



Royal Commission Update - Adelaide - 21 July - Day 5

RSL References

Positive:

No references made.

Negative:

No references made.

Timeline:

12:35pm - In Session

12:38pm - Witnesses Affirmed

2:35pm - Adjournment

2:56pm - In Session

4:40pm - Commission adjourned until 9:00am, 24 July 2023.

General summary:

- Better visual presence at march outs and graduations;
- Need to better communicate amongst ADF groups about support available;
- Demand outweighs supply in areas of childcare, education and tuition and other needs;
- DFV to be reviewed: families to receive additional assistance where DFV occurs - accommodation, expenses etc;
- Workforce shortage, security vetting (AGSVA) delays, impacted on onboarding processes; resourcing lacking;
- Hard to gauge need for DMFS - some family's want privacy; no contact with Defence, complex issue to resolve;
- Aim to reduce stress by increasing support, services and resources available to ADF Members and their families;
- Hamilton Report from 1986 - still consistent with the issues faced by ADF personnel today;
- Complimentary relationship: if ADF is cared for, they see increased efficiency, less injuries, better mental health outcomes;

Counsel Assisting Opening Address - Gabriella Rubagotti:

- ADF members serve longer and more efficiently where morale is supported and family connections are maintained;
- Families provide a lot of support, recognising something is wrong and encourage help-seeking journey;
- Families often maintain many connections and taken on a significant emotional burden for serving ADF members;
- Adverse impacts upon families very rarely recognised;
- Connection between family break down and service - family breakdowns account for 49% of suicides;
- 38% of female ADF personnel who died by suicide had spousal problems;

Summary of

Witness List:

Time	Witness	Description
12:30pm-2:30pm	Major General Wade Stothart DSC AM CSC Head, Military Personnel, Defence People Group Aspasia Iosifidis Area Manager, Sydney-Liverpool, DMFS Rachel Baker Area Manager, North Queensland, DMFS	Commonwealth Witnesses
2:30pm-2:45pm	Short Adjournment	
2:45pm-3:45pm	Panel Continued	Commonwealth Witnesses
4:40pm	Adjourned	

Witnesses:

Major General Wade Stothart DSC AM CSC - 12:38pm

Type	Body/Comments
Verbal Evidence	Defence Service, and separately, their families, where not supportive and can lead to poor physical and mental health outcomes.
	Every families circumstances are unique: the definition of family is contextual for everybody depending on their career lifestyle and progression. The unique nature of military service places extra and exceptional demands on personnel. These demands often impact the families - challenges and opportunities, with benefits of service - focusing on those challenges and through the life course phases, different strains will be placed on families at different times. Often, service compounds already existing issues.
	DMFS was responsible for transition; we encourage Members to utilise the provisions under DVA - we notify DVA about who is a Veteran and who is entitled to what.
	DMFS main stakeholders: <i>families, members, the community, responsible for the wellbeing and welfare of the members of their units - ships and flying squadrons, Chain of Command is very important to provide and uphold that overarching framework of wellbeing and support. Independent Advocacy for Defence Families Australia is also important.</i>
	Relating to the policy definition of a family and attribution for conditions and benefits, we have a system that has defined family - potentially inaccurately - due to the emerging different types of families (single parents; blended families; separation through borders; adoption; custodial arrangements etc). Policy said housing benefits require ninety-day residence with child. Requirement no longer exists.
	The Division 1 lead includes career management, recruitment, DMFS and the Joint Transition Authority and other authorities. Reorganisation may take some time, and eventual composition of emerging Divisions. Should be logistically organised by 1 November 2023. Structural benefits of this change: career life cycle process.
	DMFS programme delivery - at its most strategic level - many programmes are delivered nationally, with others delivered locally and regionally.
	Policy and legal research to understand requirements to roll-out engagement and communication avenues to families frequently. Opt-In for ADF personnel if legal hurdles cleared.
	We need better data gathering, collation and collection to understand the effectiveness of these community programmes, and to adjust programmes quickly to ensure resources and funds are better used. We need better intelligence and monitoring. It is something we are working on however, tactically, it is difficult. Today's findings are consistent with the 1986 Report - issues are still pressing.

Aspasia Iosifidis

Paragraph/Type	Body/Comments
Verbal Evidence	Role: area of responsibility DMFS Sydney-Liverpool, greater Sydney - 76 establishments; Has 2,000-odd DVA homes across 187 postal codes. 12,177 ADF members 5,700 Navy 5,600 Army 785 RAAF. 12,330 dependants (dependants include spouses): 5,742 5,485 1,058
	DMFS: Critical incident and mobility support; absence from home; community capacity building; support to command; family wellbeing support.
	Different services are required at different time by families. Child-minding services, education and tuition - housing issues arise too, communication and deployment. Common themes include public transport, schooling, social connections, employment opportunities. Some State Schools have Defence School Mentor allowing easy transition for Defence Children into State Schools.
	Drivers poor outcomes - CRT, mental health and communication issues, children behavioural concerns, assistance requests for diagnoses for children; we provide initial crisis support - the helpline triages the call and the Area Office may involve individual Family Liaison Officers, or Case Workers.
	Within the team - there are referrals which may result in long-term work. DMFS is time-limited; they aim to triage them and then pass them on to other services. DMFS is limited to six sessions, however, if referrals have not yet been made, the Area Manager, with Director of Regional Engagement, may allow concessions (eg: additional sessions).
	No cap - may people re-present.
	Sydney-Liverpool: 377 AC698s - Referrals from Command; allocated to Social Workers and other appropriate team members to finds support. Members and families do call the help line.
	Attempt to hold the same event over different areas due to Sydney's large geographical size and overcome the barriers that come with that;
Supports to be improved for dual serving families.	

Rachel Baker

Paragraph/Type	Body/Comments
Verbal Evidence	Role: area manager of Nth Qld - two area offices in Cairns, and Townsville. Also support remote outposts of Thursday Island, Mount Isa, Cairns and Weaper. Cairns: predominately Navy Townsville: predominately Army
	Services provided include six core outputs, and challenges and opportunities for members and families are very similar regardless of their posting location - subjective to personal experiences.
	There is a multitude of different supports provided under mobility support aspect - eg: in Cairns and Townsville; yearly, aligned with a posting period (usually February), there is a function in Townsville - with community capacity building - with usually up to 180 exhibitors, ranging from State + Federal parliamentarians, sporting and community groups, recreational organisations, etc - invites extended to new and former serving ADF personnel to connect them with the community and its services.
	Tailored support as required - a range of formalised and anecdotal feedback - consistent.
	Some Command are very supportive in assisting ADF personnel to connect with DMFS - others may not; others may not have knowledge about us or the services we provide.
	Three problems in service provision: 1. Knowledge: communication not appropriate 2. Services: filtered through other avenues, and lack of understanding about who they are and what they do 3. Command: May not appropriately understand the DMFS services;

Evidence Tendered:

Document	Paragraph	Body
Response to NTG-DEF-154A	DEF.9999.0103.0001	
Annexure A to NTG-DEF-154A	DEF.9999.0103.0001	
Responses to NTG-DEF-154B	DEF.9999/0102.0001	
Biography of Major General Wade Stothart DSC AM CSC	DEF.0022.0001.0001	
Biography of Ms. Aspasia Iosifidis	DEF.0022/0001.0002	
Supporting Service Families: Report on the Main Problem Facing Spouses of the ADF [Hamilton Report]	Def.1197.0002.0389	Comment made by Commissioner Brown: If things have not yet changed in 37 years then is there cause to be optimistic?
Defence DFV Strategy 2017-2022	DEF.1197.0002.0295	Methodology: identifying people most likely affected by competing demands of service and family life.
Family Sensitive Practice (Stage One Implementation)	DEF.0001.0003.0159	
ADF Families Research (2019)	DEF.1197.0004.0203	
Commanders and Managers Guide to Responding to DFV	DEF.1024.0002.0001	
Preventing Suicide in the U.S. Military: Recommendations from the Suicide Prevention and Response Independent Review Committee	STU.0010.0001.0283	Organisational Instability Caused by Frequent Moves; page 37.
Analysis of IGADF Inquiry Reports regarding ADF member suicides (June 2016-June 2022)	DEF.1063.0001.0027	SSIM ADFHQ Assurance Check Report.
	DEF.1043.0001.0034	Most common factors relevant to 57 deaths by suicide: <ul style="list-style-type: none"> a. Mental health issues - 35 deaths (61%) b. Relationship breakdown - 28 deaths (49%) c. Mental health issues <i>and</i> relationship breakdown - 18 deaths (32%) d. Chronic pain, injury or illness - 11 deaths (19%) e. Alcohol - 10 deaths (18%) f. Concerns about ADF members' career - 9 deaths (16%)

Questions by Counsel and Commissioners:

Witness: Major General Wade Stothart DSC AM CSC		
Parties	Question	Comments
Gabriella Rubagottih	What is DMFS going to be doing moving forward? What do they need more emphasis on?	<p>We need to be focusing further on stressors and assist to assimilate families into communities; strengthen transition; education and tuition opportunities; shifting our focus to revise and review to see if we have the right opportunities, right delivery, right response, at the right time. We need to constantly assess our progress and further emphasise</p> <p>We need further emphasis on feedback and strategic view and delivery outcomes.</p> <p>Survey: wellbeing factors and targets to meet - recently expanded our partner employment connection programme has been expanded in regional locations. Impacts not yet felt.</p>
	Are there gaps in your crisis management and delivery service response?	<p>We could always become better - all-encompassing - where families have reached crisis. Responses need to be multi-factored with time to remedy the situation. Model of early prevention and intervention, with long-term support. Long-term responses needs to focus on bereavement and postings.</p> <p>Focus on next-of-kin support services, and aiming to provide support between spouse and bereaved spouse. Looking at ways to deal with that due to inherent complexities.</p>
	What would DMFS benefit from?	<p>Our systems would benefit from identifying risks and mitigating those risks. A more formal and view of risk for individuals and their families - for a number of factors - especially multiple deployments - would be useful.</p>
	What is Defence and DMFS doing to address child care concerns?	<p>At the strategic level, we run a childcare providing contracted services and guaranteed or priority-placement programmes for ADF personnel. Reviews need to be undertaken frequently to understand where we are and are not meeting family's needs.</p>
	Why are statistics showing that there's 1,700 children still on wait lists?	<p>Those statistics may not fully comprehend the way in which childcare is sought. Our demand, overall, exceeds our supply.</p>
	What is DMFS doing to address DFV?	<p>We have an existing strategy to prevent, respond and manage DFV and have a Commanders and Managers Guide to aid us address and monitor DFV. We have a Draft in the final stages for re-issue and a Draft to further address other complex areas of DFV from both a prevention and educational focus; and a response lense.</p> <p>The National Action Plan to prevent DFV acknowledges the Defence Community may be more at risk by the nature of isolating families from normal support networks; dependents on one person; risks and consequences of reporting DFV. We are concerned about it and updating our strategy and Action Plan - attempting to reduce the impacts and rate of DFV. We accept it is also a specific problem but a community problem; it requires an organisational - an active organisational - response.</p>
	What supports are available to families who have experienced DFV from ADF members?	<p>The Commonwealth will cover the expenses of removal; however - currently, the family are entitled to remain within the house for a period of time with extensions requested. We see that frequently, however, up to five nights, if they are at imminent risk, they [the family] can be placed in a SafeHouse, with aids to find appropriate accommodation.</p>
What do you need to do better?	<p>We need to better define 'family' and 'families'; we need greater presence at graduations and march out parades so recruits and families know where to lean to for support.</p>	
Commissioner Brown	Comment	<p>I do not feel confident about the changes you have spoken about Major General Stoddart - it has been 37 years since the Hamilton Report however, the issues identified in that Report have still not been resolved.</p> <p>Is there going to be a commitment to doing it?</p> <p>- Response by Major General: We need resources - we cannot quantify the amount of resources provided; many of these things are underway. They are not resourced enough to be implemented effectively or holistically, with connections lacking. I cannot answer the question of how much more resources we require - it isn't just AMFS. We need a programme approach to be getting underway.</p>
Commissioner Brown	Is there another way of looking at this instead of in a Defence personnel member? We understand the employment relationship but can we look at it differently to consider the families involved?	No comment.

Commissioner Douglas	Do you have any statistics to determine difference of breakdown between ADF and non-ADF families?	No.
Commissioner Kaldas	Is there going to be an improvement to minimise postings and relocations?	There is a scope to review and reduce geographical location: there is a difference between posting and relocation; we need to look at the drivers of relocation requirements; capability or career development - but also have a concerted effort to provide geographic stability for a long-period of time.

Witness: Aspasia Iosifidis

Parties	Question	Comments
Gabriella Rubagotti	What supports are offered pre-deployment?	Prior to deployment, we provide pre-deployment briefings. We contact and negotiate the spouse with contact - typically fortnightly. We often hold events where families come together and maintain connections with other Serving Families. We aim to maintain contact with the team on deployment. On return, Units request decompression support. Update PMKeys to ensure relevant information is updated regularly.
	What is the nature of services provided to children under ten - and also services provided to adolescents?	DMFS typically works with parents to identify and meet the needs of their children; whom know their needs best. We do not provide clinical care to children however, do work with families to refer and identify the best placements possible to ensure that family and child is attended to. DMFS also provides psycho-education programmes. Formerly, KidSMART - with the aim to assist children to develop resilience and strategies aligned with Service Life requirements, including absence and mobility. We also work with schools to help them understand the requirements and needs of ADF children; and the complex issues they may face in relation to mobility and absence. 656 users; 165 schools; Schools are becoming interested in understanding ADF children, their challenges and implement Liaison Officers to work with ADF children.
	Where do you see gaps in service?	Entitlements sit with the Member and not the family - especially where they [the family] feel they have supported the Member long term. In instances of DFV, it can be a confronting and disempowering position - with final removal and not requiring the families to go back to the Member, would provide greater strength and time to find community supports.
	Broadly, what improvements do you need to see?	DMFS always needs more people; resources - to be able to work more with preventative supports. We rely on other services to do community connections and we do not have the opportunity to immerse ourselves within the community and offer more. I would like to see further opportunities for counselling, and then externally refer if DMFS does not have the capability to offer support. We need further training, more social workers and a combination of everything. Training improved. We need to work with ESOs and collaborate with other organisations (such as OpenArms) which may be useful to spouses and families.
	How do you engaged with parents?	We don't have direct contact with parents - they may opt-in to receive assistance, and offer supports and put them in touch with other services.
	Do you have anything to further assist?	Community consultations across the Sydney-region over the coming months to determine how we are working with families, what we could do better, what we're doing well.
Commissioner Kaldas	What is the no-wrong door policy?	There's always a safety assessment that comes with that and recommendations that the helpline and caller agree to. We are able to identify who the call needs to go to and we make efforts to allocate efficiently and appropriately. We ensure that all people receive the help they require.

Witness: Rachel Baker

Parties	Question	Comments
Gabriella Rubagotti	What preventative approaches are taken pre-deployment - particularly those undergoing multiple deployments?	Through pre-deployment or post-return briefs, we don't have any preventative approaches. We have mentors, chaplains and family support networks and programmes are a combination of approaches to minimise accumulated impacts on multiple deployments. There is the approach taken on an individual basis to understand the nature of the family cycle and unit, deployment and tasks undertaken whilst away. It is reliant on the family member or ADF personnel to reach out. The limitations of what we offer, is reliant on knowledge or word-of-mouth about us and the services we offer, or Command requesting support.
	How are services found in remote and rural communities?	This can be challenging in our Outposts - Thursday Island, Mt. Isa, Cairns, Townsville - with small provisions available for children. The further remoteness that presents, the diminished range and accessibility available. We will liaise with parents and their children who may be able to utilise Federal, State or Local support services.
	Is there anything that DMFS could benefit from?	Yes, especially in the regions, if our scope of practice was extended or utilised based on what support was provided, or what could be provided through to being responsive, and properly resourced.