

**SENATE FOREIGN AFFAIRS, DEFENCE AND TRADE
REFERENCES COMMITTEE**

**INQUIRY INTO RECRUITMENT & RETENTION
OF DEFENCE PERSONNEL**

SUBMISSION

Submission No: 43

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Inquiry Into Recruitment and Retention of ADF Personnel

The following is the submission to the Senate Inquiry Into Recruitment and Retention of ADF Personnel by the Injured Service Persons Association (Peacetime Injuries).

The opinions expressed by this association are in line with Section 2 (c) & (f) of the Terms of Reference.

In 1996 when the Blackhawk tragedy happened, the general public was exposed to two main facts. Firstly, that military service can be extremely dangerous and demanding and secondly that the military compensation and rehabilitation scheme is inadequate.

From that it was determined that there needed to be changes. Subsequently, an increase in the maximum payout was made and an inquiry started.

During a meeting with the then Minister for Defence Science and Personnel, Mrs Bronwyn Bishop, a question was raised regarding retraining of injured personnel. It was revealed that in her opinion the ADF only wanted warriors. In other words those who were 'broken' were not wanted. As this was her attitude, the number of medical discharges increased, thus reducing military numbers.

It's obvious that certain injuries would make retention unable to be approved, eg, severe head injuries or high-level quadriplegia. Before my accident terminated my military career earlier than wanted, I worked with a soldier who had lost his right arm just below the shoulder. This was around 1993 and as far as I'm aware he was still serving as at the end of 2000. This particular soldier went from a front line serviceman (in a line troop in the 2nd Cavalry Regiment) to a clerk still within the Regt. There are cases of servicemen and women still serving, but the degree of injuries of such people are unknown to our association.

It's been shown with the amount of medical discharges that this does impact on ADF numbers. With the introduction of new fitness tests and a scale by which individuals are deemed 'combat ready', 'support role' or 'non deployable' the ADF have in affect 'shot itself in the foot'. Servicemen and women are reluctant to report injuries for fear of being down graded and discharged. This causes them to carry the injury thus making it worse and therefore the affected person has no option but face medical discharge. I don't believe the service personnel are being offered retraining in another area that would allow continual service, eg, clerical, stores, transport.

During my period of service, 1986 – 1996, I witnessed the following routine regarding 'fit' versus 'unfit' for exercise deployment. When a unit was to go on exercise all those who were on medical restrictions were given jobs within the unit acting as a rear link in support of those in the field. Therefore the unit continued to run with a skeleton crew. In due course those that worked the rear link were eventually discharged. Sadly the next time the unit deployed, fit soldiers were kept behind to carry out the rear link duties. Medical unfit for field deployment should be encouraged to be retrained in support roles and administrative areas.

In line with medical discharges is the Military Compensation and Rehabilitation Scheme. This is an area that fails the servicemen and women. The current scheme places the ADF as nothing more than public servants. Here is a very relevant quote, which I feel applies to peacetime service.

"The willingness with which our young people are likely to serve in any war, no matter how justified, shall be directly proportional as to how they perceive the veterans of earlier wars were treated and appreciated by their nation" - George Washington.

Those who risk so much, which is time and time again reiterated by our politicians, deserve the to be respected and looked after. This needs to be shown.

The finally point we would like noted is the conditions of service and allowances. These 'benefits' are supposed to offset civilian equivalents such as overtime, remote locality, arduous conditions and postings. The government continues to reduce benefits or have them taxed as fringe benefits.

In conclusion, the ISPA believes that the compensation, medical status and discharge criteria and remuneration packages play a part in the retention of service personnel. To encourage enlistment and retention, it must be made known that the demands and risks faced will be recognized by way of tax-free allowances and benefits and a specific and appropriate compensation scheme.

With thanks

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