



Submission No 21

Inquiry into the Care of ADF Personnel Wounded and Injured on Operations

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**DEFENCE SUB-COMMITTEE
JOINT STANDING COMMITTEE ON FOREIGN AFFAIRS, DEFENCE AND TRADE**

**INQUIRY INTO THE CARE OF ADF PERSONNEL WOUNDED AND INJURED ON
OPERATIONS**

CENTRE FOR MILITARY AND VETERANS' HEALTH - SUBMISSION

Introduction

Thank you for an opportunity to furnish a written submission to the Inquiry into the Care of ADF Personnel Wounded and Injured on Operations.

The Centre for Military and Veterans' Health welcomes this timely inquiry noting the 'importance of the systems and processes to care for, repatriate, and rehabilitate or transition ADF personnel wounded or injured on operations are efficient and effective'.

The CMVH submission is divided into four components: firstly a background role and current activities being conducted by the Centre. Secondly, a description of the DVA funded Timor Leste Family Study conducted by CMVH was publicly launched by Minister Snowdon at Parliament House on the 20th September 2012. Thirdly, some general comments on the Inquiry's Terms of Reference as they pertain to CMVH activities. Finally, a review of our ongoing Middle Eastern Area of Operations studies with a brief description of the findings to date, noting they are still under consideration by the Department of Defence.

CMVH background

The CMVH unites academic, research and defence expertise across the Departments of Defence and Veterans Affairs, The University of Queensland, The University of Adelaide and Charles Darwin University. It is designed to facilitate access to high quality professional development and clinical training opportunities for Australian Defence Force healthcare providers, emphasising the broad range of ADF needs. Research undertaken by CMVH is expected to enhance understanding of the health impacts of service life and contribute to the improvement of both the physical and mental health of military personnel.

The CMVH is located at the University of Queensland's Mayne Medical School in Brisbane, with active nodes at the University of Adelaide and Charles Darwin University. The CMVH is staffed by Defence and civilian health practitioners and specialist researchers.

The Head Agreement between the Commonwealth and the University of Queensland for the Centre expires on 31st December 2013. Discussions to date have largely concentrated on financial issues rather than research and educational achievements to enhance the health of ADF members and the Veterans' community.

Current and planned research activities

Major research activities conducted on the Middle Eastern Area of Operations Health Study and the Timor Leste Families Health Study are concluding on behalf of the Departments of Defence and Veterans Affairs respectively. Both study reports have enjoyed departmental respect and acclaim for their scientific and professional conduct and quality.

Future research activities

CMVH research leaders are responsible for focusing inwards on future research projects in their areas of expertise:

- surveillance,
- mental health,
- physical health,
- family health,
- occupational and environmental health,
- rehabilitation and compensation and,
- health services

Major planned research activities include:

- A retrospective study of Defence and DVA health and financial records to ascertain the health of service personnel who served in Rwanda during 1994 and 1995 in light of anecdotal reports of high rates of Post-Traumatic Stress Disorder in these cohorts. Depending on the findings, similar studies could be conducted on the military cohorts who served in Somalia and Cambodia.
- A longitudinal health surveillance study of Reservists to assess their health and wellbeing and how this contributes to military capability.
- An examination of the causes for medical downgrading and discharge from the Australian Defence Force. These causes are the major drivers of health, rehabilitation, and compensation costs. A detailed analysis of the causes for medical downgrading/discharge is likely to provide significant insights and assist with the development of preventive policy and result in significant financial savings.

Current and planned educational activities

The CMVH is Australia's preeminent Centre for post-graduate and professional development qualifications for Health Practitioners working with former and serving military personnel. The CMVH helps Practitioners operating in the Defence and Civilian health work forces to advance their careers with a robust suite of programs and short courses about issues affecting ADF personnel and veterans.

The Centre offers a Master of Public Health, a Master of Clinical Psychology and is currently developing a Master of Military Medicine as well as delivering a range of short courses to health care professionals in the fields of Medicine, Nursing and Allied Health.

Other achievements and plans

CMVH conducted a very well received Think Tank on Mild Traumatic Brain Injury during late 2011. This activity led to a revision of Defence Health policy, which has been implemented overseas. CMVH is continuing research into this condition which appears to be developing into the 'signature injury' arising from the Middle East Area of Operations.

CMVH e-health unit has been exploring innovative e-health models for the provision of health services with a focus on e-mental health, electronic health records, occupational health and safety, telehealth and health information systems. These projects are supported by an ongoing collaboration with Defence and DVA including well established relationships with a number of key e-health organisations across Australia.

Collaboration

CMVH collaborates with the Schools and Centres of our consortium universities on a range of topics of mutual interest including: solvent exposure and ototoxicity, military dental hygiene, perioperative nursing, disaster medicine and humanitarian assistance, mental health, and telehealth support to remote military operations.

We also collaborate with similar Australian universities and research facilities on prostate cancer and rehabilitation, post-traumatic stress disorder, mild traumatic brain injury, national mental health survey, emergency health response, deployed health response for remote off shore facilities and recruiting and retention of rural and remote health professionals.

CMVH has strengthened and extended our international links to other like-minded institutions including the University of Otago, The Uniformed Services University in the United States of America and the Canadian Institute for Military and Veteran Health research centre.

Collaborative activities include a review of the combined ANZAC military health response to a Papua New Guinea based Tsunami which occurred during 1998, the combined Australia and USA campaign in Buna during WWII, and a longitudinal PTSD treatment intervention study with the Canadian equivalent of the CMVH, The Kings College UK, and the US Millennium Cohort Study.

Financial Strength

CMVH has a number of sources of income:

- Core funding from the Departments of Defence and Veterans' Affairs,
- Commonwealth Government Research Performance Funds pay to UQ annually based on research income and publications and research higher degree students,
- Contract research income from the Departments of Defence and Veterans Affairs and,
- Donations.

External Review

The CMVH underwent an extensive, external review during 2011. The Review Committee noted significant progress in research educational and collaborative activities of the CMVH and concluded that CMVH represents an institution of both national and international significance.

Future success

Clearly, CMVH's research, educational and financial strength has been underpinned by DVA core funding and Defence postings, and now salaries, to CMVH since its commencement date of 2 February 2004. The Institution's ongoing success and its contribution to the personnel component of military capability will continue to depend on generous Commonwealth funding support.

Yours sincerely,

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TERMS OF REFERENCE

CMVH notes the Terms of Reference for the Inquiry relating to the treatment of wounded and injured ADF personnel, their repatriation arrangements, the care of wounded and injured personnel on return to Australia, return to work arrangements and the management of those who cannot return to ADF service.

CMVH does not have the responsibility for the direct management of wounded and injured ADF personnel on operations or following their return to Australia. However, the Centre is vitally interested in these arrangements and is contributing directly to the enhancement of preventive, therapeutic, evacuation and rehabilitation services through a raft of research activities and educational activities conducted at CMVH.

A greater insight into the Inquiry's TOR could perhaps be better gained through the Office of the Professor of Military Surgery and Medicine at The University of Queensland, Professor Michael Reade.

For some years the CMVH has been conducting a series of deployed health studies examining the health of service personnel who have deployed to a number of areas in our region including Bougainville, Solomon Islands and East Timor.

These studies have not been simply confined to ADF personnel but recently have involved a landmark study of the families supporting service personnel who have deployed to East Timor.

CMVH now possesses a very rich dataset on the health of those who have deployed on military operations. In addition, we possess the data analytical tools and skilled individuals who are able to interrogate these data sets in an intelligent, effective and efficient manner. Indeed, we are investing considerable resources towards improving our data management, analysis and sharing capability in order to enhance the health of the ADF and Veterans' communities.

Please find below a detailed description of the Timor Leste Family Study which was successfully launched by Minister Snowdon at Parliament House on Thursday 20th September 2012.

There is also a description of the Middle East Area of Operations health studies which have been proceeding over the last three years. The description addresses the three main components of the MEAO studies including a census study of approximately 26,000 service people who have deployed to the Middle East during the last nine years, a prospective study involving pre and post deployment health screening of personnel before deployment to Afghanistan, and finally an initial cancer and mortality study establishing a base line for these conditions in this cohort.

OVERVIEW OF TIMOR-LESTE FAMILY STUDY, TLFS, SUMMARY REPORT

This overview of the TLFS was co-authored by CMVH and DVA staff.

In July 2009, the Department of Veterans' Affairs (DVA) commissioned The University of Queensland, Centre for Military and Veterans' Health (CMVH) to conduct the Timor-Leste Family Study (TLFS). The TLFS was the first Australian study to investigate the effects of recent deployments on the health and wellbeing of Australian Defence Force (ADF) families.

Purpose

The purpose of the TLFS was:

- to determine what, if any, physical, mental or social health impacts there are on a service member's family from the member's deployment to Timor-Leste; and
- to identify any risk and protective factors associated with any health impacts.

Study Design

The study compared the health of the families of personnel who have deployed to Timor-Leste with that of families of personnel who have not deployed to Timor-Leste.

The study used semi-structured focus groups and interviews with partners of current/former ADF members to identify key issues for partners. This helped the study team to develop a questionnaire of general health, coping style and family dynamics for the main study.

Three ethics committees approved the study:

- the Australian Defence Human Research Ethics Committee,
- the DVA Human Research Ethics Committee, and
- the University of Queensland Behavioural and Social Science Ethical Review Committee.

Participants

Participants comprised current and ex-serving ADF members (who had deployed to Timor-Leste, deployed to other locations, or never deployed) and their partners.

The TLFS overall completion rate was 36.6%. Of 7,752 invited ADF members, 36.8% completed their questionnaires. Of 2897 current partners invited, 36.1% completed their questionnaires. Only 24 former partners completed the questionnaire. To protect these participants from identification, their responses were not included in the analysis or results.

Results

The study found that the physical, mental and social health of the families of Defence personnel deployed to Timor-Leste was not significantly different to a comparable group that did not deploy to

Timor-Leste. The partners who participated in the study were found to be in good physical and mental health and the majority of children had normal emotional and behavioural health.

Military service was found to have negative consequences for some families. A strong relationship was found between the Defence member's mental health and their partner's mental health. Further, if either parent had mental health issues then the children's health was affected. In other words, if the serving member's mental health suffered because of their operational service then there was a flow-on effect to their family.

The study found no evidence to suggest that the health of the families of Defence personnel varied with multiple deployments. However, partners themselves were more likely to negatively rate the impact of operational service with more deployments and they were twice as likely to report their children had behavioural difficulties if the family had experienced two or more deployments.

Social support, whether it is provided by family members, communities or co-workers, was significantly associated with mental health outcomes. Partners who had more support had better mental health, lower psychological distress and fewer problems with their children. Partners turned most often to families for help—either their own extended family or other families also experiencing deployment.

Many families participating in the research expressed pride in the contribution they were making to Australia. This was reflected in the positive effects and the resilience shown by most families.

The findings of the *Timor-Leste Family Study* show that while all families are affected by deployment, most do not experience significant negative consequences. Those families that do suffer from the effects of operational service, however, show that there are many ways that support to military families can be strengthened and improved, and this will benefit all families. The study has provided a solid base of evidence and a starting point for further research into the effects of deployment on veterans and their families. The research will act as a guide in the development of policies and programs.

Study Limitations

The TLFS population is a biased sample of ADF members and their families because through selecting a random sample of those who experienced a Timor-Leste deployment, comparatively fewer younger couples and newer ADF members were included. This excluded population is likely

to have younger families and may face different issues in terms of established support networks, for example.

Because this study used a retrospective cross-sectional research design (responses were gathered from participants at one point in time), it did not have the capacity to measure changes in health outcomes based on different stages of life. This can only be done through longitudinal research that collects data from people over a number of years.

Conclusion

The TLFS is the first Australian study to begin measuring the impact of military service on family health and it involved a high number of participants for research of this type. The findings provide an evidence base to guide policy and intervention development. The study provided a firm foundation of baseline measures and a large and rich data set that will continue to be analysed.

THE MIDDLE EAST AREA OF OPERATIONS, MEAO, HEALTH STUDY

Introduction, Background and Aims

The Middle East Area of Operations (MEAO) Health Study was designed to investigate the health of Australian Defence Force (ADF) members who deployed to the MEAO, with a view to identifying factors associated with poorer or better health. The study was contracted by the Department of Defence to the Centre for Military and Veterans' Health (CMVH) and was conducted by CMVH nodes at the University of Queensland and the University of Adelaide.

The **MEAO Health Study** had four components:

- The **MEAO Census Study**, which is the subject of this report, was conducted by the University of Queensland node of CMVH. This study was a retrospective self-report survey covering health and deployment experiences of ADF members who deployed to the MEAO between 2001 and 2009.
- The **MEAO Prospective Study** is a follow up study collecting pre- and post-deployment data on members deploying in 2010/11, conducted by CMVH's University of Adelaide node. Along with the self-report survey, selected members also participated in physical and neuro-cognitive testing. The final report is due in late 2012.
- The **MEAO Preliminary Study** was conducted in 2009. The purpose was to gain stakeholder input to the development of the measurements and method of data collection for the Census and Prospective Studies. Defence force units, ex-service organisations and other veterans' groups were involved in meetings and focus groups.
- The **MEAO Mortality and Cancer Incidence Study** is based on record linkage to national databases. Death and cancer incidence data from the Australian Institute of Health and Welfare were linked with the MEAO nominal roll and compared with standardised Australian cancer and mortality rates.

A detailed research plan, covering the Census, Prospective, and Mortality and Cancer Incidence components of the MEAO Health Study, was developed and modified through rounds of consultations and review between May 2007 and 2010. During all phases of the study development and conduct there was consultation with the Department of Defence and the Department of Veterans' Affairs (DVA).

Findings to date

It should be noted that the preliminary findings are under active consideration by Defence at present and accordingly, CMVH is not at liberty to release them.

However, most of the results are as expected from previous studies in Australia (including the 2010 ADF Mental Health Prevalence and Wellbeing study) and military studies elsewhere;

There were strong associations between perceptions of high levels of unit cohesion, military, family and community support during and after deployment and good mental and general health;

Patterns of symptoms were similar for people who deployed to Iraq or Afghanistan, and similar to patterns reported for other deployments;