

Discovery and Insight Workshops on the new agency to support the wellbeing of Veterans and Families

High level interim findings

This document provides a snapshot of the interim findings which have emerged from 44 discovery insight workshops conducted in every state and territory in Australia with veterans (including current serving members), families and ex-service organisations and service providers (ESOs). Due to the need to use these findings to inform the Veterans and Families Assembly, time constraints have warranted the need to focus intentionally on presenting the high-level findings. Therefore, this paper does not disaggregate data by age, gender, ethnicity, or location. This deeper analysis will be presented in the final report. Here we focus on identifying the overarching perceptions of the barriers and enablers to veteran and family wellbeing; an understanding of where supports and services are needed most; and, the game changers necessary to transform a fragmented system into a coordinated, integrated and trusted one that delivers better outcomes for veterans and families.

1. Barriers to Veteran and Family Wellbeing

Workshop participants identified a range of significant cultural, system and service barriers to veteran and family wellbeing (see Figure 1). The findings validate the Royal Commission's understanding of the challenges faced by Veterans and families:

- loss of identity and purpose post-military service when shifting from a command and control paternalistic culture to civilian life
 - transition difficulties in terms of employment, housing and social reintegration (although support has improved in recent times) exacerbated by limited recognition of military skills in civilian industries,
 - the persistent of a top-down “deficit-based government-knows best” approach, and
 - a complex service system that is both difficult to understand and navigate often leading to disengagement and a sense of isolation.
- An observation shared with ESOs and service providers.

Veteran wellbeing services are provided by multiple entities across a fragmented system with poor service coordination and integration (particularly with mainstream services) leading to inefficient service delivery, poor access to care (particularly clinical and mental health care) and gaps in support.

System fragmentation is perceived to impede care coordination, and delay access to holistic care for veteran families with complex needs. In addition, the medical and legal aspects of compensation and rehabilitation processes were perceived to harm veteran identity and undermine health and wellbeing outcomes. There was therefore very strong support for separating the compensation process in DVA from the responsibilities of the new agency for the coordination of wellbeing services and support.

These challenges to the service system are reaching a crisis point in regional Australia. Veterans continue to report difficulty in navigating this complex service system, connecting to the right service at the right time, locating a single source of truth on transition and wellbeing issues and they experience deep frustration and trauma with having to tell their stories (personal circumstances and life events) repeatedly to different agencies. Existing service costing structures are leading to veterans being priced out of the health care market and the absence of harmonisation of waiting lists across states and territories often disadvantage veterans and families.

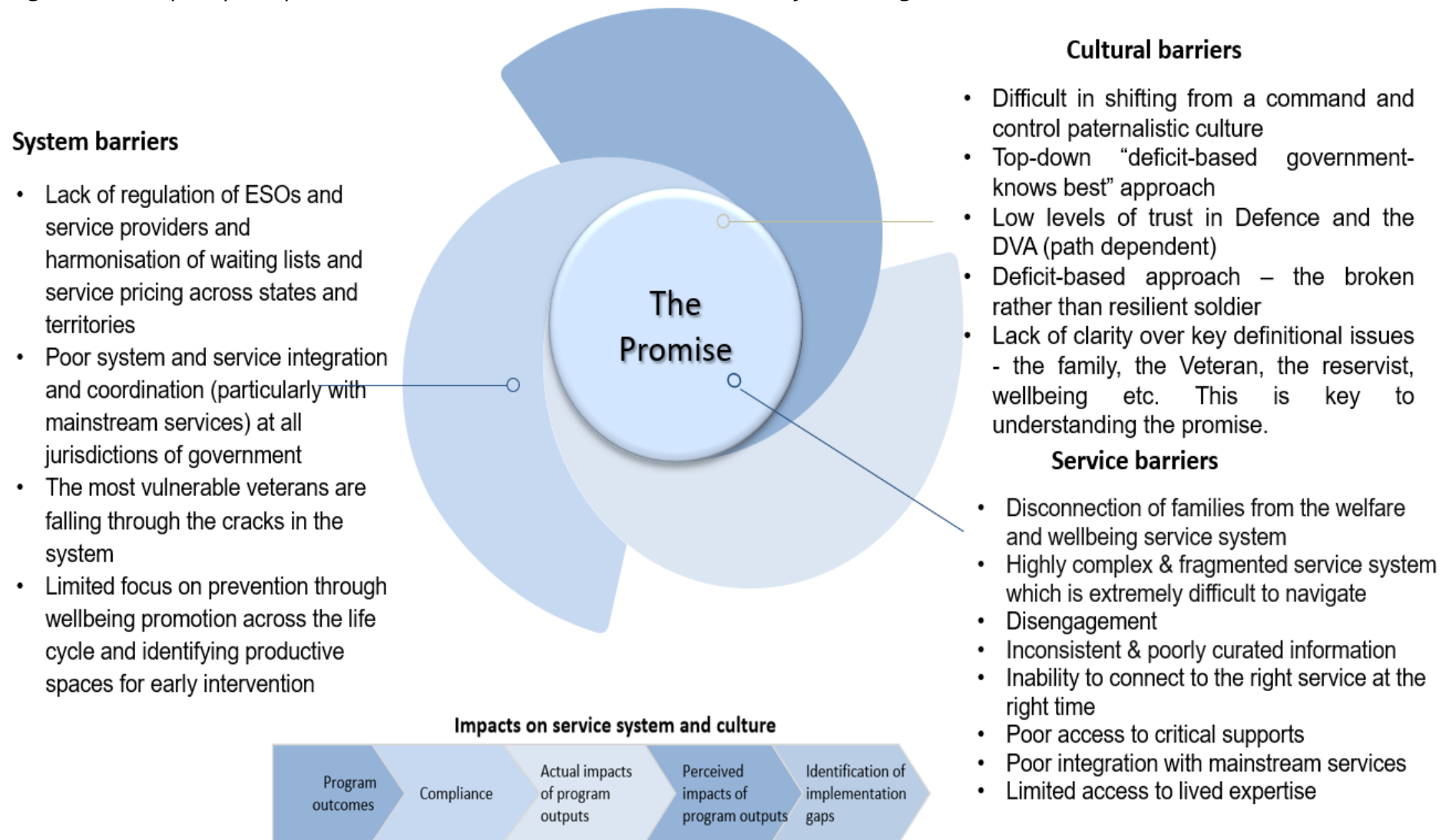
We found further evidence that military families bear the emotional and financial burden of a veteran's transition but lack tailored support for spouses and children and other Veteran carers including mothers. There continues to be a perception of limited structured involvement of families in Defence transition planning although there is evidence that this is improving.

Depending on the nature of separation, there also continues to be low levels of trust in Defence due to challenges in the process of separation and transfer. The Department of Veterans' Affairs (DVA) also suffers from distrust due to complex bureaucracy, and delays in accessing entitlements and compensation. When we asked veterans and families what trust means to them in this context, they emphasized the importance of transparency, empathy, respect and the delivery of benefits (see Table 1).

Table 1. What does trust mean to you?

<p>"Say what you do and do what you say!" A clear service promise</p> <p>BE TRANSPARENT</p>	<p>"Listen" "walk in our shoes" "be empathetic and curious"</p> <p>BE EMPATHETIC & SHOW A DUTY OF CARE</p>	<p>"Respect" "every veteran matters", "has been on a journey" and "deserves respect"</p> <p>DISPLAY RESPECT FOR SERVICE</p>	<p>"Help" "problem seek", "solution seek" "demonstrate the benefits"</p> <p>DELIVER ON THE PROMISE</p>
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Figure 1. Participant perceptions of the critical barriers to veteran and family wellbeing



2. Transition touchpoints and service gaps

We asked participants to identify the critical transition points in their transition journeys and the key services and supports that should support their pathways through the system (see Tables 2 and 3). Participants identified the need to recognise that there are multiple journeys that veterans and families pursue through the system and each merits support by the Agency.

Participants advocated for the need for families to be formally connected both to the Defence welfare system pre-separation and the wellbeing system from transition supported by the new agency and its delivery partners. Participants highlighted the importance of the provision of wellbeing support post separation until end of life.

Table 2. Critical transition touchpoints for Veterans and Families

Transition touchpoints identified by Veterans and Families as most important across all Discovery Sessions		
Rank	Veterans	Families
1	6 months prior	Immediately on separation
2	Immediately on separation	Joining the ADF, 6 months prior
3	3 months prior and 12 months or longer after separation	3 months prior and other
4	Joining the ADF	3 months after separation

Table 3. Key services to support veteran and family wellbeing

Key Services identified by Veterans and Families as being most helpful during the transition and wellbeing journey			
Rank	Veterans	Rank	Families
1	Health Support	1	Counselling and mental health
2	Education and skills training	2	Social support and connection
3	Counselling and mental health	3	Health support
4	Employment	4	Employment
5	Social support and connection	5	Education and skills training
6	Financial Counselling	6	Financial Counselling
7	Wrap around services for the most vulnerable	6	Assistance with housing
8	Assistance with housing	7	Income support
9	Income support	8	Wrap around services for the most vulnerable
10	Other	9	Other
11	Legal support	10	Legal Support

Families noted inconsistent practices in the provision of relocation support with regard to appropriate and affordable housing, access to affordable childcare and employment opportunities and problems in terms of connecting to community.

Veterans emphasised the need to build their capabilities over time in alignment with new career opportunities post separation. This should include the opportunity to build a portfolio of credentialed qualifications and recognition of prior learning that has market recognition over time to enhance their next career prospects.

Families contend that Defence has a very old-fashioned understanding of the financial wellbeing of the family which appears to stress the “one breadwinner” model. If Defence is to be viewed as an employer of choice and reverse its current problems with recruitment it needs to address the issue of the broader financial wellbeing of the family.

Participants also highlighted problems accessing the range of services described in DVA’s Wellbeing Wheel and noted that the Agency is setting itself up for failure if it is unable to ensure connection to services.

3. Enablers to veteran and family wellbeing

It is important to note at the outset of this section that the majority of workshop participants were insistent that the capability of veterans and families to adapt to civilian life should be built from Day 1 through wellbeing promotion and prevention. Moreover, that Defence should identify the important spaces for early intervention and prevention and plan interventions accordingly. This was deemed particularly important in addressing issues of intergenerational trauma that impact adversely on the wellbeing of families.

There was also strong agreement with the Royal Commission’s recommendation that Defence focus on separations and transfer and collaborate with DVA and mainstream services on transition issues under the umbrella of the new Agency. However, there is also a strong current of opinion that to be trusted the agency will need to be viewed as independent from both Defence and DVA.

Nor should the new agency reinvent the wheel but should focus on identifying the gaps, building on best practices that already exist within the wellbeing system and crystallise its role around systems and service integration and coordination using a risk-based approach. This would ensure that the wellbeing of the most vulnerable veterans is better supported. The Agency’s responsibility in enabling wellbeing services and supports across the life cycle from transition to end of life was also viewed of paramount importance by participants to allow for continued connection and support. This was also viewed integral to the Agency’s “trusted mission” to meet Australia’s historic promise

that in recognition of their selfless service the nation will support veterans and families from cradle to grave. The significance of the Agency “delivering on the promise” was a key focus of workshop discussions.

The health and wellbeing needs of veterans and families intensify during the transition from full-time military service to civilian life and reintegration-related difficulties can persist for a significant period. Military life fosters strong bonds and a deep sense of belonging for both veterans and families. It is therefore perceived as crucial to the wellbeing of veterans and families that they can find new purpose and connect with a community where they can experience a renewed sense of belonging post transition. This requires mechanisms to build social connectedness at the community level. Participants viewed local Veterans’ and Families’ Hubs as a promising investment in this regard. However, there is also strong support for Defence to enable volunteering opportunities during service to help build adaptive capacity through organisations such as Invictus and Legacy.

These challenges are particularly acute for veterans and families with complex needs and poor physical and psychological health. Here it is also viewed to be particularly important to ensure continuity of care from ADF to the civilian health care system for the most vulnerable. Recovery-oriented practice was also viewed as an effective method for promoting veteran independence and self-management. Participants expressed a strong preference for family-centred care that was informed by an understanding of military lifestyle and culture (lived expertise).

We asked ESO’s and service providers to identify the key functions of the Agency given their expert knowledge on the current state of the service system. Notably these align with the recommendations of the Royal Commission in terms of: service integration and coordination; simplifying a complex system and enabling better connection to services; ensuring that the most vulnerable veterans and families are supported; measuring the effectiveness of wellbeing interventions; and, identifying and diffusing best practices.

Table 4. Key functions to support veteran and family wellbeing

3 most important functions the Agency should do:	
Rank	ESOs and Service Providers
1	Connect clients to the Agency's network of other services
2	Measure Veteran wellbeing, monitor Transition services, evaluate impact and improve service delivery
3	Ensure that the needs of the most vulnerable clients are supported
4	Provide an individual needs analysis
5	Target supports for veteran community cohorts with known areas of increased vulnerability
6	Coordinate Transition services
7	Help clients implement their transition plans
8	Celebrate and communicate positive veteran stories through media channels

4. Game changers

To meet the Royal Commission's challenge for "systemic reform in veteran transition and wellbeing", we asked workshop participants to identify game changers which they viewed to be critical in transforming the wellbeing of veterans and families. We focus on four key game changers here. These have been prioritized as they potentially meet the critical barriers identified by participants above.

Game Changer 1. Build trust systems around the delivery of the "Promise" and value-based engagement

There are four key dimensions to this process of trust building:

1. The "Promise" signals the intent of the Agency and provides a focus to its operations.
e.g. "We the people of Australia honour the dedicated and selfless service of Veterans and Families and make an enduring promise to support your health and wellbeing across the life cycle."
2. The notion of "mutual agreement" should be established from enlistment – "see us as a person", "give us time, be calm", "help us transition", "build our confidence", "build a relationship". Hence the need to put resources into building trust from the outset.
3. The Agency should be clear about client needs and aspirations for the future providing sensible pathways to success. Here collaborating on the co-development of a journey map with clients in the transition stage to understand their journey, the barriers that they have navigated and still need to navigate, their needs and aspirations for the future.
4. The Agency should ensure that it delivers on the service promise – "say what you do and do what you say" through wellbeing outcomes driven performance measurement.

The "Promise" requires clarification over key definitions to ascertain what the promise involves in terms of benefits and who the promise is being made to – e.g. the family, the veteran, reservists etc.

Game Changer 2. The Agency should be understood as a relatively independent institutionalized collaboration between Defence, DVA, the community of practice and mainstream services

Poor quality collaboration between Defence and DVA and across the service system has been reflected in low levels of public trust. There is an urgent need to shift from a culture of "collegiality" to "collaboration" and adopt best practice approaches to collaborative governance.

The Agency needs to deliver on the “Promise” through a collaborative model in which Defence, DVA, mainstream services and the community of practice cohere around a common mission and clear value proposition, build trust, ensure best practice and deliver tangible benefits for veterans and families.

Game Changer 3. Improve the service experience for clients through a new service architecture – Veterans and Families Connect

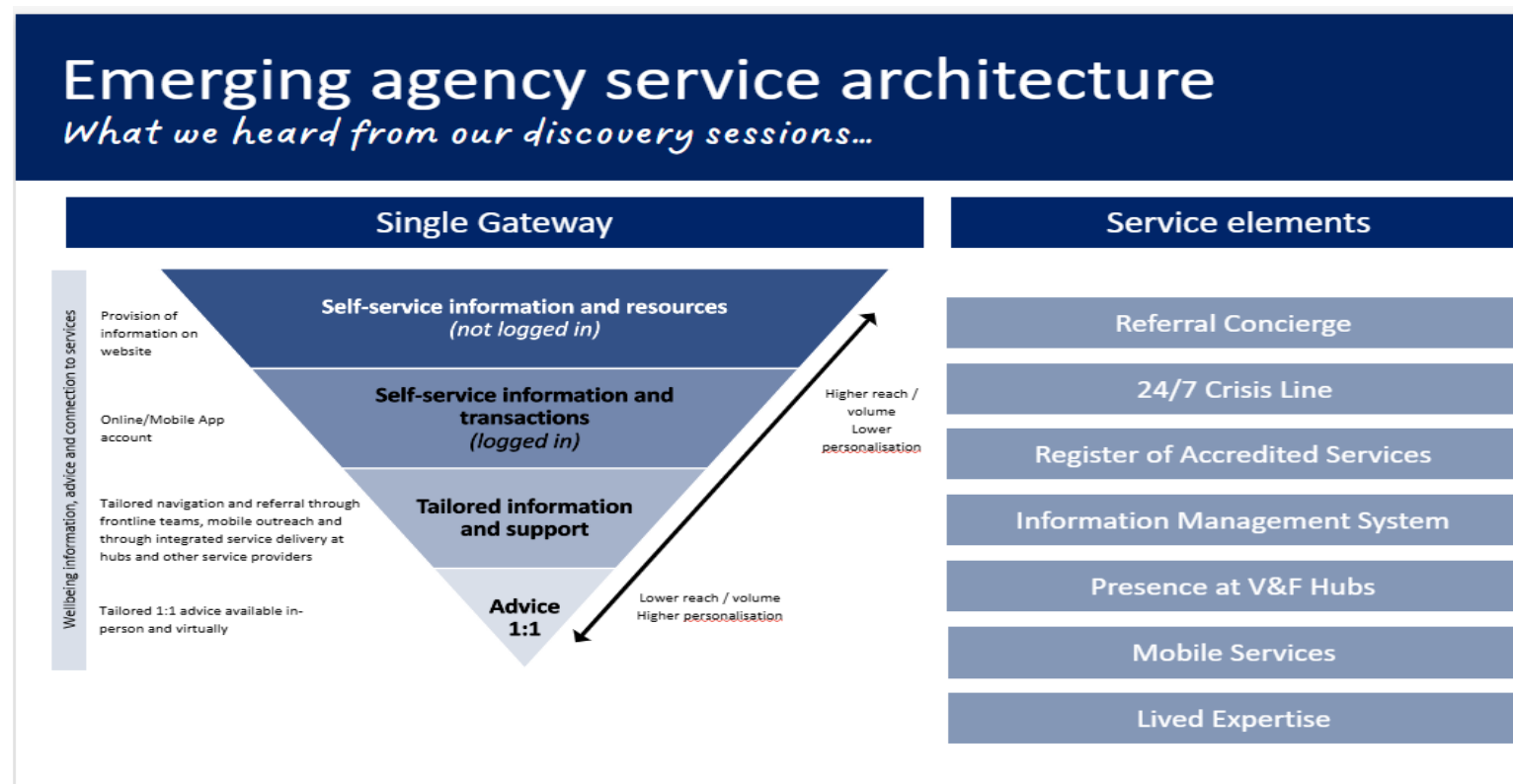
The key features of the new service architecture hosted by the Agency (also understood as dimensions of trust building) could be based upon the following design principles

1. **No wrong door** – The agency is a consistent, trusted touchpoint for wellbeing information, guidance and service connection for all.
2. **Build trust** – The agency says what it will do and does what it says. Trust is built through its promise and actions.
3. **Empowerment and self-agency** – Through information and education veterans and families are empowered to live well at all life stages.
4. **Choice and control** – Veterans and families have choice and are in control of their decisions.
5. **Lived expertise** – The agency staff and leadership have lived expertise and drive a culture of inclusivity, empathy and accountability.
6. **Safe to engage** – The agency is trauma-informed, has cultural competency and is inclusive.
7. **Best practice and continuous improvement** – The agency builds on best practice and informs continuous improvement across Government and the service sector.

Game Changer 4. Connection to community and connection to services via Veterans' and Families' Hubs

Military life fosters strong bonds and a deep sense of belonging for both veterans and families. It is therefore perceived as crucial to the wellbeing of veterans and families that they can find new purpose and connect with a community where they can experience a renewed sense of belonging post transition. This requires mechanisms to build social connectedness at the community level. Discovery workshop participants viewed the creation of local Veterans' and Families' Hubs as a promising investment in this regard.

Figure 2. What Veterans and Families Connect could look like



Hubs can be a focus for the delivery of effective place-based wellbeing strategies if they can provide a space for the co-location of a critical mass of wellbeing services united by a common vision and sense of purpose (e.g. Open Arms, VANs etc) and enacted through a community wellbeing plan that focuses on delivering tangible outcomes for veterans and families. It also provides a space for integrating mainstream services into the wellbeing community of practice.

Local Veterans' and Families' Hubs led by peers with lived expertise can provide the best possible community setting for building trust systems with veterans and families. However, workshop participants stressed the importance of Agency visibility in the hubs to avoid the criticism that the agency is purely a product of the "Canberra bubble".