

Inquiry into Suicide in Australia

Department of Veteran's Affairs

Submission to the Senate Community Affairs Committee

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Introduction

The Australian Government's Department of Veterans' Affairs (DVA) welcomes this inquiry into suicide in Australia. As the agency responsible for providing programs and services to assist the veterans and the ex service community, DVA is committed to supporting veterans at risk of suicide and increasing the awareness of members of the veteran community about suicide prevention.

Mental health is an important issue for the veteran community. DVA is committed to ensuring appropriate, accessible, efficient, accountable, and evidence based mental health care for the veteran community. This is reflected through five strategic directions that provide the operational framework for the implementation of the mental health policy. These are:

1. Creating awareness and understanding of mental health through education and training around mental health issues and DVA services.
2. Developing sustainable mental health services and programs, and improving the integration and coordination of mental health services.
3. Recognising and supporting the role of carers and families.
4. Strengthening partnerships with key stakeholders, including primary, secondary and tertiary service providers, the Departments of Defence and Health and Ageing, non-government organisations, the VVCS - Veterans and Veterans Families Counselling Service and ex-service organisations.
5. Building and using an evidence base.

Under this policy, DVA works closely with the Departments of Defence and Health and Ageing, as well as other key agencies, to enable a broader understanding and application of suicide prevention within the ex-service community, as well as mental health issues generally. DVA also works within the Council of Australian Government's (COAG) mental health reform package and is providing a range of initiatives consistent with COAG's National Action Plan on Mental Health. DVA aims to ensure the veteran community can access a wide range of mental health services available to the general community as well as veteran specific services.

Independent Study into Suicide in the Ex-Service Community

As part of its 2007 election commitment, the Australian Government committed to conducting a study that examines the broad issue of suicide in the ex-service community, including a number of specific cases of suicide over the last three years, to help identify:

- ex-service members who are at increased risk of self harm;
- common contributing factors among ex-service members who committed or attempted suicide;
- the extent of suicide in the ex-service community;
- lifestyle or other factors that may be contributing to suicide in the ex-service community; and
- recommended administrative reforms or initiatives to help combat suicide in the ex-service community.

In August 2008, DVA commissioned Professor David Dunt, a public health specialist and epidemiologist at the University of Melbourne, to conduct the suicide study. The Suicide Study report, together with the Government's response, was publically released on 4 May 2009 and is available at www.dva.gov.au. The recommendations cover wide ranging matters, including strengthening mental health programs, including suicide prevention, the use of experienced case coordinators for complex cases, and ensuring that administrative processes are more 'user-friendly'. The Report made 21 Recommendations - the Government accepted 20 recommendations with the remaining one accepted in principle.

The Suicide Study is an important step in helping identify and provide the support needed by members of the veteran community when dealing with mental health concerns and will provide a key platform to assist the Government to improve mental health services for the veteran and ex-service community. The Government allocated \$9.5m over four years in the 2009 Budget to implement the recommendations in order to strengthen and improve the range of mental health services provided, particularly in relation to suicide prevention, to support the veteran community.

The Suicide Study included examination of specific cases of suicide, risk factors and an international literature review.

A copy of Professor Dunt's report, together with the Government's response, is at [Attachment A](#).

Professor Dunt was also contracted to conduct a review of Mental Health in the ADF and Transition through Discharge. This report, together with the Government's response, is also publically available on line (www.defence.gov.au/health/).

DVA specific initiatives

The mental health of Australia's veterans and the ex service community is a major priority and the Department provides a comprehensive range of mental health services to veterans, serving defence personnel and their families, through general practitioners, specialists, allied health providers and the VVCS - Veterans and Veterans Families Counselling Service. Some specific initiatives are listed below.

Operation *Life* Suicide Prevention Framework

Operation *Life*, the National Suicide Prevention Strategy for the Veteran Community was developed in 2007 as a framework for action to prevent suicide and promote mental health and resilience across the veteran community. Operation *Life* was developed in consultation with the veteran community and the Departments of Defence and Health and Ageing. Operation *Life* was developed from the Living Is For Everyone (Life) National Suicide Prevention Strategy, but is specifically targeted to the veteran community. Consultation with the ex-service community and focus groups assisted the Department to target this material to the veteran community. Operation *Life* has five priority areas, which are to:

- promote resilience, mental health and well-being across the veteran community through education, training and self-awareness;
- enhance protective factors by reducing risk factors for suicide and self-harm within the veteran community;
- deliver support through the VVCS – Veterans and Veterans Families Counselling Service - and allied health providers for veterans and their families at increased risk of suicide;
- develop partnerships with the veteran and ex-service community through such areas as the men's health peer education facilitators and TIP trainers; and
- research the evidence base for suicide prevention and good practice through a variety of initiatives.

A major component of the framework consists of a choice of suicide prevention workshops, as well as the provision of information on treatment services that are readily available to the veteran community. There are currently three suicide prevention workshops available to members of the veteran community. These workshops aim to equip advocates, pension and welfare officers, as well as veterans, family members and carers with skills and knowledge to identify people in the veteran community who are at risk of suicide and help those at imminent risk to stay safe and seek further help. The workshops include:

- safeTALK: suicide alertness for everyone – a four hour workshop;
- ASIST: applied suicide intervention skills training – two day workshop; and
- ASIST Tune Up : a half day refresher workshop that consolidates and refines the learning from ASIST.

A review of the workshops will be undertaken in 2010 to ensure they are evidence based. DVA is currently investigating the extension of Operation *Life* to introduce online counselling and support services for veterans and their families who may find it difficult to attend face-to-face counselling.

The Ex-Service community has a number of committed advocates who support and promote Operation *Life* workshops.

VVCS –Veterans and Veterans Families Counselling Service

VVCS is a specialised, confidential service that provides nation-wide counselling and support to Australian veteran, peacekeepers, their families and eligible Australian Defence Force personnel. VVCS staff and outreach contractors are qualified psychologists or social workers experienced at working with veterans, peacekeepers and their families and who can provide information and direct support. Veterans and their families can access the counselling services at one of the 15 locations across Australia or by phoning a 24 hour counselling service on 1800 011 046.

Given it is recognised that mental illness has a strong relationship with suicide related behaviours and risks, below are further related programs which assist the veteran community, including aiming to reduce suicide risk factors. It is also considered that discussion of suicide in Australia, enhanced mental health literacy and increased capacity to access appropriate referral and support services are critical elements in any overall strategy to improve mental health wellness and mitigate suicide risk.

At Ease

As part of DVA's commitment to improving the mental health of the veteran community, the *At Ease* mental health awareness campaign was launched in May 2008. The *At Ease* initiative focuses on increased awareness and education about the importance of mental health and self help management strategies. It was developed and tested with the veteran community and encourages veterans to recognise possible signs, take appropriate action, and assume more responsibility for their own health and wellbeing.

The *At Ease* website (www.at-ease.dva.gov.au) is a specialised site for veterans, their partners, carers and children to access information on mental health.

The Right Mix

The Right Mix – your health and alcohol (TRM) health promotion strategy was developed in 2001. This strategy aimed to provide information and opportunities to reduce alcohol-related harm in the veteran community and to assist with informed choices around alcohol consumption and health related issues. A website www.therightmix.gov.au and a resource kit of associated materials were developed in consultation with key stakeholders in the veteran community.

In February 2009, the National Health and Medical Research Council published the *Australian Guidelines to Reduce Health Risks From Drinking Alcohol*. *The Right Mix* website and information kit have been revised to include this new evidence about alcohol use. After extensive consultation, the website also has a new look and smarter interactive tools to help those seeking to modify their alcohol intake.

Mind the Gap: A Physical and Mental Health Comorbidity: Education and Training Package

DVA are funding the Australian General Practice Network (AGPN) to develop and implement an education and training package that provides primary health care practitioners, including general practitioners and practice nurses, with skills to identify, prevent and treat veterans mental and physical health co morbidities. The *Mind the Gap* training package has been trialled and outcomes are currently being evaluated.

Shared Mental Health Care Coordination - Can Do Initiative

The Department has been working closely with the AGPN to develop, implement, deliver and evaluate an education and training package for GPs, drug and alcohol services, inclusive of community pharmacists. The final report of the 'Can Do' Initiative evaluation was provided to DVA in June 2009. Over 260 clinicians have participated in veteran specific 'Can Do' training events across 17 Divisions of General Practice. A further 215 clinicians have enrolled in the online clinical education resource. The evaluation of the 'Can Do' Initiative concluded that "there can be little doubt that the 'Can Do' program has helped to establish a local level primary health care environment which is prepared and ready to better assist veterans with mental health and substance use comorbidity disorders."

The Department is currently examining and considering the evaluation report to examine potential ways to improve liaison with GPs and improve mental health outcomes (especially in the areas of early intervention, prevention, evidence based treatment and targeted referrals) for the veteran community.

The Department is intending to progress further initiatives including doctor and mental health practitioner education with the aims of improved understanding of issues faced by the veteran community, to encourage evidence based treatments and develop improved referral pathways and linkages with VVCS.

Centrelink support

DVA funded Centrelink through a Memorandum of Understanding to revise its Suicide Awareness Staff Training Package to include reference to veterans' mental health issues. This package has been developed and is currently being rolled out nationally across all Centrelink Centres. This initiative recognises that many members of the veteran community may seek information or support through Centrelink.

The major initiatives below are being undertaken collaboratively between the Department of Defence, the Department of Veterans' Affairs and the Australian Centre for Post-Traumatic Mental Health (ACPMH).

Mental Health Lifecycle Package

As part of the Government's 2007 election commitment, funding was provided to implement an Australian Defence Force Mental Health Lifecycle Package. This package includes a number of projects including:

- *Transition Management and Family Support Pilot Project (Townsville)* – project is on target to be completed in 2010.
- *Treatment Options for Hard to Engage Clients* – the final report has been received by the Department and is currently being considered.
- *A Study into Barriers to Rehabilitation* – work is continuing, with the final report due in September 2010.

These studies aim to equip discharging Defence Force members with improved information and referrals to improve their wellbeing and minimise suicide risk. They also aim to better connect with clients who have been identified as having mental health accepted disabilities who have no or little connection with counselling and support services.

Training for Secondary Mental Health Workers

This initiative aims to develop and implement a training package to improve the competencies of community-based mental health practitioners in treating veterans with common mental health problems. A training and competency program for secondary mental health professionals (primarily psychologists) has been developed by ACPMH and will be rolled out nationally over the next three years. There are currently a further nine workshops planned and applications from over 270 participants have been received.

Consultation – The National Veteran’s Mental Health Forum

Consultative arrangements for veterans’ issues were recently reviewed and streamlined with the overarching Prime Ministerial Advisory Council (PMAC) established by the Prime Minister and Minister for Veterans’ Affairs as the main voice for the veteran community to advise the Minister. As part of these consultative arrangements, a National Veteran’s Mental Health Forum was established in 2009 to enable broad consultation on mental health policy and issues. This forum will continue the work undertaken by the previous National Veteran’s Mental Health and Wellbeing Forum, which took a keen interest in suicide prevention in the veteran community.

Suicide prevalence in the veteran community.

Professor Dunt stated in his Suicide Study that the prevalence of suicide in the veteran community cannot be easily determined, but that it is likely slightly higher than the general community. In client records, DVA only codes suicides for veterans whose dependants submit a death claim for the purposes of receiving dependant benefits where the veteran’s suicide is determined to be war caused. The following table represents the number of suicides in the last full five years (1 January 2004 to 31 December 2008) by primary decision, and subsequent decisions that have been overturned at the Veterans' Review Board (VRB) or Administrative Appeals Tribunal (AAT). During this period there have been a total of 30 veterans recorded as committing suicide who have had their death accepted as service related following the lodgement of a death claim under the relevant legislation. More detail is provided in the table below:

| Year of death | Primary Level | VRB | AAT | Total |
|----------------------|----------------------|------------|------------|--------------|
| 2004 | 5 | 1 | 1 | 7 |
| 2005 | 4 | | | 4 |
| 2006 | 5 | 5 | | 10 |
| 2007 | 5 | 1 | | 6 |
| 2008 | 3 | | | 3 |
| Total | 22 | 7 | 1 | 30 |

Notes:

- Records are based on the year of the veteran’s death, therefore a claim that is processed some years after the death will show up in an earlier year, changing the numbers of that particular year.
- The above information only relates to death claims of veterans, as the department only keeps records relating to claims.
- No death claim (and possible suicide information) will be received for clients whose dependant is eligible for an automatic grant of dependant benefits upon the death of the veteran. The only time DVA collects any information about a veteran's death - other than the relevant date - is in regard to a death claim from a surviving dependant where they are seeking to establish a war caused death for manual grant of war widow/ers or orphan's pension. No death-related information other than the date of death is collected for veterans whose surviving dependants do not make a claim for either of these pensions or for veterans with no dependants.

Health Studies

A number of veteran health studies have been conducted in Australia since 1997. These have examined cause of death, including suicide. These are:

- The 1997 *Mortality of Vietnam Veterans Study* concluded that deaths from external causes were not statistically significantly elevated, although there was a suggestion that there may be a slight excess in risk of death from suicide.
- The 2005 *Australian National Service Vietnam Veterans: Mortality and Cancer Incidence Study* concluded that death from external causes was lower than expected when compared to the Australian male population. However, when compared with National Service non-veterans, deaths from motor vehicle accidents and suicide were significantly elevated by 31 per cent and 43 per cent.
- The 2003 *Australian Gulf War Veterans Health Study* concluded that Gulf War veterans had a similar rate of death from external causes as the comparison group (that is one third due to suicide) while the 2006 *Third Australian Vietnam Veterans Mortality Study* concluded that mortality rates from suicide and motor vehicle accidents did not differ from expectation.
- However, the 2003 *Australian Veterans of the Korean War Mortality Study* concluded that the death rate from suicide for this cohort was elevated by 31 per cent.

National Death Index Investigation into the Cause of Death

In late 2008 the Australian Institute of Health and Welfare (AIHW) were contracted to investigate the cause of death of DVA clients by age/sex/conflict with a specific focus on suicide to inform DVA. DVA and AIHW are currently clarifying some anomalies in the data and it is anticipated that this will be resolved in early 2010.

Summary

The *Independent Study into Suicide in the Ex-Service Community* is informing and guiding the work of DVA in the area of suicide awareness and prevention. DVA recognises that suicide is an important issue that needs to be addressed, and DVA is implementing a range of initiatives demonstrating its strong commitment to address the important issue of suicide in the ex-service community.

DVA is also committed to work with other agencies to tackle suicide at all levels.