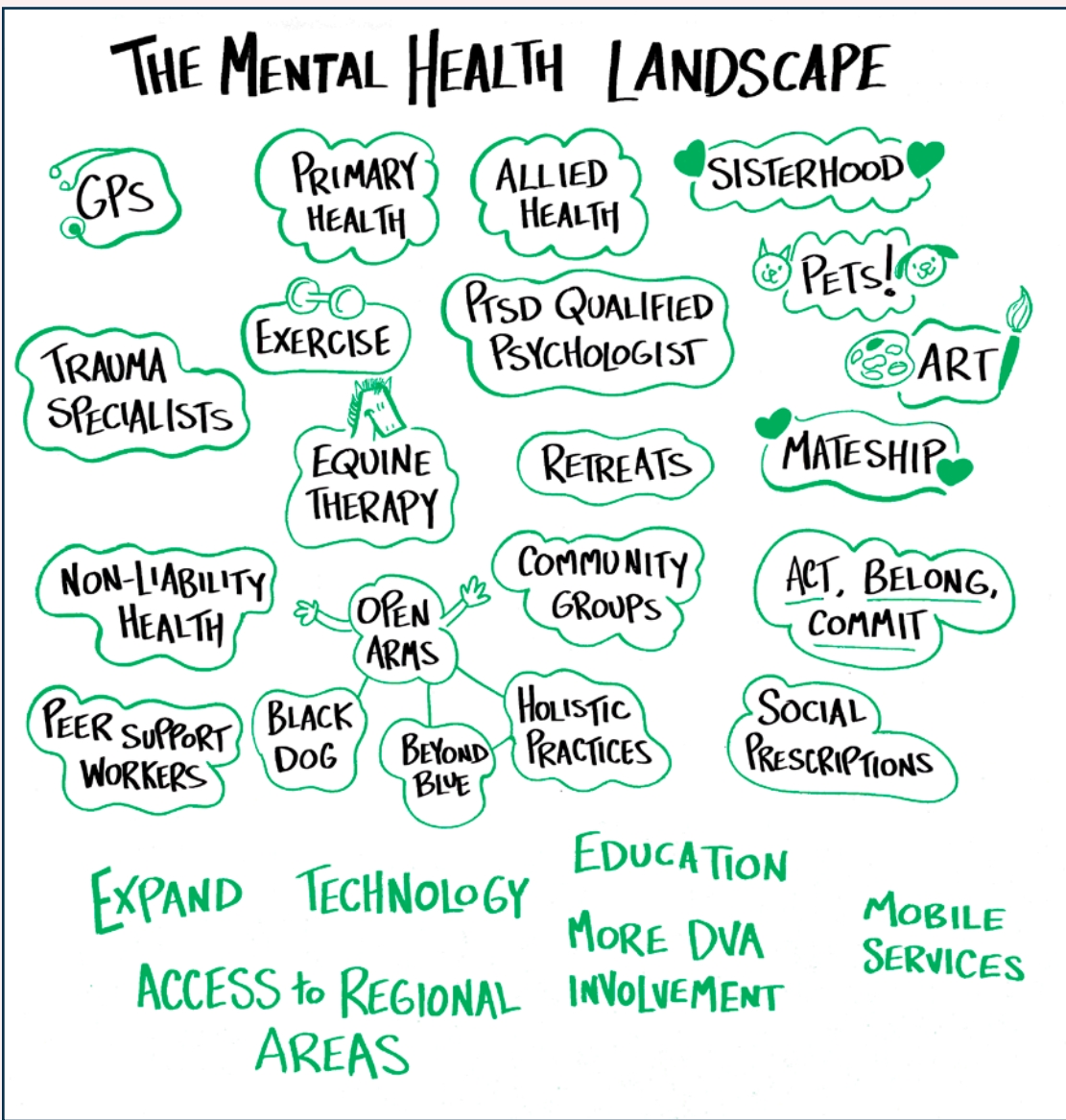


## FUTURE OF MENTAL HEALTH SERVICE DELIVERY

This session asked both cohorts of participants to discuss mental health services available through DVA, and how these services would ideally be delivered in the future to better meet the needs of female veterans and veterans' families.

Participants collectively mapped the mental health support landscape in Australia. This activity highlighted the breadth of services available to support veterans and families, and which of these supports exists within DVA.

Having mapped the services which provide various types of mental health supports, participants worked to design aspects of the ideal future of mental health services through DVA.



## Suggestions from Female Veterans and Veterans' Families:

In reporting to the Feedback Panel, the female veterans and veterans' families highlighted the following key considerations about how mental health services could be delivered in the future.

- De-stigmatise mental health for everyone:
  - Educate and raise awareness with service providers, employers, teachers and the broader community about veterans and veterans' families;
  - De-stigmatise mental health through positive language, to make it ok to ask for help, and a focus on prevention and early intervention;
  - Engage with children from veteran families on mental health from an early age; and
  - Encouragement to access services while still serving in Defence.

*"To destigmatise mental health, you need to start that at an early age."*

*"Awareness of what is available. This is not streamlined. We don't need more legislation or regulation, it's already complex, it's already unclear. Clarity is important."*

*"You can't talk about mental health if you've never talked about it before. You need to be talking about mental health and the children of veterans."*

- Demand-driven funding:
  - Funding limitations restrict the ability of government and the community to fully understand who needs what services, which services are effective, and where the unmet needs are; and
  - Organisations accessing funding must be required to provide an evidence-base for their outcomes.

*"Demand-driven funding. You cannot cap funding for services if you don't know what the need is for those services. It needs to be demand-driven so we can see what services do people actually want? What do they need? What will they access? What will they use? And, what is effective?"*

*"We need to make sure that all of the services are evidence-based and accountable, so they provide what we need for veteran specific services."*

- Services designed to be appropriate for the community in 2022:
  - Use of up-to-date IT solutions;
  - De-identified digital access to protect confidentiality and limit possible career impacts of accessing mental health services for serving members;
  - Tele-health services specifically for veteran families;
  - Prompt payments for service providers; and
  - Centralised and up-to-date information.

*"They need to be flexible, easy and mobile, and they need to be provided in the ways people actually access services. People say 'Don't use Doctor Google', but the first thing most people do when they've got a problem is pick up their phone and Google it. So the information needs to be there, it needs to be prominent enough on those devices that people get the right services and the right information."*



*"When people access services online, how do you de-identify that person, so that they can access services without it being detrimental to their careers? I've had a lot of people not want to put in claims for mental health, because they don't want to lose their job as a teacher – 'How can I get a Working with Children certificate if I've got PTSD?'. "*

*"Future services should not be provided in Windows 2004, like a lot of IT services from DVA."*

*"A stand-out point for me was, that DVA has a great deal to offer however it's very difficult to find it. Instead of creating another service can we focus on improving what we have?"*

*"It's super important that we actually regulate the ESOs. It's important that we have consistency, we have scalability, and we have repeatability. It's super important that they are regulated and that there's not anything outside that regulation that's untoward, because we've had a few stories that are worrying."*

- Expanded types of services to support mental health:
  - Increasing the suite of both clinical and non-clinical support services;
  - Trauma-based training in schools;
  - Schools being able to refer to Open Arms and other support services; and
  - Therapeutic alternatives such as Play Therapy for children and Art Therapy.

*"We need to include places like schools to be able to refer to Open Arms."*

*"Children of veterans need to be talking about mental health from school age. There are a couple of strategies out there that should be enhanced and spread across schools to talk about mental health and how to access services."*

*"We need connectedness. We know now we're not alone. We need to make sure we're all connected and we stay connected, particularly since we know that camaraderie and connectedness within the service is absolutely vital to the culture of service. So we need to continue that after we leave, with better ways to do that."*

- Equality of access:
  - Increasing the physical presence of mental health support workers in regional, rural, and remote areas;
  - Tele-health services to complement where fly-in fly-out services are a primary support mechanism;
  - No limitations placed on access for care-givers, regardless of specific relationships to a veteran; and
  - Acknowledgment, shown through access to services, of the whole-of-life impacts on veteran families.

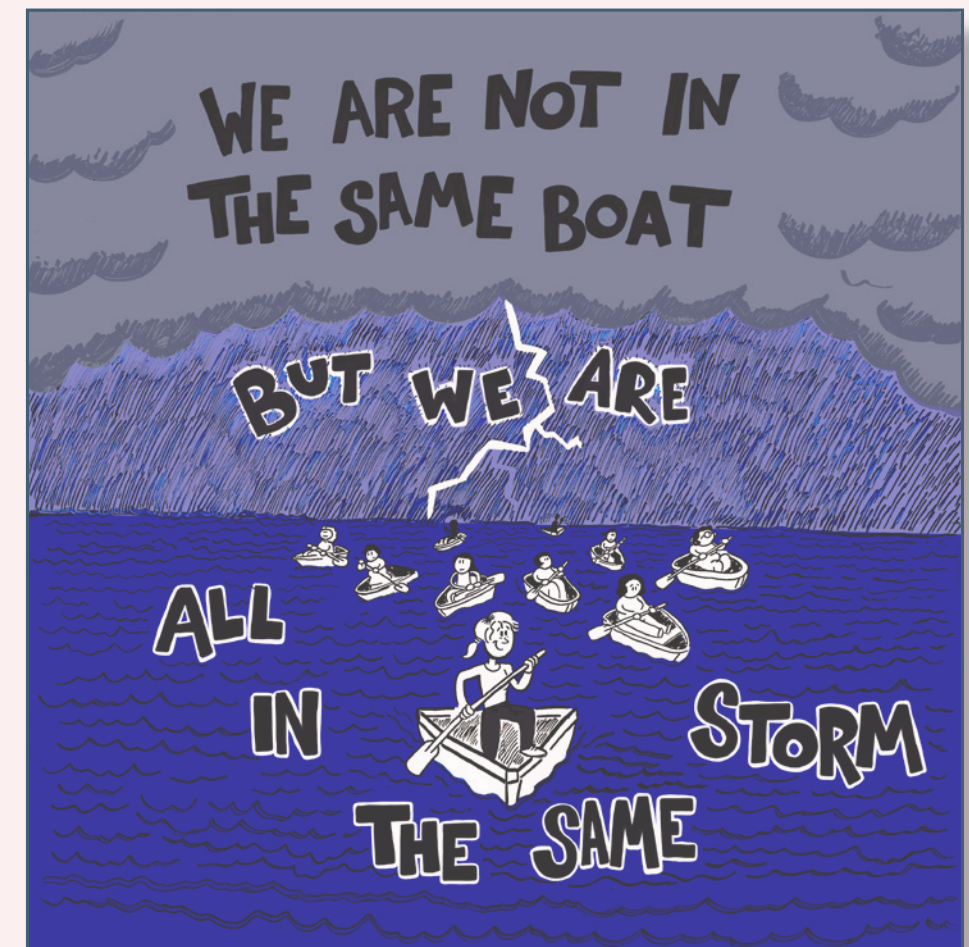
*"Equality of access for everyone including regional, rural and remote areas."*

*"As a mother of a veteran, we were offered nothing. I couldn't call to get services for my son at all, no one would speak to me. So things like that really need to change."*

*"Remove the traditional definition of family and allow the veteran to determine themselves who that family is and add people along the way. It's also defining who a veteran's care-giver is, and again, it's whoever the veteran decides is their care-giver at any point in that journey ... Sometimes those of us who are the traditional care-giver, we have to step out because we can't do it anymore ... there is going to be ongoing impacts for those people who play that care-giving role for very long period of time. And for whatever reason, if they have had to step out of that role, they still need support."*

*"We also want the acknowledgement that there's a whole-of-life impact, that parents of veterans will be impacted, not just the spouse, not just the children. There are parents that have had to sacrifice their homes to care for their veteran child, and that's not recognised at the moment. It is the whole-of-life of that veteran, but it's the whole-of-life of the family and that needs to be recognised as well, and then supported through service delivery."*

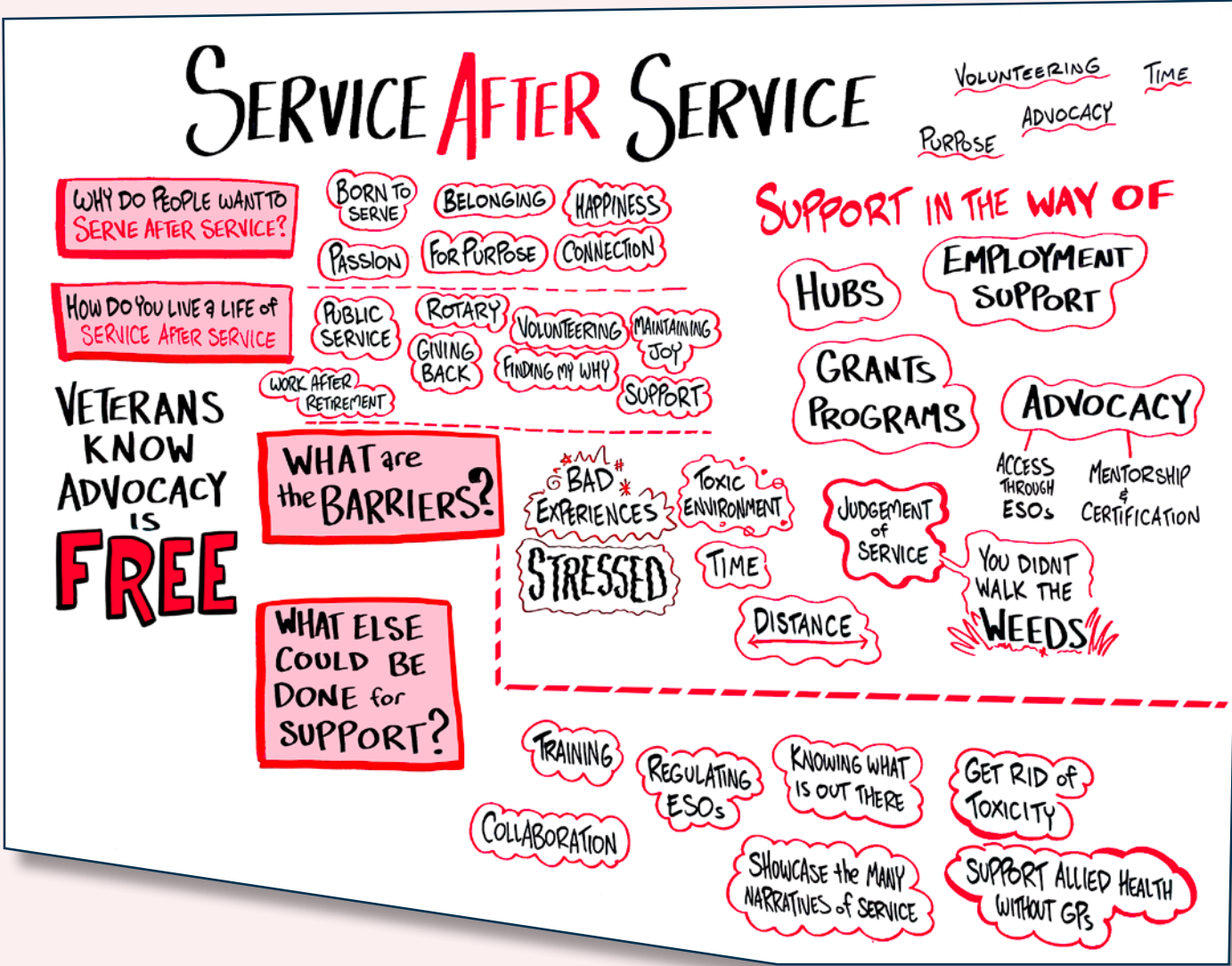
*"One of the ladies here today said 'If I had Gold Card, I could look after me. But at the moment, I can't afford to look after me.' And if she can't look after herself, how can she look after her veteran? And how can she look after her children? So that service delivery needs to recognise that whole-of-life impact."*





# SERVICE AFTER SERVICE

All Forum participants came together to discuss the concept of 'service after service'; the desire to continue to help others, connect with the community and find purpose after separating from the ADF community.



"I have the training and skills, and knowledge of veterans, to try and help them through what I went through myself."

"Volunteer for local events and get to know people in your new community."

"Using your lived experiences and work experiences, along with your academic qualifications, to assist with changes."

"Putting on talks, events, finding ways to give back to the veteran community. We know what the issues are and can we do something about it."

"The Public Service may match the values for veterans, having a similarly aligned purpose."

"Joining Rotary which coordinates volunteers for local events and overseas events. The structure is similar to the military and runs meetings like the military. There is even a military chapter and the organisation has a good history, so it's comfortable for veterans to join."

## What words come to mind when thinking about 'service after service'?

- |                |                  |           |
|----------------|------------------|-----------|
| • Volunteering | • Contributing   | • Coping  |
| • Advocacy     | • Purpose        | • Support |
| • Time         | • Helping others | • Purpose |

## Why do people want to continue to serve after service?

- |                        |                                 |                       |
|------------------------|---------------------------------|-----------------------|
| • Born to serve        | • To be valued                  | • A life worth living |
| • Contribution         | • Feeling part of the community | • Happiness           |
| • Belonging            | • Service makes me who I am     | • Something to love   |
| • Matches their values | • Duty and helping others       | • Identity            |
| • Wanting purpose      | • Continue to feel connected    |                       |

## What does service after service look like for veterans' families?

- |  |   |
|--|---|
| • Families are able to establish themselves when their veteran continues to serve after service. | • Families are able to move into a community, put roots down. |
|--|---|

## How do you live a life of service after service?

- |   |   |
|---|---|
| • Volunteering  | • Investing in our community using our skills                                       |
| • Joining community organisations and ESOs                        | • Being there for families by giving up-to-date information, support and friendship |
| • Advocate for families   | • RSL Forums to assist with development of services                                 |
| • Transition from permanent forces to part-time (reserve) service |   |

## What gets in the way of people engaging with the community?

- |  |  |
|--|--|
| • Poor treatment in service  | • Can't relate to civilians/The community doesn't understand veterans  |
| • Travel   | • Judgement and lack of recognition for your type of service ("You didn't walk the weeds.", "You didn't really serve.", "I was told I couldn't have a back injury because I was in the Navy.") |
| • Egos   | • Not knowing what's out there   |
| • Bad experiences with an ESO  | • Physical and mental health limitations   |
| • Anxiety and lack of confidence   |  |
| • Community organisations which don't reflect the modern diversity in the veteran and family communities |  |

## What else could be done to support service after service?

- |  |   |
|--|---|
| • Base access  | • Positive feedback to serving members on transition and life after service |
| • Tell veterans how to join organisations              | • Include families information in transition programs                       |
| • Community organisations working together             | • Gym membership for veterans and families                                  |
| • Compliance measures in place to be an accredited ESO | • More information during transition – A 'Service after Service' Market Day |
| • Career information during service and transition     |   |



PARTICIPANT-LED CONTENT

Community Initiatives Presentations

The Community Initiatives Presentations segment of the 2022 Forum provided an opportunity for female veterans and veterans’ families to present to DVA and their peers. These presentations explored what the presenters and/or their organisations are delivering to support the Defence, veteran and veterans’ families communities.



"It's open to all serving members, the first responders, veterans, their families and carers. We use the term carers loosely because sometimes you can have a really good mate that's a civvy but gets you through."

"We offer day visits, overnight accommodation, animal therapy and more. And our key focus is on meaningful engagement. I feel like that's the big thing that we've lost as we leave the services."

"So our mission is to one day truly believe you are not alone."

"I don't care if we get 20 or 50 people to an event. If I get one veteran or their family there to an event, it's a success."

WOMEN VETERANS AUSTRALIA

AUSTRALIA'S LEADING NOT-FOR-PROFIT CHARITY SUPPORTING WOMEN VETERANS

"Women Veterans Australia is about empowerment, inclusion and supporting women veterans ... regardless of cultural diversity, background, or service."

"We have enlisted a team of experts, who volunteer their expertise in areas of research, consultation, and professional development. Some of our expert practitioners are also veterans themselves. Our decision to enlist these people is to ensure we can access the latest research information and provide evidence-based interventions."

"During 2021, we conducted a mentoring and professional development program and were fortunate to have a group of women veterans join online from all over the country for coaching and professional development ... As a non-for-profit organisation, we see this as an area of need which we can fill."

"Our long-term vision is to be a one-stop-shop of where women can seek information, support, and help, but also be an avenue of where we can refer people to relevant services according to their need."





*"Most small country towns have an RSL Sub-Branch that is probably the centre of where veterans go when they live in a small country town. Sub-Branches are not to be confused with RSL Clubs. Sub-Branches in NSW do not have access to 'Pokies and Bars'."*

*"We have a Veterans Support Centre there. We offer advocacy with qualified advocates ... We offer assistance and referral to all of the appropriate agencies, all of the local agencies. One of the wonderful things about living in a small country town, we know exactly who does what."*

*"We're all volunteers and that's the most important thing, is that we are volunteers. Nobody is paid. We're supported financially and philosophically by our RSL Sub-Branch."*

*"We also offer social connection and we have relationships with all the schools. There's a roster around Anzac Day and Remembrance Day for us to go and talk to all the schools."*

*"We visit the aged care facilities and we've got a member who visits the private hospital, which has the private mental health ward. And that makes a lot of difference because we can pick up veterans that need compensation and support through the mental health unit."*

## Career Management Agency

*"As a Career Manager with the Career Management Agency, I just thought I'd impart with you just a small portion of what we present at transition seminars."*

*"The Reserve Forces are made up for Service Categories (SERCATs) 5, 3 and 2."*

*"SERCAT 5 is the Army Reserve Service ... There you can serve part-time through to full-time ... It provides stability, flexibility, it's a military career and guess what? You can work another job ... The benefits include tax-free money, retain your ADF ID card, and 20 plus days per year, that's your commitment, which will allow you to keep your DHOAS [Defence Home Ownership Assistance Scheme]."*

*"SERCAT 3 is what we call the Standby Reserve. SERCAT 3 is that you've indicated you have an ability to serve if needed to. You don't have to do the 20 days a year, so you're going onto standby ... SERCAT 3 is becoming more popular, because you're not posted to anyone ... I have people on SERCAT 3 doing up to 200 days a year, because they're not posted to a unit so they can pick and choose what work they do and where they do it."*

*"SERCAT 2 is 'do not ring me'. Standby component, no requirement to serve unless there's a call out. We had people come for Bushfire Assist and COVID Assist. Members just have to maintain their contact details ... If you remain in SERCAT 2 for five years and don't provide any service, then they will transition you out."*

## Experience of Natural Disasters

*"I really want to talk about policy, because this is a policy forum, but policy is transacted at the level of an individual and a community locally. So I want to bring to you a recent experience that I had that has impacted many of you in this room and many people that you know as well."*

*"On the 28th of February the sky fell ... as it rained and rained and rained, and in some places, including over my head, it turned into a rain-bomb ... this rain bomb terminology, I found out, is that in the sky there is more rain in some of these areas than the quantity of Sydney Harbour. It all came down on an already drenched countryside ... a tsunami from the sky, and it can move boulders."*

*"We didn't really know what to do ... we had no communication at all, no power, no water, no internet, no nothing ... We heard, by virtue of a neighbour running and taking several hours to reach our place ... that an Army helicopter was coming, a once only opportunity, and I took that opportunity. I think most of us know that noise [of a Black Hawk Helicopter]. It was the most reassuring noise I'd ever heard."*

*"They took me to an evacuation centre in Lismore, which is kind of why I'm trying to weave policy into this. There was a policy for the Army to be involved in this rescue mission. There was policy that had been setting up evacuation centres within 24 hours of water level up to people's ceilings. The people I slept alongside, people who didn't know where their families were ... they are why policy is important, because it's real people."*

*"The kindness of people and humanity means a great deal. But it starts with policy and it ends with everybody working together."*

## Working Spirit — [workingspirit.org.au](http://workingspirit.org.au)

*"We assist veterans who may want to pivot careers that are already out, or currently serving or transitioning ADF members."*

*"We started a Military to Civilian Career Summit. We just headhunted companies. We're up to an eighth summit this year and had over 200 people attend."*

*"We do business networking events, which are smaller events, so it's designed to get the junior members in the ADF out of their comfort-zone to network with employers in the room who are keen to hire veterans."*



*"We do a corporate fellowship work experience program, for those members that are transitioning out who get their 20 days transition leave. We will work with companies to get you some work experience."*

*"This year we've started a joint venture with RSL WA. So we can support more veterans, partners of veterans, children of veterans of working age, and families. The WS/RSL WA employment initiative has found employment for 51 veterans from January to June."*



# The Victorious Wellness Camp

*"I am here to address the lack of acknowledgement and support available to the care-givers of today, who are still in the trenches with their veterans."*

*"In 2019, I sat in these rooms and listened to stories from other care-givers. I felt the pain, the tears and the anguish. I felt it to the bone. For the first time, I felt acknowledged ... That day was the beginning of my true healing. It was a turning point."*

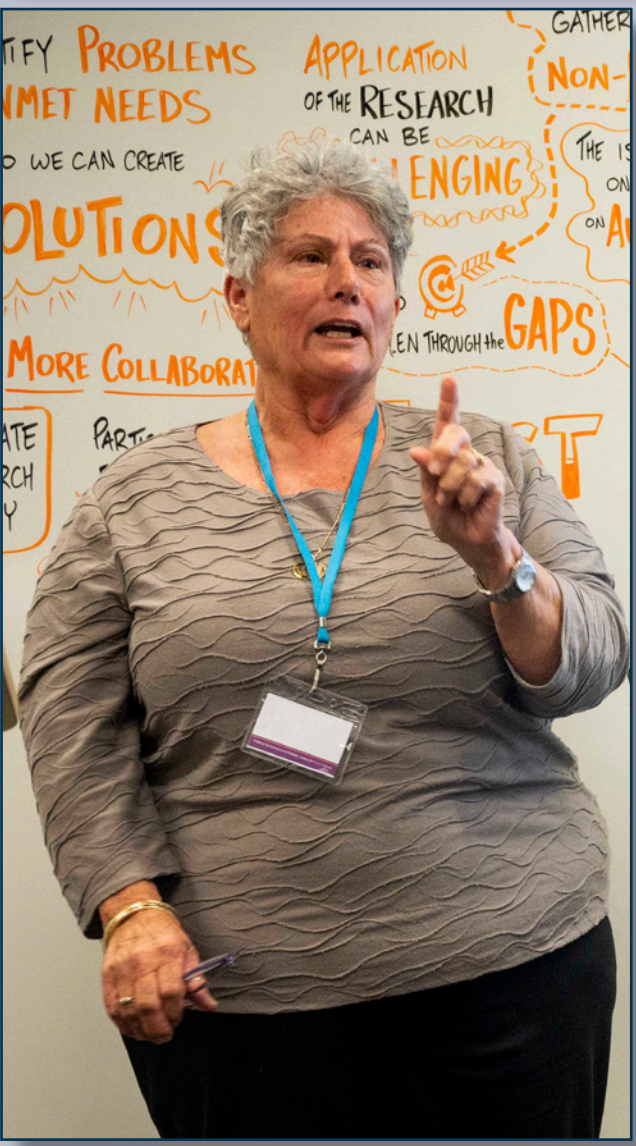
*"This wellbeing wheel looks at six areas required to keep your wellbeing balanced. As a care-giver to a veteran, the opportunity to have these six facets of life in balance is but a dream."*



*"Research on the effects of veterans with PTSD on partners and families is an important and neglected topic. The current number of affected partners and family members that are care-givers is unknown."*

*"The proposed Victorious Wellness Camp aims to support, acknowledge and serve these forgotten care-givers. It is a five day itinerary of activities aimed at providing a circuit breaker in the carer's life. Each day will focus on a different activity, providing an opportunity for participants to bond and feel supported in knowledge."*

*"Our objectives are to provide a safe space for participants to connect with others of similar lived experience, introduce them to new skills and ideas that will help in challenging situations ... A healthy care-giver equals a healthy veteran family."*



# The Partners of Veterans Association of Australia — [pva.org.au](http://pva.org.au)

*"P.V.A is a non-for-profit organisation. We volunteer. We are in every state of Australia. We meet as groups to give support, understanding, friendship and information."*

*"Our aim is not only to support the partners of all conflicts, and to consider the needs of future generations and to have in place support networks that are available when our veterans return from their war service, and now when they're in the community."*



*"Over the years some of the things we have successfully lobbied for include the bereavement payment to be paid at the Veteran's rate at the time of death, the compilation and distribution of children's health questionnaires, and to have carer allowance supplement paid to carers of veterans. We work with Ex-Service Organisations, we are a member of ESORT. Each state attends the Deputy Commissioners' Forums, bringing the issues that are important."*

*"P.V.A is committed to working with our members at both state and national levels, asking their views, representing their needs and issue to Governments, and providing them with the information and support."*



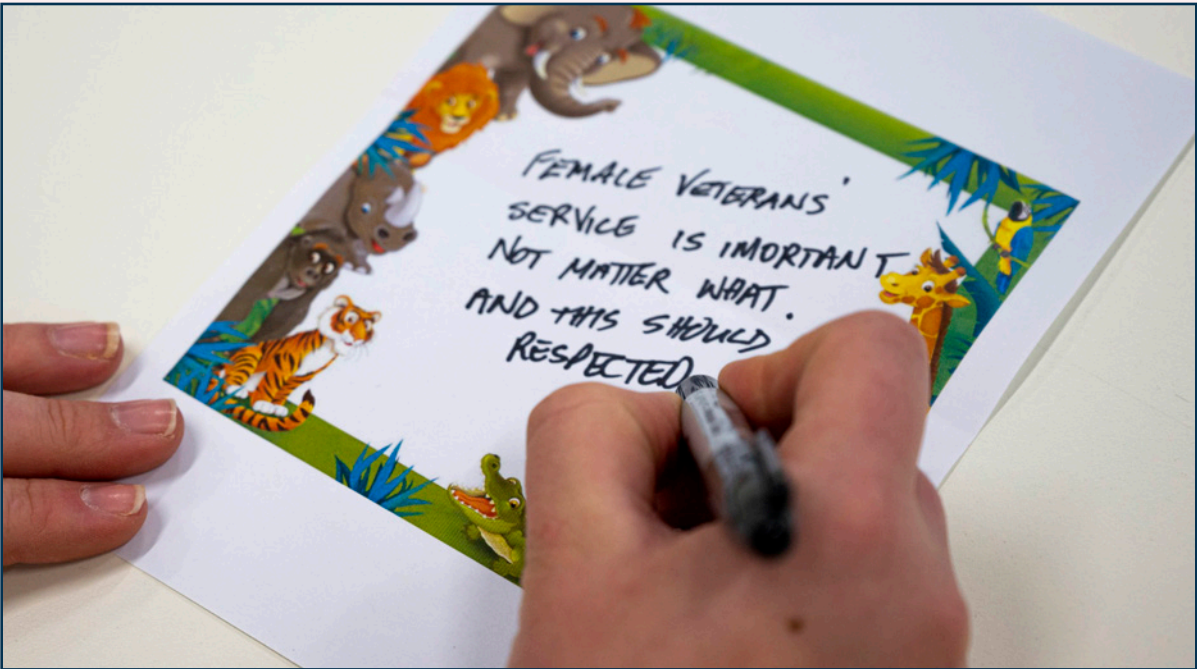
WILDCARD TOPICS

The Forum Wildcards activity presented another opportunity for DVA and the Forum participants to discover what some of the most pressing issues in the Australia veteran community currently are. The female veterans and veterans’ families were given the opportunity throughout Day One of the Forum to anonymously submit a ‘Wildcard’ on which they had written a comment. These comments could be a single word or a sentence, addressing a subject they wanted raised at the Forum, a problem or concern, a personal reflection or a positive insight into the veteran and veteran families landscape.

The group then worked together to discuss some of the recurrent themes found in the Wildcards, exploring personal reflections and the subject matter’s relevance to the broader community.

The key themes drawn from the Wildcards activity included:	
<b>Improved experience of communication with DVA, including both:</b> <ul style="list-style-type: none"><li>• <b>More information from DVA; and</b></li><li>• <b>An improved experience communicating to DVA.</b></li></ul>	<p>What is DVA doing specifically for female veterans now?</p> <p>Need for a booklet on DVA clients’ entitlements when in residential care or home care. What’s happening now, and what’s about to be improved.</p> <p>Talk about the achievements of this Forum.</p> <p>RSL Advocate Hotline.</p> <p>DVA Website – We need a short 5 minutes on how to navigate the website.</p>
<b>Suggested areas for the creation or expansion of entitlements.</b>	<p>More support for spouses. After leaving Defence, your partner gets the Gold Card but the spouse gets nothing. Spouses give up everything to support their partner. Without family, the veteran would have no support.</p> <p>More in-home care supports for people who have service-related injuries.</p> <p>Travel support to attend appointments for families.</p> <p>Female specific policy changes:</p> <ul style="list-style-type: none"><li>• Payment for medical procedures for e.g. breast reduction.</li><li>• SOP for fibromyalgia.</li><li>• Effect of stress and mental health on physical injuries for female physiology.</li></ul>

The key themes drawn from the Wildcards activity included (continued):	
<b>Recognition and respect.</b>	<p>Female veterans’ service is important no matter what, and this should be respected.</p> <p>Support for veteran family members who have been through the trauma faced by a serving member – however the serving member divorces (meets someone else). After so many years of dedicated support there is nothing in place for that family.</p> <p>Acknowledgement for partners, parents and care-givers.</p>
<b>Support for children.</b>	<p>Specific resources and support for school-aged children. Resources to help teachers, schools, counsellors support children. Age appropriate books to help introduce the conversation about PTSD to children.</p> <p>Have more camps for kids in Defence families. Let them know they aren’t alone.</p> <p>Services for children of Defence families with special needs.</p>
<b>Transition support.</b>	<p>Transition seminars involve more supports i.e. social workers. Families need transition support, financial support, housing support. DVA to recruit more transitioning staff.</p>





## FINAL COMMENTS

To conclude the 2022 Female Veterans & Veterans’ Families Policy Forum, the group were asked to write down a final comment, insight or reflection on their experiences over the preceding two days.

The central themes generated from these insights included:

**The value of community connections, support and sisterhood.**

*These amazing people have overcome incredible challenges and come wanting to help others— very inspiring.*

*We are not alone #EveryoneNeedsaSister. We are not in the same boat but are in the same storm. Knowledge is power.*

*Input and dialogue from ladies who had direct experience – strong, amazing women.*

*Despite the deep longstanding hurt so many have – these wonderful women are prepared to put it aside for a time just to help others.*

*If I just reach out to my sisters I know they will have my back.*

*Strength. Hope for the future. Connection.*

**The ability to influence and drive positive change through the Forum.**

*That there were great ideas for change for veteran families and in 2023 to hope some are being developed further or implemented.*

*Together we can affect change.*

*Holy crap! I might be able to affect change in the organisation for the better of us all, and the future.*

*We are part of the amazing things to come.*

*That lived experience is valuable and heard and impactful to contribute to practice and policy. So grateful to DVA – especially Liz Cosson – for allowing and encouraging participation.*

*That DVA really do want to effect real and good change, especially for women.*

**The scope of work happening in the veteran community, both from government and non-government sources.**

*We identified research gaps and DVA services I didn’t know about (Open Arms Peers).*

*That a lot of people have no awareness of what is available through DVA, or the specific Acts that their service is covered by.*

*There is a lot going on that we don’t know.*

*I need to educate myself on legislation/Superannuation/DVA website.*

*The opportunity to take back to our charity ideas for where we can direct our efforts and better support veteran women.*

## FORUM EVALUATION

Participants had the opportunity to complete a Forum Evaluation Survey, to provide their feedback on their Forum experience. Of the evaluation respondents:

- 96% felt attending the Forum was ‘very worthwhile’ and 93% felt that the topics discussed at the Forum were ‘very relevant’ to the community.
- 96% were also satisfied with:
  - Communication from DVA about the Forum;
  - The Forum venue;
  - The opportunities to network with other participants; and
  - That they felt respected and supported in the Forum environment.
- 89% were satisfied that the Forum had given them the opportunity to have their say, although only 61% felt the pace of the Forum was ‘just right’. The remaining 39% felt the Forum was either ‘somewhat too fast’ (36%) or ‘much too fast’ (3%).

*“Overall the Forum was an easy flow between female veterans and families, and a lot of great connections and genuine care and support shown.”*

*“This Forum showed just how DVA is consistently acting and implementing, listening, engaging and looking to the future in order to continually progress, for the wellbeing of all veterans and those with families and those who are from a veteran family. It has highlighted some very important and key areas, even some past gaps that still require research, in order to better problem solve and come up with further understanding, education, which will enable implementation and guidance on quite a number of topics. I personally feel not only privileged and humbled, but heard.”*

*“Living remotely I really do find these Forums very beneficial for my own mental health. Talking face-to-face to my own peer group is something that very rarely happens and I value this opportunity every year and only hope I give the opportunity the return it deserves. I know I need to speak up more in group discussions but I make connections that continue on way past these Forums and continue for years. Thank you.”*

*“By being able to engage with DVA and Defence leaders in such a way, it enables us to have a continued voice, not only to be heard about our ideas and possible solutions, but to gain further understanding from them on their current situation and what and how they are trying to implement and the barriers they also come up against in this process ... Thank you all for all the continued and wonderful work you all do, it is seen and very much appreciated.”*

*“Please keep this going.”*





RECOGNITION and RESPECT  
IT'S IMPORTANT TO LAUGH!  
THERE IS JOY IN THE SERIOUSNESS

SHOW & KINDNESS  
EMPATHY

#EVERYONE NEEDS A SISTER

USE VETERANS to COLLABORATE to IMPROVE THINGS

WE ARE ALL INSPIRING!  
THE FOCUS THAT DVA GIVES US



*The Department of Veterans' Affairs would like to thank the participants of the 2022 Female Veterans and Veterans' Families Policy Forum for the perspectives, ideas and experiences they shared during the Forum, and their ongoing contributions to the veteran community.*



*Supporting Veterans and their Families*