Chapter 1

Introduction

- 1.1 On 25 March 2015 the Senate referred the following matter to the Foreign Affairs, Defence and Trade References Committee for inquiry and report by 19 February 2016. On 2 February 2016, the Senate agreed to extend the reporting date for the inquiry to 29 February 2016, and then on 29 February 2016 agreed to further extend the reporting date to 15 March 2016. The terms of reference for this inquiry concerned the mental health of Australian Defence Force (ADF) personnel who have returned from combat, peacekeeping or other deployment, with particular reference to:
 - a. the extent and significance of mental ill-health and post-traumatic stress disorder (PTSD) among returned service personnel;
 - b. identification and disclosure policies of the ADF in relation to mental ill-health and PTSD:
 - c. recordkeeping for mental ill-health and PTSD, including hospitalisations and deaths;
 - d. mental health evaluation and counselling services available to returned service personnel;
 - e. the adequacy of mental health support services, including housing support services, provided by the Department of Veterans' Affairs (DVA);
 - f. the support available for partners, carers and families of returned service personnel who experience mental ill-health and PTSD;
 - g. the growing number of returned service personnel experiencing homelessness due to mental ill-health, PTSD and other issues related to their service:
 - h. the effectiveness of the Memorandum of Understanding between the ADF and DVA for the Cooperative Delivery of Care;
 - i. the effectiveness of training and education offerings to returned service personnel upon their discharge from the ADF; and
 - j. any other related matters.

Conduct of inquiry

- 1.2 The committee advertised the inquiry on its website and in the Australian newspaper. The committee also wrote to individuals and organisations likely to have an interest in the inquiry and invited them to make written submissions.
- 1.3 The committee received 82 submissions and 11 supplementary submissions to the inquiry. These submissions are listed at Appendix 1 and are published on the committee's website.
- 1.4 The committee held four public hearings on 31 August 2015 in Canberra, 1 September 2015 in Brisbane, 21 September 2015 in Canberra, and 18 November 2015 in Narrabeen. The witnesses who appeared at these hearings are listed at

Appendix 3 and the programs and Hansard transcripts of the hearings are published on the committee's website.

Past parliamentary inquiries

1.5 In June 2013, the Joint Standing Committee on Foreign Affairs, Defence and Trade tabled its report into the *Care of ADF Personnel Wounded and Injured on Operations*. The report found that the mental health of ADF members (current and former) is not well documented nor understood by the Defence organisations and made three recommendations to improve this understanding:

Recommendation 8

The Committee recommends that the Department of Defence publish periodic detailed written assessments on:

- the implementation of the recommendations of both the 2009 Review of Mental Health Care in the ADF and Transition through discharge, and the 2010 ADF Mental Health Prevalence and Wellbeing Study;
- the Australian Defence Force mental health reform program; and
- what additional enhancements have been made to current programs, as indicated in the Defence White Paper. 1

Recommendation 9

The Committee recommends that the departments of Defence and Veterans' Affairs undertake a study into psychological support of partners and families of Australian Defence Force (ADF) members and ex-ADF members. The Committee further recommends that the study be conducted with the objective of developing recommendations to overcome partners' and families' mental health issues that may be highlighted by the study.

The Committee further recommends that the Government implement, as a priority, the recommendations of *The Health and Wellbeing of Female Vietnam and Contemporary Veterans* report.²

Recommendation 10

The Committee recommends that the effectiveness of psychological first aid be made a research priority by the Department of Defence, in consultation with the Department of Veterans' Affairs.³

1.6 The Returned and Services League of Australia (RSL) expressed disappointment with the government's progress implementing the recommendations of this inquiry and other past inquiries:

Joint Committee on Foreign Affairs, Defence and Trade, *Care of ADF Personnel Wounded and Injured on Operations*, June 2013, p. 75.

Joint Committee on Foreign Affairs, Defence and Trade, *Care of ADF Personnel Wounded and Injured on Operations*, June 2013, p. 76.

Joint Committee on Foreign Affairs, Defence and Trade, *Care of ADF Personnel Wounded and Injured on Operations*, June 2013, p. 76.

It is with considerable disappointment that the earlier, excellent [i]nquiries held over the previous decade have failed to produce the necessary follow-up they so rightly deserved. Too few of the recommendations were adequately pursued and we now find ourselves in much the same position once more...on close examination it can be seen that many of these excellent reforms have failed to come to pass or they have produced less benefit than they intended to implement.⁴

1.7 The government response to the report's recommendations was tabled in March 2015. Recommendations 8 and 10 were supported and recommendation 9 was supported in principle.

Structure of report

- 1.8 The report is structured as follows:
- Chapter 2 considers the extent and significance of mental ill-health in ADF members, veterans, and the families of ADF members and veterans;
- Chapter 3 considers the mental health strategies for ADF members and veterans; identification and disclosure policies in the ADF in relation to mental ill-health; and recordkeeping for mental ill-health for ADF members;
- Chapter 4 considers the diagnosis and treatment of mental ill-health and the adequacy of mental health support services provided to ADF members, veterans, and their families;
- Chapter 5 considers the barriers to accessing mental health services for ADF members and veterans, primarily their reluctance to seek help. It also focuses on the difficulties and challenges experienced by ADF members and veterans seeking assistance through DVA delivery models and claims processes, including ADF members and veterans who live in regional and remote areas; and
- Chapter 6 considers the effectiveness of training, education, and transition support services provided to ADF members at discharge; the Memorandum of Understanding (MoU) between the ADF and DVA and the effective transfer of responsibility of care; and veterans experiencing homelessness due to mental ill-health and other issues related to their service.

Definitions

1.9 The committee acknowledges that there is more than one definition for the term 'veteran' and that the term means different things to different people. The *Veterans' Entitlement Act 1988* defines a veteran as a person who is 'taken to have rendered eligible war service'; and the term is not specifically defined by the *Military Rehabilitation and Compensation Act 2004*, rather it notes the kinds of service to

⁴ Returned and Services League of Australia, *Submission 19*, p. 19.

⁵ *Veterans' Entitlement Act 1988*, ss. 5C(1).

which the act applies, listing warlike service, non-warlike service, peacetime service and defence service.

1.10 This report uses the term 'veteran' to describe all former members of the ADF, irrespective of whether they were deployed or undertook war or warlike service.

Acknowledgements

1.11 The committee thanks all those who contributed to the inquiry by making submissions, providing additional information or appearing at the hearings.