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18 August 2015
Australian Government
Department of Veteran Affairs
GPO Box 9998
Melbourne VIC 3001

Dear Officer

RE: Daryl James
VSM16730

I am writing a detailed clarification of the history of Mr Daryl James Post Traumatic Stress Disorder related to his Australian Army service.

1. Date of onset of the claimant's Post Traumatic Stress Disorder(PTSD).

My opinion is the onset of Mr James' PTSD was clearly diagnosable in May 1976. He had some symptoms earlier in November 1973 and February 1975 but the full clinical diagnosis was not evident at that time.

Reasons for that date of onset

Up until May 1975 I have tallied 10 clearly defined separate Category A(i) stressors occurring during service, meeting the Australian Government Repatriation Medical Authority Statement of Principles concerning Posttraumatic Stress Disorder No 83 of 2014 for the purposes of the Veterans' Entitlements Act 1986 and Military Rehabilitation and Compensation Act 2004 (hereafter I will refer to these as SOP's 2014).

These include:

1. July 1972 forcibly held at bayonet point in his barracks bed space by a group of senior apprentices, anally raped with a bayonet scabbard, then a wooden handled toilet brush, then threatened with death if he told anyone.
2. July to September- anally raped by adult laundry worker on multiple occasions and threatened with summary charges of AWOL or discharge if he told anyone.
3. August 1972- almost shot at close range in the face with a 9mm SMG by another army apprentice in a firing range mishap
4. September 1972- drowned forcibly in a toilet bowl by Senior apprentices involved with initial rape in July 1972 detailed in item 1. Resuscitated by 2 junior apprentices who found him not breathing.
5. Groomed by a senior Apprentice musician who took him off base plied with whiskey and raped him.
6. October 1972- forcibly tied in a calico bag, beaten then dropped off a ledge
7. January 1973-had his nose punched as punishment ordained by a kangaroo court convened without authority by Senior apprentices.
- 8 March 1973 administered 4 beatings as punishment ordained by a kangaroo court convened without authority by senior apprentice NCOs

9. September 1973- was subject with other apprentices of a death threat made by a former colleague who was in Pentridge Prison for murder

10. November 1973- subjected to summary punishment of being kicked multiple times in anus and testicles on the walkway which led from the school of music to B Coy lines, resulting in permanent injuries to these areas which give him pain and discomfort to this day.

These all occurred at Balcombe Army Apprentices School on the Mornington Peninsula in Victoria. Whilst they were occurring he describes himself as in survival mode with acute fear reactions. He did not inform about everything at that time due to fear, pride and shame that he would be labelled homosexual which was illegal in most states at that time. He 'soldiered on'.

He suffered some symptoms of fear of confined spaces and avoiding those who had assaulted him before the full onset of PTSD syndrome in April to June of 1976 when he returned to Balcombe to do a promotion course.

-he suffered recurrent distressing intrusive involuntary memories of the traumas- B(i) criteria SOP 2014

- he suffered recurrent distressing dreams related to the traumas- B(ii) criteria

- he had intense anxiety while there, including bedwetting and started drinking alcohol heavily and smoking cigarettes to try and calm himself, he was unable to read or concentrate -B(iv) criteria, B (v) criteria, C(i) criteria –efforts to avoid

- he moved out to alternative B&B accommodation off base with his wife (who travelled from Wagga at his request) to avoid his triggered distress- C(ii) criteria

-his marital relationship was strained due to his detached, irritable and sad state- D (iv) (vi) and (vii) criteria

-he was reckless in his alcohol and tobacco use, could not concentrate and had disturbed sleep E(ii), (v) and (vi) criteria respectively

-he was in this state for some months –F criteria

-he was impaired particularly in his marital relationship- G criteria

-this range of disturbance could not be attributed to alcohol and tobacco use as these were secondary to the disturbance, and he was not abusing them prior to doing this promotion course, or another medical condition- H criteria

Thus meeting the full criteria at this time for PTSD under the SOP 2014 guidelines.

2. Clinical worsening since 1 July 2004, and the stressors leading to that worsening?

There has been clinical worsening since 1 July 2004 with 3 compounding events causing this.

A. In 2006-2007 he was experiencing conflict with his teenage son **REDACT** which started triggering his PTSD symptoms. To relieve this he moved out of home and decided to separate from his wife. He started heavily abusing alcohol, tobacco, prescribed benzodiazepine, antidepressant and opiate painkillers. He began a relationship with a younger civilian musician. In this context when intoxicated he over exuberantly demonstrated to his wife the stressor of attempted strangulation that her younger brother **REDACT** had done to him at their father's wake a few years earlier. This mirrored an attack that had been made on him whilst on duty by an intoxicated Korean War veteran suffering a PTSD flash back in 1982 witnessed by 12 members of both serving members' then military unit.

In this distressed and disturbed state he was given involuntary admission to Heidelberg Repatriation Hospital Psychiatry ward, leading to a diagnosis of manic episode and so a diagnosis of Bipolar Mood Disorder. As remarked on in my previous reports there is no evidence longitudinally before

or space of manic or hypomanic episodes and I think this episode is consistent with an exacerbation of his PTSD combined with substance abuse and adjustment disorder.

B. In 2008 he was tasked by his then ARA unit to play at a reunion of army apprentices in Albury. This included being accommodated in old Apprentice school living quarters which brought on bedwetting, night terrors, night sweats, vivid nightmares, night screaming, and uncontrollable shaking. He attended the task under silent duress still bound by the code of silence beaten into him at Apprentices school in 1973 which resulted in very severe triggering of his PTSD that this caused, making him extremely anxious, fearful, tearful and withdrawn. He attended the task being more fearful to remain in the barracks than to stay near his unit which had been made aware of his distress by this time.

C. In 2010 he was locked out of the band room as part of a bullying and exclusion process sustained against him by previous assailants. He claims a number of unit members rang him to inform him of the vilification and defamatory remarks the unit hierarchy were disseminating. He was falsely accused of becoming violent and vandalizing military and personal musical instruments. He felt extremely disabled by this in terms of PTSD symptoms, the work environment was full of triggers and ongoing persecution, and his livelihood and passion for music were threatened, leading to him being unfit for work after this. I began treating him in 2010 and can attest to his ongoing presentations consistent with severe, disabling PTSD, and that he has not had Major Depressive Disorder nor Manic Episode in that time that I have been regularly reviewing him.

Other detail in regard to Mr James can be found in my previous reports.

Yours sincerely



Dr Bernard S. Hickey