



18 December 2023

Royal Commission into Defence and Veteran Suicide

By email to: engage@thesocialdeck.com

Dear Commissioners

Re: Proposed new entity to promote the wellbeing of Defence members and veterans

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) welcomes the opportunity to provide feedback on the Royal Commission into Defence and Veteran Suicide's (the Commission's) consultation paper on a proposed new entity to promote the wellbeing of Defence members and veterans (the Consultation Paper).

The RANZCP is responsible for training, educating and representing psychiatrists in Australia and New Zealand. The RANZCP has more than 8,000 members, including around 5,800 fully qualified psychiatrists. We have a Military, Veterans' and Emergency Services Personnel Mental Health Network (MVESPMHN) for psychiatrists and trainees to promote interest and expertise in the mental health of veterans, serving armed forces members, and paid and voluntary serving and ex-serving emergency services personnel. We are also supported by the Department of Veterans' Affairs (DVA) to administer the Military and Veteran Psychiatry Training Program, which supports psychiatry trainee placements in health organisations that predominantly work with military and veteran personnel.

This response follows the RANZCP's detailed <u>general submission</u> to the Commission in 2022, and has been prepared in consultation with the MVESPMHN Committee.

Our feedback to the Consultation Paper is as follows:

- The RANZCP strongly supports the creation of an independent statutory body to oversee
 the implementation of the Commission's findings as described in the consultation paper,
 and agrees with the reasoning presented. The body should provide ongoing oversight of
 defence and veteran wellbeing efforts, including but not limited to suicide prevention,
 across the whole of government.
- The structural independence of the body should be considered carefully. Previous inquiries and commissions, where response was led by the DVA or the Defence portfolio, have not led to authentically operationalised change to the extent that was anticipated. A reporting line directly to the Parliament is suggested.
- The body should also have powers of oversight for relevant state and territory government activity.
- With reference to 5.2(d), monitoring and reporting functions: the body should consider possible improvements to data collection and monitoring of defence and veteran





wellbeing across a variety of government and community services domains – for instance, via health, social services or housing and homelessness services.

• In relation to 6(d), the powers of the body, the RANZCP would discourage the body from investigating individual suicide-related incidents, including reopening previous inquiries or investigations into individual matters. Involvement in Australian Defence Force incident investigations or testimony to previous inquiries and commissions may have been traumatising or retraumatising to the parties involved. Further demands for testimony should be avoided. Such investigations would also duplicate the functions of existing institutions and systems, creating further complexity and uncertainty. Instead, the RANZCP recommends the body take a strategic, systems-based approach to creating change across the whole of government, to support lifetime wellbeing for veterans.

For further background information to this response, please refer to our <u>full submission</u> of September 2022, or to our Position Statements:

- PS 80: The role of the psychiatrist in Australia and New Zealand
- PS 99: The mental health of veterans and defence force service members
- PS 101: <u>Suicide prevention the role of psychiatry</u>.

The RANZCP welcomes any further opportunity to assist and inform the Commission. If you have any questions or wish to discuss anything further, please contact Nicola Wright, Executive Manager, Policy, Practice, and Research via nicola.wright@ranzcp.org or on (03) 9236 9103.

Yours sincerely

Dr Elizabeth Moore

President

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