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| **PURPOSE OF SURVEY**This survey has been designed as part of this year’s South Australian Defence Industry Leadership Program (“**SADILP**”). A major assessment component of this year’s SADILP is the research and presentation of a concept paper. The question that our group has been tasked with is: * *“Contemporary returning veterans are presenting with significant ‘emotional scars’ that, in previous generations, were undiagnosed and ignored. Discuss this issue and propose ways that society, and more importantly industry, can play a part in their rehabilitation to the benefit of all”.*

The purpose of this survey is to identify which areas relating to the awareness and treatment of mental health issues are of the greatest concern to Australian Defence Force (“**ADF**”) personnel and veterans. NB: For the purposes of this survey ‘Veteran’ is intended to mean a person who has served in the ADF.**INSTRUCTIONS FOR COMPLETION AND RETURN**We would be grateful if you could complete the survey either by printing off and marking the most relevant answer with a cross (X) in pen or pencil or by saving the survey as a new word document and inserting a cross (X) in the most relevant answer.**Kindly return the survey by Friday 4 October2013 using any of the following options.**By post: To 336 Glen Osmond Road, Myrtle Bank SA 5064 marked attention Brigid Emmett.By fax: (08) 8338 1431 marked attention Brigid EmmettBy email: bemmett@roseybatt.comIf you have any queries please contact Brigid Emmett on 0409 697 783 |
| Age:Gender:Number of years service with the ADF:Area/country of deployment: |
| **N0.** | **QUESTION** | **STRONGLY AGREE** | **SOMEWHAT AGREE** | **NOT APPLICABLE** | **SOMEWHAT DISAGREE** | **STRONGLY DISAGREE** |
|  | It's easy for veterans to gain support from defence health practitioners to treat emotional effects developed from ADF service, even many years after a traumatic event. |  |  |  |  |  |
|  | Today, the ADF recognises that more support services are required to treat emotional effects and is providing effective strategies. |  |  |  |  |  |
|  | It is easy to obtain help at any time within the ADF to address emotional effects without fear of impacting on ability to be promoted. |  |  |  |  |  |
|  | The ADF provides satisfactory services to treat any developed or exacerbated emotional effects. |  |  |  |  |  |
|  | Serving defence personnel (past or present) are typically treated within two weeks of a traumatic incidence to address mental health issues such as anxiety, depression or PTSD.  |  |  |  |  |  |
|  | There is no stigma associated with emotional effects of trauma within the ADF. |  |  |  |  |  |
|  | Are ADF personnel trained to recognise behaviours that may indicate mental health issues in self and in others? |  |  |  |  |  |
|  | There is sufficient discussion within elements of the ADF for recognising and approaching colleagues who display mental health effects. |  |  |  |  |  |
|  | Families (wife’s, partners, de-facto, and children) of serving personnel are involved in the treatment plan to treat emotional effects. |  |  |  |  |  |
|  | The Veteran Mental Health Strategy adopted by the Department of Veteran’s Affairs satisfactorily addresses the needs of the ADF service personnel. |  |  |  |  |  |
|  | Civilian services to treat mental health effects are adequate to treat ADF personnel. |  |  |  |  |  |
|  | Veterans leaving the ADF are respected and emotionally accommodated within private industry. |  |  |  |  |  |
|  | The ADF has learned lessons from past generations of veterans coping and recovering from emotional effects and are adapting these lessons to the treatment of contemporary veterans. |  |  |  |  |  |
|  | Recovery plans for treatment of trauma and post traumatic stress are fully supported whilst serving within the ADF. |  |  |  |  |  |
|  | I received pre-deployment professional counselling that prepared me mentally for my deployment  |  |  |  |  |  |
|  | I received the professional mental health support I sought during my deployment(s) |  |  |  |  |  |
|  | I receivedfollow up support on return from my deployment |  |  |  |  |  |
|  | My family received effective counselling and professional support during my deployment. |  |  |  |  |  |
|  | I believe the pre-deployment support provided to me was adequate |  |  |  |  |  |
|  | I believe the post-deployment support provided to me was adequate. |  |  |  |  |  |
|  | I have sought additional counselling / support from private sector providers post deployment  |  |  |  |  |  |
|  | My ongoing post deployment stress has directly affected my family. |  |  |  |  |  |
|  | I am seeking ongoing support for post-traumatic stress after leaving the military |  |  |  |  |  |
|  | My civilian employer has provided tailored support to enable my return to the civilian work force |  |  |  |  |  |
|  | The old-age attitude to 'harden up with a cup of cement' is still used today by senior staff within the ADF. |  |  |  |  |  |
|  | It is obvious to me that the ADF gives adequate consideration to the emotional wellbeing of ADF personnel prior to deployment. |  |  |  |  |  |
|  | The importance to maintain Operational Readiness is causing contemporary service personnel to self diagnose and discuss mental health effects privately. |  |  |  |  |  |
|  | (if relevant) My own Post-traumatic stress diagnosis was not confirmed until many weeks after the events that triggered my condition.  |  |  |  |  |  |
|  | (If relevant) My personal experience in the process of treatment delivered by the Department of Veterans' Affairs is complex and contributes to ongoing stress and anxiety for myself and my family. |  |  |  |  |  |
|  | I believe there is still work to be done by the ADF and Veterans Affairs when it comes to dealing with mental health issues. |  |  |  |  |  |
|  | I believe that many serving veterans don't feel they can speak up regarding mental health issues and if they do, they fear being disciplined by their ADF leaders. |  |  |  |  |  |
|  | I believe serving ADF personnel have a duty to report to the appropriate ADF medical practitioner if they are suffering mental health problems. . |  |  |  |  |  |
|  | Many serving ADF personnel do not seek professional help for mental illness for a variety of reasons. I believe men especially have a fear of the stigma associated with seeking help for mental health issues.  |  |  |  |  |  |
|  | There is a lack of awareness in the broader community of PTSD in serving ADF personnel and veterans.  |  |  |  |  |  |
|  | It should be compulsory for every member of the ADF to submit to a psychological assessment by an appropriate medical practitioner at least every 2 years. |  |  |  |  |  |
|  | It is common for veterans to feel let down or isolated upon return from deployment or discharge from the ADF. |  |  |  |  |  |
|  | The training available to protect soldiers from mental trauma before they are even sent to war is inadequate. |  |  |  |  |  |
|  | The screening and evaluation process to determine if a soldier is suffering from PTSD is adequate. |  |  |  |  |  |
|  | The availability of the treatment for PTSD and the appropriateness of PTSD programs in Australia needs urgent review. |  |  |  |  |  |
|  | Contemporary veterans have different psychological treatment needs compared with veterans aged 50 and over. |  |  |  |  |  |
|  | Since I have returned from deployment I find that I fight with my partner more than before I was deployed. |  |  |  |  |  |
|  | (if relevant) As a child of a parent who has served in the ADF I felt that my parent’s experience in the ADF has had a negative emotional impact on me. |  |  |  |  |  |
|  | The ADF should encourage my family to be more involved in my emotional rehabilitation. |  |  |  |  |  |
|  | The community outside of the ADF should be better educated about the traumas that deployed ADF personnel face. |  |  |  |  |  |
|  | If the community outside of the ADF were made more aware of the traumas deployed ADF personnel face it would be easier for returning veterans to fit back into civilian life. |  |  |  |  |  |
|  | I do not want civilians to know about the traumatic experiences I have had in the ADF. |  |  |  |  |  |
|  | (if relevant) My kids sometimes find it difficult to approach me because they do not know what mood I will be in. |  |  |  |  |  |
|  | I avoid talking to my partner about my traumatic experiences in the ADF. |  |  |  |  |  |
|  | If I talk to anyone about my traumatic experiences in the ADF it is other ADF personnel who have gone through the same thing. |  |  |  |  |  |
|  | I wish that my civilian employer understood more about my experience in the ADF. |  |  |  |  |  |
|  | Any Governmental funding/concession/pension that I receive due to my involvement as ADF personnel is adequate.  |  |  |  |  |  |
| If you had to identify just one way that society and/or the defence industry could play a part in the rehabilitation of contemporary returning veterans what would that be? |

Thank you for taking the time to complete this survey, your input is greatly appreciated.

Derek Reuther – Lockheed Martin

Jon Icimsoy – Australian Aerospace

James Black – Elders

Peter DiMaria – JH Williams

Brigid Emmett – Rosey Batt & Associates Legal & Business Consultants