



## A snapshot of Australian Veterans' Mental Health Research: Important insights for clinical practice

This document answers the most common questions that remained outstanding at the webinar's conclusion.

### Frequently Asked Questions

#### 1. What are the evidence-based treatments available to veterans with posttraumatic stress disorder (PTSD)? Why are they most effective?

Trauma-focussed cognitive behavioural therapy (TF-CBT), including exposure components and eye movement desensitisation and reprocessing (EMDR), is the most effective treatment for veterans with PTSD.

The Department of Veterans' Affairs (DVA) funds a range of treatment services, including in-patient trauma recovery group programs in hospitals across Australia. These programs are required to meet DVA's National Accreditation Standards for Trauma Recovery Programs. You can find a hospital provider or further information at: <https://at-ease.dva.gov.au/professionals/client-resources/trauma-recovery-programs>

In addition, individual therapy can be provided through Open Arms (formerly known as the Veterans and Veterans Families Counselling Service) or private psychologists who accept payment by DVA Gold or White cards. A specific item number is available for PTSD therapy, allowing longer sessions if necessary.

PSTD Guidelines are available here: <https://www.phoenixaustralia.org/resources/ptsd-guidelines/>

International Society for Traumatic Stress Studies Guidelines are available here: <https://www.istss.org/treating-trauma/new-istss-guidelines.aspx>

#### 2. What are the barriers that stop veterans seeking help? What are evidence-based strategies for overcoming these barriers?

There are a number of barriers that may prevent a veteran seeking help or treatment. Typical barriers might include the stigma associated with mental illness, a lack of insight into their emotional state, use of alcohol or other drugs to try and reduce distress and avoidance often associated with mental health conditions. There may be distrust of DVA funded treatment and concerns about the sharing of confidential information.

A holistic assessment with a focus on specific goals and objectives and how these might be achieved could provide leverage for treatment and/or engagement in therapy. Motivational Interviewing is a

useful and valid method of overcoming resistance (traditionally in the drug and alcohol field) that may enable this engagement.

### **3. How can veterans be supported as they transition to civilian life?**

Each year around 5500 people leave the Australian Defence Force (ADF). Many ADF members navigate transition successfully and require little or no support.

A joint Transition Taskforce established by the Department of Defence, the Commonwealth Superannuation Corporation and the Department of Veterans' Affairs in 2017, engaged with approximately 600 transitioning or transitioned ADF members and their families. The Taskforce identified barriers and enablers to an effective transition and the insights are now being used to drive further changes to transition policy, services and support.

The Taskforce found that an effective transition can be enabled by ensuring members:

- Have financial certainty
- Have access to necessary professional health care
- Have access to, and can understand, information about the transition process, including what to expect, what help and support is available and how they access the support
- Are psychologically prepared for the change
- Are provided transition information and assistance for their family
- Remain connected to peers and establish new community connections
- Experience fast, easy and simple access to services, assistance and support from government.

The Taskforce's report is available here: <https://www.dva.gov.au/consultation-and-grants/transition-taskforce>

Through engagement with transitioning and recently transitioned ADF members, it was found that one of the best types of support for veterans is the economic independence that comes with a job.

Evidence shows that the majority of transitioned members are employed or meaningfully engaged within a few months of discharge. Greater support is required for transitioning ADF members who face complex social, financial, employment and wellbeing challenges during this period of change.

Regardless of the reasons for them leaving the ADF, members who cease full-time service are offered a range of support and services to assist them through the transition from the ADF, prior to discharge and into the future. The aim is to support ADF members and veterans in their life journey of serving well, living well and ageing well.

### **4. Is Bipolar Disorder common amongst veterans?**

The [Mental Health Prevalence Report](#) was developed as part of the Transition and Wellbeing Research Program. This report investigated the prevalence of 12 month and lifetime mental disorders, trauma exposure, suicide ideation and self-reported mental health symptoms among transitioned ADF members.

The overall estimated rate of affective disorders within the previous 12 months was 23.1%. This represents some 5,755 individuals. The most prevalent affective disorder was depressive episodes. Bipolar affective disorder (which included individuals who had experienced either hypomanic or manic episodes in the previous 12 months) was similar in prevalence, with 9.8% of the transitioned ADF meeting criteria for this disorder in the last 12 months. There is debate as to whether this reflects actual Bipolar Disorder, or symptoms common in traumatised military personnel that may be similar to those associated with Bipolar Disorder.

The report and key findings are available here: <https://www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/mental-health-prevalence-report>

## 5. How can professionals engage with other professionals that treat veterans?

There are a number of opportunities for health professionals to engage with other health professions to discuss veteran health. The Mental Health Professionals' Network has established a number of networks across Australia where practitioners who have a shared interest in veterans' mental health meet on a regular basis. Practitioners meet four times a year in their local community, those attending meetings include GPs, psychiatrists, psychologists, mental health nurses, social workers, occupational therapists and other associated mental health practitioners.

More information about the networks or to get involved please see link below:

<https://www.mhpn.org.au/NewsArticle/617/Veteran-Focussed-Networks#.XA3EA-IlKUk>

In addition, the Centenary of Anzac Centre, a Phoenix Australia initiative funded by the Department of Veterans' Affairs, provides valuable research and support in veteran mental health and wellbeing. The Centre has two arms:

- The Practitioner Support Service is a free, nation-wide service providing expert multidisciplinary support and guidance to health practitioners, support organisations, and others working with Australian veterans with mental health problems. This service provides access to free consultations with veteran mental health experts, online practitioner resources, and professional development and networking opportunities for those supporting veterans. To access, phone 1800 VET 777 or visit [anzacentre.org.au](http://anzacentre.org.au).
- The Treatment Research Collaboration aims to improve mental health outcomes in veterans by conducting and facilitating innovative clinical intervention research into PTSD and other complex military mental health issues. It will improve understanding of these problems and test innovative psychological, social, and neurobiological treatments and delivery methods. It will include a particular focus on early intervention to reduce the cumulative impact of PTSD and related disorders.

This document has been developed to assist health professionals, including medical practitioners, nurses, psychologists, social workers, counsellors and rehabilitation service providers, who care for veterans. The assessment and treatment of mental health problems requires the consideration of an individual's particular circumstances by a qualified health professional, practising within the limits of their competence and accepted standards at the time for their profession.

This document is not a substitute for such professional competence and expert opinion, and should not be used to diagnose or prescribe treatment for any mental health problem. The Australian Government does not accept liability for any injury, illness, damage or loss incurred by any person arising from the use of, or reliance on, the information and advice that is provided in this document.



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This document highlights some additional resources related to this topic.

#### Studies

##### Transition and Wellbeing Research Programme

The Transition and Wellbeing Research Programme (TWRP) is the most comprehensive study undertaken in Australia that examines the impact of military service on the mental, physical and social health of serving and ex-serving Australian Defence Force (ADF) members including those who have been deployed in contemporary conflicts, and their families.

This research builds on the findings of the world-leading research conducted with current serving members of the ADF in the 2010 Military Health Outcomes Program. TWRP comprises three studies: the Mental Health and Wellbeing Transition Study (five reports and two papers), Impact of Combat Study and the Family Wellbeing Study, each comprising one publication.

The first released reports and studies are:

[Mental Health Prevalence Report](#) explores the prevalence of mental disorders among ADF members who have transitioned from Regular ADF service between 2010 and 2014; and examines self-reported mental health status of Transitioned ADF and the 2015 Regular ADF.

[Pathways to Care Report](#) assesses pathways to care for Transitioned ADF and the 2015 Regular ADF, including those with a probable 30-day mental disorder.

[Physical Health Status Report](#) examines the physical health status of Transitioned ADF and the 2015 Regular ADF.

[Family Wellbeing Study](#) investigates the impact of ADF service on the health and wellbeing of the families of Transitioned ADF and the 2015 Regular ADF.

The below are to be released:

*Technology Use and Wellbeing* investigates technology and its utility for health and mental health programmes including implications for future health service delivery.

*Mental Health Changes Over Time: A Longitudinal Perspective* conducts predictive modelling of the trajectory of mental health symptoms/disorders of Transitioned ADF and the 2015 Regular ADF, removing the need to rely on estimated rates.

*The Health and Wellbeing of ADF Reservists* paper investigates the mental health and wellbeing of currently serving 2015 Ab-initio Reservists.

*Psychosocial Predictors of Health* paper examines the factors that contribute to the wellbeing of Transitioned ADF and the 2015 Regular ADF.

*Impact of Combat Study* follows up on the mental, physical and neurocognitive health and wellbeing of participants who deployed to the Middle East Area of Operations between 2010 and 2012.

*Transition and Wellbeing Research Programme Key Findings Report* summarises the key findings of the Programme.

Further information is available at: [dva.gov.au/health-and-wellbeing/](https://dva.gov.au/health-and-wellbeing/)

### **Incidence of suicide in serving and ex-serving Australian Defence Force personnel: detailed analysis 2001–2015**

The Government has released a detailed analysis on the incidence of suicide among serving and ex-serving ADF personnel from 2001–2015. The report can be found on the Australian Institute of Health and Welfare website. The Government will continue to maintain a record of ex-serving ADF member suicide deaths and will annually update incidence rates of suicide among serving and ex-serving ADF members as new cause of death data becomes available.

[aihw.gov.au/reports](https://aihw.gov.au/reports)

### **Coordinated Veterans' Care (CVC) Mental Health Pilot**

The CVC Mental Health Pilot aims to improve the mental health support available to veterans in rural and regional areas. The CVC Mental Health Pilot will target those veterans diagnosed with mild-to-moderate anxiety or depression and who have a combined co-morbid physical health condition requiring pain management.

[dva.gov.au/providers/provider-programs](https://dva.gov.au/providers/provider-programs)

### **Veteran Suicide Prevention Trial**

The pilot will provide support to veterans and former ADF members who have experienced a suicidal crisis and required hospitalisation. A previous suicide attempt is a known risk factor for further suicide attempts. The time immediately after discharge from hospital can be a particularly vulnerable period. This pilot will connect individuals with support following hospitalisation and continue this support for up to three months following discharge from hospital.

[dva.gov.au/health-and-wellbeing/mental-health](https://dva.gov.au/health-and-wellbeing/mental-health)

### **Current military specific research trials – Open Arms collaborations**

Open Arms formerly Veterans and Veterans Families Counselling Service (VVCS), is currently collaborating with Phoenix Australia - Centre for Posttraumatic Mental Health (Phoenix Australia) and a range of other organisations on military specific research trials:

### **Stepping Out – Attention Reset (SOAR)**

Open Arms will soon commence a trial of an innovative attention control training program – using computer-based attention control training. Open Arms is working with Phoenix Australia and Tel Aviv University to conduct a randomised control trial to evaluate the efficacy of attention control training to prevent and reduce existing anxiety, and traumatic stress symptoms in this high-risk cohort.

[openarms.gov.au/professionals/research-and-collaboration/stepping-out-attention-reset-trial-soar](https://openarms.gov.au/professionals/research-and-collaboration/stepping-out-attention-reset-trial-soar)

### **Rapid Exposure Support for Trauma Recovery (RESTORE)**

In partnership with Phoenix Australia, Department of Defence (DoD) and Department of Veterans' Affairs (DVA), Open Arms is seeking to confirm that intensive exposure therapy for Post-Traumatic Stress Disorder (PTSD) is as effective as prolonged exposure therapy.

[openarms.gov.au/professionals/research-and-collaboration/rapid-exposure-supporting-trauma-recovery-restore-trial](https://openarms.gov.au/professionals/research-and-collaboration/rapid-exposure-supporting-trauma-recovery-restore-trial)

### **Moral Injury Outcome Scale – Phase One**

In partnership with the DoD and Phoenix Australia, Open Arms is sponsoring a study to develop a new moral injury outcomes scale to potentially be used by Open Arms and the ADF as part of routine mental health assessment and treatment, and to assess the outcomes of care delivered to address moral injury.

[openarms.gov.au/professionals/research-and-collaboration/development-moral-injury-scale](https://openarms.gov.au/professionals/research-and-collaboration/development-moral-injury-scale)

### **Synergy Technology Trial (Sydney region)**

In partnership with the Department of Health and Innowell Pty Ltd, Open Arms is leading a trial to assess whether an internet-based platform – 'Synergy Online System' – will assist clients to manage their mental health through self-referral to Open Arms by bringing together integrated and interoperable telephone applications, e-mental health tools and other resources.

[openarms.gov.au/professionals/research-and-collaboration/synergy-technology-trial-sydney-region](https://openarms.gov.au/professionals/research-and-collaboration/synergy-technology-trial-sydney-region)

### **Community Coordination Pilot (North Queensland region)**

Open Arms is trialling a program which involves coordination of mental health care for clients who need additional support.

[openarms.gov.au/professionals/research-and-collaboration/community-coordination-pilot-north-queensland-region](https://openarms.gov.au/professionals/research-and-collaboration/community-coordination-pilot-north-queensland-region)



### **Townsville Suicide Prevention Pilot (Operation COMPASS)**

Open Arms is supporting a project run by the [North Queensland Primary Health Network](https://primaryhealth.com.au/ex-adf-suicide-prevention-townsville/), which aims to reduce the incidence of suicide among ex-ADF members and their families.

[primaryhealth.com.au/ex-adf-suicide-prevention-townsville/](https://primaryhealth.com.au/ex-adf-suicide-prevention-townsville/)

### **Operation Life Suicide Prevention Pilot Workshop**

In collaboration with DVA, Uniting Care Community and Australian Health Care Associates, Open Arms is assisting the research and design of a suicide prevention program for the ex-service community.

[openarms.gov.au/professionals/research-and-collaboration/operation-life-suicide-prevention-pilot-workshop](https://openarms.gov.au/professionals/research-and-collaboration/operation-life-suicide-prevention-pilot-workshop)

## **Group programs**

### **Operation Life - Group Programs**

Open Arms delivers Operation Life Applied Suicide Intervention Skills Training (ASIST). The workshops raise awareness on suicide prevention and prepare individuals to work with people at risk to increase their immediate safety and to get further help. ASIST workshops are free for anyone who is concerned about family, friends or colleagues in the veteran community. This program is offered in addition to the Operation Life website and associated mobile App (outlined in Other related online resources).

For information on Open Arms Group Program dates and locations, please visit: [openarms.gov.au/get-support](https://openarms.gov.au/get-support)

## **Treatment services for veterans**

### **Non-Liability Health Care**

DVA can pay for treatment for mental health conditions without the need for the conditions to be accepted as related to service. This is known as non-liability health care (NLHC) and anyone who has served at least one day in the full-time ADF or reservists with certain service experience can access free treatment for any mental health condition.

Veterans only need to call DVA on free call 1800 555 254 or email [nlhc@dva.gov.au](mailto:nlhc@dva.gov.au) to apply.

[dva.gov.au/factsheet](https://dva.gov.au/factsheet)

### **Open Arms**

Open Arms provides free, confidential, nation-wide counselling and support to current and former ADF personnel and their families. Open Arms has an integrated, 24/7 service delivery system, that includes counselling (individual, couple and family), group programs, case management, and after-hours telephone support. If you have a client you consider may benefit from support from Open Arms, please call 1800 011 046 to discuss.

[openarms.gov.au/get-support](https://openarms.gov.au/get-support)

## **ADF Post-discharge GP Health Assessment**

All former serving members of the ADF can access a one-off comprehensive health assessment from their GP. This assessment is available to all former serving members of either the permanent or reserve forces and a Medicare rebate is available. A key objective of the assessment is to help GPs identify and diagnose the early onset of physical and/or mental health problems among former serving ADF members.

[at-ease.dva.gov.au/professionals](http://at-ease.dva.gov.au/professionals)

## **DVA Rehabilitation**

Complementary to primary and allied health treatment, DVA provides whole-of-person rehabilitation to help clients adapt to and recover from injuries or illnesses relating to their ADF service.

Rehabilitation can assist individuals coordinate their medical treatment, assist individuals maximise their independent functioning and quality of life, and return to work when they are ready.

Veterans may be eligible for rehabilitation assistance through DVA if they are incapacitated for service or work, or have an impairment, as a result of a service injury or disease.

Under a psychosocial rehabilitation plan, veterans can access brief intervention counselling to assist them to manage their pain more effectively. [Section 6.5.1 of the CLIK Rehabilitation library](#) describes more about the assistance available.

Further information about DVA rehabilitation is available on the DVA website via

[dva.gov.au/health-and-wellbeing](http://dva.gov.au/health-and-wellbeing)

## **Alcohol and Other Substance Use Disorders – Community-Based Treatment Services**

DVA funds community-based alcohol and other substance use disorder treatment at over 20 locations across the country. A list of community-based treatment providers can be accessed via:

[at-ease.dva.gov.au/professionals](http://at-ease.dva.gov.au/professionals)

These treatment services are available under the NLHC arrangements to anyone who has served at least one day in the full-time ADF or reservists with certain service experience.

Further information on this program can be found at [dva.gov.au/factsheet](http://dva.gov.au/factsheet)

## **Additional family support for veterans and their families**

Additional family support is available to veterans who have returned from recent conflicts overseas and their families, including certain widowed partners of veterans. To receive this additional support, eligibility requirements must be met. Further information can be found at: [Factsheet – Family Support Package for Veterans and their Families](#) or [Family Support for Widow\(er\)s](#).

## **Trauma Recovery Programs: Treatment for veterans and former serving members**

DVA funds Trauma Recovery Programs – PTSD in hospitals across Australia. These programs are required to meet DVA's National Accreditation Standards for Trauma Recovery Programs – PTSD (2015). These standards provide a framework for ensuring that hospitals provide high quality evidenced based treatment for veterans and former serving members of the ADF who have PTSD.



Further information is available via [at-ease.dva.gov.au/professionals](https://at-ease.dva.gov.au/professionals)

## Other group programs offered by Open Arms include:

### *Understanding PTSD for carers and Families*

The Understanding PTSD for carers and Families workshop is an educational program which aims to provide partners, carers and families with a knowledge and understanding of PTSD. It focuses on the impact of PTSD on individuals and relationships, promotion of health and wellbeing in carers and outlines resources and services available.

### *Stepping Out*

The *Stepping Out group program* is a 2-day program developed for ADF members and their partners who are about to, or have recently separated from the military. The program helps participants to examine their transition process and what it means to go from military life to civilian life as an individual and as a family – both in practical and emotional terms.

### *Residential Lifestyle Management Program*

The *Residential Lifestyle Management Program* is designed for veterans and their partners who want to improve their wellbeing and enhance their relationship. It provides an opportunity to take time out from the daily routine and focus on a range of lifestyle subjects, such as stress management, communication skills and relationship building.

For further information visit: [Open Arms/Group Programs](https://at-ease.dva.gov.au/open-arms)

## Other related online resources

### **At Ease Professional website**

DVA's platform for mental health professionals, At Ease is a one-stop shop for information, professional development opportunities, referral options, clinical resources, educational resources and the latest in international research.

[at-ease.dva.gov.au/professionals](https://at-ease.dva.gov.au/professionals)

### **At Ease portal**

At Ease can help veterans, ADF personnel and family members identify the symptoms of poor mental health, find self-help tools and advice, access professional support and learn about treatment options. Families can find advice on how to keep their family healthy while caring for someone with a mental health condition.

[at-ease.dva.gov.au/](https://at-ease.dva.gov.au/)

### **Operation Life – Website**

The Operation Life website targets people experiencing suicidal thoughts or people wanting to learn how to mitigate suicide. The website is complemented by a mobile app that provides safety planning capability and cognitive behavioural therapy to reshape their thoughts. It also supports quick access to services and their clinical support team – see below.

[at-ease.dva.gov.au/suicideprevention](https://at-ease.dva.gov.au/suicideprevention)

The Clinician's Guide is available for Android or iOS users. More information about the app is available at: [at-ease.dva.gov.au/veterans](https://at-ease.dva.gov.au/veterans)

### **Case Formulation eLearning**

Case Formulation assists front line therapists to make better sense of complex presentations and to design and plan treatment in collaboration with their patient. This eLearning program assists clinicians to identify and focus on the presenting problems that are likely to have the most impact on recovery and help set priorities for treatment.

[at-ease.dva.gov.au/professionals/professional-development](https://at-ease.dva.gov.au/professionals/professional-development)

### **Working with Veterans with Mental Health Problems**

This one-hour eLearning program assists GPs to better understand common veteran mental health conditions, how military service can affect the mental health of serving and ex-serving personnel and referral pathways for DVA clients.

[at-ease.dva.gov.au/professionals/professional-development](https://at-ease.dva.gov.au/professionals/professional-development)

### **High Res (High Resilience) mobile app**

The High Res suite includes a website and app to help serving and ex-serving ADF personnel and their families manage stress and build resilience.

[highres.dva.gov.au](https://highres.dva.gov.au)

### **The Right Mix website**

The Right Mix website helps serving and ex-serving ADF members better manage their alcohol consumption with information, strategies and online tools.

[therightmix.gov.au](https://therightmix.gov.au)

### **ON TRACK with the Right Mix app**

The ON TRACK app helps serving and ex-serving ADF members keep track of their alcohol consumption in real time and find out what it is costing them financially and physically.

[at-ease.dva.gov.au/on-track-app](https://at-ease.dva.gov.au/on-track-app)

### **PTSD Coach Australia mobile app**

The PTSD Coach Australia app can help you learn about and manage symptoms that commonly occur following exposure to trauma. It is free to download from the App Store and Google Play.

[at-ease.dva.gov.au/veterans/ptsd-coach](https://at-ease.dva.gov.au/veterans/ptsd-coach)

### **Evidence Compass**

The Evidence Compass is a repository for literature reviews on issues of importance to the veteran community. The Evidence Compass is designed to be used by researchers, policy-makers, and the broader community. The literature reviews available on this website use the Rapid Evidence Assessment methodology.

[dva.gov.au/health-and-wellbeing](http://dva.gov.au/health-and-wellbeing)

### **Australian Society for Psychological Medicine**

The Australian Society for Psychological Medicine, offers training in psychological medicine skills for GPs.

[aspm.org.au](http://aspm.org.au)

### **DVA Provider News**

Subscribe to [DVA Provider News](#) to receive the latest updates and information for working with DVA patients and clients.

### **Centenary of Anzac Centre**

The Centenary of Anzac Centre comprises a Treatment Research Collaboration and a Practitioner Support Service, to ensure better treatments and improved lives for Australia's veterans and military personnel and their families. The Practitioner Support Service includes a free, confidential consultation service for practitioners which can be accessed nationwide via email, telephone or online. Practitioners and organisations can seek expert advice on a range of issues relating to veteran mental health.

[anzaccentre.org.au](http://anzaccentre.org.au)

The Centenary of Anzac Centre is a [Phoenix Australia](#) initiative.

### **US National Center for PTSD (US NCPTSD)**

The US NCPTSD ([www.ptsd.va.gov](http://www.ptsd.va.gov)) has a wide range of valuable clinical and research materials available for free. For research in particular, see "Our Publications" then "Electronic Publications" ([https://www.ptsd.va.gov/publications/electronic\\_pubs.asp](https://www.ptsd.va.gov/publications/electronic_pubs.asp)) where practitioners can subscribe for regular email alerts.

The goal at the National Center for PTSD is to keep all professionals up-to-date with the latest in trauma research and how it can be applied.

- [Clinician's Trauma Update Online \(CTU-Online\)](#)  
Provides summaries of clinically relevant publications in the trauma field. The summaries are sent via email every two months and are presented in brief format with links to the full article, when available.
- [PTSD Research Quarterly \(RQ\)](#)  
Each RQ contains a review article written by guest experts on a specific topic related to PTSD. The current RQ is posted online.
- [PTSD Monthly Update](#)  
The PTSD Monthly Update contains informative articles on PTSD, trauma and related topics. This publication is for all audiences.

### **Subscribe**

The National Center for PTSD can keep you informed with the latest information and new products on trauma and PTSD. [Subscribe](#) to our electronic publications.

## International Society for Traumatic Stress Studies (ISTSS)

ISTSS ([www.istss.org](http://www.istss.org)) is the peak international organisation for clinicians and researchers interested in traumatic stress. Members receive regular email summaries of the latest relevant peer reviewed journal articles.

### Journal alerts

Most peer reviewed journals provide a free email contents page service to alert clinicians and researchers to their latest edition. A particularly useful journal for this topic is Journal of Traumatic Stress. It is published by ISTSS and is free to members, but anyone can [subscribe](#) to the contents email alert (which also allows abstracts to be viewed for free).

## Veteran specific research

### Australian Gulf War Veterans' Health Study (2003)

*Authors: Sim, M., Abramson, M., Forbes, A., Glass, D., Ikin, J., Ittak, P., Kelsall, H., Leder, K., McKenzie, D., McNeil, J., Creamer, M., Fritschi, L.*

The Australian Gulf War Veterans' Health Study investigated whether Australian Defence Force (ADF) personnel who served in the Gulf War (1990 – 91) experienced higher rates of adverse physical and psychological health effects than ADF personnel who had not served in the Gulf War. The study was commissioned by the Department of Veterans' Affairs and was conducted by a collaborative medical research team from the Department of Epidemiology & Preventive Medicine at Monash University, Health Services Australia Ltd, the University of Western Australia and The Australian Centre for Posttraumatic Mental Health at the University of Melbourne. The study was the first comprehensive health study of a group of Australian war veterans involved in a single theatre of war.

Of the 1,873 Australian Gulf War veterans, 1,456 took part in the study, comprising 80.5% of the target population. The major finding of the study was that Gulf War veterans experienced higher rates of psychological disorders than the control group, in the time since the Gulf War. Gulf War veterans were found to be at significantly increased risk for posttraumatic stress disorder (PTSD) though other anxiety disorders, depression and substance use disorders were also common among the cohort.

The published study is available from:

<http://www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/gulf-war-veterans-health-study>

### Australian Gulf War Veterans' Health Study – Follow Up Health Study (2015)

*Authors: Sim, M., Clarke, D., Forbes, A., Glass, D., Gwini, S., Ikin, J., Kelsall, H., McKenzie, D., Wright, B., McFarlane, A., Creamer, M., Horsley, K.*

The Australian Gulf War Veterans' Health Follow Up Study was a longitudinal cohort study that built upon the findings of the 2003 baseline study. As in the 2003 study, the 2015 Follow Up Study aimed to examine the physical, psychological and social health and military-related exposures of ADF veterans who served in the Gulf War as compared to ADF personnel who had not served in the Gulf War. All 1,456

participants of the baseline study were eligible to participate, and 715 Gulf War veterans participated in the Follow Up Study.

The Follow Up Study found Gulf War veterans remained at an increased risk for PTSD, 12-month alcohol disorder and general psychological distress when compared to the comparison group. The difference in risk for these factors between Gulf War veterans and the comparison group widened since the baseline study. The risk of major depression was not significantly different between study groups and both groups were found to be equally resilient.

The published study is available from:

<http://www.dva.gov.au/consultation-and-grants/research-and-development/health-studies/australian-gulf-war-veterans-follow>

### **Mental Health in the Australian Defence Force – 2010 ADF Mental Health Prevalence and Wellbeing Study (2010)**

*Authors: McFarlane, A.C., Hodson, S.E., Van Hooff, M., Davies, C.*

The ADF Mental Health Prevalence and Wellbeing Study was conducted by a collaborative research team comprising representatives from the Centre for Traumatic Stress Studies at the University of Adelaide, the Joint Health Command of the ADF and the Australian Centre for Posttraumatic Mental Health at the University of Melbourne.

The study examined the prevalence rates of the most common mental disorders, the optimal cut-offs for relevant mental health measures, and the impact of occupational stressors. ADF prevalence rates were compared to an Australian sample matched for age, sex and employment. Nearly 49% of ADF current serving members participated in the study between April 2010 and January 2011.

Prevalence of mental disorders was similar to the Australian community sample, but profiles of specific disorders in the ADF varied. The study identified PTSD as the most prevalent anxiety disorder, with ADF males experiencing PTSD at a significantly higher rate than the general community. ADF males also experienced higher rates of affective disorders than the control sample and both ADF males and females experienced 12-month depressive episodes at higher rates than the general community. Alcohol disorders were significantly lower in ADF personnel than the control sample in the 12 months preceding the study.

The published study is available from:

<http://www.defence.gov.au/Health/DMH/Docs/MHPWSReport-FullReport.pdf>

### **Mothers in the Middle East Area of Operations (MEAO) Study (2014)**

*Authors: Lawrence-Wood, E., Jones, L., Hodson, S., Crompvoets, S., McFarlane, A., Neuhaus, S.*

The MEAO Study examined the impacts of deployment on female veterans with dependent children. Using a mixed methods design, the study collected standardised self-reported data and qualitative information from participants. The main finding of the study indicated that while the experience of deployment is particularly challenging for female veterans with dependent children, most participants viewed their deployment as a positive and important element of their service. The resilience, creativity and agency of female veterans was key to successfully navigating the demands of motherhood and deployment.

The published study is available from:

<http://www.dva.gov.au/about-dva/publications/research-and-studies/health-research-publications/mothers-middle-east-area>

### **Vietnam Veterans' Family Study (2014)**

The Vietnam Veterans' Family Study was conducted by a research panel commissioned by DVA. The study comprised a number of complimentary research projects that aimed to determine the effect, if any, that active Vietnam service had on the physical, mental and social wellbeing of the sons and daughters of Australian Vietnam veterans. The study cohort comprised 27,000 participants including Vietnam veterans, their partners and children and a control group of veterans (and their children and partners) who served in the ADF during the Vietnam War era, but were not deployed to Vietnam. The study found the majority of children of Vietnam veterans were in good health. However, children of Vietnam veterans (as compared to children of veterans who were not deployed to Vietnam) were more likely to experience depression, anxiety, PTSD, suicidal thoughts and planning, skin conditions, migraines and sleep disturbances.

The published study is available from:

<http://www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/vietnam-veterans-family-study>

### **Timor-Leste Family Study (2012)**

*Authors: McGuire, A., Runge, C., Cosgrove, L., Bredhauer, K., Anderson, R., Waller, M., Kanesarajah, J., Dobson, A., Nasveld, P.*

The Timor-Leste Family Study was conducted by The University of Queensland, Centre for Military and Veterans' Health and funded by DVA. The study aimed to determine the physical, mental and social health impacts and associated risk and protective factors of deployment to Timor-Leste on the families of service members. The study involved 4,186 participants comprising veterans deployed to Timor-Leste between 1999 - 2010 and their partners as well as a control group of veterans who were not deployed to Timor-Leste (and their partners).

The study found no statistically significant differences were found between the physical, mental or family health of family members of people deployed to Timor-Leste when compared with comparison group family members.

The published study is available from:

<http://www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/timor-leste-family-study>

### **Rwanda Deployment Health Study (2014)**

*Authors: Runge, C., Kanesarajah, J., Loos, C., Waller, M., Nasveld, P.*

The study was commissioned by DVA and conducted by the Centre for Australian Military and Veterans' Health. The aim of the study was to examine the health and compensation history and outcomes of veterans of Rwanda deployments (Operation TAMAR (Troops and Medical Aid Rwanda)). The study sample included 680 veterans of Operation TAMAR. Major findings included: half of participating veterans had an accepted compensation claim, with 31% having a claim or treatment for PTSD; medical personnel had fewer compensation claims and medical presentations than rifle company and support

personnel; claims were mainly lodged around the time of discharge not at incident; the majority accepted 11-15 years after the deployment.

The published study is available from:

<http://www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/rwanda-deployment-health-study>

### **Peacekeepers' Health Study**

*Authors: Hawthorne, G., Korn, S., Creamer, M.*

The Peacekeepers' Health Study examined the long-term effects on mental health status, health service use and quality of life of peacekeeping or peacemaking deployments among Australian veterans. The study involved over 1,000 participants from seven United Nations (UN) peacekeeping missions between 1989 and 2002, who had transitioned out of full-time service in the Australian Defence Force. Major findings included: most peacekeepers reported they were in good, very good or excellent health, though 30% of participants had at least one diagnosable mental health condition.

The published study is available from:

<http://www.dva.gov.au/health-and-wellbeing/research-and-development/health-studies/peacekeepers-health-study>

## **Hospitals providing trauma recovery programs**

The document available from the following web page provides a list of providers delivering Trauma Recovery Programs to veterans.

<https://at-ease.dva.gov.au/professionals/client-resources/trauma-recovery-programs>



## A snapshot of Australian Veterans' Mental Health Research: Important insights for clinical practice

### Research presenters:



#### **Professor David Forbes**

BA (Hons) MA (Clin Psych) PhD

David Forbes is the Director of Phoenix Australia – Centre for Posttraumatic Mental Health and Professor in the Department of Psychiatry,

University of Melbourne.

He has over 20 years' experience in the assessment and treatment of mental health problems in trauma survivors, with a speciality in military and veteran mental health. He led the development of the inaugural 2007 Australian Guidelines for the Treatment of Posttraumatic Stress Disorder (PTSD) and the revision published in 2013 approved by the National Health and Medical Research Council and endorsed by the key health professional colleges. He is also the Vice Chair of the international PTSD Guidelines Committee developed by the International Society for Traumatic Stress Studies (ISTSS).

He has a strong track record in the conduct of research in the assessment and treatment of PTSD and the provision of policy and service development advice to government and agencies responsible for the care of veteran and military personnel and trauma survivors across the community.

Professor Forbes has also a strong track record in the provision of training in evidence-based treatments for PTSD and related disorders in veterans to health and mental health practitioners. This has also included the development of mobile app and online resources for practitioners and the current and ex-serving Defence community.

He has published over 140 scientific papers in the international literature and sits on many Commonwealth government veteran and military policy and scientific advisory panels and academic journal editorial boards.



#### **Professor Alexander C McFarlane AO**

MBBS (Hons), MD, Dip. Psychother, FRANZCP

Professor McFarlane is Professor of Psychiatry and Director of the University of

Adelaide Centre for Traumatic Stress Studies at the University of Adelaide.

He is an international expert in the field of the impact of disasters and posttraumatic stress disorder. He has held the role of Senior Adviser in Psychiatry to the Australian Defence Force, and the Department of Veterans' Affairs. He has also held the rank of Group Captain in the RAAF Specialist Reserve.

Professor McFarlane has been integral in establishing research programs to investigate the physical and mental health of all Australian veterans and serving military personnel who have deployed to the Middle East. He was also the principal investigator of the Defence Health and Wellbeing Survey, which examined the mental health of the entire Australian Defence Force.

Apart from his interest in the care and wellbeing of disaster victims, military personnel and civilian trauma survivors, he has significant experience in the provision of care to emergency service personnel. His research is supported by the Department of Veterans' Affairs and the NHMRC program and partnership grants. He has published over 350 articles and chapters in various refereed journals and has co-edited three books.

In 2011, he received the Officer of the Order of Australia award in recognition of his "outstanding contribution to medical research in the field of psychiatry, particularly posttraumatic stress disorders, to veterans' mental health management, and as an author". In 2012, he was awarded the Lifetime Achievement Award from the International Society of Traumatic Stress Studies. This award recognises years of service and leadership in the field of traumatic stress. In 2016, he became one of only three Australians to be awarded an Honorary Fellowship of the American Psychiatric Association in recognition of his contributions to the field of traumatic stress.

## Webinar panelists:



**Dr Jane Hay**  
*Psychiatrist, Qld*

Dr Jane Hay is a consultant psychiatrist working in private practice in Townsville, North Queensland.

Dr Hay is the Director of medical services at Townsville Private Clinic - a 60-bed private mental health inpatient facility, and Clinical Director of the Townsville Private Clinic Trauma

Recovery Program - a 12-week PTSD outpatient program for current and ex-ADF members.

Jane has a particular interest in veterans' mental health and is a member of the steering committee of Operation Compass, a federally funded suicide prevention trial aimed at ex-serving Australian Defence Force members and their families.



**Dr Phil Parker**  
*General Practitioner, Qld*

BAppSci (Hons1), BEd,  
MBBS, FRACGP

Dr Phil Parker is a Brisbane-based general practitioner with extensive expertise in veterans' health – providing consultation to practitioners on a wide range of veteran health care issues, including PTSD.

Dr Parker served with the Australian Army for 28 years, in Signals, Infantry and Medical Corps. In 2012, he deployed to Afghanistan as the Task Force Surgeon. This role involved operational coordination of coalition health forces in Uruzgan, mentoring of senior Afghan Army, Police and civilian health staff, and treatment for trauma patients. Dr Parker has also held senior medical officer roles within the Army, with significant involvement in capability and policy development.

As a community general practitioner, Phil has a special interest in veterans' health. He provides advice and education to other practitioners on PTSD management. Phil is GP Ambassador for Gallipoli Medical Research Foundation and serves as a medical educator with General Practice Training Queensland.



**Professor Zachary Steel**  
*Psychologist, NSW*

Professor Zachary Steel has worked in the field of traumatic stress for over 25 years as a researcher and clinician.

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He has a long history of work with populations affected by trauma, including veterans, emergency service workers and those affected by mass conflict and forced displacement.

Professor Steel heads a program of clinical research into the impact of trauma on veterans, first responders, refugees and civilian populations. He holds the St John of God Professorial Chair of Trauma and Mental Health. This appointment links a not-for-profit psychiatric facility specialising in the treatment of PTSD, early intervention and inpatient care directly to a university setting in order to promote clinical and research excellence and evidence generation and inquiry within the delivery of clinical services.

## Facilitator:



**Professor Mark Creamer**  
*Clinical Psychologist*

Professor Mark Creamer is a clinical and consulting psychologist with over 30 years' experience in the field of posttraumatic mental health.

Mark is internationally recognised for his work in the field; providing policy advice, training and research consultancy to government and non-government organisations, with the aim of improving the recognition, prevention and treatment of psychological problems following stressful life events.

Mark is a Professorial Fellow in the Department of Psychiatry at The University of Melbourne, and has an impressive research record with over 180 publications.

Mark is an accomplished speaker and has given numerous invited addresses at national and international conferences.