



# VETERAN AND SERVICE PEOPLE SUICIDE PREVENTION POLICY POSITION MARCH 2020

## POSITION

1. Every suicide death is a tragedy and it is especially tragic to hear that our servicemen and woman, who' have dedicated their lives to our country, are taking their own lives
2. Suicide Prevention Australia has welcomed the appointment of a National Commissioner for Defence and Veterans Suicide, as this dedicated senior resource will provide oversight, coordination and much needed policy attention to the issues.
3. Suicide Prevention Australia calls on the Commissioner to act on two key areas:
  - a. Accurate, reliable, timely data on veteran and defence suicide
  - b. speeding up the compensation claiming process.

## CONTEXT AND COMMENTARY

We must address the high suicide rates among veterans and servicemen and women, who have dedicated their lives to serving the nation.

Veterans face unique challenges that increase their risk factors for suicide including re-transitioning to civilian life, finding post-military employment, securing housing, re-adjusting to the isolation from the military unit and the independence associated with civilian life, challenges in joining supportive communities, restoration or renewal of prior relationships and the establishment of new ones<sup>1</sup>.

### The need for accurate, reliable, timely data

The latest available data from the Australian Institute of Health and Welfare shows that more than 400 veterans, servicemen and women have taken their own lives since 2001<sup>2</sup>. This may not, however, be the full picture as there are significant discrepancies between the data reported by Government bodies and the information reported by advocacy groups.

The high suicide rates among service people highlights the urgent need for accurate, reliable and complete data on veteran suicide deaths. The sector cannot tailor services and programs if information is lacking on when, how many and why our serving and ex serving personnel are taking their own lives. Similarly, we cannot accurately assess whether early intervention and response services and programs are working if we are not monitoring their performance via the outcomes they achieve.

<sup>1</sup> Speer, M, Phillips, M, Winkel, T, Wright, W, Winkel, N and Reddy, S, *Serving Those Who Serve: 'Upstream Intervention and the Uphill Battle of Veteran Suicide Prevention in the US'*, <accessed online on 29 November 2019 at> <https://www.healthaffairs.org/doi/10.1377/hblog20190709.197658/full/>

<sup>2</sup> Australian Institute of Health and Welfare, *National suicide monitoring of serving and ex-serving Australian Defence Force personnel: 2019 update*, <accessed online on 29 November 2019 at> <https://www.aihw.gov.au/getmedia/99c20935-ac59-4a78-88d7-e37b6cd3b969/aihw-phe-222.pdf.aspx?inline=true>

There are crisis services available 24/7 if you or someone you know is in distress:

**Lifeline:** 13 11 14

**Suicide Call Back Service:** 1300 659 467

[www.lifeline.org.au](http://www.lifeline.org.au)

[www.suicidecallbackservice.org.au](http://www.suicidecallbackservice.org.au)

**Suicide Prevention Australia**

**Phone:** 02 9262 1130

**Email:** [admin@suicidepreventionaust.org](mailto:admin@suicidepreventionaust.org)

**Web:** [www.suicidepreventionaust.org](http://www.suicidepreventionaust.org)

We need reliable data at a national level on veteran suicide. A first priority for the National Commissioner for Defence and Veterans Suicide should be to work with the AIHW to improve the timeliness, accuracy and frequency of reporting on suicide deaths involving veterans and service people, as well as supporting intergovernmental information sharing on the same issue.

The availability of accurate, reliable, timely data on suicide deaths, including suicide deaths involving veterans and service people, also hinges on every jurisdiction putting in place a Suicide Deaths Register. Suicide Deaths Registers are already in operation Victoria, Tasmania and Queensland, and the other jurisdictions should follow suit.

### **Compensation claim processes and systemic delays require reform**

The issues concerning delays in processing compensation claims and administrative delays have been well documented by numerous Government inquiries.

The Senate Inquiry Report *The Constant Battle: Suicide By Veterans* (2017) found the legislative framework for the veterans' compensation system to be complex and difficult to navigate. The Committee was concerned that inconsistent treatment of claims for compensation and lengthy delays in the processing of claims were key stressors for veterans and their families, and said it was time for a 'comprehensive rethink of how the system operates'.<sup>3</sup> More recently, the Productivity Commission's wide ranging inquiry into veterans services found that despite some recent improvements to the veterans' compensation and rehabilitation system it is out-of-date and is not working in the best interest of veterans and their families, or the Australian community.<sup>4</sup>

Suicide Prevention Australia is of the view that boosting the capacity of the Department of Veteran Affairs (DVA) to quickly, efficiently and sensitively deal with veteran claims should be a top priority. Veteran claims have increased by more than 80% over this past two years and there is limited evidence suggesting that additional resources have been allocated to meet this demand. We particularly need to see shorter timeframes for the permanent impairment application process which can take more than 22 weeks, placing veterans and their families through significant financial and emotional stress.

### **A whole of person and whole of government is required to address veteran suicide**

Veterans face unique challenges that increase their risk factors for suicide including re-transitioning to civilian life, finding post-military employment, securing housing, re-adjusting to the isolation from the military unit and the independence associated with civilian life, challenges in joining supportive communities, restoration or renewal of prior relationships and the establishment of new ones<sup>5</sup>.

With the rates of veteran suicide increasing nationally, holistic innovative solutions are necessary to adequately address needs of this population.

Recent Government Inquiries have highlighted the need to invest in prevention and early intervention strategies to improve health and wellbeing outcomes for veterans. As identified by the Productivity Commission, the system fails to focus on the lifetime wellbeing of veterans.

---

<sup>3</sup> Australian Government Response to the Foreign Affairs, Defence and Trade Committee Report (2017). *The Constant Battle: Suicide by Veterans*, October 2017, accessed online at <<https://www.dva.gov.au/sites/default/files/files/consultation%20and%20grants/reviews/Government%20Response%20-%20The%20Constant%20Battle.pdf>>.

<sup>4</sup> Productivity Commission 2019, A Better Way to Support Veterans, Overview and Recommendations, Report no. 93, Canberra, accessed online at <<https://www.pc.gov.au/inquiries/completed/veterans/report/veterans-overview.pdf>>.

<sup>5</sup> Speer, M. Phillips, M. Winkel, T. Wright, W. Winkel, N. Reddy, Swapna.R. *Serving Those Who Serve: Upstream Intervention and the Uphill Battle of Veteran Suicide Prevention in the US*, online article, <https://www.healthaffairs.org/doi/10.1377/hblog20190709.197658/full/>

There are crisis services available 24/7 if you or someone you know is in distress:

**Lifeline:** 13 11 14

**Suicide Call Back Service:** 1300 659 467

[www.lifeline.org.au](http://www.lifeline.org.au)

[www.suicidecallbackservice.org.au](http://www.suicidecallbackservice.org.au)

**Suicide Prevention Australia**

**Phone:** 02 9262 1130

**Email:** [admin@suicidepreventionaust.org](mailto:admin@suicidepreventionaust.org)

**Web:** [www.suicidepreventionaust.org](http://www.suicidepreventionaust.org)

A future veteran support system needs to have a focus on the lifetime wellbeing of veterans and should be redesigned based on the best practice features of contemporary workers' compensation and social insurance schemes, while recognising the special characteristics of military service.

Submissions to the 2017 Parliamentary Inquiry into Suicide by Veterans and Ex-Service personnel highlight the potential efficacy of alternative non-clinical therapies for veterans who may have mental health conditions related to their service, which include yoga, meditation, assistance dogs, equine therapy and medicinal cannabis. Veterans Affairs agencies in the United States, Canada and the United Kingdom have proven to be far more open to funding pilot programs and initiatives to explore these types of approaches (Equine Therapy again as an example) so the evidence about their efficacy can be gathered.<sup>6</sup>

DRAFT

---

<sup>6</sup> Foreign Affairs, Defence and Trade References Committee. (2017). *The Constant Battle: Suicide by Veterans*, The Senate, August, accessed online at

<[https://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate/Foreign\\_Affairs\\_Defence\\_and\\_Trade/VeteranSuicide/Report](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Foreign_Affairs_Defence_and_Trade/VeteranSuicide/Report)>.

There are crisis services available 24/7 if you or someone you know is in distress:

**Lifeline:** 13 11 14

**Suicide Call Back Service:** 1300 659 467

[www.lifeline.org.au](http://www.lifeline.org.au)

[www.suicidecallbackservice.org.au](http://www.suicidecallbackservice.org.au)

**Suicide Prevention Australia**

**Phone:** 02 9262 1130

**Email:** [admin@suicidepreventionaust.org](mailto:admin@suicidepreventionaust.org)

**Web:** [www.suicidepreventionaust.org](http://www.suicidepreventionaust.org)