



## **Royal Commission Update - Brisbane Day 10 - 10 December 2021**

### **RSL References**

#### Positive:

NA

#### Negative:

NA

### **General Summary**

- Graphic lived experience testimony - parents and serving member
- Summary of hearing block
- Summary of main themes for moving forward

### **Counsel Closing Remarks**

- Importance of lived experience in informing the key themes for further investigation
- Counsel assisting deliberately contacted smaller, grassroots ESOs (outside ESORT) to inform practice at the coal face
- Next Hearing Block to begin on 14 February in Sydney, with issuing of Notices to Give Information to follow in the coming weeks - case studies and adverse findings are more likely to be pursued in following Hearing Blocks
- Previous Inquiries will form basis of upcoming work - Commissioner Kaldas has committed to finding a mechanism for implementing the findings of previous hearing and inquiries
- The Royal Commission has received 900 submissions and 180 requests for private hearings
- Key themes that will form basis of further investigation:
  - ADF culture, including the treatment of women, stigmatisation of help-seeking and mental health, redeployment
  - Leadership and Accountability
  - Deployment pace and tempo
  - Recruitment processes
  - Military justice processes, including through IGADF and Coroner's
  - Trauma, both in the course of duty and moral trauma
  - Families, including engagement, information sharing and post-suicide support
  - Information, including the use of data, information during discharge and transition and among veterans and their families, availability of services, and assessment and evaluation processes

- DVA, including examining organisation, bureaucracy, red tape, box ticking, and understanding its clientele
- Transition, including at the policy level, processes, on the ground, becoming a civilian, ownership/responsibility, and ongoing support
- Polypharmacy, overmedicalising and medical deployment categorisation
- Emerging treatment models
- Language and imagery

### **10:30am - Mr Michael Fernandez de Viana & Mrs Patricia Fernandez de Viana - Lived Experience**

- Parents of flying officer James Fernandez, who died by suicide 25 July 2019
- Insufficient career counselling, interservice transition
- Damaging medical processes, prescribing procedures and continuity of care
- No family welfare procedure, contact, support or engagement
- No family counselling following suicide, no support, no information - family paid for repatriation of body
- Following death, no information, no IGADF contact, no coroner counselling

### **11:15am - Dr Ed Heffernan - Queensland Forensic Mental Health Service**

#### Suicidality

- Affects 800,000 people worldwide - suicidality affects serving ADF members at a higher rate (4%) than the general population (1.8%)
- There is a 20 to 1 ratio between attempted suicide and death by suicide
- Suicidality is an opportunity for prevention and intervention
- There is a need for continuity of care 5+ years post-discharge
- Suicidality is a heterogenous problem that requires heterogenous responses

#### Data

- Need evidence base - allows to identify issues, pathways for intervention, identification of problems, needs and responses
- Opportunity to link existing databases to inform this evidence base
- Limited availability of psychologists, psychiatrists and mental health staff - may wish to better utilise Reserve resources
- Trauma-informed practices and training programs are needed

## **2:15pm - BR1 (anonymised) - Lived Experience**

- Experienced bullying in training - 17 years old
- Just after first deployment, was the victim of a sexual assault by a shipmate - what followed was systemic victim-blaming, both by Chain of Command and Police
- No help was offered - help-seeking was discouraged due to paperwork, told would affect career negatively
- Psychologists were in Chain of Command - privacy concerns
- Posted to another misogynistic ship, with no avenue for rectification
- Experienced isolation, depression and suicidality
- Family eventually was able to seek help - paid for help outside ADF structure
- Poor transition processes - currently in Reserves even though doesn't want to be - no information on how to leave and no response from Defence
- Post-discharge - 18 months to get DVA support, diagnosed with PTSD and anxiety
- Regrets joining
- Message to female ADF members 'It's not your fault. Speak up. If you can't speak to Defence, speak to family, seek help'

## **3:15pm - Ms Jasmin Carmel - Lived Experience**

- Mother of Corporal Jarrad Brown, who served tours in Iraq and Afghanistan, and died by suicide on 5 December 2015
- Best friend was killed in Afghanistan - following postings, started to experience PTSD and suicidality - self-medicated with alcohol and gambling
- Lost job, had no work, relationships broke down, lashed out - 'life was skewed'
- First suicide attempt - tried to seek help from Defence - denied as 'he's not in anymore'
- DVA processes were arduous and left Cpl Brown hopeless and broken
- No family support following first attempt - some support from Veterans and Veterans' Families Counselling Service (VVCS) - not adequate - and Open Arms - not adequate
- No information available for family
- Post-death, lack of support for family - Digger's Rest was the only help
- No contact from ADF, Coroner, IGADF - DVA contact was solely 'you are not entitled to compensation' - no post-death information was made available
- Closing remarks:
  - Need a single Point of Contact for information about support services
  - Veterans and Defence members have been let down by Governments saving money
  - Need timely, appropriate, well-funded supports
  - Government needs to 'Step up. Stand tall. Honour your side of the contract of the Service Oath'. To be enacted by independent Inspector General.