

Statement of Principles concerning **ALCOHOL USE DISORDER** (Reasonable Hypothesis) (No. 85 of 2025)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(2) of the Veterans' Entitlements Act 1986.

Dated 24 October 2025

Professor Terence Campbell AM Chairperson by and on behalf of The Repatriation Medical Authority

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1 Name

This is the Statement of Principles concerning *alcohol use disorder* (*Reasonable Hypothesis*) (No. 85 of 2025).

2 Commencement

This instrument commences on 24 November 2025.

3 Authority

This instrument is made under subsection 196B(2) of the *Veterans' Entitlements Act 1986*.

4 Repeal

The Statement of Principles concerning alcohol use disorder (Reasonable Hypothesis) (No. 48 of 2017) (Federal Register of Legislation No. F2017L01045) made under subsection 196B(2) of the VEA is repealed.

5 Application

This instrument applies to a claim to which section 120A of the VEA or section 338 of the *Military Rehabilitation and Compensation Act 2004* applies.

6 Definitions

The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

7 Kind of injury, disease or death to which this Statement of Principles relates

(1) This Statement of Principles is about alcohol use disorder and death from alcohol use disorder.

Meaning of alcohol use disorder

(2) For the purposes of this Statement of Principles, alcohol use disorder means a disorder of mental health meeting the following diagnostic criteria (derived from DSM-5-TR):

A problematic pattern of alcohol use leading to clinically significant impairment or distress, as manifested by at least 2 of the following, occurring within a 12-month period:

- (a) Alcohol is often taken in larger amounts or over a longer period than was intended.
- (b) There is a persistent desire or unsuccessful efforts to cut down or control alcohol use.

- (c) A great deal of time is spent in activities necessary to obtain alcohol, use alcohol, or recover from its effects.
- (d) Craving, or a strong desire or urge to use alcohol.
- (e) Recurrent alcohol use resulting in a failure to fulfil major role obligations at work, school, or home.
- (f) Continued alcohol use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of alcohol.
- (g) Important social, occupational or recreational activities are given up or reduced because of alcohol use.
- (h) Recurrent alcohol use in situations in which it is physically hazardous.
- (i) Alcohol use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by alcohol.
- (i) Tolerance, as defined by either of the following:
 - (i) a need for markedly increased amounts of alcohol to achieve intoxication or desired effect; or
 - (ii) a markedly diminished effect with continued use of the same amount of alcohol.
- (k) Withdrawal, as manifested by either of the following:
 - (i) the characteristic withdrawal syndrome for alcohol; or
 - (ii) alcohol (or a closely related substance, such as a benzodiazepine) is taken to relieve or avoid withdrawal symptoms.

The definition of alcohol use disorder excludes alcohol-induced disorders in the absence of alcohol use disorder. Alcohol induced disorders include alcohol intoxication, alcohol withdrawal, and alcohol-induced mental disorders.

Note: **DSM-5-TR** is defined in the Schedule 1 – Dictionary.

- (3) While alcohol use disorder attracts ICD-10-AM code F10.1 and F10.2., in applying this Statement of Principles the meaning of alcohol use disorder is that given in subsection (2).
- (4) For subsection (3), a reference to an ICD-10-AM code is a reference to the code assigned to a particular kind of injury or disease in *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM), Tenth Edition, effective date of 1 July 2017, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-296-4.

Death from alcohol use disorder

(5) For the purposes of this Statement of Principles, alcohol use disorder, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's alcohol use disorder.

Note: *terminal event* is defined in the Schedule 1 – Dictionary.

8 Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that alcohol use disorder and death from alcohol use disorder can be related to relevant service rendered by veterans, members of Peacekeeping Forces, or members of the Forces under the VEA, or members under the MRCA.

Note: MRCA, relevant service and VEA are defined in the Schedule 1 – Dictionary.

9 Factors that must exist

At least one of the following factors must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting alcohol use disorder or death from alcohol use disorder with the circumstances of a person's relevant service:

- (1) having one of the following clinically significant disorders of mental health at the time of clinical onset or clinical worsening:
 - (a) agoraphobia;
 - (b) anorexia nervosa;
 - (c) antisocial personality disorder;
 - (d) attention-deficit/hyperactivity disorder;
 - (e) avoidant-restrictive food intake disorder;
 - (f) binge-eating disorder;
 - (g) bipolar disorder;
 - (h) borderline personality disorder;
 - (i) bulimia nervosa;
 - (j) conduct disorder;
 - (k) gambling disorder;
 - (1) generalised anxiety disorder;
 - (m) insomnia disorder;
 - (n) major depressive disorder;
 - (o) obsessive-compulsive disorder;
 - (p) panic disorder;
 - (q) persistent depressive disorder;
 - (r) posttraumatic stress disorder;
 - (s) schizophrenia or schizoaffective disorder;
 - (t) social anxiety disorder;
 - (u) specific phobia; or
 - (v) substance use disorder.

Note: clinically significant disorder of mental health is defined in the Schedule 1 dictionary.

(2) experiencing a category 1A stressor within the 5 years before clinical onset or clinical worsening;

Note: category 1A stressor is defined in the Schedule 1 - Dictionary.

(3) experiencing a category 1B stressor within the 5 years before clinical onset or clinical worsening;

Note: category 1B stressor is defined in the Schedule 1 - Dictionary.

(4) experiencing a category 2 stressor within the 1 year before clinical onset or clinical worsening;

Note 1: A category 2 stressor can arise in a variety of circumstances connected with service. Such circumstances can arise during the course of service, as a result of separation from service and the conditions associated with that separation, and in the transition to civilian life in the years following separation.

Note 2: category 2 stressor is defined in the Schedule 1 - Dictionary.

- (5) experiencing the death of a person with whom one has a close family bond or a close personal relationship, within the 10 years before clinical onset or clinical worsening;
- (6) having experienced as a child (under the age of 18) one of the following:
 - (a) serious physical, emotional, or sexual harm;
 - (b) neglect involving a serious failure to provide the necessities for health, physical and emotional development, or wellbeing by adults with obligations to provide such necessities;

before clinical onset or clinical worsening;

- (7) having persistent pain, which is severe enough to interfere with daily living, for at least the 3 months before clinical onset or clinical worsening;
- (8) having Roux-en-Y gastric bypass surgery within the 3 years before clinical onset or clinical worsening;
- (9) experiencing a morally injurious event within the 5 years before clinical onset or clinical worsening;

Note: *morally injurious event* is defined in the Schedule 1 – Dictionary.

(10) experiencing intimate partner violence within the 5 years before clinical onset or clinical worsening;

Note: *intimate partner violence* is defined in the Schedule 1 – Dictionary.

(11) having smoked tobacco at least 0.5 pack-years before clinical onset or clinical worsening, and where smoking has ceased, clinical onset or clinical worsening occurred within 3 months of cessation;

Note: one pack-year is defined in the Schedule 1 - Dictionary

- (12) having a concussion or moderate to severe traumatic brain injury within the 3 years before clinical onset or clinical worsening;
- (13) inability to obtain appropriate clinical management for alcohol use disorder before clinical worsening.

10 Relationship to service

- (1) The existence in a person of any factor referred to in section 9, must be related to the relevant service rendered by the person.
- (2) The clinical worsening aspect of factors set out in section 9 apply to material contribution to, or aggravation of, alcohol use disorder where the person's alcohol use disorder was suffered or contracted before or during (but did not arise out of) the person's relevant service.

11 Factors referring to an injury or disease covered by another Statement of Principles

In this Statement of Principles:

- (1) if a factor referred to in section 9 applies in relation to a person; and
- (2) that factor refers to an injury or disease in respect of which a Statement of Principles has been determined under subsection 196B(2) of the VEA;

then the factors in that Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

Schedule 1 - Dictionary

Note: See Section 6

1 Definitions

In this instrument:

alcohol use disorder—see subsection 7(2).

category 1A stressor means one of the following severe traumatic events:

- (a) experiencing a life-threatening event;
- (b) being subject to a serious physical attack, or assault including rape or sexual molestation;
- (c) being threatened with a weapon, being held captive, being kidnapped, or being tortured.

category 1B stressor means one of the following severe traumatic events:

- (a) killing or maiming a person;
- (b) being a witness to a person being killed or critically injured;
- (c) being a witness to atrocities inflicted on another person;
- (d) witnessing human remains or a critically injured casualty, excluding seeing a closed body bag or viewing a body in an open-casket.

Note: witness is defined in the Schedule 1 – Dictionary.

category 2 stressor means one of the following negative life events, the effects of which are chronic in nature and cause the person to feel on-going distress, concern or worry:

- (a) being a full-time caregiver to a family member or a person with whom one has a close family bond or a close personal relationship with a severe physical, mental or developmental disability;
- (b) being socially isolated and unable to maintain friendships or family relationships, due to physical location, language barriers, disability, or medical or psychiatric illness;
- (c) experiencing adverse prejudicial differential treatment or unequal access to opportunities based on membership to a particular sociocultural group (racism);
- (d) experiencing a problem with a long-term relationship including the break-up of a close personal relationship, the need for marital or relationship counselling, marital separation, or divorce;
- (e) having concerns in the work environment including on-going disharmony with fellow work colleagues, perceived lack of social support within the work environment, perceived lack of control over tasks performed and stressful workloads, or experiencing bullying in the workplace or school environment;
- (f) experiencing prejudice or discrimination based on gender, or behaviour or attitudes that foster stereotyped social roles based on gender (sexism);

- (g) experiencing serious legal issues including being detained or held in custody, on-going involvement with the police concerning violations of the law, or court appearances associated with personal legal problems;
- (h) having severe financial hardship including loss of employment, long periods of unemployment, foreclosure on a property or bankruptcy;
- (i) having a family member or a person with whom one has a close family bond or a close personal relationship experience a major deterioration in their health;
- (j) having a medical illness or injury which has resulted in a severe level of physical or cognitive disability.

clinically significant disorder of mental health means a disorder of mental health which is of sufficient severity to warrant ongoing management.

Note: To warrant ongoing management does not require that any actual management was received or given for the condition.

DSM-5-TR means the American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision. Washington, DC, American Psychiatric Association, 2022.

intimate partner means a person who is or has been in an intimate relationship with another person.

intimate partner violence means behaviour within an intimate relationship perpetrated by an intimate partner that causes or has the capacity to cause physical, sexual, economic or psychological harm. Examples include, but are not limited to:

- (a) violence:
- (b) threats;
- (c) harmful behaviours or threats of harmful behaviours directed towards a child, animal or another adult;
- (d) neglect where there is a relationship of dependence;
- (e) coercion;
- (f) stalking;
- (g) humiliation;
- (h) restriction of access to education, employment or medical care; or
- (i) isolation from family, friends or colleagues.

Note 1: *intimate relationship* is defined in the Schedule 1 – Dictionary.

Note 2: *intimate partner* is defined in the Schedule 1 – Dictionary.

intimate relationship means a relationship that involves emotional and/or physical closeness and interdependence between people. Purely commercial relationships are excluded from this definition.

morally injurious event means an event that transgresses a person's deeply held moral beliefs and expectations.

MRCA means the *Military Rehabilitation and Compensation Act 2004*.

one pack-year means the amount of tobacco consumed in smoking 20 cigarettes per day for a period of 1 year, or an equivalent amount of tobacco products.

- Note 1: An equivalent amount of tobacco products is 7,300 grams of smoking tobacco by weight, either in cigarettes, pipe tobacco or cigars, or a combination of same. For pipe tobacco, cigars or combinations of multiple tobacco types, 1 gram of tobacco is considered to be equal to one cigarette.
- Note 2: Pack-years are calculated by dividing the number of cigarettes smoked per day by 20 and multiplying this number by the number of years the person has smoked. For example, smoking 10 cigarettes per day for 10 years is equal to 5 pack-years, and smoking 40 cigarettes per day for 10 years is equal to 20 pack-years.

relevant service means:

- (a) operational service under the VEA;
- (b) peacekeeping service under the VEA;
- (c) hazardous service under the VEA;
- (d) British nuclear test defence service under the VEA;
- (e) warlike service under the MRCA; or
- (f) non-warlike service under the MRCA.

Note: MRCA and VEA are defined in the Schedule 1 - Dictionary.

terminal event means the proximate or ultimate cause of death and includes the following:

- (a) pneumonia;
- (b) respiratory failure;
- (c) cardiac arrest;
- (d) circulatory failure; or
- (e) cessation of brain function.

VEA means the Veterans' Entitlements Act 1986.

witness means a person who experiences an incident at the time it occurs and can give direct evidence of it. This excludes persons exposed only to public broadcasting or mass media coverage of the incident.