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Senate Inquiry into 'The Operation of the Australian Defence Force's (ADF's) Resistance to Interrogation (RTI) Training'.

Thank you for providing the opportunity to make this submission to the Senate Inquiry into 'The Operation of the Australian Defence Force's (ADF's) Resistance to Interrogation (RTI) Training'.

This submission is made in accordance with the Terms of Reference of the Inquiry.

I am a former soldier and officer of the Australian Defence Force, having served over a period of 21 years in Infantry (RAInf), Armoured Corps (RAAC), Electrical and Mechanical Engineers (RAEME), Royal Australian Navy (Weapons Engineer), and Medical Corps (RAAMC). Today, I now do my best to serve as a general practitioner in a rural community, including its veterans and their families.

I have been involved in Resistance to Interrogation training both as an involuntary participant (in 1991), and as a medical officer involved in three separate RTI activities conducted in 2005.

It is my ethical and moral duty to provide this submission. This Inquiry represents an opportunity to rationally and intellectually question the necessity of RTI training, with specific emphasis on perceived operational benefit versus the obvious human and moral harm.

I wish to relay my experiences and observations of RTI training to provide additional context to the Inquiry. Additionally, I have a specific interest in the health and welfare of formerly serving personnel, having been appalled by their deleterious health outcomes, high rates of suicide, and the government's inability to address this.

I have previously made a submission to the Senate regarding its Inquiry into 'Suicide By Veterans and ex-Service Personnel'. This additional Inquiry is a further opportunity to explore Resistance to Interrogation training as an obvious source of harm to personnel, without any proven operational benefit.

On Remembrance Day in 2016, the former Victorian Premier and founding Chairman of Beyond Blue Jeff Kennett poignantly and saliently declared 'Zero Tolerance' to veteran suicide. This was courageously announced in response to over 70 Australian suicides in 2016 alone, the tip of a very deep iceberg of veteran anguish and suffering. This 'Zero Tolerance' campaign also translated to a 'full disclosure' mandate, with open and honest revelation and discussion of all aspects of harm confronting veterans, the latter term used to include all ADF personnel, serving and ex-serving, regular or reserve, deployed and non-deployed.

Resistance to Interrogation training is an obvious place to start when analysing and justifying the military 'benefit versus harm' equation. Full disclosure, with honest and intellectual discussion must occur on this subject. The ADF must demonstrate awareness and ownership of the problems and outcomes. The commanders may well insist on Resistance to Interrogation training as essential to operations. So be it. However, the ADF must acknowledge the implicit harms of its training and operations, and be accountable for it.

As a former maintenance engineer, amongst other roles, I have seen more attention paid to the lifecycle of ships, missiles and helicopters, than I have to serving and ex-ADF personnel. The life-cycle of military equipment is fully defined before 'introduction into service', including the disposal phase. Human resources within the military are afforded no such privileges. At some stage during the 'in-service' phase, disposal is summarily enacted after persistent negligence of maintenance, and materiel abuse. Ships are scuttled in a respectable, coordinated and pre-defined manner, whilst formerly proud, loyal and committed personnel are thrown on to human scrap-heaps.

I do not wish to provide a discourse on the academic aspects regarding the morality or ethics of RTI training, nor the operational arguments for its necessity. I will also defer to psychiatric experts regarding the deleterious mental health effects of the techniques used within the RTI process,

[REDACTED]
[REDACTED] Former SAS Soldier Stuart Bonner, in his biography 'Redback One', indeed admitted that his RTI experiences 'might have been the first step into that dark place in the mind where PTSD planted its seed'.

The ADF will dogmatically assert that RTI training is operationally essential for 'high-risk personnel'. The ADF will also try to reassure any critics that RTI training is conducted within strict guidelines, with voluntary consent, pre-event training, neutral observers with power of veto, psychological support and debriefing and long-term health surveillance.



My own experiences and observations directly refute the disingenuous reassurances of the ADF. The ADF has no evidence basis for the operational benefit of Resistance to Interrogation. RTI training is not just restricted to special forces (not that they are exempt from its outcomes), but also is inflicted upon regular and reserve soldiers.

The concept of consent to such training is extremely questionable. Consent for serving defence force members is an irrelevant concept. Consent implies free-will, a freedom exchanged for obedience at enlistment. 'Obedience is doing what you are told, regardless of what is right. Morality is doing what is right regardless of what you are told'. In the defence force, soldiers are trained for obedience to prevail, automatically and at all costs. Morality is a very secondary or non-existent concept.

Consent issues aside, I also have evidence that RTI training has been inflicted upon unwitting, and therefore non-consenting, personnel. [REDACTED]

[REDACTED] These soldiers were not debriefed or offered any psychological support. There is also no known record of their involvement with this activity. Even if the ADF wished to follow-up on the welfare of these individuals, there would be no record of their whereabouts or disposition. As these soldiers were members of the Army Reserve, they are not entitled to services provided by Non-Liability Health Care (NHLC). Hence we astoundingly have a cohort of formerly serving Australian soldiers whom have been subjected to one of the most hazardous (and possibly heinous) forms of military training, without any preparation, training, consent, post-exercise debriefing, or access to any form of support. The ADF does not even know who these individuals are, nor acknowledge the potential harms inflicted upon these members.

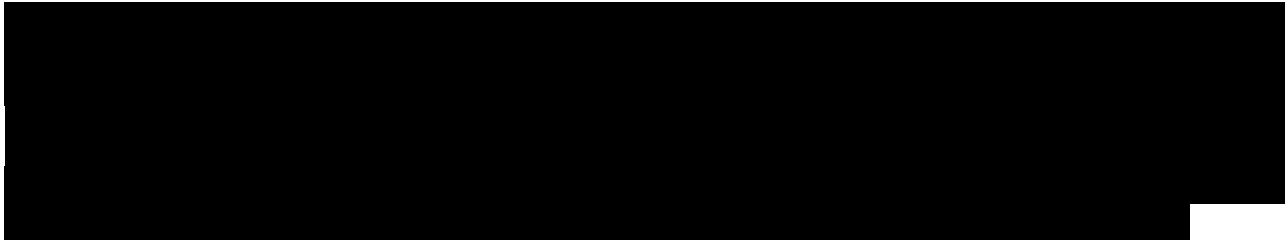
The ADF will have you believe that RTI exercises are conducted within strict guidelines, and that personnel are not physically harmed. They will assure that all activities are supervised via CCTV, and recorded for later scrutiny. In my experience, I recall cameras being located in the holding areas,




I do not recall during any exercises a 'friendly' psychologist being on staff, who would advocate for the captive. Had such a psychologist been present, he or she would likely have been a junior uniformed officer, well trained in mandates of obedience over morality. Challenging the wants of command is an audacious, if not career-ending, prospect. The military has many implicit sanctions for the non-conforming, and this includes the lowly-ranked psychology or medical officer.


Medical officers also apparently had the 'power of veto', with the veiled eyes of impartiality. Although imbued with the Hippocratic Oath, and inculcated with strong code of ethics and morality, commanders would insist commitment to the uniform primarily. All Hippocratic concepts of *'I will abstain from all intentional wrong-doing and harm, especially from abusing the bodies of man or woman, bond or free'* were relegated to flaky and unnecessary notions in the eyes of command.

Medical officers, the apparent eyes of impartiality and the voice of reason, were discondordantly entrained in servile deference to command. This process would occur over several years of conditioning, usually not without resistance. The turmoil of servile obedience competing with ethics, and indeed proper clinical care would erode the moral core of any decent medical officer, accelerating burn-out if not inducing mental illness via moral injury. Medical officers being forced to change clinical decisions (not over-ruled, but enforced) was common place. Concepts of confidentiality were lost on superior officers insisting on intruding on sacrosanct doctor-patient ground, in directed attempts to sway the outcome of the clinical interaction, such as occurred in Resistance to Interrogation training, and other settings. Threats of insubordination charges, legal action and imprisonment were reserved for the particularly feisty.



No amount of CCTV video footage can show the viewer what has never been recorded, and what cannot be recorded. The mind states of the victims are not visible to see. Certainly, no cameras were present at the process of capture, or 'take-down', where any amount of violence was sanctioned to subjugate and suppress the participants. These activities can only be described as gross violence and assault, with grievous harm the common outcome. Many hospitalisations and possible long-term harm have occurred as a result of this hostile element of the RTI experience.





Trooper Evan Donaldson has made a statement that he was assaulted during his Resistance to Interrogation training in 2006, as mentioned in Parliament by Senator Jacqui Lambie. His claim of injury is entirely consistent with the nature and conduct of the training. It is also unlikely that this injury would have been recorded on video footage. Nonetheless, lacerations and bleeding aside, I assert that the psychiatric effects of Resistance to Interrogation training has the potential to leave far greater scars. Trooper Donaldson describes a significant impact of the RTI process upon his mind state and his career, sequelae not dissimilar to former Trooper Stuart Bonner, and many other subjects of RTI training (who may not be so bold and self-aware to come forth with this admission).

I have little further to offer on this subject. I have said my piece. I live with the vestiges of my experiences with Resistance to Interrogation training, both as a recipient, and as a perpetrator. The nightmares and guilt are part of it. The generals, intellectuals and politicians can take it from here, and do as they wish. They can pontificate amongst themselves, and decide whether international and domestic laws have been breached, and whether United Nations and Geneva Convention principles have been violated. I acknowledge my abrogation of the Hippocratic Oath, and frequent excursions from its implied ethics and morality, and am prepared to be accountable for it. I only ask that the harms inflicted upon our serving personnel are acknowledged, owned, justified, and remedied. Veterans, their families, and the society from which they come, and which our government claims to represent and protect, deserve better.

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