

**Submission to House of Representative Committee  
Parliament of Australia  
Inquiry into Workplace Bullying**

**Submission from:**

**SUMMARY**

When bullying has occurred to the point of causing injury to the victim, the victim needs to be protected from further bullying and persecution from the department that caused the injury. This is needed to prevent further harm, to maximise the chance of recovery/rehabilitation, and to minimise the long term cost and loss of productivity to both employers and employees.

**Author's Background**

I write this submission as an ex Commonwealth Public Servant, and the spouse of a person whom experienced extreme bullying in the workplace. I worked as an IT professional in the from 1992 to 2004. Most of my time in the Department was spent in the , and my statement here relates to my experiences in that organisation.

**SUBMISSION**

During 2002-3, I was employed at the , in , Western Australia. My wife was also employed there. During that time, she was the recipient of escalating and torturous bullying, by two managers. This had a devastating effect on her health and well being, and despite her raising the issue very early on, several levels of management failed to act constructively. Some in fact, participated further in the bullying, "attacking the victim". The situation was also very stressful for me, being co located in this environment. Her situation culminated in a physical assault on her by a manager (being crushed/pinned in a doorframe by the door, while trying to escape from a hostile verbal attack). Despite two other managers being present, no criminal or even disciplinary action was taken against the perpetrator. Although an internal, "independent" investigation was conducted, the perpetrators' actions were not even seen as a breach of the APS Code of Conduct.

Unable to continue in this environment, we returned to headquarters in Canberra. My wife was psychologically injured to the point of not being able to continue working. She lodged a Comcare claim and has not been able to return to the workplace since that time. She has had no less that seven medical reports

conducted on her, most at the initiation of \_\_\_\_\_ or Comcare. All have been universally overwhelmingly in support of her condition and claim.

Despite this, \_\_\_\_\_ have continued the bullying, through several Comcare case managers. Comcare have been complicit in this bullying, through both inaction against \_\_\_\_\_, and at times, direct support of \_\_\_\_\_ ongoing mistreatment of my wife. They have taken an adversarial approach to her case, denying and reduce their recognition of her injury (including disregarding and contradicting the advice/assessment of their own commissioned medical reports). They have also forced her to attend repeated, unneeded assessments (forcing her to repeatedly relive and revisit the abuse committed against her. \_\_\_\_\_ has also sabotaged her attempts to recover, and have even stalked and cyber bullied her on a personal level. Rather than support her and try to aid in her recovery, they have continued to brutalise her. They have shown absolutely no empathy or understanding of her condition or injury. It has been sickening for me to watch.

No behaviour from \_\_\_\_\_ suggests that this has, or will, ever change, while they are managing her case. \_\_\_\_\_, still to this day, seem to be in denial of her injuries and the impact of them on her ability to work, let alone any wrongdoing against her. From the outset of her case, \_\_\_\_\_, in denying any occurrence or culture of bullying in their workplace, seemed to see no reason why she just couldn't return to the environment that injured her so badly. They just don't "get it".

This ongoing denial by \_\_\_\_\_ about bullying occurring in its Department goes to the heart of the problem. Until they recognise and admit that bullying has occurred, and is still occurring, they are doomed to make the same mistakes and damage people over and over. In my 13 years as an employee there, I witnessed frequent bullying to the point of it being culturally entrenched. Some work areas were worse than others, and in some cases physical threats and intimidation and violence were more than isolated occurrences. It is only now that I am out of that environment that I truly appreciate how bad it was. Contact that I still have on occasion with ex colleagues, who are still employed there, lead me to believe that the work environment there has not changed.

Despite my wife resigning from \_\_\_\_\_ during the course of her Comcare case, \_\_\_\_\_ has continued to be in control of managing her case, and continue to persecute her as the victim and injured party.

She remains injured to this day, and is permanently impaired. Without the wonderful support of her own treating medical practitioners, and the legal support of a fantastic Lawyer, to resist the appalling behaviour of \_\_\_\_\_, I fear to think where she would be.

The emotional and psychological effect on her has been very large, and been very taxing on me too. Professionally, it ruined her potential for a wider career. Financially, this has also cost us a great deal of money, through loss of income, and legal bills. I too, left the department, after her Comcare claim, and am now self employed on a much lower income than I had when I left. It has also cost the

Commonwealth a large amount of money, through loss of a highly competent and dedicated employee (my wife), and the overhead in administering an overly bureaucratic, poorly implemented and adversarial Comcare claim against her. They now employ a case manager to intimidate and badger my wife, instead of paying either of them to do productive work. It is a lose-lose situation. In effect, if bullying is unaddressed, you pay two people (three if you include the bully) to produce nothing, rather than pay either of them to be productive, and injure someone in the process.

While these costs are high, I believe that would be even higher if claims for psychological injury were in any way reduced or limited, through some naïve attempt to minimise expenditure. During my 13 years as an employee in the department, I saw the huge loss in productivity in areas where bullying was most common. These areas were toxic and dysfunctional, with a corresponding reduction in meaningful output. With such a culture of denial and entrenched bullying, Comcare/insurance claims, as imperfect as they are, are the only way to provide any protection for victims, and also send a message to employers who insist on denying the existence of bullying. There do also need to be significant improvements in the Comcare process however, when it comes to protecting victims and providing the best chance of rehabilitation and possible return to employment.

## **Recommendation**

### **Give some control to the injured party in their rehabilitation**

When bullying continues to the point of injuring the victim, it is vital to protect the injured party from further attacks, in the hope of providing the best chance of treatment, recovery and possible rehabilitation.

It is ludicrous that the victim is placed in the ongoing “care” of the perpetrators of the bullying and subsequent injury. This fails to protect the victim from further bullying and ongoing mistreatment by the department. It is absurd in the extreme, that a department that (often willingly) caused injury to someone, continues to take the approach of “we know what’s best for you” in the victim’s case management, while denying the cause, existence, or effect of the injury to the victim.

The victim’s department, and Comcare, should remain financially responsible for treatment and rehabilitation. The victim, however, should be given the choice to be removed from ongoing persecution from the people who caused their injury.

This could be done using privately contracted services/providers, accessible through the victim’s treating medical practitioners, and supported by their own medico legal advice. This would have a far greater chance of success for rehabilitation (and be far less costly in the long run), than the alternative - being dictated to by a case manager in the department, that often has at best, disinterest, and at worst malicious intent.

Thank you for the opportunity to contribute to this Inquiry. I am available to expand on my submission and field questions if required

23 August 2012