



Health and Life style.

Federal Budget

The 2010-11 Federal Budget, handed down by the Treasurer, Wayne Swan, on Tuesday 11th May, provided more support for Veterans. This budget allocated the enormous sum of **\$12.1 billion** to DVA for compensation and better health services, which, when it is considered that the number of dependant veterans decreased over the past year from 415,000 to approximately 380,000, means an increase in funds in real terms.

If you're really interested, you can read the whole 130 pages of the Budget which relate to the Department of Veterans Affairs [HERE](#).

Here's a breakdown:

If Tarzan lives in the jungle – why doesn't he have a beard?

UBON.

For ages, a number of blokes who were posted to Ubon during the early 60's (see [HERE](#)), have been chasing DVA to have their service classified as "War-like". Finally, the Defence Nature of Service Review (NOSR) has re-classified the period between 31 May, 1962 to 27 July 1962 from Non-Warlike to "Qualifying Service". Qualifying service generally means that a veteran must have incurred danger from hostile enemy forces. It covers service in various conflicts in which Australia has been involved, however, special requirements apply for specified areas during particular periods.

Unfortunately, this will come as too late for a good mate, [Bill Bastion](#), but hopefully others will benefit.



79 Sqn at Ubon, May, 1962.

This re-classification will allow the small number of affected blokes access to further benefits such as the Service Pension at age 60 and the Gold Card at age 70.

SO! If you were posted to Ubon, this is now how the DVA sees your service.

From 31 May, 1962 to 27 July 1962 - Qualifying
 From 28 July 1962 to 24 June 1965 – Operational
 From 25 June 1965 to 31 August 1968 – Qualifying.

You can read more about claims against DVA in the Pension Officer’s Repatriation Handbook which you can get [HERE](#).

What is the speed of darkness?

F111 Fuel Tank blokes.

If you were one of the thousands of blokes that had the un-enviable job of climbing into the innards of an F111 to inspect/repair the fuel tanks, then, you’ll be pleased to know the Government has expanded the definition of eligible personnel and the benefits and services available to them. These new measures take effect immediately.

Key features of the Budget measures are:

- expanding of the [Tier 3 definition](#) to include many more workers;
- providing enhanced access to compensation and health care under ss7(2) of the *Safety, Rehabilitation and Compensation Act 1988* (SRCA) for an estimated additional 2,400 personnel, including the ‘pick and patch’ workers and other trades;
- using Statutory Declarations to support claims;
- reopening of the [SHOAMP Health Care Scheme](#), with access now available to many more workers;
- appointing a dedicated F-111 team within DVA to review and process claims – you can contact the team on **1800 555 323**, or e-mail: f111enquiries@dva.gov.au (do not send personal information by e-mail until you have submitted an [Authority form](#)).
- tasking a senior officer with health and F-111 claims background to oversee and report on implementation of the new measures;
- expanding the counselling services available to workers and their families, through the VVCS - Veterans and Veterans Families Counselling Service (call **1800 011 046**);
- providing a dedicated F-111 government website, jointly



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hosted by the departments of Defence and Veterans' Affairs. You can access that [HERE](#).

The ex-gratia payment scheme continues unchanged, with the exception that the Estates of deceased personnel who died prior to 8 September 2001 are now eligible to apply for ex gratia payments.

The Department of Defence is continuing to research the underlying cause of health conditions associated with F-111 fuel tank maintenance through its study of [mitochondria](#) in personnel exposed to fuel and solvents. A pilot study has been completed and the next stage of the research is being scoped under the management of Defence Centre for Occupational Health.

Reduced Hospital Stays.

Veterans who suffer chronic conditions and who require complex care which is normally only available at Hospitals will now have access to the ***Preventable Admissions and Improved Community Care Program***.

This program will provide funding for Local Medical Officers who will coordinate and oversee community based care and support for the 17,000 veterans and war widows who are expected to benefit from this scheme.

Being admitted to hospital can be very stressful, especially for older people, and this program will focus on reducing un-necessary hospital stays by providing community nursing which will provide support in:

- Co-ordinating appointments with other health professions involved in their care,
- Provide an appointment reminder,
- Making home visits,
- Assisting with medication management and treatment,
- Assisting the patient to self-monitor his or her condition.

The program will target veterans and war widows who suffer congestive heart failure, coronary artery disease, pneumonia, chronic obstructive pulmonary disease and diabetes.

British Nuclear Tests

The Government has accepted the Clarke Review findings with regard to the British Nuclear Tests (BNT) (You can read a copy of it [HERE](#)). This means that service by Australians in the BNT in Australia be declared 'non-warlike hazardous' service under the Veterans' Entitlements Act 1986. This means people who served at Maralinga, Emu Field and Monte Bello Islands will now be eligible for benefits they have been chasing for many years, which subject to legislative changes, will be available from July 2010.



These benefits will include potential access to disability pensions, health care benefits and war widow/ers pension for their partners and a Gold Card to the widow/er.

Iceland goes bankrupt, then it manages to set itself on fire.
This has insurance scam written all over it.

You and your prostate.

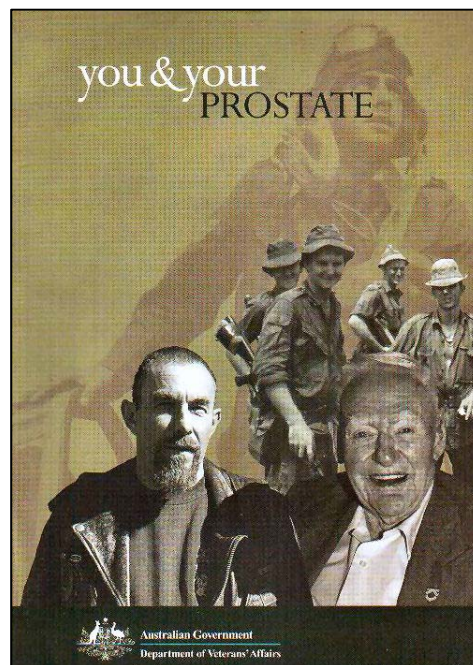
The DVA has produced an excellent little 86 page book titled “You and your Prostate”. It has been produced to assist members of the veteran community to gain a better understanding of the complex issues and management options relating to prostate disease

Too often men ignore urinary systems and delay seeing a doctor, even if their systems are having a major impact on their life. Many men find it difficult to see their doctor about problems connected with their reproductive organs. DVA hopes this book will encourage men to seek early medical intervention for any health issue troubling them.

Prostate health is an important issue for men and this book will assist the veteran community to better understand the early signs and symptoms, along with the management options of prostate disorders.

You will find clear diagrams detailing the anatomy of the male reproductive organs, and urinary and prostatic symptoms. This book also presents details for available support and assistance.

The book is available on the DVA web site and you can download a PDF copy from [HERE](#). You would be well advised to download a copy and read it carefully.



How is it that we put man on the moon before we figured out it would be a good idea to put wheels on luggage?

Veterans' Home Maintenance Line (VHML)

What is the Veterans' Home Maintenance Line?

The Veterans' Home Maintenance Line (VHML) is a toll-free telephone service that provides advice on general property maintenance matters and will provide a referral to local reliable and efficient trades-people. The trades-people have appropriate qualifications, and both professional indemnity and public liability insurance cover. VHML can also arrange home inspections to identify current or possible future maintenance problems.

Note: This is a home maintenance and emergency service only. It cannot give financial or legal advice, or answer questions about pensions or other Veterans' Affairs matters.

Who is eligible?

Any member of the veteran community is eligible to use the VHML.

How many services can be received?

You can receive an unlimited number of services from the VHML.

Do you need to pay?

The VHML advice is free but you will need to pay for work done by trades-people, including callout fees.

How do you access the Veterans' Home Maintenance Line?

You can access this service by telephoning **1800 80 1945**.

What time is the service available?

The property maintenance and home inspection advice is available Monday to Friday between 9am and 5pm. Emergency property advice is available 7 days a week 24 hours a day.



Why do people pay to go up tall buildings and then put money in telescopes to look at things on the ground?

Defence Service Homes Loans.

The Defence Service Home Loan is available to eligible veterans, war widows and widowers. Persons whose first service in the Defence force began on or after 15 May 1985 are not eligible for a DSH loan unless they were allocated for service in Namibia. Housing loan assistance for persons whose first service began on or after 15 May 1985 is provided through the Defence Housing Authority (DHA). DHA can be contacted on 1800 802 763 or visit their web site at www.dha.gov.au.

Loans are available to buy, build, enlarge, complete, modify or repair a house or unit, and to refinance a mortgage over a house or unit. Loans are also available in certain circumstances for retirement village accommodation and granny flats.

The maximum amount you can borrow for your first loan is \$25,000 but the actual amount you can obtain depends on various factors, including the ability to meet instalments and other commitments.

Interest is capped at 6.85% pa, but is variable each month at a rate 1.5% below the average market rate while the average market rate is below 8.35% pa. WESTPAC Banking Corporation (Bank of Melbourne in Victoria and Challenge Bank in Western Australia) is contracted to provide the subsidised housing loans.



For further information on the Defence Service Home Loan, including eligibility, contact your nearest DVA office or visit their web site at www.dva.gov.au and look up fact sheet [HAC 01](#). The Vietnam Veterans Association of Australia can assist *any veteran of any conflict*, their widow/er's and children by providing advice and assistance in regard to all pensions matters. Simply contact your [nearest sub-branch](#).

Don't 'waist' your food.

Dr Warren Harrex, Senior Medical Advisor

There has been extensive media coverage of the obesity epidemic over the past few years and this is now regarded as one of the major factors affecting health that lead to a range of chronic conditions including [type 2 diabetes mellitus](#). The onset of the obesity epidemic has occurred relatively recently, and advertisements for foods, including those promoting fast foods outlets, have often been pinpointed as the cause. Not surprisingly, the food companies have indicated that the modern sedentary lifestyle, lack of exercise and individual behaviours and attitudes towards food are primarily responsible.

I was reminded of the significant influence of personal attitudes towards foods recently when I had eaten about three quarters of a meal prepared by my wife. I had reached the stage so eloquently described by my grandmother as 'elegant sufficiency' and placed my knife and fork in the traditional position to indicate that I had finished my meal. Almost immediately, my good spouse chided me to continue eating and not to waste good food. I replied that I thought I had reached an appropriate age at which I could determine how much I needed to eat.

Most of us are aware (or can relearn) when we have satisfied our immediate hunger. I noticed that our dog will eat whatever is immediately



in front of him when he is hungry. I note that when he starts pushing some food aside to get to the more pleasurable morsels that he has probably eaten enough. I have also noted similar behaviour with my children. When they were actively engaged in sport, they would eat anything in front of them (including Brussels spouts). When they turned down vegetables and fruit in favour of ice-cream or cake, this was a good indication that their real hunger had been satisfied.

Identifying this point between satisfying hunger and over-indulging is a key point to maintaining a healthy waistline and preventing becoming overweight or obese. We now know that the truncal fat (truncal fat are fat deposits that settle in the torso and abdomen and cause abdominal obesity. It puts you at risk for type 2 diabetes.) is a major risk factor for chronic diseases. Abdominal circumference, or waist measurement, is the current preferred measure of obesity.

Health risks begin to increase if your waist measurements are more than 94 centimetres for men and more than 80 centimetres for women.

So the message should now be: 'Don't waist your food'

More information on waist measurement is available [HERE](#).