



## Military member to civilian: Identity in transition

### Garth's story

Garth never thought it would come to this. Nearly 30 years old. No job and no prospects. Left the Army after 11 good years, feeling proud of his achievements and excited about the future. Now 20 months later he had nothing to show for it.

The Army had been good to and for him. He loved his work as a medic, his mates, the routine, the opportunities, the team spirit. Over the 11 years he had moved units several times, he never imagined he'd get the chance to live where he had, having originally come from a very small outback country town. He had reached the rank of Sergeant and developed a good reputation as an instructor and as a manager of teams. And what about his overseas deployments? First Afghanistan and then Vanuatu for humanitarian relief after the cyclone. It was unbelievable what he'd got to do and what he'd seen and been part of during his career.

But all good things must come to an end and when his youngest child, Nathan, was about to start school, Garth didn't want to miss out on this experience as he had with Neve, his older daughter. And if he was honest with himself, it was time to leave the Australian Defence Force (ADF). '*Leave them laughing*' had always been his mantra, but by the time he decided to leave the Army, he was almost on the verge of crying. Well, not actually crying, but feeling restless, irritable and, for some unknown reason, not really looking forward to the next posting or possible future deployments. So he knew leaving was the right decision and he made it

quickly and was out within three months of putting in his paperwork.

He didn't have a plan about post army life, just an idea that it was time for him to be a dad.

He settled in Darwin to be near his kids who lived with their mother, Karen and her partner, Chris. Garth had never lived with Nathan and only with Neve when she was very young. Karen had left him while he was deployed to Vanuatu, when Nathan was just a baby, claiming she couldn't handle the constant disruptions to family life that came with being a partner of a serving ADF member. It didn't take her long to settle down with Chris, and Garth always blamed Chris rather than the Army for the breakdown of his family.

Although he hadn't thought deeply about employment as a civilian he assumed his experience as a medic and manager of teams would bode well. He was surprised by the limited job opportunities in Darwin. Casual employment didn't provide enough security; and any permanent position he secured he'd lose or leave. He couldn't stop flaring up, so annoyed he would get with his work mates; their low resilience and constant whining even at the smallest amount of stress. He often wondered how they'd be if they had seen some of the things he had. He was aghast how leadership in the real world was so different to the Army. In the Army leaders were respected. It was hard to respect them in the civilian world.

Since he'd left the Army he'd struggled with sleep, being woken frequently by vivid and disturbing dreams. As a result his best sleep was from dawn to midday making getting to work on time difficult. Time and anger management were often cited as the reasons for his employment being terminated.

He didn't know many people in Darwin. Initially he kept in contact with his mates on base but after a while he couldn't relate to them anymore and decided it wasn't good for him to see them. Perhaps he'd re-connect later when he'd established himself as a 'civilian' and had something to be 'pumped about'. And that was it; nothing really excited him anymore. Not like some of the experiences he'd had in the Army. If he got worked up about anything now it was more about things not going his way, not being fair, or funnily enough, being too easy.

He missed the busy schedule of his day-to-day Army life. He struggled to occupy himself in Darwin, and couldn't afford to do the stuff he had always enjoyed, like gym and rock climbing. He'd put on weight since leaving the Army, about a kilo a month and now he was 20 kilos overweight. He was drinking more and while he told himself he could live without it, he couldn't deny booze was a good time killer. He wouldn't have said he was lonely as such, more bored and tired all the time.

He could only afford a small, one bedroom unit which didn't have enough room for the kids to stay overnight. Karen and Chris assured him that they wanted him to be part of the kids' life but the numerous rules, standards and requirements they set made seeing them challenging. Garth couldn't keep up with the kids' allergies and associated dietary requirements, their extra curricula commitments, their 'play dates' and their constant need to be entertained. It was easier for him to see them at Karen and Chris's home. Except that he was invariably tense in Karen's home, convinced that Chris didn't like him, let alone trust him, and always felt that his interactions with the kids were being monitored. It didn't help that Neve

was a 'mummies' girl and that Garth struggled to find some, or any, connection with Nathan.

One day it all came to a head. He'd gone to visit the kids unannounced. Chris wouldn't let him in, claiming he could smell alcohol on his breath. Garth encouraged Chris to come outside and '*deal with this like a man*' and before he knew it, he had swung a punch, surprising himself with the force. Chris hit the ground swiftly and sustained a blow to the head. The kids were screaming and the neighbours called Karen. Before he knew it Karen was home, telling him '*I'm calling the cops and if you think you are ever going to see your kids again you're dreaming*'.

The next morning he woke feeling shocking. He couldn't remember much of what happened the night before but he'd never felt as alone and as ashamed as he did now. Rock bottom he was, he couldn't go on like this. He knew he needed help but didn't quite know where to start. And when he was at the pharmacy buying some hydralytes he saw they were attached to a GP clinic. Maybe a doctor could help him. He made an appointment to see one of the GPs the next day.



# Military Member to Civilian: Identity in transition

This document answers the most common questions that remained outstanding at the webinar's conclusion.

## Frequently Asked Questions

### 1. What does a typical transition process involve?

Members can transition from the Australian Defence Force (ADF) for a variety of reasons. The transition process varies depending on the reason for the transition.

If a person is leaving voluntarily or retiring the process is largely administrative. The Defence [Community Organisation \(DCO\) website](#) contains a range of resources explaining the steps members need to take.

Members are expected to develop a transition plan, receive assistance from a transition coach, and attend a transition seminar. These one day seminars cover a range of topics including supports and services the Department of Veterans' Affairs (DVA) can offer, superannuation information, information about the civilian health care system, success in employment, and success in retirement. The presentation on retirement includes a discussion about identity. More information, including the seminar presentations, are available on the [DCO website](#). Members are also expected to complete a transitional health assessment.

If a member has been injured or become ill during their ADF service and is transitioning for medical reasons, the process is quite different. Veterans who are anticipating separation due to medical reasons, and who are involved with ADF Rehabilitation Program or Rehabilitation for Reserves will be referred to DVA rehabilitation for ongoing support as part of their transition process. Veterans who have an accepted condition, or who submit a claim as part of their transition and consider they might benefit from rehabilitation can also self-refer, or be referred for DVA rehabilitation as part of the transition process. The [DVA rehabilitation policy library](#) explains the process that is triggered when an ADF member is injured or becomes ill during service.

Processes have been established to ensure a smooth transition process, where a member has been undertaking a Defence rehabilitation program, and continuing with a DVA rehabilitation program after they transition from the ADF.

Medically transitioning members may also access transition support through DCO, attend a transition seminar and receive follow up support from DCO for up to 12 months following transition. They are

also expected to undertake a Transition Health Assessment prior to their final transition date. This provides an important benchmark of their health status at their time of transition.

Administrative transitions are initiated by the specific ADF service (Army, Navy, or Airforce). In some cases, these occur because retention is not in the service interest, or the individual is not suited to service. Members are expected to undertake a Transition Health Assessment. They can also access transition coaching, support and up to 12 months follow up from DCO.

During and following transition, many members feel apprehensive about the decreased predictability of their future. It can also feel overwhelming, as this may be the first time they have ever had to organise their own housing, employment, healthcare, meals, etc. Members can feel their lives lack purpose, as they previously valued being of-service and contributing to a greater-good. Members can think it unusual that they must re-establish their trustworthiness and reliability with new employers. They may also find it frustrating if all their colleagues are not team-players. Members' friendships are often mostly comprised of other members. After discharging they can feel isolated as they often do not realise that (1) they must make repeated efforts to initiate contact with their mates; and (2) they must become involved in other activities in order to form new friendships. There can also be a period of adjustment at home with the family, as the civilian spouse has in many cases been the parent who establishes and maintains routines and boundaries with the children.

If a member has been medically discharged the adjustment to be made can be enormous. Members are accustomed to being high-achievers, and this is very much expected by Defence. Defence has also taught them repeatedly during initial training to push through pain/difficulties whilst on duty. Members with ongoing physical limitations often feel ashamed and worthless. They can also feel betrayed by the ADF's lack of reciprocity after all their years of going above-and-beyond the call.

## **2. What resources can health professionals refer to in supporting veterans and their families as they transition to civilian life?**

The Transition Taskforce report identified some veterans experience barriers to self-managing their health and wellbeing and this can have a particular impact during transition. This is because transition can be a period of instability and uncertainty where members may already be experiencing significant social, financial, employment and wellbeing challenges. The transition taskforce report is available on the [DVA website](#).

Veterans and their families have also raised that some medical practitioners do not understand the unique nature of military service. This lack of understanding can compromise the relationship veterans and their families have with health professionals and cause barriers to seeking treatment. To help address this, there are a range of resources available for health professionals, about the military experience and its impact, and barriers and enablers for a successful transition to civilian life.

The [At Ease Professionals website](#) has resources about the impact of military service.

Quick reference guides for providers and DVA clients are attached for your information.

The [Anzac Centre](#) has online resources for professionals, and professionals can also obtain free support by telephoning the Anzac Centre on 1800 838 777.

The [DCO website](#) also has online resources for both members and professionals.

[Open Arms – Veterans and Families Counselling](#) provides a range of services and programs to support the individual and their family through the transition process:

- The [Stepping Out program](#) provides information and skills to both the transitioning member and their partners to assist with managing and adjusting to civilian life. This program has a focus on identity and becoming aware of, and adapting to, differences between military and civilian cultures and lifestyles.
- The [Residential Lifestyle Management Program](#), including the Younger Veterans Lifestyle Management Program, is designed for veterans and their partners who want to improve their wellbeing and enhance their relationship. It provides an opportunity to take time out from the daily routine and focus on a range of lifestyle subjects, such as stress management, communication skills and relationship building.
- The [ADF Orientation Guide](#) contains useful information about the nature of recent conflicts and the impact of the military culture and service experiences.

Open Arms is also conducting a study to find out if a simple computer task can help transitioning ADF personnel adjust to civilian life. The study is called the Stepping Out Attention Reset (SOAR) Trial. Further information is available on the [Open Arms website](#).

### **3. What support is available to transitioning ADF members relating to vocational upskilling and finding mainstream employment?**

Veterans who have suffered an illness or injury as a result of their service are provided with a range of assistance by the Departments of Defence and Veterans' Affairs to help them recover, including services and support to help them return to work. This support is delivered through individually tailored rehabilitation programs.

ADF members who have lodged a claim for a service related injury or illness are eligible for rehabilitation assistance from DVA. This may include a vocational rehabilitation plan. Such plans can include upskilling through training or study, or participation in work trials to gain employment experience. They may also involve assistance with resume preparation, job search skills, etc. More information about vocational rehabilitation assistance can be found [here](#).

More generally, the Australian Government has made a significant investment in a range of programs providing assistance to all transitioning veterans, including employment assistance, suicide prevention and support for families.

The Department of Defence provides [transition seminars](#), and career and job search coaching for separating members. It also provides separating members with documentation that includes their formal qualifications. Under the [ADF Transition and Civil Recognition Project](#), Defence also provides guides that articulate military skills in civilian language, recognition of prior learning for relevant national accreditation, and tailored vocational education and training advice.

Under the [Career Transition Assistance Scheme](#) (CTAS), all permanent members of the ADF and eligible Reservists can access CTAS 12 months before and up to 12 months after their transition date. CTAS benefits are determined by the length of service and reason for leaving the ADF. Additional CTAS help is available if members leave the ADF for medical reasons, declared redundant, or as a result of a Management Initiated Early Retirement package.

DCO manages the [Transition for Employment \(T4E\) Program](#). This program provides targeted assistance to ADF members who are medically transitioning from the ADF. Eligible ADF members

are referred to this program by their commanding officer, rehabilitation provider or the Medical Employment Classification Review Board within Defence.

Many state and territory governments provide specific veteran employment strategies and have produced resources for veterans seeking employment. Some of these are listed on the [DCO website](#).

In addition to those services, the [Prime Minister's Veterans' Employment Program](#) (the Program) was launched in late 2016 to raise awareness of the unique skills and experience that veterans can bring to the civilian workplace, with the aim of increasing employment opportunities for veterans. Veterans can also find useful information and resources on the [website](#).

DVA is implementing a range of initiatives under the Program. An Industry Advisory Committee has been established to provide advice on practical measures to embed veterans' employment strategies into the recruitment practices of businesses. The Committee has fourteen industry members and is working on six priority areas:

- data, research and targets;
- human resources policies, accreditation, retention and translation of ADF service skills;
- communications (awareness, transition seminars, job fairs);
- employment of serving ADF members' spouses / partners;
- the Prime Minister's Veterans' Employment Annual Awards; and
- assistance for veteran business owners and entrepreneurs.

A Veterans' Employment Commitment was also launched in November 2018 to provide businesses with an opportunity to publicly commit to supporting veterans' employment. As at 5 April 2019, 76 companies have made such a commitment.

DVA also offers a range of grant programs to assist with providing support to veterans. For example, a grant program that specifically targets the needs of younger veterans (military service post-1999) transitioning from the ADF back into civilian life, is the Supporting Younger Veterans program. This \$1 million annual program opens for online application in July each year and seeks to increase collaboration and develop capability amongst veterans' organisations, harnessing expertise and expanding services to benefit younger veterans now and into the future. More detail on Supporting Younger Veterans grants provided in 2018-19, including two grants to universities to support younger veterans entering and undertaking tertiary studies, can be found [online](#).

#### **4. How can peers best support transitioning ADF members?**

By building on a shared sense of identity, peers who have successfully transitioned from the ADF can help build confidence and hope for the future and create a sense of "if they can do it, so can I".

Both DVA and DCO utilise the potential of peers to share positive stories about successful transition to civilian life. DVA's rehabilitation success stories enable transitioning members to hear stories of ADF members learning to manage life after service, while living with an injury. These can be accessed on the [DVA website](#). DCO's transition success stories focus on successfully gaining employment after the ADF and can be accessed on the [DCO website](#).

Open Arms – Veterans and Families Counselling recently announced a peer support program to help provide a more holistic and therapeutic experience for veterans and their families. By drawing on their own experiences with the military and the mental health system, peer and community advisers

can provide insights and support to veterans, particularly veterans with complex care needs. More information about the community and peer support program can be found on the [Open Arms website](#).

The veteran community has a long history of establishing organisations dedicated to helping their peers, both through transition and following years. These organisations are known collectively as ex-service organisations, and number in the hundreds. Some are small and localised, but many, such as the Returned & Services League of Australia and Legacy, have a national structure with a high level of national coverage. Some organisations offer services specifically dedicated to assisting veterans through transition, such as Soldier On and Mates for Mates.

DVA has a number of discretionary grants programs that provide ex-service organisations with financial support including the Building Excellence and Support in Training Grants, Veteran and Community Grants, and the Supporting Younger Veterans Grants programs. More information is available on the [DVA website](#).

While these grants programs are not available for individuals, organisations seeking grant funding can apply on-line through the centralised [Community Grants Hub portal](#). The Community Grants Hub website also contains the Grant Opportunity Guidelines for each of DVA's programs. Potential applicants should read these guidelines closely to ensure they have the best chance of submitting a successful grant application. Help with any aspect of the application process can be obtained by telephoning the Hub on 1800 020 283 or by emailing them at [support@communitygrants.gov.au](mailto:support@communitygrants.gov.au).

## **5. To what extent do health professionals need to be familiar with the military culture and environment when treating veterans?**

An understanding of the military culture and environment can be of real value to health professionals when treating veterans. It can assist health professionals to understand how the unique nature of military service can impact on a veteran's health and wellbeing. It can also help health professionals to understand barriers to veterans seeking treatment, maintaining treatment regimes and self-managing their health and wellbeing.

The Senate Inquiry into transition from the ADF released its report in early April 2019.

Recommendation 7 indicated the need for:

- Post-graduate education in Veteran Health and Mental Health for healthcare practitioners registered with Defence and DVA; and
- Mandatory online veteran-specific training and professional development for clinicians and a register of clinicians for client information.

Evidence from a number of Ex-Service Organisations, and others, pointed out the importance of service providers, including medical professionals, but mental health professionals in particular, having knowledge of Defence culture and the veteran experience.

The risk, if health care providers do not possess an adequate understanding of the environment from which former members of the ADF are transitioning, is that veterans are less likely to either seek out, or remain in treatment. This may contribute to veterans dropping out of psychological treatment prematurely as they may feel that their needs are not well understood or acknowledged. It is difficult to establish a good rapport and collaborative relationship with the veteran without a thorough understanding of the military context and culture.

An understanding of 'the unique relationships (and the personal impact of them) forged in service ... which relate to identity, are critical for those working with veterans during the sensitive period of transition'. A focus on the primary mission, 'maintaining the security of the nation', dominates the

highly structured and focused work environment of the ADF, and this culture tends to be counter-productive to early intervention when personnel are struggling with physical or psychological health issues.

It is important to understand that some military personnel will conceal health conditions, physical and psychological, because they do not want their peers to know and judge them as weaker, and to protect their careers. Such behaviour can continue after transition to protect their new career or career prospects, which can further complicate health issues in the unfamiliar environments and different stresses of civilian life.

Unfortunately, some clinical psychology and psychiatric training programs do not cover the treatment of PTSD in detail; hence graduates from these programs may not have the necessary skills and experience to treat veterans who may present with a trauma history as well as broader ADF experience.

Health professionals can upskill by watching Open Arms Community Webinars on YouTube. These webinars draw on the lived experience of members of the veteran and ex-service community, coupled with expertise of clinical professionals. The *Understanding the Military Experience: From Warrior to Civilian* webinar is also available to watch on [At Ease Professionals](#).



APPENDIX A

Quick reference: Referral options and programs provided through the DVA for eligible patients

Need	Service/Resource	Clinician-guided		Description	Further information
		Self-guided Y/N	Y/N		
<b>1. General mental health and counselling/therapy</b>	Refer to Open Arms (formerly Veterans and Veterans' Families Counselling Service, VVCS)  24 hour counselling line	N	Y	Free individual counselling, mental health support and group programs for current and former Australian Defence Force personnel and their families	<ul style="list-style-type: none"> <li>• <a href="http://www.openarms.gov.au/">www.openarms.gov.au/</a> Phone: 1800 011 046 (24 hrs)</li> <li>• <a href="http://www.dva.gov.au/providers">www.dva.gov.au/providers</a></li> <li>• <a href="http://www.dva.gov.au/health-and-wellbeing">www.dva.gov.au/health-and-wellbeing</a> (go to 'medical conditions')</li> <li>• <a href="http://www.dva.gov.au/factsheet-hsv109-non-liability-health-care">www.dva.gov.au/factsheet-hsv109-non-liability-health-care</a></li> </ul>
	Refer to DVA approved psychologists/social workers/OTs or Open Arms. DVA White Card now incorporates treatment of any mental health condition under Non-Liability Health Care arrangements	N	Y	Private counselling (free) for veterans with DVA gold/white cards. Referral from GP or psychiatrist required	
<b>2. In-patient programs</b>	DVA-approved in-patient treatment, including PTSD programs	N	Y	Acute or extended private psychiatric care and outpatient programs	<ul style="list-style-type: none"> <li>• <a href="http://www.dva.gov.au/providers/hospitals-and-day-procedure-centres">www.dva.gov.au/providers/hospitals-and-day-procedure-centres</a></li> <li>• <a href="http://www.at-ease.dva.gov.au">www.at-ease.dva.gov.au</a> ('assessment and treatment')</li> </ul>
<b>3. Substance abuse</b>	Referral to provider listed on DVA Alcohol and Drug provider panel matrix	N	Y	Specialist alcohol and other substance treatment and care	<ul style="list-style-type: none"> <li>• <a href="http://www.at-ease.dva.gov.au/professionals/client-resources/alcohol-and-other-substance-treatment-providers-panel">www.at-ease.dva.gov.au/professionals/client-resources/alcohol-and-other-substance-treatment-providers-panel</a> (follow link from 'professionals' tab)</li> <li>• <a href="http://www.dva.gov.au/factsheet-hsv140-alcohol-and-other-substance-treatment-services">www.dva.gov.au/factsheet-hsv140-alcohol-and-other-substance-treatment-services</a></li> </ul>
	Fact Sheet HSV140 on alcohol and other substance treatment services	Y	N	Information on services and treatment available	
<b>4. In-home care</b>	DVA Community nursing	N	Y	Clinical, personal care interventions for veterans living in their homes	<ul style="list-style-type: none"> <li>• <a href="mailto:nursing@dva.gov.au">nursing@dva.gov.au</a></li> <li>• <a href="http://www.dva.gov.au/providers/community-nursing">www.dva.gov.au/providers/community-nursing</a> Phone: 1800 636 428</li> </ul>

Quick reference: Referral options and programs provided through the DVA for eligible patients continued . . .

Need	Service/Resource	Self-guided Y/N	Clinician-guided Y/N	Description	Further information
<b>5. Men's health</b>	Men's health peer education program	N	N	Raises awareness about men's health issues; encourages shared responsibility for this	<ul style="list-style-type: none"> <li><a href="http://www.dva.gov.au/health-and-wellbeing/wellbeing/mens-health-peer-education">www.dva.gov.au/health-and-wellbeing/wellbeing/mens-health-peer-education</a></li> </ul>
	Heart Health	N	N	A practical exercise, nutrition, and lifestyle management program offered over 52 weeks	<ul style="list-style-type: none"> <li><a href="http://www.dva.gov.au/health-and-wellbeing/wellbeing/heart-health-programme">www.dva.gov.au/health-and-wellbeing/wellbeing/heart-health-programme</a></li> </ul>
<b>6. Rehabilitation appliances</b>	Rehabilitation Appliances Program	N	N	Provision of aids and appliances to facilitate independence and self-reliance	<ul style="list-style-type: none"> <li><a href="http://www.dva.gov.au/factsheet-hip72-providers-rehabilitation-appliances-program">www.dva.gov.au/factsheet-hip72-providers-rehabilitation-appliances-program</a></li> </ul>
<b>7. Peer support</b>	Soldier On Mates4Mates RSL and other ex-service organisations	Y	N	Community organisations who provide support, social connections, advocacy, and practical assistance to veterans	<ul style="list-style-type: none"> <li><a href="http://www.soldieron.org.au/">www.soldieron.org.au/</a> Phone: 1300 620 380</li> <li><a href="http://www.mates4mates.org/">www.mates4mates.org/</a></li> <li><a href="http://www.rslnational.org/">www.rslnational.org/</a></li> <li><a href="http://www.vvfa.org.au/">www.vvfa.org.au/</a></li> <li><a href="http://www.vvaa.org.au/">www.vvaa.org.au/</a></li> </ul>

**Note:** DVA is able to fund/provide transport for veterans to attend approved medical treatment. See [www.dva.gov.au/health-and-wellbeing/home-and-care/travel-treatment](http://www.dva.gov.au/health-and-wellbeing/home-and-care/travel-treatment)

## APPENDIX B

### Quick reference: Guide to resources for DVA providers

Resource	Details	Link/further information
1. Provider Line	Provider enquiry contact email and phone number	<ul style="list-style-type: none"> <li>• <a href="mailto:GeneralEnquiries@dva.gov.au">GeneralEnquiries@dva.gov.au</a> Phone: 1800 550 457</li> <li>• <a href="http://www.at-ease.dva.gov.au/professionals">www.at-ease.dva.gov.au/professionals</a></li> </ul>
2. ADF Post-discharge GP health assessment	Screening tool for GPs to help identify physical and mental health issues in former military personnel. MBS items 701, 703, 705, 707	<ul style="list-style-type: none"> <li>• <a href="http://www.at-ease.dva.gov.au/professionals/assessment-and-treatment/adf-post-discharge-gp-health-assessment">www.at-ease.dva.gov.au/professionals/assessment-and-treatment/adf-post-discharge-gp-health-assessment</a></li> </ul>
3. Prior financial approval	<p>Approval can be requested for treatment that is not provided through DVA contractual arrangements. Prior approval is required:</p> <ul style="list-style-type: none"> <li>• When the service being provided has NOT been assigned an item number under the Medicare Schedule of benefits</li> <li>• When the fee to be charged for the service being provided is ABOVE the fee stated in the relevant DVA Schedule of Fees</li> <li>• When the service being claimed is highlighted with shading in the relevant Schedule of Fees</li> </ul>	<ul style="list-style-type: none"> <li>• <a href="http://www.dva.gov.au/providers/services-requiring-prior-approval">www.dva.gov.au/providers/services-requiring-prior-approval</a></li> </ul>
4. Veterans' MATES program	Provides information for health professionals to assist their patients in managing their medical conditions and medications	<ul style="list-style-type: none"> <li>• <a href="http://www.dva.gov.au/providers/provider-programs">www.dva.gov.au/providers/provider-programs</a></li> </ul>
5. Pharmaceutical advice: Veterans Affairs Pharmaceutical Advisory Centre	24/7 advice from expert pharmacists relating to medications, supplements, wound care, etc.	<ul style="list-style-type: none"> <li>• <a href="http://www.dva.gov.au/providers/dva-provider-news/veterans-affairs-pharmaceutical-advisory-centre-vapac">www.dva.gov.au/providers/dva-provider-news/veterans-affairs-pharmaceutical-advisory-centre-vapac</a> Phone: 1800 552 580</li> </ul>
6. Professional development resources offered through DVA to improve your understanding of the veteran experience and common mental health issues	<p>eLearning</p> <p>Courses/training programs</p> <p>Webinars</p>	<ul style="list-style-type: none"> <li>• <a href="http://www.dva.gov.au/providers/online-training-health-providers">www.dva.gov.au/providers/online-training-health-providers</a></li> <li>• <a href="http://www.at-ease.dva.gov.au/professionals/professional-development">www.at-ease.dva.gov.au/professionals/professional-development</a></li> <li>• <a href="http://www.at-ease.dva.gov.au/professionals/professional-development/dva-webinars">www.at-ease.dva.gov.au/professionals/professional-development/dva-webinars</a></li> </ul>
7. Professional development resources offered through Phoenix Australia and the Centenary of ANZAC Centre	<p>Resources/training</p> <p>Professional consultation and advice, including <u>free</u> consultations through Phoenix/Anzac Centre</p>	<ul style="list-style-type: none"> <li>• <a href="http://www.phoenixaustralia.org/for-practitioners/">www.phoenixaustralia.org/for-practitioners/</a></li> <li>• <a href="http://www.anzaccentre.org.au/practitioner-support-service/">www.anzaccentre.org.au/practitioner-support-service/</a></li> </ul>

## APPENDIX C

### Quick reference: Self-help resources for DVA/ex-military patients

(Note that these programs are evidence-based, however not all are designed/funded by DVA or targeted to a veteran population)

Need	Service/Resource	Veteran specific?	Description	Further information
<b>1. General on-line resources</b>	<ul style="list-style-type: none"> <li>High Res</li> </ul>	Yes	<ul style="list-style-type: none"> <li>Online “tools” to help veterans with issues relating to sleep, relaxation, social connections, anger, and negative thoughts</li> </ul>	<ul style="list-style-type: none"> <li><a href="https://highres.dva.gov.au/highres/">https://highres.dva.gov.au/highres/</a></li> </ul>
	<ul style="list-style-type: none"> <li>Department of Health mental health resources links</li> </ul>	No	<ul style="list-style-type: none"> <li>Links to apps, websites, forums for a wide variety of mental health and social problems/issues</li> </ul>	<ul style="list-style-type: none"> <li><a href="http://www.headtohealth.gov.au">www.headtohealth.gov.au</a></li> </ul>
<b>2. Sleep</b>	<ul style="list-style-type: none"> <li>High Res</li> </ul>	Yes	<ul style="list-style-type: none"> <li>See above for ‘High Res’</li> </ul>	<ul style="list-style-type: none"> <li><a href="https://highres.dva.gov.au/highres/#!/tools/healthy-sleeping">https://highres.dva.gov.au/highres/#!/tools/healthy-sleeping</a></li> </ul>
	<ul style="list-style-type: none"> <li>Department of Health mental health resources links</li> </ul>	No	<ul style="list-style-type: none"> <li>Links to apps, websites, forums for a wide variety of mental health and social problems/issues. Includes various apps on sleep</li> </ul>	<ul style="list-style-type: none"> <li><a href="http://www.headtohealth.gov.au/">www.headtohealth.gov.au/</a></li> </ul>
<b>3. PTSD</b>	<ul style="list-style-type: none"> <li>PTSD Coach</li> </ul>	Yes	<ul style="list-style-type: none"> <li>Mobile app to help monitor and manage PTSD symptoms, in conjunction with psychological therapy</li> </ul>	<ul style="list-style-type: none"> <li><a href="http://www.at-ease.dva.gov.au/veterans/resource-library/mobile-apps/ptsd-coach-australia">www.at-ease.dva.gov.au/veterans/resource-library/mobile-apps/ptsd-coach-australia</a></li> </ul>
	<ul style="list-style-type: none"> <li>Department of Health mental health resources links</li> </ul>	No	<ul style="list-style-type: none"> <li>Links to apps, websites, forums for a wide variety of mental health and social problems/issues. Includes various apps relating to PTSD management</li> </ul>	<ul style="list-style-type: none"> <li><a href="http://www.headtohealth.gov.au">www.headtohealth.gov.au</a></li> </ul>
<b>4. Depression/ anxiety</b>	<ul style="list-style-type: none"> <li>High Res</li> <li>‘At Ease’ website</li> </ul>	Yes	<ul style="list-style-type: none"> <li>At Ease website provides information to help recognise the symptoms of poor mental health, provides self-help tools and advice, and helps veterans access professional support and learn about treatment options</li> </ul>	<ul style="list-style-type: none"> <li><a href="https://highres.dva.gov.au/highres/">https://highres.dva.gov.au/highres/</a></li> <li><a href="http://www.at-ease.dva.gov.au/veterans/">www.at-ease.dva.gov.au/veterans/</a></li> </ul>
	<ul style="list-style-type: none"> <li>Department of Health mental health resources links</li> </ul>	No	<ul style="list-style-type: none"> <li>Links to apps, websites, forums for a wide variety of mental health and social problems/issues. Includes various apps on depression, anxiety, and stress.</li> </ul>	<ul style="list-style-type: none"> <li><a href="http://www.headtohealth.gov.au/">www.headtohealth.gov.au/</a></li> </ul>

Need	Service/Resource	Veteran specific?	Description	Further information
<b>5. Substance abuse</b>	• The Right Mix	Yes	• Tips, tools, and strategies to help manage alcohol use	• <a href="http://www.therightmix.gov.au/">www.therightmix.gov.au/</a>
	• Department of Health mental health resources links	No	• Links to apps, websites, forums for a wide variety of mental health and social problems/issues. Includes various apps on problematic drug and alcohol use, and smoking cessation	• <a href="http://www.headtohealth.gov.au/">www.headtohealth.gov.au/</a>
	• In-patient drug and alcohol treatment	Yes	• Approved community providers who provide treatment and programs for drug and alcohol problems	• <a href="http://www.dva.gov.au/factsheet-hsv140-alcohol-and-other-substance-treatment-services">www.dva.gov.au/factsheet-hsv140-alcohol-and-other-substance-treatment-services</a>
<b>6. Chronic pain</b>	• Department of Health mental health resources links	No	• Links to apps, websites, forums for a wide variety of mental health and social problems/issues. Includes various apps on managing pain	• <a href="http://www.headtohealth.gov.au/">www.headtohealth.gov.au/</a>
<b>7. Suicide Prevention</b>	• Operation Life	Yes	<ul style="list-style-type: none"> <li>• Raises awareness about and is designed to help prevent suicide in the veteran community. Along with useful contacts and resources, this site offers learning tools, case study videos, and a quiz to reaffirm learning</li> <li>• The app provides access to emergency and professional support and self-help tools to help users regain control, keep calm, and take action to stay safe</li> </ul>	<ul style="list-style-type: none"> <li>• <a href="http://www.at-ease.dva.gov.au/suicideprevention">www.at-ease.dva.gov.au/suicideprevention</a></li> <li>• <a href="http://www.at-ease.dva.gov.au/veterans/resource-library/mobile-apps/op-life-app">www.at-ease.dva.gov.au/veterans/resource-library/mobile-apps/op-life-app</a></li> </ul>



Australian Government  
Department of Veterans' Affairs

## Mental Health and the Military Experience



# > SUPPORTING RESOURCES

## Military Member to Civilian: Identity in transition

This document highlights some additional resources related to this topic.

### Transition specific resources

#### Services for veterans and their families

##### Defence Community Organisation

The Defence Community Organisation provides a range of resources for members who are thinking about, planning for, or transitioning from the Australian Defence Force (ADF), and their families.

The *ADF Member and Family Transition Guide – A Practical Manual to Transitioning* contains detailed information on the transition process for ADF members. The Guide includes information on support services and administrative requirements. It includes checklists to help them navigate the transition process.

For further information and resources please visit: [www.defence.gov.au/DCO/Transition/Default.asp](http://www.defence.gov.au/DCO/Transition/Default.asp)

##### *Stepping Out*

The *Stepping Out group program* through Open Arms is a 2-day program developed for ADF members and their partners who are about to, or have recently transitioned from the military. *Stepping Out* helps participants to examine their transition process and what it means to go from military life to civilian life as an individual and as a family – both in practical and emotional terms.

Further information is available at: [www.openarms.gov.au/get-support/group-programs/stepping-out](http://www.openarms.gov.au/get-support/group-programs/stepping-out)

##### DVA Rehabilitation

Complementary to primary and allied health treatment, the Department of Veterans' Affairs (DVA) provides whole-of-person rehabilitation to help clients adapt to and recover from injuries or illnesses relating to their ADF service. Rehabilitation can assist individuals coordinate their medical treatment, assist individuals maximise their independent functioning and quality of life, and return to work when they are ready.

Veterans may be eligible for rehabilitation assistance through DVA if they are incapacitated for service or work, or have an impairment, as a result of a service injury or disease.

Under a rehabilitation plan with psychosocial goals, veterans can access support to help address psychosocial challenges that may be impacting on their family, connections with others, resilience and overall quality of life. Psychosocial activities under a rehabilitation plan may include:

- intervention counselling or self-management programs to support relationships with others, provide the veteran with strategies to build resilience, or manage and adapt to their health conditions more effectively;
- connecting the veteran with local community supports, services or programs; or
- supporting the veteran to participate in local activities and programs - this could include, undertaking time-limited short course education to assist them to better engage with their community, or where this participation may be a 'first step' achievement in their long term recovery.

The [Psychosocial Rehabilitation section of the CLIK Rehabilitation Policy Library](#) describes more about the assistance available.

Vocational rehabilitation is the managed process that provides an appropriate level of assistance, based on assessed needs, necessary to achieve a meaningful and sustainable employment outcome. The aim of a vocational rehabilitation program is to return a person to the workforce to at least the level of their pre-injury employment. Activities may include vocational assessment and guidance, assessments to determine what their employment options might be, work preparation activities, work trials, job seeking assistance, provision of workplace aids and appliances, and vocational retraining.

The [Vocational Rehabilitation section of the CLIK Rehabilitation Policy Library](#) describes more about the assistance available.

Further information about DVA rehabilitation is available on the DVA website via: [www.dva.gov.au/factsheet-mrc05-rehabilitation](http://www.dva.gov.au/factsheet-mrc05-rehabilitation).

### **Additional Family Support for veterans and their families**

Additional family support is available to veterans who have returned from recent conflicts overseas and their families, including certain widowed partners of veterans. To receive this additional support eligibility requirements must be met. Further information can be found at: [Factsheet – Family Support Package for Veterans and their Families](#) or [Family Support for Widow\(er\)s](#).

## **Research on identity and transition**

### *The Transition Taskforce: Improving the Transition Experience*

The Transition Taskforce sought to better understand the current experience of transition through extensive engagement with transitioning and transitioned ADF members, family members and key government stakeholders delivering transition services. Unpreparedness for loss of identity was identified as a barrier to effective transition from the ADF.

[www.dva.gov.au/consultation-and-grants/transition-taskforce](http://www.dva.gov.au/consultation-and-grants/transition-taskforce)

**Purvis, Robin (2017). [No Release: A Phenomenological Study of Australian Army Veterans of Afghanistan and Iraq Post-Military](#). MPhil Thesis, School of Social Science, The University of Queensland.**

This study explores the lived post-discharge experience of seven combat veterans of Australia's Middle East wars. The study has identified there is academic and popular recognition, interest in and knowledge about the process of socialisation into the military. However, there is a noticeable gap in material that explores the process of socialisation out of the military. Eighteen in-depth semi-

structured interviews were conducted with the seven participants, some ranging over a twelve-month period.

**McCormack, Lynne et al. [Complex psychosocial distress post deployment in veterans: Reintegration identity disruption and challenged moral integrity](#). *Traumatology*. Vol.23(3), 2017, pp. 240-249.**

How individuals experience reintegration postcombat and subsequent military discharge is a poorly explored phenomenon, though for many service personnel it is fraught with complex psychosocial hurdles. Therefore, seeking both positive and negative interpretations of this phenomenon, semi structured interviews explored the "lived" experience of five former military personnel. Using interpretative phenomenological analysis (IPA) one superordinate theme emerged: shaping and breaking: who am I now? and overarched five subordinate themes. Four themes encapsulated the search for post war identity in these former military personnel.

## Treatment services for veterans

### **DVA Health Cards**

DVA issues health cards to veterans, their war widow(er)s and dependants to ensure they have access to health and other care services.

Further information is available at: [www.dva.gov.au/providers/dva-health-cards](http://www.dva.gov.au/providers/dva-health-cards)

### **Non-Liability Health Care**

DVA can pay for treatment for mental health conditions without the need for the conditions to be accepted as related to service. This is known as non-liability health care (NLHC) and anyone who has served at least one day in the full-time ADF or reservists with certain service experience can access free treatment for any mental health condition.

Veterans only need to call DVA on free call 1800 555 254 or email [nlhc@dva.gov.au](mailto:nlhc@dva.gov.au) to apply.

Further information is available at: [dva.gov.au/factsheet](http://dva.gov.au/factsheet)

### **Open Arms**

Open Arms provides free, confidential, nation-wide counselling and support to current and former ADF personnel and their families. Open Arms has an integrated, 24/7 service delivery system, that includes counselling (individual, couple and family), group programs, case management, and after-hours telephone support. If you have a client you consider may benefit from support from Open Arms, please call 1800 011 046 to discuss.

Further information is available at: [openarms.gov.au/get-support](http://openarms.gov.au/get-support)

### **ADF Post-discharge GP Health Assessment**

All former serving members of the ADF can access a one-off comprehensive health assessment from their GP. This assessment is available to all former serving members of either the permanent or reserve forces and a Medicare rebate is available. A key objective of the assessment is to help GPs identify and diagnose the early onset of physical and/or mental health problems among former serving ADF members.

Further information is available at: [at-ease.dva.gov.au/professionals](http://at-ease.dva.gov.au/professionals)



## **Alcohol and Other Substance Use Disorders – Community Based Treatment Services**

DVA funds community-based alcohol and other substance use disorder treatment at over 20 locations across the country. These treatment services are available under the NLHC arrangements to anyone who has served at least one day in the full-time ADF or reservists with certain service experience.

Further information on this program can be found at: [dva.gov.au/factsheet](https://dva.gov.au/factsheet)

A list of community-based treatment providers can be accessed via: [at-ease.dva.gov.au/professionals](https://at-ease.dva.gov.au/professionals)

## **Trauma Recovery Programs: Treatment for veterans and former serving members**

DVA funds Trauma Recovery Programs – PTSD in hospitals across Australia. These programs are required to meet DVA’s National Accreditation Standards for Trauma Recovery Programs – PTSD (2015). These standards provide a framework for ensuring that hospitals provide high quality evidenced based treatment for veterans and former serving members of the ADF who have PTSD.

Further information is available at: [at-ease.dva.gov.au/professionals](https://at-ease.dva.gov.au/professionals)

## **Group programs**

### **Open Arms Group Programs**

Open Arms offers a variety of evidence based group treatment programs and educational workshops. These groups are free to Open Arms clients and are delivered nationally to small groups face-to-face, led by highly skilled facilitators with military awareness. The Open Arms treatment group programs are designed to be effectively incorporated into one-on-one counselling treatment plans. Open Arms has recently redeveloped four group programs: Doing Anger Differently, Managing Pain, Understanding Anxiety and Recovery from Trauma (described below). These programs now include access to online information that supports participants to practice skills at their own pace and allows them to show their partners and family members what they have learnt in the comfort of their own home.

For further information please visit: [Open Arms/Group Programs](#)

#### *Doing Anger Differently*

*Doing Anger Differently* is an education and skills-based group program to help participants understand anger and aggression. It provides strategies to manage thoughts and feelings which may contribute to anger and to prevent aggressive behaviors. This program will help participants understand:

- How problematic anger develops and is maintained
- The particular warning signs of anger
- The link between heightened physical responses and anger, and develop skills to reduce physical responses
- Where thoughts, values and beliefs originate, and how they influence anger, and how to deal with unhelpful thinking
- The impact of anger on relationships and develop skills to communicate more effectively and improve relationships, and
- Situations that provoke anger and how to prevent aggressive behaviours.

### *Managing Pain*

The *Managing Pain* program is designed to help participants learn about effective pain management strategies. The program will help participants learn about:

- Chronic pain and understand that they are not alone in their struggle with pain
- The link between the physical and psychological aspects of pain
- The relationship between thoughts and pain, and introduce them to strategies to challenge/change their thoughts
- The relationship between their behaviour and pain, and introduce them to strategies to change what, and how, they are doing things
- The importance of lifestyle factors in their pain management, and introduce strategies for managing these lifestyle factors, and
- Managing their pain beyond the program, with the help of a personally developed Pain Plan.

The *Recovering from Trauma* program helps participants to understand trauma, and teaches them strategies and skills to help manage its impact on them and their family. The program will help participants understand:

- Trauma and impacts on them and their loved ones
- The link between heightened physical responses and trauma, and develop skills to identify and reduce physical responses
- The role of avoidance in maintaining traumatic stress, and develop a strategy to safely confront feared and avoided situations
- Where thoughts, values and beliefs originate, how they are influenced by trauma, and develop strategies for modifying unhelpful thinking, and
- The impact of trauma on relationships and lifestyle, and develop skills to improve relationships and meet healthy lifestyle goals.

The *Understanding Anxiety* program teaches strategies and skills for managing anxiety. The program will help participants understand:

- That they are not alone in their struggle with anxiety
- The impact of military training and experiences on anxiety
- The impact of their thoughts on anxiety, and introduce them to strategies that challenge/change their thoughts
- Their behaviour on anxiety, and introduce them to strategies to change what, and how they are doing things
- A range of lifestyle factors for managing their anxiety, and introduce strategies for managing these lifestyle factors, and
- That they are equipped to manage anxiety beyond the program, with the help of a personally developed Relapse Prevention Plan.

### *Mental Health First Aid (MHFA)*

*MHFA* training courses teach people simple, practical first aid skills for helping a family member, friend, co-worker or other person who is experiencing mental health problems. *MHFA* is free for anyone who is concerned about family, friends or colleagues in the veteran community.

### *Operation Life: Applied Suicide Intervention Skills Training (ASIST)*

ASIST workshops raise awareness of suicide prevention and prepare individuals to work with people at risk of suicide to increase their immediate safety and to get further help. ASIST workshops are free for anyone who is concerned about family, friends or colleagues in the veteran community. The Operation Life suite of services also includes the safeTALK half-day awareness training, the Operation Life website, and associated mobile App (refer to 'Other related online resources').

## **Other related online resources**

### **At Ease Professional website**

DVA's platform for mental health professionals, At Ease is a one-stop shop for information, professional development opportunities, referral options clinical resources, educational resources and the latest in international research.

[at-ease.dva.gov.au/professionals](http://at-ease.dva.gov.au/professionals)

### **Case Formulation eLearning**

Case Formulation assists front line therapists to make better sense of complex presentations and to design and plan treatment in collaboration with their patient. This eLearning program assists clinicians to identify and focus on the presenting problems that are likely to have the most impact on recovery and help set priorities for treatment.

[at-ease.dva.gov.au/professionals/professional-development](http://at-ease.dva.gov.au/professionals/professional-development)

### **Working with Veterans with Mental Health Problems**

This one-hour eLearning program assists GPs to better understand common veteran mental health conditions, how military service can affect the mental health of serving and ex-serving personnel and referral pathways for DVA clients.

[at-ease.dva.gov.au/professionals/professional-development](http://at-ease.dva.gov.au/professionals/professional-development)

### **Evidence Compass**

The Evidence Compass is a repository for literature reviews on issues of importance to the veteran community. The Evidence Compass is designed to be used by researchers, policy-makers, and the broader community. The literature reviews available on this website use the Rapid Evidence Assessment methodology.

[www.dva.gov.au/health-and-wellbeing/evidence-compass](http://www.dva.gov.au/health-and-wellbeing/evidence-compass)

### **Australian Society for Psychological Medicine**

The Australian Society for Psychological Medicine, offers training in psychological medicine skills for GPs.

[aspm.org.au](http://aspm.org.au)

### **DVA Provider News**

Subscribe to [DVA Provider News](#) to receive the latest updates and information for working with DVA patients and clients.

### **Centenary of Anzac**

The Centenary of Anzac Centre comprises a Treatment Research Collaboration and a Practitioner

Support Service, to ensure better treatments and improved lives for Australia's veterans and military personnel and their families. The Practitioner Support Service includes a free, confidential consultation service for practitioners which can be accessed nationwide via email, telephone or online.

Practitioners and organisations can seek expert advice on a range of issues relating to veteran mental health.

[anzaccentre.org.au](http://anzaccentre.org.au)

The Centenary of Anzac Centre is a [Phoenix Australia](#) initiative.

### **ISTSS Guidelines**

The International Society for Traumatic Stress Studies Guidelines are based on extensive reviews of the clinical research literature and are intended to assist clinicians who provide prevention and treatment interventions for children, adolescents and adults with or at risk of developing PTSD and Complex PTSD.

[www.istss.org/treating-trauma/new-istss-guidelines.aspx](http://www.istss.org/treating-trauma/new-istss-guidelines.aspx)

### **Australian PTSD Guidelines**

The *Australian Guidelines for the Treatment of Acute Stress Disorder and Posttraumatic Stress Disorder* provide information about the most effective treatments for PTSD. The Guidelines aim to support high quality treatment of people with PTSD by providing a framework of best practice around which to structure treatment.

[www.phoenixaustralia.org/resources/ptsd-guidelines/](http://www.phoenixaustralia.org/resources/ptsd-guidelines/)

### **At Ease portal**

At Ease can help veterans, ADF personnel and family members identify the symptoms of poor mental health, find self-help tools and advice, access professional support and learn about treatment options. Families can find advice on how to keep their family healthy while caring for someone with a mental health condition.

[at-ease.dva.gov.au/](http://at-ease.dva.gov.au/)

### **Operation Life - Website**

The Operation Life website targets people experiencing suicidal thoughts or people wanting to learn how to mitigate suicide. The website is complemented by a mobile app that provides safety planning capability and cognitive behavioural therapy to reshape their thoughts. It also supports quick access to services and their clinical support team – see below

[at-ease.dva.gov.au/suicideprevention](http://at-ease.dva.gov.au/suicideprevention)

The Clinician's Guide is available for Android or iOS users.

More information about the app is available at: [at-ease.dva.gov.au/veterans](http://at-ease.dva.gov.au/veterans)

### **High Res (High Resilience) mobile app**

The High Res resilience suite includes a website and app to help serving and ex-serving ADF personnel and their families manage stress and build resilience.

[highres.dva.gov.au](http://highres.dva.gov.au)

### **The Right Mix website**

The Right Mix website helps serving and ex-serving ADF members better manage their alcohol

consumption with information, strategies and online tools.

[therightmix.gov.au](http://therightmix.gov.au)

### **ON TRACK with the Right Mix app**

The ON TRACK app helps serving and ex-serving ADF members keep track of their alcohol consumption in real time and find out what it is costing them financially and physically.

[at-ease.dva.gov.au/on-track-app](http://at-ease.dva.gov.au/on-track-app)

### **PTSD Coach Australia mobile app**

The PTSD Coach Australia app can help you learn about and manage symptoms that commonly occur following exposure to trauma. It is free to download from the App Store and Google Play.

[at-ease.dva.gov.au/veterans/ptsd-coach](http://at-ease.dva.gov.au/veterans/ptsd-coach)

### **Ex-Service Organisations**

- [RSL](#)
- [Mates4Mates](#)
- [Soldier On](#)
- [Young Diggers](#)

### **Income Support through Comcare**

An injured employee may be entitled to receive income support, known as incapacity payments, while they are unable to work or are on a rehabilitation program, if they have a work-related condition that has been accepted by Comcare. Incapacity payments compensate an injured employee for loss of income while on a rehabilitation program or until they recover from their work-related injury or illness.

[www.comcare.gov.au/recovery/returning\\_to\\_work/incapacity\\_payments](http://www.comcare.gov.au/recovery/returning_to_work/incapacity_payments)

## **Veteran specific research**

### **Australian Gulf War Veterans' Health Study (2003)**

*Authors: Sim, M., Abramson, M., Forbes, A., Glass, D., Ikin, J., Ittak, P., Kelsall, H., Leder, K., McKenzie, D., McNeil, J., Creamer, M., Fritschi, L.*

The Australian Gulf War Veterans' Health Study investigated whether Australian Defence Force (ADF) personnel who served in the Gulf War (1990 – 91) experienced higher rates of adverse physical and psychological health effects than ADF personnel who had not served in the Gulf War. The study was commissioned by the Department of Veterans' Affairs and was conducted by a collaborative medical research team from the Department of Epidemiology & Preventive Medicine at Monash University, Health Services Australia Ltd, the University of Western Australia and The Australian Centre for Posttraumatic Mental Health at the University of Melbourne. The study was the first comprehensive health study of a group of Australian war veterans involved in a single theatre of war.

Of the 1,873 Australian Gulf War veterans, 1,456 took part in the study, comprising 80.5% of the target population. The major finding of the study was that Gulf War veterans experienced higher rates of psychological disorders than the control group, in the time since the Gulf War. Gulf War veterans were found to be at significantly increased risk for posttraumatic stress disorder (PTSD) though other anxiety disorders, depression and substance use disorders were also common among the cohort.

The published study is available from: [www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/gulf-war-veterans-health-study](http://www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/gulf-war-veterans-health-study)

### **Australian Gulf War Veterans' Health Study – Follow Up Health Study (2015)**

*Authors: Sim, M., Clarke, D., Forbes, A., Glass, D., Gwini, S., Ikin, J., Kelsall, H., McKenzie, D., Wright, B., McFarlane, A., Creamer, M., Horsley, K.*

The Australian Gulf War Veterans' Health Follow Up Study was a longitudinal cohort study that built upon the findings of the 2003 baseline study. As in the 2003 study, the 2015 Follow Up Study aimed to examine the physical, psychological and social health and military-related exposures of ADF veterans who served in the Gulf War as compared to ADF personnel who had not served in the Gulf War. All 1,456 participants of the baseline study were eligible to participate, and 715 Gulf War veterans participated in the Follow Up Study.

The Follow Up Study found Gulf War veterans remained at an increased risk for PTSD, 12-month alcohol disorder and general psychological distress when compared to the comparison group. The difference in risk for these factors between Gulf War veterans and the comparison group widened since the baseline study. The risk of major depression was not significantly different between study groups and both groups were found to be equally resilient.

The published study is available from: [www.dva.gov.au/consultation-and-grants/research-and-development/health-studies/australian-gulf-war-veterans-follow](http://www.dva.gov.au/consultation-and-grants/research-and-development/health-studies/australian-gulf-war-veterans-follow)

### **Mental Health in the Australian Defence Force – 2010 ADF Mental Health Prevalence and Wellbeing Study (2010)**

*Authors: McFarlane, A.C., Hodson, S.E., Van Hooff, M., Davies, C.*

The ADF Mental Health Prevalence and Wellbeing Study was conducted by a collaborative research team comprising representatives from the Centre for Traumatic Stress Studies at the University of Adelaide, the Joint Health Command of the ADF and the Australian Centre for Posttraumatic Mental Health at the University of Melbourne.

The study examined the prevalence rates of the most common mental disorders, the optimal cut-offs for relevant mental health measures, and the impact of occupational stressors. ADF prevalence rates were compared to an Australian sample matched for age, sex and employment. Nearly 49% of ADF current serving members participated in the study between April 2010 and January 2011.

Prevalence of mental disorders was similar to the Australian community sample, but profiles of specific disorders in the ADF varied. The study identified PTSD as the most prevalent anxiety disorder, with ADF males experiencing PTSD at a significantly higher rate than the general community. ADF males also experienced higher rates of affective disorders than the control sample and both ADF males and females experienced 12-month depressive episodes at higher rates than the general community. Alcohol disorders were significantly lower in ADF personnel than the control sample in the 12 months preceding the study.

The published study is available from: [www.defence.gov.au/Health/DMH/Docs/MHPWSReport-FullReport.pdf](http://www.defence.gov.au/Health/DMH/Docs/MHPWSReport-FullReport.pdf)

### **Mothers in the Middle East Area of Operations (MEAO) Study (2014)**

*Authors: Lawrence-Wood, E., Jones, L., Hodson, S., Crompvoets, S., McFarlane, A., Neuhaus, S.*

The MEAO Study examined the impacts of deployment on female veterans with dependent children. Using a mixed methods design, the study collected standardised self-reported data and qualitative information from participants. The main finding of the study indicated that while the experience of deployment is particularly challenging for female veterans with dependent children, most participants viewed their deployment as a positive and important element of their service. The resilience, creativity and agency of female veterans was key to successfully navigating the demands of motherhood and deployment.

The published study is available from: [www.dva.gov.au/about-dva/publications/research-and-studies/health-research-publications/mothers-middle-east-area](http://www.dva.gov.au/about-dva/publications/research-and-studies/health-research-publications/mothers-middle-east-area)

### **Vietnam Veterans' Family Study (2014)**

The Vietnam Veterans' Family Study was conducted by a research panel commissioned by DVA. The study comprised a number of complimentary research projects that aimed to determine the effect, if any, that active Vietnam service had on the physical, mental and social wellbeing of the sons and daughters of Australian Vietnam veterans. The study cohort comprised 27,000 participants including Vietnam veterans, their partners and children and a control group of veterans (and their children and partners) who served in the ADF during the Vietnam War era, but were not deployed to Vietnam. The study found the majority of children of Vietnam veterans were in good health. However, children of Vietnam veterans (as compared to children of veterans who were not deployed to Vietnam) were more likely to experience depression, anxiety, PTSD, suicidal thoughts and planning, skin conditions, migraines and sleep disturbances.

The published study is available from: [www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/vietnam-veterans-family-study](http://www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/vietnam-veterans-family-study)

### **Timor-Leste Family Study (2012)**

*Authors: McGuire, A., Runge, C., Cosgrove, L., Bredhauer, K., Anderson, R., Waller, M., Kanesarajah, J., Dobson, A., Nasveld, P.*

The Timor-Leste Family Study was conducted by The University of Queensland, Centre for Military and Veterans' Health and funded by DVA. The study aimed to determine the physical, mental and social health impacts and associated risk and protective factors of deployment to Timor-Leste on the families of service members. The study involved 4,186 participants comprising veterans deployed to Timor-Leste between 1999 - 2010 and their partners as well as a control group of veterans who were not deployed to Timor-Leste (and their partners).

The study found no statistically significant differences were found between the physical, mental or family health of family members of people deployed to Timor-Leste when compared with comparison group family members.

The published study is available from: [www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/timor-leste-family-study](http://www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/timor-leste-family-study)

### **Rwanda Deployment Health Study (2014)**

*Authors: Runge, C., Kanesarajah, J., Loos, C., Waller, M., Nasveld, P.*

The study was commissioned by DVA and conducted by the Centre for Australian Military and Veterans' Health. The aim of the study was to examine the health and compensation history and outcomes of veterans of Rwanda deployments (Operation TAMAR (Troops and Medical Aid Rwanda)). The study sample included 680 veterans of Operation TAMAR. Major findings included: half of participating veterans had an accepted compensation claim, with 31% having a claim or treatment for PTSD; medical personnel had fewer compensation claims and medical presentations than rifle company and support personnel; claims were mainly lodged around the time of discharge not at incident; the majority accepted 11-15 years after the deployment.

The published study is available from: [www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/rwanda-deployment-health-study](http://www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/rwanda-deployment-health-study)

### **Peacekeepers' Health Study**

*Authors: Hawthorne, G., Korn, S., Creamer, M.*

The Peacekeepers' Health Study examined the long-term effects on mental health status, health service use and quality of life of peacekeeping or peacemaking deployments among Australian veterans. The study involved over 1,000 participants from seven United Nations (UN) peacekeeping missions between 1989 and 2002, who had transitioned out of full-time service in the Australian Defence Force. Major findings included: most peacekeepers reported they were in good, very good or excellent health, though 30% of participants had at least one diagnosable mental health condition.

The published study is available from: [www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/peacekeepers-health-study](http://www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/peacekeepers-health-study)

### **Transition and Wellbeing Research Programme**

The Transition and Wellbeing Research Programme (the Programme) is the most comprehensive study undertaken in Australia that examines the impact of military service on the mental, physical and social health of:

- serving and ex-serving Australian Defence Force (ADF) members including those who have been deployed in contemporary conflicts; and
- their families.

This research builds on the findings of the world-leading research conducted with current serving members of the ADF in the 2010 Military Health Outcomes Program. The Programme comprises three studies: the Mental Health and Wellbeing Transition Study (five reports and two papers), Impact of Combat Study and the Family Wellbeing Study, each comprising one publication. The following reports are available on the DVA and Defence website:

[Mental Health Prevalence](#), which explores the prevalence of mental disorders among ADF members who have transitioned from Regular ADF service between 2010 and 2014; and examines self-reported mental health status of Transitioned ADF and the 2015 Regular ADF.



[Pathways to Care](#), which assesses pathways to care for Transitioned ADF and the 2015 Regular ADF, including those with a probable 30-day mental disorder.

[Physical Health Status](#), which examines the physical health status of Transitioned ADF and the 2015 Regular ADF.

[Family Wellbeing Study](#), which investigates the impact of ADF service on the health and wellbeing of the families of Transitioned ADF and the 2015 Regular ADF.

The reports listed below are still to be released:

*Technology Use and Wellbeing*, which investigates technology and its utility for health and mental health programmes including implications for future health service delivery.

*Mental Health Changes Over Time: a Longitudinal Perspective*, which conducts predictive modelling of the trajectory of mental health symptoms/disorder of Transitioned ADF and the 2015 Regular ADF, removing the need to rely on estimated rates.

*Impact of Combat Study*, which follows up on the mental, physical and neurocognitive health and wellbeing of participants who deployed to the Middle East Area of Operations between 2010 and 2012.

*Transition and Wellbeing Research Programme Key Findings*, which summarises the key findings of the Programme.

Further information is available at: [dva.gov.au/health-and-wellbeing/](http://dva.gov.au/health-and-wellbeing/) and [www.defence.gov.au/health/dmh/researchsurveillanceplan.asp](http://www.defence.gov.au/health/dmh/researchsurveillanceplan.asp)

### **National suicide monitoring of serving and ex-serving Australian Defence Force personnel: 2018 update**

The Government has released analysis on the incidence of suicide among serving and ex-serving ADF personnel from 2001–2016. This report can be found on the Australian Institute of Health and Welfare website. The Government will continue to maintain a record of ex-serving ADF member suicide deaths and will annually update incidence rates of suicide among serving and ex-serving ADF members as new cause of death data becomes available.

[www.aihw.gov.au/reports/veterans](http://www.aihw.gov.au/reports/veterans)

The previous report *Incidence of suicide in serving and ex-serving Australian Defence Force personnel: detailed analysis 2001-2015* is available at: [www.aihw.gov.au/reports/veterans/incidence-of-suicide-in-adf-personnel-2001-2015/](http://www.aihw.gov.au/reports/veterans/incidence-of-suicide-in-adf-personnel-2001-2015/)

## **Hospitals providing trauma recovery programs**

The document available from the following web page provides a list of providers delivering Trauma Recovery Programs to veterans.

<https://at-ease.dva.gov.au/professionals/client-resources/trauma-recovery-programs>



## Military member to civilian: Identity in transition

### Webinar panelists:



**Mr Russell McCashney**  
*Social Worker, Tas*

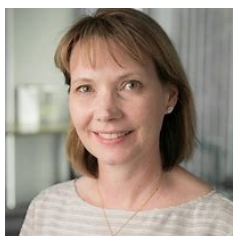
Russell has been a social worker since 1986.

He has completed post graduate training in counselling and

psychotherapy plus many years of training, workshops and conference participation/presentations, much of which is on the assessment and treatment of post-traumatic stress disorder (PTSD) and co-morbidities; working with military populations and their families, as well as managing service delivery to this client group.

Russell worked for the then Veterans and Veterans Families Counselling Service (VVCS) now Open Arms, for 25 years as a counsellor and later in various management and leadership roles.

Since 2014 he has been operating his own consultancy as an accredited mental health social worker, a clinical supervisor, mentor and trainer. Russell is a branch committee member of the Australian Association of Social Workers (AASW) Tasmanian Branch (Immediate Past President) and is a member of the Australian College of Social Workers (ACSW) clinical division working party.



**Ms Nicole Sadler**  
*Psychologist, ACT*

Nicole Sadler joined Phoenix Australia – Centre for Posttraumatic Mental Health in July 2017 as the Director

Military and High Risk Organisations.

Through her 23-year career as a full-time Army psychology officer, she developed considerable expertise in military mental health, including in the issues and challenges for serving and ex-serving military personnel and their families.

Nicole has worked in psychology service provision, training, research, policy development and strategic planning, and has deployed in support of numerous Australian Defence Force operations.

She held the senior psychology position within the Australian Army from August 2012 to January 2017. Nicole continues to serve as a Colonel in the Army Reserves.



**Professor Gerard Gill**  
*General Practitioner, Vic*

Professor Gerard Gill is the retired Professor of General Practice at Deakin University in Geelong, with a large recent veteran practice.

He has been an Army Reservist for 37 years, attained the Rank of Colonel and deployed to Kuwait in 2008.

He is the Secretary of Royal College of General Practitioners (RACGP) Chapter of Military Medicine, has served on the DVA Local Medical Officer (LMO) committee and remains a member of the DVA Veteran MATES editorial Committee.

In 2016 he co-authored an Australian Family Physician article on assisting modern era new veterans.

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## Facilitator:

**Professor Mark Creamer**  
*Clinical Psychologist, Vic*

Professor Mark Creamer is a clinical and consulting psychologist with over 30 years' experience in the field of posttraumatic mental health.

Mark is internationally recognised for his work in the field; providing policy advice, training and research consultancy to government and non-government organisations, with the aim of improving the recognition, prevention and treatment of psychological problems following stressful life events.

Mark is a Professorial Fellow in the Department of Psychiatry at The University of Melbourne, and has an impressive research record with over 180 publications.

Mark is an accomplished speaker and has given numerous invited addresses at national and international conferences.