

Personnel

- 3.1 The *Defence Annual Report 2009-10* shows that during 2009-2010:
- Defence had 77,755 permanent employees comprised of 57,697 permanent ADF members and 20,058 APS staff;¹
 - the number of Reservists who rendered paid service during 2009-10 increased by 971 to 21,248²; and
 - the total Australian Defence Force (ADF) workforce was 78,945 which comprised 15,970 Navy members³, 45,566 Army members and 17,409 Air Force members.⁴

Women and Indigenous people in the ADF

- 3.2 There continues to be considerable disparities between the proportion of men and women in the ADF. As at 30 June 2009, 86.5 per cent were men and 13.5 per cent were women.⁵ However Defence commented:

... there are 399 more women serving now than at the same time last year. It is now 7,873 – 13.6 per cent of the workforce. Broken down: in Navy, it is 18.5 per cent; Army, 9.7 per cent; Air Force,

1 Department of Defence, *Defence Annual Report 2009-2010 Volume One*, p. 34.

2 Department of Defence, *Defence Annual Report 2009-2010 Volume One*, p. 32.

3 Members are comprised of permanent, gap year and reserve members.

4 Department of Defence, *Defence Annual Report 2009-2010 Volume One*, p. 34.

5 Department of Defence, *Defence Annual Report 2009-2010 Volume One*, p. 344.

16.9 per cent. To clarify why the Army number is lower than the other two, it is the effect of the restrictions on serving in occupations, which in Army's case are infantry and armoured corps and some artillery roles within the combat engineer squadron.⁶

- 3.3 One of the issues affecting the retention of women was "the attitude of the local commander to being open to having flexible working arrangements, shared working arrangements or part-time arrangements"⁷ but Defence stated that they were:

... seeking to make it an issue in the way that the services evaluate the performance of their emerging leadership. Are you actually supporting a flexible workplace which is leading to increased retention of women?⁸

- 3.4 The Committee asked about the numbers of women in senior ranks. Defence replied that:

As at 1 April 2011, the percentage of women in senior positions are:

- ADF senior ranks (Colonel or higher) 6.7 per cent; and
- Defence APS women in senior positions (EL2 or higher) 20 per cent.

Since 30 June 2005, the participation of women in senior ADF ranks is as follows:

	2005	2011 (1 March 2011)
Two star	1	1
One star	0	7
Colonel (E)	12	31 ⁹

- 3.5 The Defence Annual Report does not give information as to the ethnicity of members of the ADF. Defence provided the following information:

The diversity statistics are:

- Indigenous: ADF 0.8 per cent and APS 0.5 per cent; and
- Non English Speaking Background: ADF 5.2 per cent and APS 13.3 per cent.¹⁰

6 Mr Phil Minns, Department of Defence, *Transcript*, 25 March 2011, p. 33.

7 Mr Phil Minns, Department of Defence, *Transcript*, 25 March 2011, p. 34.

8 Mr Phil Minns, Department of Defence, *Transcript*, 25 March 2011, p. 34.

9 Department of Defence, *Submission 4*, p. 6.

10 Department of Defence, *Submission 4*, p. 6.

- 3.6 The Committee was particularly interested in seeking out information about Indigenous recruitment within the ADF. In relation to Indigenous participation the Chief of the Defence Force told the Committee:

NORFORCE is a very successful demonstration of what we can do where you have a large Indigenous population around you. We are very proud of that, but unfortunately, when you look in the wider ADF we are not getting the sorts of levels of participation that I would really like to see. But again we are deeply committed to increasing the level of Indigenous participation in the Defence Force.¹¹

- 3.7 The CDF went on to explain that Defence do have strategies in place for increasing Indigenous participation and raised the question as to whether he might need a reference group as he has with women:

We have a strategy. The secretary and I have a strategy to increase not just Indigenous participation in the ADF but also in the defence organisation, and we are very supportive of that. We go along every Indigenous People's Day and throw our very strong support behind the strategy we have in place at the moment. It is a good question. Should we have a reference group? That is something we will have a look at. The question was whether the ADF represents the community from whence it came. I think you are right; we are probably far too more towards the Anglo-Saxon side of the ledger. But again there are no barriers to anybody coming into the ADF. You will see, if you visit our people, that we are well represented by all of the ethnic communities in Australia. It is just that the levels of participation probably do not reflect the number of those people in our population.¹²

- 3.8 The Committee was interested to hear about recruitment of people from Indigenous and ethnic backgrounds. Defence told the Committee that they are:

... implementing a range of initiatives designed to attract and retain employees from diverse backgrounds through the Multicultural Recruitment and Retention Strategy:

(a) Defence Force Recruiting (DFR) is conducting extensive research into Culturally and Linguistically Diverse (CALD) communities with a view to better understanding the factors that

11 Air Chief Marshal Angus Houston, Department of Defence, *Transcript*, 25 March 2011, p. 33.

12 Air Chief Marshal Angus Houston, Department of Defence, *Transcript*, 25 March 2011, p. 33.

influence people from CALD backgrounds when making employment decisions. Recruiting activities include:

- Use of the 'Proud to Belong in the Australian Defence Force' banner to promote career opportunities in the ADF to CALD communities.
- Reviewing existing national research on recruitment and retention of CALD employees.
- All generic DFR advertising (Television, Print, Online and Radio) must consider ADF workforce diversity and aims to portray diversity including women, Indigenous and CALD serving members.
- Developing, producing and distributing an ADF Guide for Parents/Guardians through DFR Centres nationally.
- Continued participation in community engagement programs that target employee prospects from CALD backgrounds and also targets their influencers; parents and community leaders.

(b) Fairness and Resolution Branch is developing a range of products and services to aid increased cultural awareness across Defence and to facilitate retention of people from CALD backgrounds. These initiatives include:

- The distribution of an 'ADF Guide to Religion and Belief' that aims to inform employees and members of the religious needs of different cultural groups.
- The release of the 'Diversity in Defence' guidance document that draws together many elements of diversity across Defence.
- Conducting further research into the current level of diversity in the ADF and attitudes towards greater diversity.¹³

ADF Pay Remediation

Background

- 3.9 Media and community scrutiny in recent times have highlighted a range of issues relating to the delivery of payroll services to members of the ADF. Defence has acknowledged this, and put in place remediation action
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13 Department of Defence, *Submission 4*, p. 7.

to address process problems and areas of concern in the medium to long term.

- 3.10 On 2 February 2010, Minister for Defence Personnel, Materiel and Science, the Hon Greg Combet AM MP, announced the “immediate establishment of a high powered ADF Payroll Remediation Task Force”.

...the function of the Task Force will be to rectify current deficiencies in the ADF payroll system and to accelerate the introduction of an improved pay system... The initial steps of the Task Force will include remediating pay issues that arise for individual ADF members, including the recent overpayments of the International Campaign Allowance.¹⁴

- 3.11 The Task Force is co-chaired by the Vice Chief of the Defence Force and the Deputy Secretary Defence Support. To support the Task Force, a Payroll Remediation Team (PRT) has been established.¹⁵

- 3.12 The Committee were eager to find out about the PMKeyS (Defence’s HR data software) refresh including the CENRESPAY (Defence’s Payroll system) integration and Defence planning with respect to moving allowances from approximately \$1,000 to a different amount. In relation to the PMKeyS refresh Defence stated that:

The Technical Refresh project is currently running under budget and is due for completion in April 2012 as originally proposed. There has been minimal change to the originally planned scope of work. The only key milestone change has been the implementation of Reserve payroll (replacing CENRESPAYII), originally planned for July 2011, which is now planned for implementation in October 2011.¹⁶

- 3.13 In relation to allowances Defence stated that:

The strategic review of allowances is the next tranche of reform of remuneration for members of the ADF. It follows on from the officer and other ranks pay structure reforms in 2007-08. The review deals with the seventeen categories of pay-related allowances that currently fall under the jurisdiction of the Defence Force Remuneration Tribunal (DFRT). The aim of the review is to

14 Hon Greg Combet AM MP, Minister for Defence Personnel, Materiel and Science, ‘ADF Payroll And Pay System Reform’, Media Release, 2 February 2010.

15 Department of Defence, Defence Payroll Remediation Task Force viewed on 6 April 2011, <<http://www.defence.gov.au/payrollremediation/index.htm>>.

16 Department of Defence, *Submission 4*, p. 8.

consolidate and simplify the structure and administration of these allowances and ensure they continue to support the people capability requirements of the ADF, and enable more cost effective administration of allowances.

The review is presently in the analytical phase where various options for the reform of the allowance structures are being evaluated. It is anticipated that Defence will make submissions on proposed reforms of the allowances to the DFRT in late 2011 and in 2012.

The strategic review of ADF pay-related allowances does not deal with the large range of domestic allowances that underpin the conditions of service that are provided to members of the ADF, such as leave, travel, housing, removal and location.¹⁷

ADF Mental Health Reforms

Background

3.14 The *Review of Mental Health Care in the ADF and Transition through Discharge* was initiated by the Minister for Defence Science and Personnel, the Hon Warren Snowdon MP, and the Minister for Veterans' Affairs, the Hon Alan Griffin MP on 26 May 2008.¹⁸ Professor David Dunt the author of the report published his findings in January 2009.

3.15 Key points from the Dunt Review were:

- There are lots of good Defence mental health initiatives, but they need to be coordinated better within a wider strategy.
- Re-organisation of mental health agencies is required, to remove duplication and gain better efficiency from available resources.
- In line with wider society, mental health issues are increasingly prevalent and recognised. Awareness and acceptance are improving, but there is room for improvement.

17 Department of Defence, *Submission 4*, p. 8.

18 The Hon Warren Snowdon MP, Minister for Defence Science and Personnel and the Hon Alan Griffin MP, Minister for Veterans' Affairs, 'Review of Mental Health Care in the ADF and Beyond', Media release, 060/2008, 26 May 2008.

- There is a capacity issue for Defence mental health personnel, with causes including: difficulty of attracting suitable experts, manning caps, remuneration, and competition with civilian agencies.
- Better mental health training is required for chaplains and unit leaders.
- Defence has world-leading systems for post-operational psychological support (Return to Australia Psych Screen “RtAPS” and Post Operational Psych Screen “POPS”) but improvements are required.
- Resilience training for ADF personnel is world class during initial training, but should be a career-long activity.
- Improvements are required to the ADF’s Medical Employment Classification (MEC) system.
- Rehabilitation systems need to be enhanced.
- Transition management needs to be improved, especially for personnel discharging due to mental health issues¹⁹.

3.16 In the Government response to the Dunt Review:

Defence has agreed to 49 of the 52 recommendations and partially agreed to three recommendations. Funding of \$83m has been allocated over the period 2009 – 2013 for major program of reform that will address the gaps identified, including providing improved mental health governance and policy, an enhanced mental health workforce, improved mental health training for ADF personnel and providers, enhanced prevention strategies including better research and surveillance, enhanced mental health rehabilitation and transition services, greater involvement of families in the mental health of ADF members, and better facilities from which mental health services will be delivered.²⁰

¹⁹ Dunt, D Prof, *Review of Mental Health Care in the ADF and Transition through Discharge*, January 2009
<<http://www.defence.gov.au/health/DMH/docs/Review%20of%20Mental%20Health%201%20May%2009.pdf>> viewed 12 October 2011.

²⁰ Government Response to the Mental Health Care Crisis in the ADF and transition to discharge, p. 1
<<http://www.defence.gov.au/health/DMH/docs/Government%20Response%20to%20Review%201%20May%2009.pdf>> viewed on 8 August 2011.

Current Status

- 3.17 At the public hearing on 25 March, Defence Personnel were asked about the implementation of the Dunt Review recommendations thus far:

We have come a long way since Dr Dunt's review, with an implementation program under the mental health strategy. It is a four-year program and has 10 major goals. Many of those subjects that you have just identified are part and parcel of those goals . . . An enhancement of the workforce that deals with mental health issues within Defence, improvement in the governance—²¹

- 3.18 The Committee asked for further clarification regarding the 'enhancement of the workforce' and did this mean 'additional staff'.

- 3.19 Defence responded that:

An additional 82 positions were identified to go into the health workforce. At the moment we have filled 45 of those and 37 are still to be achieved.²²

- 3.20 The Committee enquired as to what initiatives, beyond new staff were being put in place. Defence responded:

The remaining initiatives would be new policy directives . . . an improvement into mental health training; strategic alliance with the Australian and General Practice network; looking at a number of prevention policies as some tools that start from the recruitment level all the way through to using those tools to help build up a level of resistance in our workforce, and particularly those who are deploying into operational theatres; improvement in collaboration with our Department of Veterans' Affairs in research; addressing mental health rehabilitation . . .

Further initiatives would be improvement in transitioning, perhaps if that is the path that we need to take, and helping someone move more smoothly to a civilian workforce or employment after their time in the Defence Force. That would include helping families cope with perhaps the disability in their family or mental health issues. And looking at improving the facilities, many of which are based around our facilities within Australia.²³

21 Air Vice Marshal Kevin Paule AM, Department of Defence, *Transcript*, 25 March 2011, p. 36.

22 Air Vice Marshal Kevin Paule AM, Department of Defence, *Transcript*, 25 March 2011, p. 36.

23 Air Vice Marshal Kevin Paule AM, Department of Defence, *Transcript*, 25 March 2011, p. 36.

- 3.21 The Committee was concerned that it could be perceived as career limiting and stigmatising to identify as a person having mental health issues.
- 3.22 The Committee asked how the Army is working to overcome that stigma while:
- keeping the privacy of the individual paramount;
 - acknowledging the need to have a CO informed; and
 - reassuring the ADF Personnel that identifying mental health related concerns will not in fact be a career limiting move for them.
- 3.23 Defence replied that:
- What we are trying to do is break down the stigma, to have people talk and reassure our members that if mental health issues surfaced we will do our best to rehabilitate them and that discharge would be the last option. A recent initiative has been the development of a DVD on post traumatic stress, and to have soldiers talking about their experiences.²⁴
- 3.24 Defence stated that they aimed to:
- ...as best we can, rehabilitate people back into our workforce if not to the area that they have directly been employed previously to perhaps other areas. Our last line of resort we would be looking to go down the discharge path.²⁵
- 3.25 The Committee were interested in the policy concerning rehabilitation and deployment. Defence replied:
- Military personnel who are wounded, injured or ill have access to high quality medical and specialist treatment and rehabilitation services. These are provided by Joint Health Command through garrison health services and programs such as the Australian Defence Force Rehabilitation Program (ADFRP).
- The ADFRP aims to support their return to work in current or different duties or trade or, if this is not possible, they will be rehabilitated, medically discharged and supported to transition to the civilian environment. Medical discharge is the last option and, wherever possible, ADF members who no longer meet health

24 Air Vice Marshal Kevin Paule AM, Department of Defence, *Transcript*, 25 March 2011, p. 37.

25 Air Vice Marshal Kevin Paule AM, Department of Defence, *Transcript*, 25 March 2011, p. 36.

standards for their trade or profession are offered the option of retraining for another employment category.

The program has contributed to the increase in Defence's capability by reducing the number of days lost through injury, as well as supporting the retention of experience through a reduction in medical separations.

The response provided by the CDF on 25 March 2011 confirms that Defence is in practice, returning people to deployable status as best as we can. The policy related to medical employment classification has been reviewed and was re-released 1 July 2011. The revision has expanded employment and deployment options as a consequence of the inclusion of additional sub-classifications. In particular, the introduction of an extended (two year) rehabilitation classification provides ADF members with a longer period of recovery and potential for continued service.

To ensure that the support provided to wounded, injured or ill members continues to meet the needs of the individual, and their families, and to ensure ease of access, Defence and Veterans' Affairs has jointly initiated the Support for Wounded, Injured or Ill Program (SWIIP) that will develop a whole-of-life framework for the care of injured or ill ADF members during their service and after transition from the ADF.²⁶

- 3.26 The Committee asked whether or not a person diagnosed as having depression or anxiety who were given medication to help them could be deployed back into active service. Defence replied that:

It is an area that has been looked at in terms of policy right at the moment. Essentially the requirement is to make sure that we have a level of stability for the person in terms of the deployment. We have best practice guidelines for both the clinicians and also the advice for commanders to be able to recognise that a person who has been placed on such medications would have a period that would be acceptable in terms of looking at their stability, in terms of their condition, and if there is going to be a deployment we would also be looking at the potential to make sure that commanders are informed about the needs that might occur on deployment so that, should further treatment be required, if that was necessary, there would be a more immediate, appropriate and relevant response. At the moment that policy is in fact under

26 Department of Defence, *Submission 4*, pp. 3-4.

review. Our intent is to progress along the basis that, where evidence shows that medication can have a stabilising effect, we would want to have that demonstrated before commanders are able to make a decision about deployment opportunities.²⁷

- 3.27 The Committee also took an interest in 'decompression' issues. Defence gave the following information:

In relation to decompression, Defence has had quite a robust program of predeployment and post-deployment debriefings and screenings that form part of the overall approach to handling the question of decompression. However, prior to people returning to Australia, there is a program of decompression that occurs at the moment where they will be screened through a process that is called the Return to Australia Psychological Screen. That occurs prior to their returning to Australia. There is also then three to six months after the return a further post-operational screen. Defence is about to trial an enhancement of the existing decompression which in fact will include both some psycho-educational material during that decompression period before they return to Australia as well as an enhancement around the screening processes and the reintegration information that is provided. In addition, the trial we are about to run and evaluate will also be delivered at the same time that in Australia the families of those people who are returning will be offered the opportunity to participate in a program that we call Family Smart. That will be an opportunity for them to receive information about the adjustments that might occur for them and for the person coming back. That trial will be taking place in the coming months.²⁸

- 3.28 The Committee enquired as to the nature of the immediate debrief following deployment and then the post-operative analysis, or debriefing which takes place three to six months later. The Dunt Review suggested that Defence simply have a group debrief when people first come out and then the second to involve families. Professor Dunt proposed this approach because there were not enough trained personnel or resources to do the job properly with the one-on-one. The Committee was concerned to see if Defence had taken on Professor Dunt's recommendations and really looked at the best deployment of resources, and the best timing, and long-term evaluation of pre and post deployment briefings in terms what the impacts might be. Defence gave the following reply:

27 Mr David Morton, Department of Defence, *Transcript*, 25 March 2011, p. 37.

28 Mr David Morton, Department of Defence, *Transcript*, 25 March 2011, p. 37.

We have taken on the recommendations of Professor Dunt. In the course of doing the work on the development of the trial on decompression, we are at the same time reviewing the RTAPS and POPS processes. We are undertaking a fairly significant study at the moment—one of four studies in MilHOP, the Military Health Outcomes Program, and in the health and wellbeing study of that the results of the mental health questionnaires or surveys we are using will allow us to establish whether we have set the right thresholds in our screens that we used in the RTAPS²⁹ and the POPS³⁰ process. We will be strengthening the robustness of those screens.

In terms of the capacity to conduct those screens and the workforce required, part of our review of that is to recognise that, in terms of the RTAPS process, there is good reason why we continue to have that done at the moment by the people who are doing it, and that is the psychologists who are in the theatre of operations. In terms of when it is done in Australia, we are looking at how that can be done by the new and enhanced workforce that we have brought on. We have brought on more mental health nurses. We have brought on more social workers. Our approach will be to have a look at how those POPS screenings can be conducted by our enhanced workforce rather than just the psychologists who were doing it before. As a result of reviewing that process, we are also looking at including some programs that are more structured programs between that return to Australia and the three and six months mark—so a coming home readjustment program and the family debriefings that are occurring—and we will be presenting that as essentially a comprehensive program of reintegration. We are evaluating those steps as we are progressing with them.³¹

Committee conclusions

- 3.29 The Committee acknowledges that the Defence Department and the ADF in particular, continue to work proactively and sensitively in the area of mental health reform.

29 Return to Australia Psychological Screening.

30 Post Operation Psychological Screening.

31 Mr David Morton, Department of Defence, *Transcript*, 25 March 2011, p. 38.