Where to from Here? Implications of the Mental Health Prevalence and Pathways to Care Report Findings for DVA and Defence

Dr Stephanie Hodson^{1,} Mr David Morton²

1 Department of Veterans' Affairs, 2Department of Defence

Abstract

The final presentation in this symposium will discuss the implications of the findings outlined in the initial presentations for service provision and policy within DVA and Defence as well as potential strategies that can be used to better aid service personnel while in service and throughout the transition process. An overview of the broad range of mental health programs and initiatives currently underway in Veterans and Veterans Counselling Service (VVCS), Defence and DVA addressing psychological distress, PTSD, substance abuse and suicidality will be provided. This will be followed by a discussion of suggested strategies to improve engagement rates, retention and delivery of best practice mental health care at each contact point that will be acceptable to current and ex-serving ADF members.

Biography

DR Stephanie Hodson, CSC works for the Department of Veterans' Affairs as the National Manager of the Veteran and Veteran Families Counselling Service. She has worked for 25 years in the area of mental health and is herself an Australian Defence Force veteran. Dr Hodson graduated from James Cook University in Townsville in 1990 with a Bachelor of Psychology (Honours) and joined the Army in August 1991. As an Army Psychology Officer, she worked with Defence members in clinical, research and organisational health roles both in Australia and on operational deployment. In 2002, Dr Hodson completed her doctoral studies investigating the longitudinal psychological effects of operational deployment to Rwanda. While in the Army she had the opportunity to command the operational psychology assets, deploying herself to both the Middle East and Timor Leste. For her work in this role she was awarded the Conspicuous Service Cross. Dr Hodson has a significant research background. She is currently an investigator on a number of studies including the Transition and Wellbeing Research Program, the Stepping Out: Attention Reset Trial and the RESTORE intensive exposure Trial. Additionally, she was co-principle investigator for the 2010 ADF Mental Health Prevalence and Wellbeing Prevalence Study.

Corresponding Author:

Stephanie Hodson

Corresponding's Author's Email:

Stephanie.Hodson@dva.gov.au

Will it or Won't it? Spartan Proof of Concept: Tactical Aeromedical Evacuation on Cope North 2018

SGT Fahren Birrer¹

1 Royal Australian Air Force

Abstract

Situated in the Micronesian region of the Pacific Ocean, the US Territory of Guam hosts an annual multi-national military coalition exercise, Exercise Cope North (CN18). Displays of Air Power dominate the airspace with concurrent activities connecting field training exercises and Humanitarian Aid and Disaster Relief (HADR) activities. Each year CN alters its focus; this year the exercise scenario saw a small island off the coast of Guam experience a magnitude 5.6 earthquake. Intelligence suggested a semi-permissive environment with damage to water and sewage infrastructure, contamination of water supplies, disease outbreak and other major health concerns.

CN18 was the first opportunity for the RAAF C27J Spartan to test its AME capability in a prolonged 'realtime' scenario. HADR components of CN18 tested the airframe, aircrew, AME team and equipment. The known inherent space and weight limitations of the airframe required constant tailoring of the AME equipment to ensure adequate support of the patient load and clinical requirements were met. The prolonged trial reinforced the knowledge that the size restrictions of the airframe increased stressors of flight and fatigue for AME team members. CN18 saw the AME team exposed to regular tactical flying and engine running on-loads/offloads. This resulted in the AME teams quickly becoming efficient in the loading and unloading of patients whilst adhering to restricted flight times. CN18 allowed for a multimission AME scenario, proving a successful test of this capability in the HADR environment.

Not only did CN18 see the C27J in action, it also provided a trilateral learning environment and training experience for RAAF, USAF and Japanese Air Self-Defence Force (JASDF) clinicians to review and gain a working knowledge of each nation's individual AME processes and treatment protocols. The RAAF

AME team had the opportunity to display and train with our CN18 partners on our new tactical airframe, demonstrating its effectiveness in HADR and intratheatre AME tasking's.

Biography

Growing up, Sergeant Fahrney Birrer saw the challenges, friendships and life experiences the RAAF offered serving personnel, and this encouraged her to enlist at the age of 18 as a Medical Assistant. Sergeant Birrer has spent the majority of her Air Force career within Expeditionary Health at RAAF Bases Richmond, Townsville and Amberley. During her posting to 1 Expeditionary Health Squadron Amberley, she was assigned to the RAAF Security and Fire School where she worked autonomously as the unit medic, enabling and facilitating the training needs of the School. Sergeant Birrer is currently posted to No. 3 Aeromedical Evacuation Squadron at Richmond.

Her time in the Air Force has seen her deploy in support of various ADF exercises and operations including to the Middle East Regions (MER) and Malaysia. In December 2017, Sergeant Birrer completed her undergraduate studies in Bachelor of Paramedic Practice.

Corresponding Author:

SGT Fahren Birrer

Corresponding's Author's Email:

fahren.birrer@defence.gov.au