Summary of key points
Module Four: Veterans' social isolation, mental health and wellbeing

Section One: The Issues

- Many veterans have one or more chronic conditions and have been enrolled on the CVC Program by their GP.
- Chronic physical health conditions can lead to mental health conditions because of the emotional burdens arising from coping with a chronic condition. Chronic conditions can be exacerbated by the presence of mental health conditions.
- Likewise, past mental health conditions can lead to physical health conditions, as veterans age, because they can impact adversely on the veteran's self-care and motivation to seek help, follow health professionals' advice, and manage day-to-day risk factors for overall health and wellbeing.
- Being socially connected means that an individual regularly attends family and community events, plays a role in the community, and has a sense of making a contribution to the wellbeing of others.
- People with fewer than two social contacts per week are considered to be at risk of social isolation.
- Many veterans experience social isolation. Social isolation is a major risk factor for depression.
- Partners and children of veterans, and other ex-serving personnel, have higher rates of depression, anxiety disorders, sleep disorders, acute stress reactions and long-term difficulty in coping with major stressful change than partners and children of non-veterans.
- Upon returning home, many veterans find it difficult to return to civilian life due to their war experiences.
- Many veterans are suffering from post-traumatic stress disorder (PTSD) and receive inadequate treatment. This may lead to outbursts of anger, or even violence, directed towards family members.
- Many veterans with chronic PTSD also have major problems with alcohol and other drugs.
- Homelessness exacerbates social isolation, vulnerability, and other problems.
- Social isolation can lead to poorer physical and mental health, lower self-esteem, and increased risk of suicide.
- Individuals with adequate social relationships have a 50% greater likelihood of survival compared to those with poor or insufficient social relationships.
- The impacts of social isolation exceed many well-known risk factors for mortality.

Section Two: CVC Social Assistance options

- Many veterans suffering from multiple chronic conditions will develop mental health issues as a result of being chronically ill.
- Past (and long-term) mental health issues can lead to the development of chronic physical health conditions, as the veteran ages. This is particularly relevant to the delayed effects of traumatic stress.
• The presence of comorbid mental health and physical health conditions can mean that these conditions exacerbate each other, and this can have significant negative consequences for veterans' social isolation and wellbeing.

• Health care providers must discuss the individual needs of each veteran, with the veteran and their family, to find the appropriate solution from the available options and resources in their community, and to address their social isolation issues.

• Deciding which form of social re-integration is suitable for your veteran patients requires careful consideration of their psychosocial issues, health and medical needs, lifestyle and their perceived needs and preferences.

• A veteran may be eligible for CVC Social Assistance. However, it is important to determine whether they are suitable for it.

• An important step for a health care provider in gaining the trust of a veteran is to understand, or seek to understand, the veteran experience.

• A health care provider must be able to recognise and assess the mental health needs of each veteran. To understand each veteran's unique needs, they must have contact with the veteran over a period of time.

• There are numerous organisations and avenues of support available to reduce the social isolation of veterans. The options available vary from area to area. It is important to research the options available in your area.

• CVC Social Assistance is a one-off, short-term, intensive service (generally up to 12 weeks) to assist veterans and war widows / widowers to become engaged in community activities. A GP must provide a written referral to the VHC assessment agency. The VHC assessment agency is responsible for assessing the referral and determining if social assistance is required, and what that support will involve.

• There is a wealth of information available online to help support veterans, carers, and their families.

Section Three: Bringing it all together

• Many factors can contribute to a veteran, like Roger, experiencing social isolation. Contributing factors can include physical and mental health issues.

• It is important to be able to recognise the signs of depression, and to understand the impact that depression can have on veterans, and the carers of veterans.

• Roger's health care team may consult, and decide that Roger will benefit from social assistance. However, ultimately, it is the VHC assessment agency that determines if Roger, and veterans like Roger, will be eligible for social assistance.

• The GP's written referral should provide information about the broad range of psychosocial and health issues that the veteran is facing. An important component of developing a treatment plan is consultation with the veteran, and their carers.

• Upon completion of the VHC Program, the CVC participant will gain a sense of independence, and grow confident enough to become involved in community based social activities, without the help of the VHC service provider.

• Caring is a physically, emotionally, and financially demanding role for many carers. There are specific services available, through DVA, for carers, as well as general information about services available in the community.