The Minister Promised to End "Delay, Deny, Until You Die." He Didn't.

an essay on Australia's Veterans' Affairs System

written by
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I'm concerned about our country's veterans, their families and those who care for them. It is time to replace the current Minister for Veterans' Affairs

Ian Lindgren 20 August 2026

Forward

I served in the Australian Army for 21 years and consulted to Defence afterward. I spent time as a Senior Executive Service officer in the Australian Public Service, and for more than two decades I've built national businesses, work I still do, a few hours a week, while my wife and family run the companies day to day. I've chaired the Australian Peacekeeper and Peacemaker Veterans' Association and sat on the Department of Veterans' Affairs (DVA) Ex-Service Organisation Round Table (ESORT), the primary national forum meant to connect DVA leadership, the major Ex-Service Organisations, and the Minister for Veterans' Affairs.

None of that makes me neutral. It makes me a witness to leadership, to governance, and to what happens to veterans, their families, and the health professionals who care for them when the machinery fails. ESORT fails dismally. It needs to be replaced with real governance.

Awareness

Most veterans spend their careers believing something simple: if service costs them their health, DVA will be there. Many only discover how untrue that is after they leave the Australian Defence Force, at their most vulnerable.

They also believe their superannuation is theirs, the way a civilian's is. It isn't. Under veterans' legislation, it's Commonwealth money from the moment it's paid. Retirement pay for when you transition from the ADF. But if you're later found to have a service-related injury and awarded compensation, that same retirement pay is "reclassified" as compensation. Since you can't be paid compensation twice, in many cases the retirement pay you already received is deducted, dollar for dollar, from the compensation you're owed. The Hon Matt Keogh MP has said this will never change on his watch. It means veterans effectively fund their own compensation with money they'd set aside for retirement. Not even the former Chief of the Defence Force knew this happened until I raised it with him in 2025. It's called offsetting, and it's a major contributor to veteran suicidal ideation.

Julie-Ann Finney, The Minister and me at the National Press Club 2 December 2025

This isn't a failure of national capacity. Australia has the money and the know-how to properly care for and compensate its veterans. But ministers like Matt Keogh see the savings offsetting delivers to the Commonwealth and choose to do nothing.

Two moments have stayed with me

The first was 2021, when the Morrison Government accepted a recommendation from both Houses of Parliament and established the Royal Commission into Defence and Veteran Suicide; a landmark decision. But behind the scenes, there was no real urgency to stem veteran suicides. DVA didn't miss a beat. It kept doing what it had done for decades: delay, deny, until you die, and then wrote new legislation to keep it that way and convinced the Australian Parliament to pass it.

26 Mar 2022. Veterans' Affairs Minister Hon Andrew Gee MP launched an attack on the Morrison government, revealing he was on the cusp of announcing his resignation from cabinet because the Prime Minister would not honour funning commitments to veterans.

The only Minister for Veterans' Affairs I've seen show true leadership was the Hon Andrew Gee MP. When Prime Minister Morrison refused to fund a reduction in the claims backlog, Gee called a press conference and threatened to resign unless the government honoured its commitments. It took a minister risking his own job to move the needle. Then the Morrison Government lost the next election. We lost a great minister, and the funding that could have helped.

The second moment is happening now. On 2 December 2025, the current Minister for Veterans' Affairs promised to "consign the phrase 'delay, deny until you die' to the dustbin of history." Soon after, I met with him and asked him to reverse a decision that had already destroyed a veteran's life. He refused. He delayed, and he denied, and I'm thankful that veteran is still alive. I then had to threaten to engage one of the human rights barristers who helped secure Julian Assange's release, because a war artist had waited seven years for a decision on whether his service was covered by veterans' legislation. It took 470 hours of my own time for an answer that should never have needed a fraction of that. Even the former Governor-General called the Minister twice, asking him to reconsider. To no avail. Thankfully, the threat worked. The war artist is now covered.

No one who has served this country should wait years to learn whether the system will support their health, wellbeing, or future. That isn't administrative slowness. It's the slow erosion of trust in an institution built to earn it.

What is wrong

Here's the question that won't leave me alone: what causes a department to sit on hundreds of welfare recommendations for more than thirty years? And what causes a government to publicly accept a Royal Commission's findings, announce the implementation, then quietly find ways

around the very reform those recommendations demanded, including pushing key legislation through the Senate in a way that sidestepped the House of Representatives entirely?

The Hon Matt Keogh MP found a way to do exactly that. It was heartening to see the veteran community stand together, with Senate support, to secure a properly independent Defence and Veterans' Service Commissioner. Left to Keogh alone, that Commissioner would never have been independent.

I've turned this over for some time, and I keep arriving at the same answer: poor leadership, weak governance, and a culture that resists accountability. Numbers don't capture that. Examples do.

Over five years of advocacy, just under 40 veterans have come to me with the same story: a medical procedure, already approved, cancelled at the last moment with no real explanation. In most cases, all it took to fix was a phone call, not a review, not an appeal, a phone call. I could make those calls, and I thank the Secretary of DVA for allowing me to. But what about the others who never get that help?

One case has never left me. A DVA public servant I'd encouraged to help veterans untangle problems like these was later disciplined, and eventually left the Department. The First Assistant Secretary who oversaw that process was the same official who ordered the destruction of a brief, prepared in 2021, under my signature, by some of the country's most senior advocates on the true scale of the outstanding claims backlog and how to report it accurately. She has since been moved on.

Another sits just as heavily. A 97-year-old war widow was placed into care by her family, who then had to deal with DVA on her behalf. Her paperwork went missing. Her allowances were stripped away. After I got involved, her Gold Card was cancelled too. Everything was eventually reinstated and no one ever explained why. I asked three times. Her family wrote more than seventy pages of complaints. She died without an answer. Only after I demanded one did DVA say it was investigating. I still don't have that answer.

I want to be fair: I've also seen genuinely committed public servants inside DVA doing good work, often against the odds. But I've also watched a senior DVA public servant oppose proper governance arrangements for the veteran community, then use a temporary acting position to overturn a decision already made by a Deputy Secretary. It was reversed only when I pushed back and reminded her that her boss would be back in two weeks. She, too, has since been moved on.

This isn't a string of unrelated mishaps. It's a picture of a system where decisions touching veterans' health, dignity and futures can be made, unmade, stalled or buried with no one truly accountable.

Five years into this work, I no longer believe this is fundamentally a problem of policy design or funding. Those things matter, but they don't explain why the same failures persist for decades, or why vulnerable veterans and families still have to fight for outcomes that should simply be handed to them as a matter of national responsibility. Fixing this needs cultural reform,

governance reform, and public accountability that finally matches the harm done when a system built to protect its own instead lets them down.

A reform that changed the label, not the system

For decades, the biggest structural problem most Australians never heard of was this: veterans' compensation and support was split across three separate Acts. The new single Act hasn't solved that it's simply one of the same three dysfunctional Acts, now extended to cover everyone. The Hon Matt Keogh MP chose not to build a genuinely new system, telling an ESORT meeting in early 2023 that a purpose-built solution would cost too much and DVA staff would need retraining. A far more humane choice would have given veterans health care equivalent to the rest of Australia.

Caring for our carers

Last weekend I received calls from the owners of two sizeable medical providers. One is owed $1 million by DVA, with invoices dating back six years. The other is owed $600,000, dating back five years. The Australian Medical Association has written to DVA about this and received no response. This needs to reach Minister Keogh's desk and be fixed, before these providers, who serve veterans nationwide, either stop treating veterans altogether or are pushed into financial ruin themselves.

If we don't look after the people who look after veterans, we will run out of people willing to do it.

What it will take to fix it

None of this is unfixable, and none of it requires starting from scratch. It requires the courage to finish work already begun, and honesty about why it keeps stalling.

First, finish the job the Royal Commission called for. Scrap the new veterans' health care Act and write legislation that lets veterans access medical care the way any other Australian, or any public servant inside DVA can: with providers paid properly, not at the reduced rate set under the recent budget changes.

Second, make claims processing genuinely transparent. Start from the diagnosis already in the veteran's medical file or made by their own civilian doctor. DVA should have to prove an injury was *not* caused by service; it should not be left to the veteran to prove they were injured in service and tell the story time and time again. While that review is under way by DVA, the veteran should be free to get the treatment they need, just as almost any other Australian injured at work is.

Third, build oversight that can't be quietly overturned. We've yet to see what the Defence and Veterans' Service Commission does in practice, but it's looking as though it will meet the Royal Commission's recommendations.

Fourth, pay our service providers on time. Settle invoices within 20 days, and if DVA can't, pay interest on the balance until it does.

Fifth, get rid of offsetting.

Finally, change the culture, not just the paperwork. A department can accept every recommendation a Royal Commission makes and still fail the people it was meant to protect, if no one is ever held accountable for how those recommendations are delivered. Every fix on this list will fail the same quiet way the last thirty years of fixes did, unless leadership, governance and accountability change with it.

The next generation

I don't write this from the outside. I've sat across the table from the most senior people in DVA, and I believe many of them want these fixes as genuinely as I do. But goodwill inside the Department has never been enough. There is a toxic culture embedded and reinforced by the current Minister for Veterans' Affairs. What's been missing isn't intent. It's the sustained follow-through, and the willingness to be held accountable, that turns good intentions into a system a grieving widow, or a veteran waiting on a seven-year-old case, can actually rely on.

The Defence and Veterans' Service Commission is the best chance in decades to build that accountability in. Whether it succeeds depends on the same thing everything else depends on: leaders willing to act, and a government willing to let them.

That is the unfinished business of my generation of advocates. It should be the starting point for the next one.

Once last message "Scrap the $5,000 cap of veteran allied health services"

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