

TRANSCRIPT

LEGISLATIVE ASSEMBLY ECONOMY AND INFRASTRUCTURE COMMITTEE

Inquiry into sustainable employment for disadvantaged jobseekers

Ballarat—Wednesday, 23 October 2019

MEMBERS

Mr John Eren—Chair

Mr Gary Blackwood—Deputy Chair

Ms Juliana Addison

Ms Sarah Connolly

Mr Brad Rowswell

Ms Steph Ryan

Ms Kat Theophanous

WITNESSES

Mr Adam Kent, veteran,

Mr Ben Brooks, veteran, and

Ms Sue Yorston, consultant, Ballarat Veterans Assistance Centre.

The CHAIR: Thank you for being here today. We value the contribution you are about to make. All evidence taken by this Committee is protected by parliamentary privilege. Therefore you are protected against any action for what you say here today. But if you go outside and repeat the same thing, including on social media, those comments may not be protected by this privilege. You will be provided with a proof version of the transcript for you to check. Verified transcripts, PowerPoint presentations and handouts will be placed on the Committee's website as soon as possible.

I think you are going to give us a 5-minute presentation and then we will ask some questions. But before we do that, can I just say, as a former Minister for Veterans, I really want to thank you, the veterans, who have done so much for our state and our nation. We cannot thank you enough. I just wanted to put that on the record yet again.

Mr KENT: No worries. Thank you.

Mr BROOKS: Cheers.

Ms YORSTON: My name is Sue Yorston. I am currently working as a consultant with three ex-service organisations based in Ballarat who have come together to develop what they are calling a Ballarat veterans resource centre or assistance centre. It is a ground-up; it comes from their felt need of what needs to be happening. The focus is to make that a one-stop shop so that veterans in Ballarat and the region and in the Western District will have a point of contact where they can come, get information, ask questions, seek support, whatever. So it is just that—here is the spot.

Ballarat City Council have very generously given us a building at a peppercorn rent and they have also refurbished it and fitted it out. I have done some grants. So the point we are at now is just waiting for some grant money to come through to be able to fit it out and have computers, office furniture and that sort of thing. Then they will be up and running. The DVA advocates will be based there and people like myself will be based there. I have a therapeutic background. We are also working with all the other service providers in Ballarat to make sure that they understand what we do and how they can access us and invite them to be able to come and give presentations or meet with clients at the centre. We hope that by early next year it will be up and operating. We are very much looking forward to it and there is a lot of interest in it.

Through doing those grants some of the data that I have found is that there are 5,000-plus veterans that are located within Ballarat and the Western District, so that is quite a number of people that are there that may need some sort of support of some type. The centre is hoping to be able to publicise what it does and at least let people know that there is that point of contact there.

I am going to introduce these two gentlemen to you. Immediately on my left is Adam Kent. Adam Kent has come up today from Warrnambool. He is an advocate for RSL Victoria, based in Warrnambool. He is an ambassador for RSL Active, and he will be able to tell you what that is about. Mainly Adam's role has a focus on breaking down the isolation that veterans often experience when they come out of defence and assisting families to reintegrate into the community that they have chosen to live in, but he will tell you in detail about that. The other gentleman is Ben Brooks. Ben is based in Ballarat, and is in a 12-month position funded through RSL Victoria and Centacare, which is based here in Ballarat. I think Ben's title is project officer, RSL Active Ballarat—

Mr BROOKS: Those two are separate, sorry.

Ms YORSTON: Sorry?

Mr BROOKS: RSL Active I do as a volunteer through the RSL. The Centacare role is Project Officer for the Joining Forces program.

Ms YORSTON: Yes. Sorry about that. The Joining Forces program has a focus on welfare and community access—so making sure that people are linked in to community. They are both short-term positions, which for myself I find is often a handicap in this sort of work. When you are working with people, especially if there is some sort of trauma background, it is quite long-term work from a therapeutic point of view. For me it would

take probably a couple of years to work through with somebody, starting intensively and gradually easing off but being able to keep contact. So it is often an impediment in this sort of activity. Ben's position is a 12-month funded position and he is well into that position, and there is no guarantee of it being ongoing. That is it from me, and I will leave it to you.

The CHAIR: Would you like to say a few words before we proceed with questions?

Mr KENT: Just to be clear, as with Ben, my role as a military compensation advocate is a paid position with RSL Victoria, and the RSL Active side, same as Ben, is all voluntary. It is my role and my job. It goes hand in hand, but it is separate.

The CHAIR: I launched RSL Active with the RSL back in Torquay when we did the big announcement, so I saw firsthand how that had an impact on veterans. There was one veteran there that had not left the house for a month except for that event. She was actually surfing. So we know it is valuable funding, and hopefully it is being put to good use—and I am sure it is.

Mr KENT: Yes. There are many, many more stories like that, which is good.

Mr BLACKWOOD: It has got to continue, that funding.

The CHAIR: Can I just start? In terms of employment, obviously there are a number of programs—Veterans in Construction, for example. There are the public servant jobs that are available, and I think David McLaughlin is in charge of that, coordinating that program that we have in place at the moment. I think thus far most of the veterans are opting to take the course of public service through the police force, which is probably appropriate in terms of what they want to do, but are there other opportunities that you think veterans might be interested in in terms of public service jobs?

Mr KENT: Look, I am sure there would be. In my area in Warrnambool I have not really thought about that too much, and I am not sure what opportunities are in Warrnambool itself, so I cannot really speak on that.

Mr BROOKS: Along the same lines is we have sort of the sheriff's department. There are quite a few correctional facilities out this way as well, and I know the PSO positions are becoming more and more regional as well. I know that those are all things that I looked at when I got out. For health reasons and whatever none of those things sort of worked out for me, but I know that those are there, and I know that there are pushes amongst people I have had dealings with through the council here in Ballarat to try to implement more veteran-friendly flows into public service at that local level as well.

Ms CONNOLLY: Can you talk a little bit about the types of support that you think that we can do better to help veterans get a job after they come out?

Mr BROOKS: I think from the jobseeker's perspective we are probably some of the most well supported jobseekers there are—well, coming from myself, because I was medically discharged from the army, so I had rehab coordinators and vocational training and all sorts of things available to me, which have definitely given me a leg up over a lot of people, I would think, and I very much appreciate all of that. I think that from the State Government level, raising awareness about contemporary veterans and how many of us there are in the community with employer groups would definitely be a help.

Going back to something that the previous person was talking about with the free TAFE courses, I think that if there was, not so much a quota but if there were spots set aside for veterans? I know that that is something that I have struggled with myself, trying to get into Fed uni to do the courses that I am doing now. Four-hundred people applied for the same 20 positions that I applied for, and I have been forced to do a lesser qualification and then hope to make up the difference to a diploma later on, and through a private provider instead of through the TAFE. I have had the same thing. So with a lot of the guys that I work with, most of them are not so much jobseeking at the moment. They are not generally in that position. If they were that far along, then they probably would not really need my help so much. Retraining into fields that these guys could work in is critical to their mental health as well as their job prospects in the future, so more positions being made available to veterans would definitely help.

Ms CONNOLLY: So can I just ask you this just to be clear: you are saying it is really important for the training position to be there but also for the job position to be there after the training, for mental health and other reasons and supporting family—that you go from the training into work, and if that is quotas, then that is something?

Mr BROOKS: Yes, well, possibly. It is hard for me to really quantify that because most of the people that I am working with are not at that point yet, so that is sort of not something I have faced from a work point of view.

Ms ADDISON: Ben, could you talk to us about your day-to-day interactions? What do you do? Tell us a bit about the people that you are talking to. Obviously de-identify them, but who are these people? Have they served a while ago? Are they people who have recently left the services? Give us a bit of a snapshot.

Mr KENT: Pretty broad!

Mr BROOKS: Yes, it is very broad.

Mr KENT: I can give you a snapshot in our area: 25-year-olds up to 70-year-olds. Sorry to interrupt.

Mr BROOKS: No, that is fine. My oldest client is in his early 60s and my youngest client is in his very early 20s, and they have done very diverse service and have very diverse needs. The bloke in his 60s, he did 30-something years in the army and when he got out his family fell apart and he started drinking and ended up homeless. This is someone who has come from a fairly well-organised life in the past. They go through to young blokes that did not finish four years in the army due to trauma overseas and PTSD and that sort of thing. Their needs are very different.

My day-to-day with clients can range from anything from just meeting with someone and having a cuppa and talking shit, basically, just to build some rapport and give them someone to talk to that understands or speaks the same language that they do; through to trying to help people into retraining; finding GPs and helping people get into physio programs, that sort of thing; through to then attending medical appointments with people, sort of as a translator, almost, and support person. Some of these people, you can tell them all sorts of things but they walk away from it and they have not really taken any of it in. I will go to an AA meeting with someone so they do not have to go alone.

That is sort of the work side of things. I am very new to the RSL Active stuff, but I have been doing a fair bit of work liaising with different groups and organisations, sporting clubs and those sorts of things trying to get some of that stuff off the ground as well.

The CHAIR: Adam, can I just ask in relation to the psychological wellbeing of veterans and the trauma that they are experiencing, and how they get back into civilian life after service, how is that impacting on employment opportunities and what assistance can State Government give to those veterans that are finding it really difficult to come back into civilian life?

Mr KENT: I think we all know the crisis stories and all that sort of stuff. It is horrible and it is real. What I really believe in—we have used RSL Active as an amazing platform for this. It is designed for health—mental health and physical health—as a platform. I am really about the prevention side of things. What can local governments do? I think there is a lot they can do. One, they can attempt to understand. I believe in two-way streets. A lot is up to the veteran themselves to stand up and say, ‘Well, I want to fit in’. But often they do not know how to fit in. They isolate themselves and I see it not so much in Warrnambool but more in my clients around Hamilton, Portland, Cobden and Camperdown—those sorts of towns.

What I see happening sometimes, and through my personal experience as well, is that people are getting out voluntarily and they are okay, but then they do not know how to fit back in. You have got people in their late 20s that have joined as 18-year-olds who come back into their communities. Their friends are different. Their friends do not know how to treat them, they do not know how to act in front of their friends and then they decline to the crisis state. A lot of my clients end up in a crisis state as well.

So what we are doing in Warrnambool and surrounds, with RSL Active, is bringing our age range to 25 to 70s; we are making it about all veterans. We started to target younger veterans. They are coming out and joining in. I think that health and wellbeing alone puts them in a better position—the ripple effect we are seeing in families. What we are doing in Warrnambool at the moment—it is just coincidence that it is the start of Veterans' Health Week on Saturday—is we are running a veterans' retreat. We are bringing in 10 couples from outside the region, and this is happening this weekend.

The CHAIR: And we have got a thank you day in Geelong for veterans. I am part of that on Saturday.

Mr KENT: Yes, nice. Don Spinks is coming to talk at our dinner and that is a huge thing. When it comes to local governments one thing that has really frustrated me is that I have had to follow up with our shires to RSVP for dates. One shire has come back to me as late as yesterday to say, 'Look, sorry, none of our councillors are available'. And that tells me that the shires and the councils—it is not that they do not care, it is that they do not understand. Some of these veterans have so much to offer and are so creative, and they just do not know how to do it. They want to do it but they do not know how. I think if the local shires and governments attempted more to understand—they have got some amazing assets at their doorstep in places like Portland and all those towns I just mentioned before.

We are doing it in Warrnambool. It is hard for us to stretch out but we are trying to. We just recently put in for a Wannon Water grant, aptly called Ripple Effect, and we got \$5,000 for that. That is going to allow us to buy some equipment to get out to Portland and get these guys involved. With the flow-on effect, the ripple effect is to start contributing to their communities.

I am a part of Leadership Great South Coast this year and I pitched this veterans' retreat to the group and the response blew me away. It really blew me away. Some of the participants were like, 'Wow, I only thought veterans were old blokes'. And I told a story about a 28-year-old in Heywood with PTSD who was hardly leaving his house. But when we started engaging—he is a young man that has so much to give. When he is on his own he is not leaving his house. But when we engage him—and if local governments and that are engaging these people and providing understanding—it is two-way street; the veteran has got to understand how to fit in and the community has got to understand how veterans can fit in and what they have to offer.

Another pitch that I did with another veteran is called Beers and Ideas. It is every quarter in Warrnambool and four people pitch an idea—can we run it and get funding? It is a community event. We won that pitch to run a community event in Warrnambool and it is happening Saturday, 2 November, at the tail end of Veterans' Health Week. And the response has been remarkable. We have got emergency services involved and it is run by about 15 veterans. And from my role as an advocate, seeing some of these veterans struggle in where they fit in, they have really embraced this themselves and they are out there dealing with organisations. It is the ripple effect.

I think local governments—and in Warrnambool, Wannon Water and a few others—are starting to say, 'Hey, these guys have got something to give'. And then that just naturally flows on to them being more employable by organisations like Wannon Water, who are saying, 'Wow, I want to hire these guys. They're just doing so many amazing things'. And it is as a collective; it is not individually. For me it is the two-way street: veterans have got to be open-minded and have got to want to say, 'How do I fit in?', and the local community—especially the shires, the mayors and the councillors—need to say, 'How can we include these guys? How can we understand them to start with?'. They are assets sitting there for them that are totally underutilised and not leaving the four walls of their house.

Mr BLACKWOOD: That is what we found in our area in West Gippsland. The initial task was to find a way to entice these people to come out of hibernation and to actually engage. The RSL Active program has been fantastic in our area for doing that.

Mr KENT: We have got a guy coming from Leongatha this weekend to Warrnambool. He is really excited because he says he has not been past Geelong. Part of our aim is for these guys to come out and then go back to their regions and do the same thing.

Mr BLACKWOOD: I spoke in Parliament last week about the success of this program and called on the Labor Government to keep funding it. But it is very important for our area. Just in Warragul, which has got a population of about 20,000, we have drawn out 50 modern-day veterans that we did not know were in the community. That is probably the case in most towns. Also we have made approaches to local government to consider them for any job prospects that might come up, and that is starting to happen. I know that the Labor Government have funded about 1,250 positions in the public service, which is a great initiative as well. It is slowly starting to be heard and starting to work, but we need to make sure, I think, that the RSL Active program goes on for a fair while, because it is a big job.

Mr KENT: The right people in the areas need to be running them. I do personally find it frustrating that there is so much different little veterans stuff out there. It would be great if it was under the one banner.

Mr BLACKWOOD: There is a lot of cooperation between the RSL and RSL Active in our area, and that is working really well. But the whole point is that we cannot get these blokes into employment if they are hibernating all day. They are not ready for it.

Mr BROOKS: And that is where I think Active is a great thing. Building that peer support group that people had when they were in service gives those people, I think, the confidence to branch out from there and to know that they have got that understanding and that peer group to come back to—the same as your kids do. Your kids wander out that little bit and explore stuff and then come back home to safety. It is realistically the same principle, I think.

Ms YORSTON: Can I pick up on a point that Ben made earlier about the employer's understanding of the defence environment that they have come from? I have a daughter who is in the army, and I was a serving officer with the air force cadets, so I have a bit of an understanding. One of the things that she said to me early on which has always stuck with me is that it is not a 9-to-5 job. She said, 'I'm employed 9 to 5, but I'm on standby 24/7 at any time'. And at times the phone has gone: 'Marie, you need to be here'. That is quite different from a civilian job where you work those paid hours, you go home and you do not think about the job anymore—you do not worry about it. With defence and those sorts of things it is quite different. So it is quite a different mindset to always in the back of your head be sort of ready to respond to what the need might be.

Ms ADDISON: You do not switch off.

Ms YORSTON: Yes, so you do not actually switch off. I was overseas with my daughter and she got a phone call—'Where are you? We need you'. It was the Sunday after Black Saturday and they wanted her. They said, 'Where are you?'. She said, 'I'm in Ireland, but I'm on my way home', and they said, 'Right'. She got off the plane at the airport, was met and was gone. I did not see her for two weeks. That is what I mean. That is quite a different mindset, coming from that structure of defence, where you know what you are doing and you are well supported in what you are doing. You have got superiors. The training is there. It is a very structured and supportive environment. It is a family for her. It is her other family. She had a sister who died of cancer. The day that she died she was in another state. I rang the warrant officer and said, 'I need Marie home'. They put her on a plane, she was met at the airport and she was driven straight up. Anything that I have needed in a family sense is there. That is the environment they are coming from. Then they are coming out into this sort of little bit of an abyss, I think, to start with, to be able to find their feet. So I think it is really important what Ben was saying before about how we inform employers that they have got these assets that can think on their feet. They are very focused and they are very active. They are real assets, but it is how to harness that and how employers get to understand that.

Mr KENT: One thing I think we do really well as a veteran community is talk about mental health, and what we are doing around Warrnambool and surrounds is getting it out there. That council function that I pitched at, Beers and Ideas, after that I had a young man approach me who was about 30 and a really fit, good-looking young man, and he said, 'Look, I'm in awe of you guys and how you talk about your mental health. I really wish my friend network would do the same thing.' I just said, 'Why don't you?'. He did not feel safe. I said, 'Maybe if you tried, mate, your mate might be feeling the same way, and then you help.'. So we really feel like that is something, amongst many other things, that we have to offer and give to the community—to say, 'Hey, it is working with us'.

The peer support that Ben mentioned can mitigate problems, because instead of coming home from your job and being frustrated because someone was being slack—whereas in the military it would be bang, bang, bang—they come home from work feeling frustrated and they ring their mate who went through this five years ago and their mate talks them through it. As opposed to going and stewing and drinking six beers and thinking, ‘I wish I was back in the army but I can’t because my wife won’t let me’—I might be talking about myself 10 years ago. So, yes, just trying to paint that picture.

You are exactly right: the veteran needs to be ready. Instead of like in our era, when guys have probably gone through 5 to 10 years of it, we feel like with RSL Active for the guys that are coming out now it can be a shorter period. I pitched at a Rotary club to get a bit of funding recently, and the guy that introduced me and stuff—it really stuck with me at the end—he said at the end that he sort of got on top of things only three years ago. He said to his Rotarians, ‘If something like this had’ve been around when I got out, my life from 27 to 37 would have been a lot different’. He is 40 now and he is on top of things now. That really sort of wowed me. I had one of those ‘wow’ moments that we are making a difference. If we do it at the preventative level, I believe they are going to be more employable and the community is going to understand how to use that asset and whatnot. I hope I am making a bit of sense.

Mr ROWSWELL: Ben and Adam, thank you for your service as well. Ben, you are currently funded through Centacare?

Mr BROOKS: Yes. Centacare received a grant from veterans’ affairs, and a condition of that grant was that they partner with an ex-service organisation, so that is the Ballarat RSL.

Mr ROWSWELL: Okay. I am aware that in the contemporary veteran community sometimes some of the younger blokes do not see themselves as having much of an affiliation with some of the older blokes, who traditionally have been the guys who have held up the bar on a Wednesday night at the local RSL. There is a huge disconnect between those two veteran cohorts. I am just wondering—and I am also a supporter of RSL Active being funded well into the future—has it made a difference to you being through a different funding stream and a different avenue of funding? Has that meant that more veterans have wanted to speak to you seeing as though it is partnered with the RSL but kind of separate and kind of different?

Mr BROOKS: I think it does. Having the ability to either work out of Centacare or work out of the RSL or avoid both of those and go to a cafe—or soon hopefully we will have the option of the veterans assistance centre, to work out of there—allows me to tailor my approach to the individual. Thankfully both the RSL and Centacare, who both have a certain set of services that they provide, were happy. I was insistent upon it when I took the job so that I can be client focused and not service focused. I work with people who have had alcohol and gambling problems and will not go anywhere near the RSL and people that have had bad experiences with RSL advocates who say, ‘You didn’t go to Vietnam. That wasn’t even a real war’ or whatever. How much of that was actually the advocate and how much of that was the person’s own insecurity I cannot really gauge, but being able to meet with them somewhere else makes it—

Mr ROWSWELL: I am just thinking—so our endgame and your endgame is that veterans are in medium to long-term meaningful employment and can once again contribute back to their communities, so it should not really matter through which banner they receive that assistance so long as their individual needs are met.

Mr BROOKS: No. Right.

Mr ROWSWELL: So I take your point, Adam, about how it is frustrating that there is diversification in the veterans space, but that is perhaps also a good thing.

Mr KENT: That is not an age thing.

Ms YORSTON: That is the system. The system is not a joined-up system.

Mr BROOKS: A vast amount of the pools of money that are available are spent making 27,000 different letterheads.

Ms YORSTON: Yes, we talked about that last night.

Mr BROOKS: Once you get three people on a Facebook page now, you go and incorporate it and you start applying for grants.

Mr KENT: I have been contacted by different organisations, and I have said, ‘Thanks, but right now RSL Active is doing everything we need’.

The CHAIR: Well, that was one of the reasons why we funded RSL Active—to connect the two in a meaningful way—and obviously it is working. It is good to see that programs like this do unite the veterans community, which is great. There is a bit of disconnect in terms of the service duplication that occurs. There is a lot of politics in different organisations in relation to how it should be approached. But by and large, I think just government policy determines somehow how we can bring people together. That is the exact point about RSL Active: it actually brought the main groupings together in terms of providing a good service. Can I just ask in relation to post-placement support, in terms of some of those veterans that are being placed into employment: do you think there should be a follow-up and not just saying, ‘You’re in employment; we’re done with you now. Good luck to you and good luck in the future’? Do think there should be an ongoing service to see how they are going after placement?

Mr BROOKS: I have found with myself and other people who were medically discharged from the military that there is that. I have been in this job since July now. I still have a rehab coordinator that checks in with me periodically. I am on a rehab plan still until after I finish my course, which is also after my contract with Centacare actually finishes. So there is that support there for a vast number of us already.

The CHAIR: Good; excellent.

Mr KENT: There is really good support by Helping Heroes and other agencies that do that.

Mr BROOKS: Helping Heroes are who my rehab coordinators are.

Mr KENT: I deal with a lot of the rehab managers that work with my clients. We talk a lot about it. They will deal with the client and the employer and be that middle person, like a marriage counsellor, I guess.

The CHAIR: Yes, true. Any further questions? Any further comments you would like to make?

Mr BROOKS: Going back to mental health—and I do not know how relevant it is to State Government or if there is anything that you guys think can be done about that—Veterans’ Affairs has brought in this new 12 visits and then you need a new referral system. You used to get a referral from your GP to see a physio, a psychologist or any allied health, and your referral was good for 12 months. So you could see the physio every week or you could see your psych every week. After 12 months you needed to go back to your GP and get a new referral to satisfy DVA that the service was going. DVA have recently changed that. It came in at the start of this month. You now get 12 visits to a provider before they then have to write a report back to your GP on your progress or whatever, and then your GP has to, based on that, refer you back again. I am noticing a trend now with GPs and psychologists—they are the two that I have noticed—who no longer want to deal with Veterans’ Affairs patients because of this added stuff. I know the physio association argued—

Mr KENT: NJF have ruined that, I think, haven’t they?

Mr BROOKS: Who?

Mr KENT: NJF.

Mr BROOKS: I do not know who that is.

Mr ROWSWELL: Ben, I will make a call immediately to the Federal veterans’ affairs Minister during the morning tea break to ask about that and see why that is the case and if anything can be done about it. Not a worry; it is done.

Mr KENT: Unfortunately some other businesses have rorted that system, so that is why it has been brought in.

Mr BROOKS: That is what it is.

Mr KENT: What Ben is saying is the pay-off for that. It is costing DVA astronomical amounts of money.

Mr ROWSWELL: Veteran welfare should always be put first. If it is a management issue between the Federal Department of Veterans' Affairs and providers, then veterans should not be the collateral as a result of that mismanagement.

Ms YORSTON: Also in a therapeutic sense, if I was working therapeutically with someone, after 12 visits, it sort of interrupts the rapport that you are building with someone. It would have an impact, I would think, on the clients trusting me that I am writing a report on them and sending it off somewhere. It is quite a sensitive issue on a lot of levels, I think.

The CHAIR: We can follow that up.

Mr BROOKS: It is designed to save money, I presume, but it is costing more with people going to the GP more often. A lot of our people here—we are already regional—live in the smaller towns, the satellite towns around here, so every time they go to the GP or whatever, they are putting in travel claims for that as well, and that sort of thing. And no GP is going to turn around and say, 'Well, no. I don't think you should see the psych anymore'. And none of the allied health providers are going to cut their own throats by saying, 'No, I don't think we should see you anymore'. So it is really a redundant system, I think.

Mr KENT: NJF is the exercise physiology part of it; NJF Wellness work in gyms. Veterans have abused it and the NJF have abused it. They will not pay for a gym membership. But three times a week they will go there—just go to the gym—and every time they go it costs DVA \$90. So it is three times \$90 per week, and you add how many veterans. That is where the money is just bleeding, and that is why, I believe, they have brought it in. The only reason I bring that up is because it has got to be considered: how do you fix this along with fixing that? It is robbing Peter to pay Paul. As you said, you should not do it at the expense of a veteran's welfare.

Ms YORSTON: So it has to be more discrete rather than blanket, I think.

The CHAIR: Excellent. Thank you.

Ms YORSTON: Thank you for the opportunity.

Mr KENT: Thanks for the opportunity. We appreciate it.

Ms YORSTON: And we will let you know when we finally get this centre up and running. You are very welcome to come to the opening.

Witnesses withdrew.