

Good morning Chair, Senators, Committee members

My name is Kelliagh Jackson, I'm appearing as the Chief Executive Officer of Advocates Online, Professional advocates and Custodians, dedicated to the personal, social and economic dignity of veterans and their families. I am a 22 year military veteran, who medically discharged in 2018 without adequate support or understanding of the superannuation system, either at 18 when I joined, or at 22 when I changed to MSBS, or in fact at 50 when I discharged, despite having a Masters of International law.

As the Vice Chair of the Veteran Professional Standards Australia Advisory Committee (VAPSA) I am acutely aware of the complexity and challenges veterans and their families experience from the beginning of their careers. It is not welfare veterans want, its knowledge and the right to make good decisions for themselves. This is provided through government, the law, leadership, resourcing and a willingness to continuously improve. I do not present to the Committee with opinion, I come with lived experience, a learned mind and evidence.

This inquiry is important to veterans, their families and the Australian Government. The commitment to ensuring the personal, social and economic dignity of veterans and their families is every Australian's responsibility. We find it enshrined in legislation, in our oaths and through our fiduciary duties. Ministerial accountability belongs to the Prime Minister of Australia, Minister for Defence, Minister of Finance and the Minister Veteran Affairs. Until they harmonise their respective roles, and responsibilities veterans will continue to suffer disadvantage.

As Australian citizens, we have all made a commitment to the Veterans' Covenant, which is a formal promise from the Australian people to recognise and support current and former ADF members and their families. It acknowledges the unique nature of military service and sacrifice. We are obligated, in fact duty bound, to ensure those who make the commitment to serve in the ADF are looked after during and after service and we must ensure they suffer no disadvantage as a result of their service to the nation. Veterans don't want welfare, they want justice, to be seen, heard and for those employed to provide decisions, to do so not just in good conscience, but in accordance with the law.

The CSC Trustees have a legal and ethical obligation to do so. Veterans are exposed to a far greater probability of permanent and degenerative injury, illness and disadvantage from the time they sign the dotted line. This is confirmed by the Defence Act, Veteran Entitlement Act, Military Compensation and Rehabilitation Act, Australian Veterans' Recognition (Putting Veterans and Their Families First) Act and role performed by the Defence Force Remuneration Tribunal, an independent statutory body established under the Defence Act. The various Acts confirm veterans are a special class of citizen, not because of intellect, because of their exposure to sometimes severe occupational

Here are the consequences of poor interpretation of policy and the imperfection of a system reliant on individuals without the right understanding, training, advice, resources and leadership:

John joined in September 1988 as an Infantry Private. He served through to 2000 achieving the rank of Corporal. On 19 June 2008, at the age of 57 John was re-enlisted to the Army not because they were desperate for a body, but because of the directed recruiting requirements, and he was going to be a dental assistant, to meet the directed training requirement.

At 57, with already 20 years of experience in full and part time Army, he was sent back to Kapooka. In full transparency, upon re-enlistment he declared his knee issues. Within 16 days his knee condition was materially aggravated. There was no other event that led to his knees being so bad he could barely walk. Having met the previous requirements, he now became an 'attrition' statistic. He was medically separated on 6 July 2008 just over 2 weeks later. He was denied an invalidity pension because a medical doctor failed to state his pre-existing condition was material aggravated. He had given up his business, couldn't go back to work, and now lives in a shipping container in a storage yard. Destitute.

Now there is Hank: A 17 year special forces veteran with 11 deployments. Multiple physical and mental health injuries, and yet the enduring spirit of the ANZACs burns hot in his veins. Despite the complexity and multimorbidity of his conditions, he's a proud man, a husband and father, who has a family to support. Unable to perform his defence role, he studied, and secured a job post service. Relying on his residual functional capacity he continued to contribute to the economic wellbeing of his family and not drown in the reality of his situation in his late 30s. His application for retrospective invalidity denied, not based on the medical evidence readily available to the CSC Trustees but because Joint Health Command decided, by way of desk top review, and a bland medical file, nothing was wrong with him. Despite having 69 MRCA impairment points and a gold card, which was sent to the ADF to put on the members medical file, but didn't. Four years later, we are still trying to wade through the ADF and CSC processes, none of which quote a wait time of under a year. A family left abandoned and in distress.

Or there is the young RAAF Air Field Defence Guard, recently told the only way he could get upgraded to a Class A is if he ceased working. I remind the Chair and Committee a Class A pension requires the member to be deemed largely impaired for the work he is reasonably qualified, or 60%. That means he could work 3.2 hours a day for five days a week in the same job. Now we are at RECON, another year to wait to appeal when the medical doctors already stated he was largely impaired from the date of his discharge.