

# Veteran Wellbeing Action Plan

2023-26





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# PURPOSE OF THE PLAN

The Veteran Wellbeing Action Plan seeks to improve health and wellbeing outcomes for veterans and their families, with actions across three priority areas over the medium term (2023-26):



## SUPPORTING ACCESS TO HEALTH CARE

The area of veteran health and wellbeing continues to evolve. It is important that we regularly review our policies and adapt our response to ensure the needs of veterans, their families and the South Australian veteran community are met.



## SUPPORTING VETERAN WELLBEING

This Plan has been developed in consultation with stakeholders in the South Australian veteran community, following a review of the [Framework for Veterans Health Care 2016-2020](#).

The Plan includes action-based outcomes to address the main challenges identified in veteran health and wellbeing.



## BUILDING BETTER EVIDENCE (DATA)

# THE VETERAN HEALTH ADVISORY COUNCIL

The [Veterans' Health Advisory Council \(VHAC\)](#) advises the Minister for Health and Wellbeing on health issues of veterans and their families, war widows and widowers, and advocates on their behalf. The VHAC meets at least four times a year.

The VHAC was established by the Minister in 2009 as one of the Health Advisory Councils. Council members are appointed by the Minister and have knowledge and experience in matters relating to veterans' health and wellbeing.

## CONTEXT

### BROADER DEFINITION OF A VETERAN

For this Plan, a veteran is defined as anyone who has served in the Australian Defence Force (ADF), including the Reserve Forces. It is recognised that some people do not identify as a veteran and may prefer to be considered as former serving. Also, that some people choose to be identified as neither a veteran nor former serving. It is recognised that there are Australian residents and citizens who are veterans that have served not in the ADF, but in other armed forces.

Stakeholders such as the families, carers, and support networks should also be included in a broader approach to veteran wellbeing. We acknowledge that families of veterans may experience certain challenges attributable to the military service of the family member.

### NUMBER OF VETERANS

Data obtained in the 2021 census indicates that one in twenty (5.3%) of Australian households reported at least one person who had served or is serving in the ADF.

Nationally 581,139 Australians have served or are currently serving in the ADF.

47,852 South Australians have served or are currently serving in the ADF (3.2% of the population). There are 3,940 (8.2%) current serving members and 2,053 (4.3%) serving in the reserve service only. The number of former serving members is 41,861 (87.5%). (Figure 1)

In South Australia:

- > 86% are male; 14% are female.
- > 152 (2.54%) of currently serving and in the reserves service, and 549 (1.31%) of former serving identify as having Aboriginal and/or Torres Strait Islander origin.<sup>1</sup>
- > 24,032 (50%) are aged 65 or older (Figure 2)

It is recognised that data on the number of veterans collected by the Department of Veterans' Affairs (DVA) is different to the number of veterans reported in the Census 2021.

Statistics in the [DVA Quarterly Report](#) published in December 2022, reflect that 51% of the number of treatment card holders in South Australia (DVA white and gold card) were aged 60 and over.

<sup>1</sup> Number of South Australian veterans who identify as Aboriginal or Torres Strait Islander, provided by Aboriginal Veterans South Australia (AVSA).

2021 CENSUS



**ONE IN TWENTY** (5.3%)

of Australian households reported at least one person who had served or is serving in the ADF

### IN SOUTH AUSTRALIA:



**47,852**

South Australians have served, or are currently serving

**5,993**

serving members

**41,861**

former serving members

**86%**  
are male



**14%**  
are female



**152** (2.54%)

of currently serving ADF members

AND

**549** (1.31%)

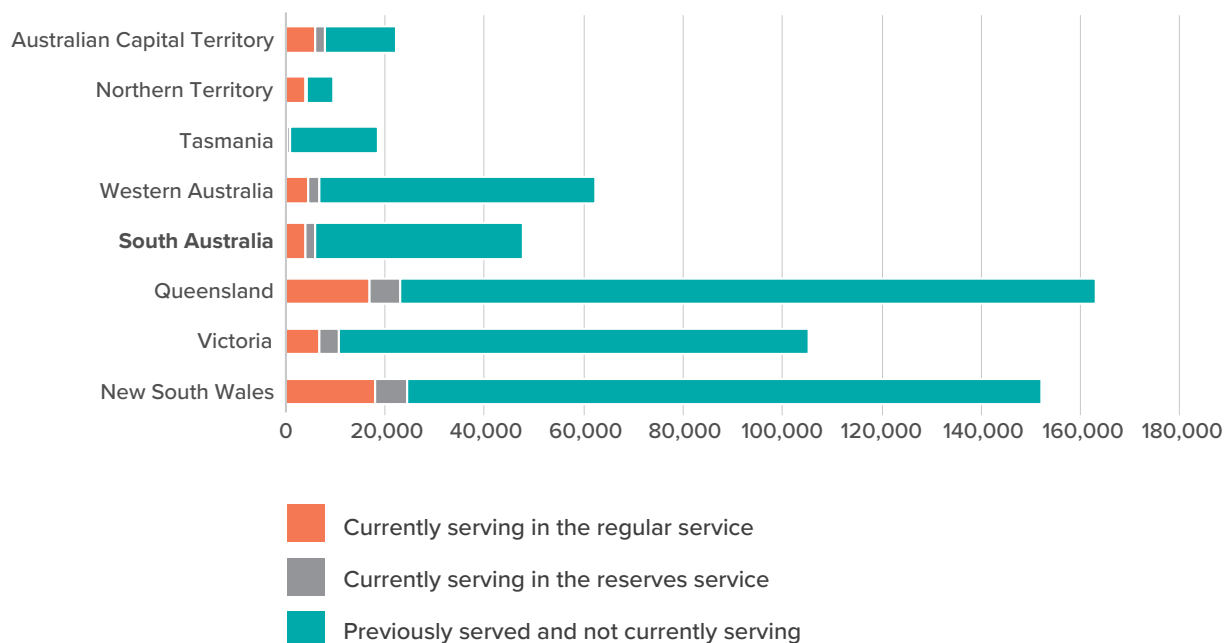
of previously served, identify as having Aboriginal and/or Torres Strait Islander origin



**24,032** (50%)

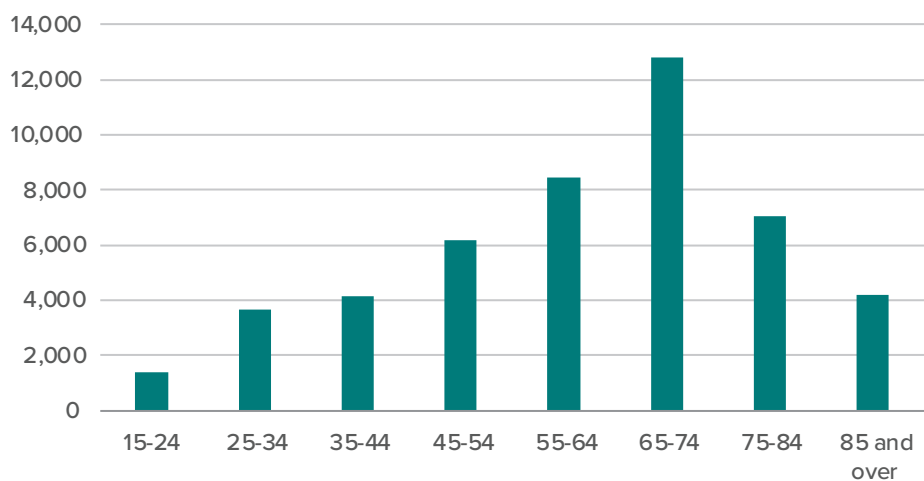
are aged 65 or older

**Figure 1** Service in the Australian Defence Force by state and territory



Source: Australia Bureau of Statistics, Service with the Australian Defence Force, Census 2021.

**Figure 2** South Australians who have served in the ADF



## CHALLENGES FOR VETERAN HEALTH AND WELLBEING

Veterans and their families face unique challenges because of their service and the diverse demographics within the veteran community may have different health, wellbeing, and social connection needs.

More than half of veterans consulted in the Census have reported a long-term health condition (57%). The top three conditions reported were arthritis (22%); heart disease (15%); and mental health (15%).

Preferences differ in how veterans access services, in the way they seek connection with other veterans and the types of services they need.

Below are some significant areas important for this Plan.

- > We recognise that the needs of veterans and their families span across several domains, for example, accommodation, employment, social needs, education support and health needs, both generally and those stemming from military service.
- > We recognise that there may be specific needs within groups of veterans and that these areas may require further research, for example, female veterans, Aboriginal and Torres Strait Islander veterans, aged veterans and veteran families, including children.
- > Transition from current serving is a crucial point where veterans may face challenges in navigating and accessing required services.
- > Veteran identification in the health system is impacted by known data constraints, that makes it difficult to routinely identify veterans (who do not have a DVA entitlement) and understand their needs and use of health and wellbeing services. Presently, the data is only available for white and gold card holders<sup>2</sup> and therefore only representative of the 'compensable veterans' cohort.

- > Ex-Service Organisations (ESOs) are an engaged sector and valued partners in meeting the complex and evolving needs of veterans. There is opportunity to better support the role of ESOs in South Australia, to deliver services that benefit veteran wellbeing<sup>3</sup>.

## THE ROYAL COMMISSION INTO DEFENCE AND VETERAN SUICIDE

The [Royal Commission into Defence and Veteran Suicide](#) was established on 8 July 2021. An Interim Report, published on 11 August 2022, contains 13 recommendations about urgent and immediate issues, many indicating the need to improve accessibility to compensation and support services.

The findings and recommendations of the final report will highlight key priorities and future actions to be undertaken, recognising that priorities at a national level may shift significantly over the next three years.

Although the scope of this Action Plan differs from the Royal Commission, we acknowledge systemic improvements are needed to ensure the veteran population is appropriately supported (particularly post-service) to live a life they value. The final report of the Royal Commission is due on 17 June 2024.

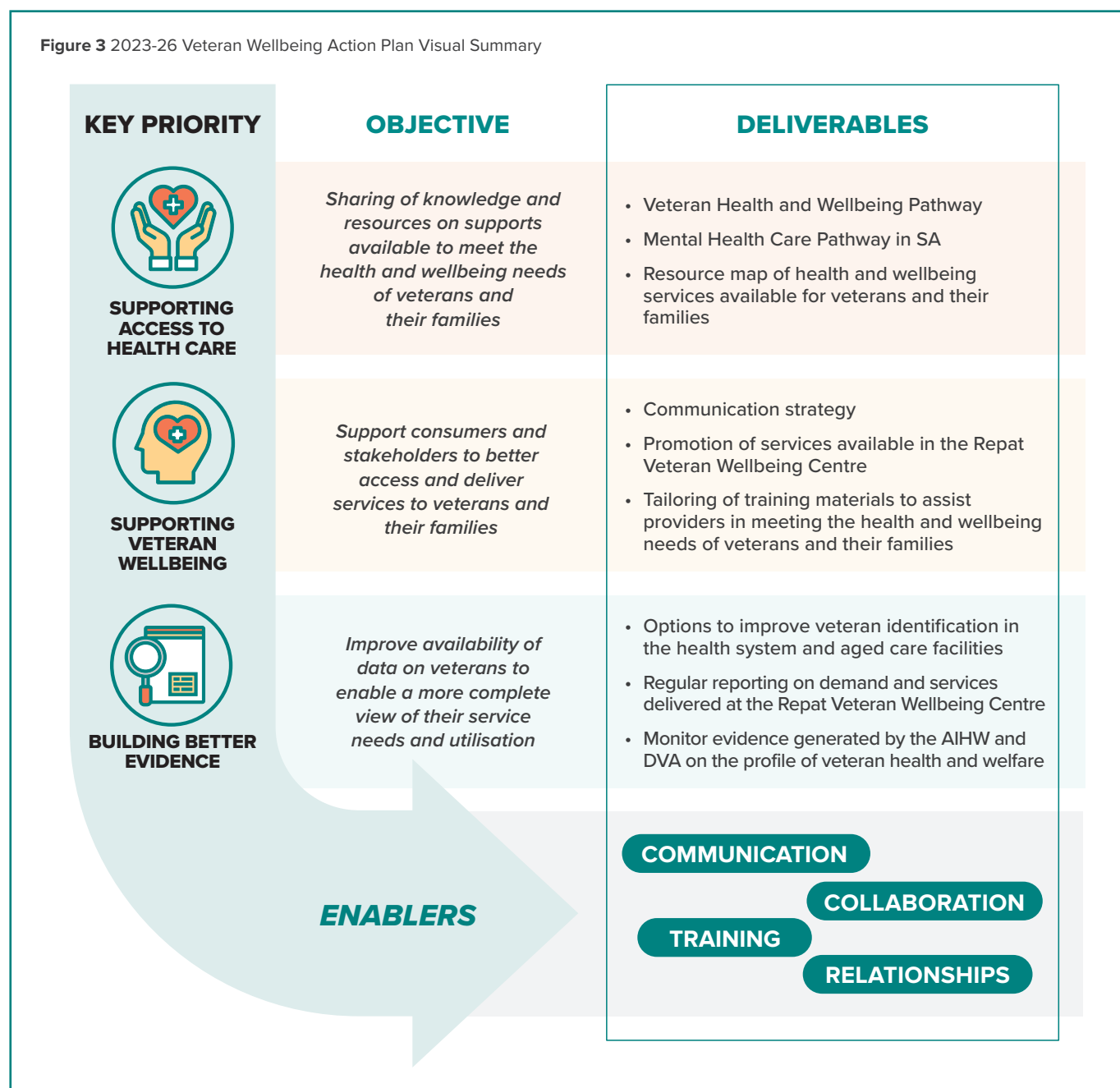
<sup>2</sup> The [White Card](#) is a treatment card that provides for medical treatment for accepted service-related injuries or conditions and all mental health conditions (for veterans with continuous full-time service or certain reserve service and other non liability conditions as determined by DVA). The [Gold Card](#) is a treatment card that provides for clinically required treatment for all medical conditions. Gold card holders can also access a range of services and support and is also available to eligible veteran dependants.

<sup>3</sup> The Ex-Service Organisations Mapping Project, conducted by the Aspen Foundation in May 2016, quantified that from approximately 2,780 ESOs across Australia, 10 per cent are located or have representation in South Australia. Source: Aspen Foundation (2016) [Ex-Service Organisation Mapping Project – Final Report](#).

# VETERAN WELLBEING ACTION PLAN'S KEY PRIORITIES

The Plan's key priorities contain areas for tangible and impactful veteran wellbeing outcomes in South Australia.

The Plan acknowledges the role of communication, collaboration, training, and relationships as enablers for delivery on its key priorities.







## SUPPORTING VETERAN ACCESS TO HEALTH CARE

### Why this is important

- > Transition from current serving presents opportunities to connect veterans with the public health system, leveraging off the work of the [Joint Transition Authority](#).
- > Mental health and suicide prevention is a focus at national and state levels, for both the general population and for veterans. South Australian veterans have free access to high quality mental health services delivered by a range of organisations. It is critical that veterans are enabled to connect with all services available to them.
- > The role of ESOs is vital to support veterans and their families connecting to required services and supports, and to strengthen wellbeing services for veterans and their families.

### Priority Actions

- Map a Veteran Health and Wellbeing Pathway to information and resources for veterans seeking support, across the life course, addressing service gaps and duplication, and to connect transitioning veterans with appropriate health care and mental health services.
- Ensure that specific options for veterans requiring support when experiencing a crisis are mapped and promulgated through the development of the Veteran Specific Pathway and associated information materials.
- Map the veteran Mental Health Care Pathway in South Australia, commencing at transition from the ADF and progressing through to end-of-life.
- Explore current data available on service utilisation (e.g. psychiatry, drug, and alcohol services) both in the public and private sector to identify areas of greater demand and/or importance for the veteran community.



## SUPPORTING VETERAN WELLBEING

### Why this is important

- > Wellbeing is increasingly recognised as an integral component of physical and mental health. Importantly, in the veterans' context, improving mental health and wellbeing can reduce the risk of suicide.
- > The establishment through Commonwealth funding of a dedicated Veteran Wellbeing Centre at the Repat Health Precinct has been a welcome addition to the network of services available for veterans and their families. ESOs are critical implementation partners in providing access to compensation, health and wellbeing services and support for veterans and their families to access a range of services.
- > Most of the Veteran Compensation and Wellbeing Advocacy services in South Australia is provided by volunteers, and support for the veteran advocacy sector in South Australia is crucial for its sustainability. A collaborative partnership with the largest group of volunteer advocates has been established at the Veteran Wellbeing Centre at the Repat Health Precinct.

### Priority Actions

- Develop a communication strategy for veterans and their families in South Australian to provide information and material on health services and resources to support health and wellbeing, including for older veterans and those in residential aged care facilities.
- Strengthen communication to various veteran groups about community activities, both general and veteran specific, and services available to promote health and wellbeing.
- Review and update existing training resources which aim to improve understanding of health and wellbeing needs of veterans and their families, for use by clinicians and other staff working with them. As part of this, the opportunity to adapt the resource to different service sectors will be explored.
- Continue to work with the Repat Veteran Wellbeing Centre to evolve its Service Model, building on the existing referral pathways to connect veterans to additional complementary services.
- Support and strengthen the Veteran Wellbeing and Compensation Advocacy work through promotion of its services at the Repat Veteran Wellbeing Centre.



## BUILDING BETTER EVIDENCE

### Why this is important

- > Data is a critical enabler for improved services and can contribute towards the generation of objective information on the needs of veterans, demonstrated by the services they access. Future service development is hampered by poor data.
- > Improved data will serve to establish parameters with which to measure efforts related to the improvement of veterans' health and wellbeing (including suicide prevention) and help both the veteran and health sectors to respond to findings of the Royal Commission.
- > Understanding the number of veterans who are present in the community can assist with modelling projected demand for services and planning their delivery accordingly. The inclusion of veteran status into the Census is a positive step towards this.

### Priority Actions

- Explore options to improve veteran identification in the SA Health's patient administration system 'Sunrise'.
- Work with regional SA Health aged care providers to explore capturing veteran status on intake.
- Develop regular reporting on services delivered to veterans and their families through the Veteran Wellbeing Centre.
- Monitor progress of the Australian Institute of Health and Welfare (AIHW) and DVA partnership to develop a comprehensive profile of veteran health and welfare.

# NEXT STEPS – IMPLEMENTING THE PLAN

The Veteran’s Health Advisory Council (VHAC) will have oversight of the implementation of this Action Plan. Regular progress reports from SA Health may be sought by VHAC to monitor implementation of actions in the Plan. Implementation activities for the project team will include:

- > Develop an Implementation Plan with deliverables and time frames to deliver actions.
- > Scoping and planning the work for improving access to services through developing information and resources for use by veterans and their families and internal and external service providers.
- > Continuing to support the work of the Royal Commission into Defence and Veteran Suicide.
- > Ongoing exploration of available data sources for action and further research.
- > Scoping and investigating the process required to improve veteran identification in the public health system, as well as improved collection and reporting of data.
- > Collaborating and consulting with relevant veteran stakeholders and the community on health and wellbeing outcomes for veterans and their families in South Australia.
- > Communication with stakeholders and the veteran community.



For more information

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