

# Healing invisible wounds

*Defence personnel who return from combat with mental health problems will continue to suffer while the stigma remains.*

**IMPORTANT** questions about the mental health effects of military deployment have been raised by reports in this newspaper and by last night's Four Corners program on the ABC. Psychiatric casualties are a part of war and always have been, with descriptions appearing in the writings of the ancient Greeks. And while we can probably never eliminate them unless we also eliminate war, we can try to prevent them and improve the recognition, early intervention and long-term management of these complex and potentially disabling problems.

It would be easy to gain the impression from recent media coverage that most serving personnel will develop mental health problems. This is not the case. The majority of serving men and women are highly resilient and, with good leadership and unit cohesion, will not experience adverse mental health effects from their military service.

A substantial minority, however, will have difficulty adjusting on their return to Australia, with a potential impact on relationships, work performance and quality of life. Some of those will go on to develop more serious, longer-term problems – such as depression, post-traumatic stress disorder and substance abuse – that may continue long after their military career is over.

For their part, defence forces around the world have come a long way in the past decade in their acknowledgment of mental health issues and in their attempts to manage them more effective-

ly. While much stigma remains, as it does in the broader community, progress has been made in making it more acceptable for serving personnel to acknowledge psychological problems and to seek help.

The Australian Defence Force now has a mental health strategy, with several initiatives designed to improve psychological outcomes. These include information programs about mental health issues, pre-deployment briefings on stress management, post-deployment screening for mental health problems and access to specialist mental health care when required. While these initiatives are to be applauded, their implementation is too often compromised by inadequate resources and questionable commitment from some in the organisation.

Screening deployed troops following their return to Australia is designed to identify personnel with adjustment problems, with the aim of providing early intervention and a rapid return to optimum health. Although objective research is lacking, this process is considered best practice internationally and there is good reason to assume that it is probably helpful. If nothing else, it raises awareness about mental health. For those willing to acknowledge that all is not well, it provides an opportunity to ask for help.

There are two major problems with mental health screening. First, it relies on individuals being honest in their responses. Contrary to popular myth, mental health professionals cannot read minds. If an individual denies any problems, then that response usually needs to be taken at face value unless there is clear evidence to the contrary. The culture of an organisation is obviously important here. Is it acceptable to



Illustration: Dyson

acknowledge psychological problems? Will it adversely affect the individual's career? There are no easy answers to these questions. In some cases, just as with a physical injury, a mental health injury will adversely affect an individual's career in the military by making it difficult or impossible for them to be deployed again. In other cases, however, especially if treated early and effectively, there is every reason to expect that the individual will return to full health and to their previous role.

The second concern with mental health screening and support is that it relies on adequate resourcing – properly trained personnel to administer and interpret the screen and, importantly, mental health practitioners to provide care to those who need it. This care will often be provided by specialists outside the defence force, but resources within

defence are needed to make referrals and co-ordinate access to appropriate care.

Stronger involvement of families is crucial and better links with existing community services, particularly in the area of mental health, should be high priorities. All of these initiatives cost money and serious questions exist about whether the Australian Defence Force has adequate resources in the mental health area.

This is a difficult issue for the community in general, and government in particular. At a time of shrinking budgets and financial hardship, health is often an area that suffers.

Within the health area, it is often mental health that takes a disproportionate hit. It is simply not possible to provide best-practice mental health services in the military from existing budgets. Rather, a quarantined budget for mental health must be identified if we are to provide the best possible care for the young men and women of our defence force.

The Australian Defence Force is working hard to improve the recognition, prevention and management of mental health problems. But much remains to be done, and the broader community must support it in addressing these problems more effectively.

This will involve continued culture change within the military, effective leadership throughout the organisation around mental health issues, and adequate resourcing to provide accessible and effective mental health services for personnel in need.

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## Ancient Pella workshop discovered

A recently excavated ceramics workshop has yielded a plethora of information concerning the economic activities of Hellenistic-era Pella, one of the most significant sites in the ancient kingdom of Macedon, according to archaeologists in Thessaloniki on Monday, who spoke during a presentation of artifacts and findings.



The workshop, unearthed by archaeologists of the culture ministry's 17th directorate of prehistoric and classical studies, was discovered north of the new entrance of the Pella archaeological site. It is believed to have been in operation between the final quarter of the 4th century BC and 200 BC.

A plumbing system used to clean the potter's clay is among the most notable findings, while a furnace and storage areas were also uncovered.

Movable artifacts include pottery casts, vessels, fragments of statuettes and silver and bronze coins.

*Caption: An aerial view of an ancient ceramics workshop recently excavated at the Pella archaeological site in northern Greece, one of the most significant sites in the ancient kingdom of Macedon, the homeland of Philip II and Alexander the Great, was presented in Thessaloniki on Monday, March 30, 2009 by culture ministry archaeologists.*

## FISH and chips may seem like the quintessential British food, but in fact the origins are much more global

Europeans hadn't even clapped eyes on a potato until they were bought back from South American by the conquistadors in the 17th century. It was the French who invented the chip (or frite as they know them) and the Spanish and Portuguese Sephardic Jews who bought "pesca-do frito", deep fried fish or to the UK.

It wasn't until the 19th century that the two began to be served together. John Lees is commonly believed to have been the first chipper with his fish and chip shop in Oldham, followed in 1863 Joseph Mallin in the East End. By the early 1900s there were more than 30,000 chippies in Britain.

**Strangely, it wasn't the British who introduced Australians to the joys of fish and chips; the first fish and chipper in Australia was believed to have been opened by a Greek, Athanasios Comino in Melbourne in 1879.**

Today, as in the UK, fish and chip shops have proliferated all around the country, from every one-pub outback town to every beach-front

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promenade.

Quality and ambience vary but one thing doesn't – you won't get your fish in chips wrapped in newspaper any more. That was banned in the 1970s due to hygiene reasons.

Not only has how it's wrapped changed, but our buying habits too. While flake (shark), cod and bass still remain the most popular choices in many fish and chip shops, fish lovers are branching out.

Cod, once the most popular choice has slipped down to third spot at Codpiece in Fortitude Valley. "Snapper is now our best seller, followed by barramundi," says owner Guy Endesor.



"People are getting more adventurous. We've also seen an increase in sales of New Zealand gold band snapper and mahi mahi too."

For most practising Catholics, right now – the 40 days of Lent in the lead-up to Easter – means fish and chips every Friday, finishing up with a big fish feast on Good Friday. But whether you are a Catholic celebrating the Lental ritual or just a fish lover, Queensland offers some of the best fish feeds in the world, so enjoy.