The Reintegration of Reservist Veterans: an Australian perspective

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Introduction

The transformation of the ADF Reserves over the last decade, from a strategic to an operational reserve, has seen reservists deployed on a scale unprecedented since the 1940s, contributing in excess of 15 per cent of deployed personnel.¹ This operational role seems likely to be reiterated in the 2013 Defence White Paper (DWP 13). Many other defence forces have undergone a similar transformation.² For example, up to 40 per cent of deployed US forces in Iraq were reservists.³ Current global trends, with constrained defence expenditure and transition from conscript to all-volunteer defence forces, point to the ongoing operational use of reservists.⁴

The Australian Army, in particular, deploys reservists mainly in scheduled, lower-intensity regional stability operations in the Solomon Islands and East Timor, and domestic-event security operations and domestic response operations. More recently, special forces reservists have been deployed to Afghanistan. From a training and operational perspective, this use of reservists matches their overall readiness and training levels. Use in lower-intensity operational requirements makes optimal use of their civilian skills and life experience, and frees the regular forces for short-notice and higher-intensity operations, best suited to their levels of readiness and training.

The overseas experience

The deployment of reservists has been recognised as entailing risk factors for adjustment and post-deployment well-being in research in the UK,⁵ US⁶ and Canada.⁷ Higher levels of adverse mental health outcomes for reservists, compared to permanent forces, have been reported among UK and US reservists. Recognition of these issues has led to increased attention to and support for the preparation of reservists and their families for deployment and redeployment. Despite significant initiatives, including reintegration programs in the UK and US, reservists remain at increased risk for post-deployment mental health issues.⁸ Moreover, issues relating to reservists’ families and careers remain major sources of stress during and after deployment.⁹

According to a 2006 study, UK reservists serving in Iraq in 2003 were more than twice as likely as those who did not deploy to report symptoms of common mental disorders (26 v 16 per cent) and probable PTSD (post traumatic stress disorder) (6 v 3 per cent).¹⁰ The same study found this was not replicated for regulars¹¹ nor was it apparently associated with differences in combat exposure. These symptoms appear more closely related to reported problems at home, both during and after deployment.¹²

A recent study of a large cohort of UK reservists returning from deployment to Iraq and Afghanistan confirmed that reservists were significantly more likely to report post-deployment adjustment issues than regulars.¹³ Problems in civil employment arising from their military service were reported by 40 per cent of the respondents, and inadequate support by the military in the weeks following repatriation was reported by 44 per cent, compared to 30 per cent of regulars. These two factors, plus lower levels of post-deployment social engagement, were associated with increased reporting of common mental disorders, probable PTSD and alcohol misuse. Altogether, 70 per cent of returning UK reservists reported adverse post-deployment experiences in civilian employment, perceived support from the military, and/or civilian social engagement.
Similarly, a significant minority of US reservists deployed to Iraq attributed civilian job loss or financial difficulties to their deployment—and these difficulties appeared to contribute to mental ill health. For example, at one year after deployment, the PTSD rate of US National Guardsmen who had lost jobs (48 per cent) was at least twice as high as those who had not deployed.

The Australian experience

Prior to the deployment of reservists to East Timor in 2002-03, the Australian experience with deployment largely concerned regulars, plus a handful of specialist reservists (such as medical personnel) as ‘augmentees’ to regular formations. In 2002, a company of reservists was deployed to East Timor on warlike service, as the first formed body of reservists sent overseas since World War 2.

Subsequently, and since 2006, company-sized bodies of reservists have been the primary ADF contribution to a low-intensity (non-warlike) stability operation in the Solomon Islands. The company sent to East Timor and the initial three rotations of reservists to the Solomon Islands were systematically surveyed with regard to their adjustment and wellbeing. Depending on the particular rotation, questionnaires were administered at the commencement of the tour, the end of the tour, six months after return, 12 months after return and two years after return, with Table 1 showing the response rates. In addition, those deployed underwent a ‘Return to Australia Psychological Screen’ immediately prior to repatriation and a ‘Post Operational Psychological Screen’ between three and six months after their return.

Table 1. Group size and response rates of reservists deployed to East Timor (2002-03) and the Solomon Islands (2006-07)

<table>
<thead>
<tr>
<th>Group/dates</th>
<th>Theatre</th>
<th>Number deployed</th>
<th>Day 1</th>
<th>End of tour</th>
<th>3-6 months after return</th>
<th>12 months after return</th>
<th>24 months after return</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Company</td>
<td>East Timor</td>
<td>92</td>
<td>*</td>
<td>96%</td>
<td>78%</td>
<td>57%</td>
<td>74%</td>
</tr>
<tr>
<td>(October 2002 – May 2003)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rotation 11</td>
<td>Solomon Islands</td>
<td>106</td>
<td>*</td>
<td>89%</td>
<td>*</td>
<td>55%</td>
<td>48%</td>
</tr>
<tr>
<td>(December 2006 – April 2007)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rotation 12</td>
<td>Solomon Islands</td>
<td>131</td>
<td>89%</td>
<td>85%</td>
<td>42%</td>
<td>*</td>
<td>48%</td>
</tr>
<tr>
<td>(April – August 2007)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rotation 13</td>
<td>Solomon Islands</td>
<td>119</td>
<td>35%</td>
<td>73%</td>
<td>*</td>
<td>40%</td>
<td>*</td>
</tr>
<tr>
<td>(August – December 2007)</td>
<td></td>
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</tr>
</tbody>
</table>

*Not assessed

The deployments were generally reported to be positive experiences and mental health issues were rare. That said, after return to Australia, a number of reservists reported some difficulties with separation from the military milieu and reintegration into their civilian environment. Specific findings were as follows:

Retention

Following the deployments to both East Timor and the Solomon Islands, the reservists generally have shown continued motivation to serve in the Australian Army and maintain their deployable status. Figure 1 shows the percentage of reservists who remained in service over periods stretching up to six years. In comparison to known rates of retention for Australian Army reservists, those who deployed showed a significantly higher
rate of retention. For example, at the end of six years, 70 per cent of the reservists who deployed to East Timor continued to serve in a deployable status, which is more than double the expected rate.¹⁸

A more detailed analysis of the larger number of reservists who deployed to the Solomon Islands revealed that 61 per cent remained in the Active Reserve component, 19 per cent had transferred permanently to the Regular Army, 6 per cent were on contract full-time service, while only a total 14 per cent had ceased serving actively. Among those who remained in service, 12 per cent had voluntarily deployed overseas at least once more within two years of returning from their first deployment.

**Figure 1. Retention in service following deployment**
Adjustment to life

Reservists were surveyed for difficulties experienced in three areas of their lives, specifically their work, personal and home lives. The options for each item were worded as 'none', 'some' or 'many' adjustment issues. Figure 2 shows the percentage of reservists who reported either 'some' or 'many' adjustment issues in each area. The reservists from the East Timor group were surveyed at 12 and 24 months after their deployment, while those who deployed to the Solomon Islands were surveyed at five time points, as indicated.

The East Timor group, who completed the questionnaire in 2004-05, reported a moderately high proportion of adjustment issues, around 60 per cent. Further examination of the data revealed that not more than 11 per cent of the respondents reported 'many' adjustment issues. Among the Solomon Islands group, who were first surveyed in 2006 at the start of their deployment, approximately 30 per cent reported 'some' or 'many' issues, of which not more than 6 per cent were reported as 'many'. Open-ended questions associated with these ratings revealed that the 'issues' included positive events (for example, birth of child, becoming engaged or promotion at work) as well as negative events (such as family illness, end of relationship or job loss).

Comparing the East Timor group to the Solomon Islands groups, it can be seen that there was a sharp decline in the overall prevalence of issues. This may have arisen from all or some of the following circumstances: the nature of the deployment (warlike versus non-warlike), length of deployment (7 months versus 4) and improvements in support services for reservists from 2002 to 2006, in areas such as access to rehabilitation. For both groups, the reported issues appeared to be more-or-less equally distributed across the three areas and any variations across time were not statistically significant.
Psychological health

Just as the great majority of reservists reported no or only some adjustment issues, the reservists returning from East Timor and the Solomon Islands were in sound mental health, as measured at the end of deployment and approximately three to six months later. On both occasions, two well-validated questionnaires were used. The first was the ‘Kessler-10’ questionnaire, which asks 10 questions related to non-specific psychological distress (for example, ‘in the past four weeks, about how often did you feel tired for no good reason?’) that are predictive of depression and anxiety disorders. The second was the ‘Post-traumatic Checklist’, which asks 17 questions, such as ‘have you experienced repeated, disturbing memories, thoughts or images of a stressful experience from the past?’

In brief, both measures revealed that the vast majority of reservists showed no appreciable distress or signs of post-traumatic stress. Of those that did, only a very small percentage reported levels for which immediate action was advisable. Figure 3 shows the percentage of reservists whose reported levels of distress were in the lowest range (10-15, which required no action), an intermediate range (16-29, which would alert the interviewer to consider providing information or advice to the member to seek assistance) or a high range (30-50, for which referral was indicated). The figure also shows the corresponding percentages for all deployed members from the Australian Army (2003-06). The pattern for the reservists was very similar, if not better, than the Army as a whole. However, it must be borne in mind that the whole-of-Army data includes individuals who were exposed to higher-intensity operations in Iraq and Afghanistan.

Figure 3. Psychological health following deployment

Examination of the Post-traumatic Checklist data, summarised in Figure 4, indicated nearly all returning reservists, and similarly other Army personnel, reported very few post-traumatic stress symptoms at either screening occasion. More than 85 per cent showed scores in a range (17-29) for which no further action was required. A small percentage (2-11 per cent) reported symptoms in a range (30-39) that would lead to the provision of information or advice to the member to seek assistance. Finally, a very few members (<5 per cent) reported symptoms in the upper ranges (40+) requiring follow-up. The rates of actual referral and follow-up were equally low, in accord with these reporting percentages.
Figure 4. Post-traumatic issues following deployment

PCL-C Score Band Percentages

- L Timor RAPs
- L Timor POPS
- Solomons RAPs
- Solomons POPS
- Army RAPs
- Army POPS

- 17 to 29
- 30 to 39
- 40 to 49
- 50 to 85

Figure 4
Alcohol use

Figure 5 shows levels of alcohol use reported by reservists on the ‘Alcohol Use and Disorders Identification Test’ at the various post-deployment testing points (noting that no measures were taken during the deployments, because land-based deployments by the ADF are ‘dry’). This questionnaire has 10 items that assess the respondent’s frequency, amount and felt consequences of alcohol consumption. On all measurement occasions, a solid majority of reservists had scores in a range (0-7) that required no action. Among the remainder, the bulk of them (17-41 per cent) had scores (8-15) for which the recommended action is ‘simple advice focusing on the reduction of hazardous drinking’. Scores in the higher two bands were infrequent (1-7 per cent), where the recommended actions for scores 16-19 was ‘brief counselling and continued monitoring’ or for scores 20+ was ‘further diagnostic evaluation for alcohol dependence’.

Figure 5. Alcohol use following deployment

![Figure 5](image)

Discussion

This study of Australian Army reservists on stability operations—as distinct from combat operations—demonstrates that they resettle well after both a short (4 month) operation in a low-threat environment and an even longer (7 month) operation in a warlike environment, which is virtually identical to regulars after the same operations.19 The major findings were:

- Up to six years following deployment, retention of reservists in a deployable status was more than twice the level seen among reservists as a whole,
- Overall psychological health remained sound after deployments to either environment, and
Self-reported alcohol use remained constant, and largely in lower ranges that at most required simple advice. The only notable area of difference among the reservists appeared in reported adjustment issues. Only a very few reservists (1-6 per cent) reported ‘many’ adjustment difficulties. However, a moderately high proportion of those returning from East Timor in 2003 reported ‘some’ issues when asked 12 months and 24 months after returning to Australia (approximately 60 per cent in all domains). In contrast, only around 30 per cent of reservists who deployed to the Solomon Islands reported any issues at any time. In fact, this level appeared constant between the start of the deployment and all subsequent measurement occasions up to 24 months after their return. These issues appeared to arise from positive as well as negative life events. However, there is a need to further investigate the sources and nature of the issues, large and small, for adjustment during and after deployment.

The multiple differences between the deployment to East Timor in 2002-03 and the deployments to the Solomon Islands in 2006-07 make it difficult to identify which factors contributed to both the positive outcomes, as well as the apparent difference in the experience of adjustment issues. One contributor may be found in the shorter tour, with its lesser exposure to hazards and reduced separation from civilian life. Moreover, the deployment to the Solomon Islands had a lower-threat environment than East Timor. In addition, the ADF enhanced its strategies for selection, preparation, training and reintegration of reservists between the two deployment periods, which could also be expected to have had some impact.

Notwithstanding the differences between the two groups in the frequency of adjustment issues, the pattern over time was similar. During and immediately after the deployment, home and personal life were the predominant adjustment issues, considering the separation from and reunion with family and friends. These issues appear to resolve progressively with the passage of time. Thereafter, work becomes a larger source of adjustment issues, in all groups, with more than 60 per cent in the East Timor group and 33 per cent in the Solomon Island group reporting ongoing issues with reintegration into civilian employment, persisting two years after their return. This is consistent with other research, with reservists often reporting a loss of motivation in the early stages of their return to civilian employment.

Nonetheless, the overall experience of the deployment and its effect on morale is reported to be positive by most reservists, comparable to that of the Army as a whole (see Figure 6), including regulars. This positive impact is evidenced by superior retention rates for reservists after deployment, with some (12-25 per cent) transferring to the regular component, and some others (12 per cent) deploying again within 2 years. Thus an operational role and an opportunity for reservists to deploy overseas appear to be effective retention enhancers. Furthermore, the sound psychological health of the reservists indicates that their levels of training and readiness augurs well for their deployment on future operations of a duration and threat level commensurate with those in East Timor and the Solomon Islands.
Implications

Although the Australian experience with the recent deployment of reservists in formed bodies has been successful, deployed reservists in the future may face more significant operational challenges. Even in stability operations like those in East Timor and the Solomons, the threat level can rapidly escalate. Accordingly, the strategies for reintegrating reservists into their civilian lives must be able to adapt to those increased operational challenges. These strategies will be most effective when proactively implemented before and during the deployment, rather than waiting until after the fact. To address this need, we propose the following principles:

Maintain the reservist’s sense of worth

The deployment experience for reservists can work significant changes in self and in other life areas. Australian Army reservists have returned from deployment with a positive perspective and high morale, as much as for all other deployments. Improvements in the reservists’ skills, maturity and self confidence are highly visible to their families and employers. Nevertheless, acknowledgement and recognition of the returned reservist’s service are important to maintaining that sense of worth. This can be facilitated in the following ways:

(1) Formal ceremonial acknowledgement, for example, ‘welcome home’ parades.
(2) Active recognition of their “veteran” status by their use as mentors within their home unit.
(3) Encouraging the validation of the deployment experience by families, employers and friends through, for example, reserve-specific briefs before and after deployment on the significance of the deployment—including that ‘it’s not a holiday’— and what may be expected when their reservist returns.
(4) Provision of opportunities for reunion with members of their deployed cohort, which will help minimise the sense of loss that can arise from the separation of the returning reservists from the people, unit, milieu and modus vivendi to which they have bonded during the deployment.

Enhance re-entry to civil employment

Strong legislative employment protection is in place in Australia, and financial assistance is available to employers of deployed reservists. These may not always be fully appreciated by reservists or employers. Anecdotal reports indicate some Australian reservists still (needlessly) resign from their civilian employment in order to deploy. Moreover, the source of information to Australian employers about their reservists' deployment, including conditions, entitlements and the date of return, often depends on the reservists themselves. A sound environment for the reservist’s reintegration may be fostered by:

(1) Regular information to employers directly from the Defence organisation before, during and after the deployment concerning the general nature of the deployment, available support services and what to expect when their reservist returns.

(2) Employer engagement with their reservists during the deployment through use of web-enabled contact (for example, Skype) and continuation of visits to their operational area, such as those currently undertaken to East Timor and the Solomon Islands (Exercise BOSS LIFT).

(3) Provision to the reservists and their employers of documentation attesting to their performance on deployment and their acquisition of additional knowledge and skills.

Ease reintegration into family and social life

Reservists, their families and friends often fail to recognise that on return from deployment, there may be a 'new normal' for some of them. In light of the experience of Australian reservists, there has often been discernible maturation and growth, but this positive aspect can be accompanied by challenges arising from changed circumstances at home arising from life cycle events, for example, change in partner’s employment, death of a family member, moving house and adaptation to the reservist’s absence. These challenges can be accommodated by:

(1) Information presentations, both live and on the web, before, during and after the deployment, for family and friends—as well as reservists—regarding the repatriation experience.

(2) Assistance in making post-deployment living arrangements, particularly for those who may need to find new accommodation on return from deployment.

(3) Financial advice, as some reservists may end a deployment with more money than they have ever had, which can be misapplied and become a source of distress.

(4) Development of a network of local volunteers to assist returning reservists and their families with information and referral information.

Ease reintegration into the home unit

In addition to being separated from the civilian environment, deployed reservists have also been separated from their home unit. Unlike US National Guard units that are activated in toto, Australian reservists volunteer from their home units to make up the deployed formation, tailored to the particular operation. On return from deployment, the home unit personnel will themselves be particularly well placed to recognise the emergence of deployment-related issues should they arise. Similarly, home unit personnel may be a source of information for families or employers who have found that their reservist is having difficulties in reintegration. Defence organisations should contemplate providing training and information to the leaders and key personnel within home units to monitor and assist returning reservists.
Conclusion

While the reintegration of reservists has unique complexities and challenges, overall they adjust very well after short-tour stability operations. Generally, they perceive deployment as a positive experience, reflected in superior retention rates and sound mental health. These findings strongly indicate that current selection, training and preparation of Australian Army reservists renders them well suited to undertake shorter-tour stability operations like those in East Timor and the Solomon Islands. Nevertheless, there is room for further evolution of strategies for assuring the successful reintegration of reservists back into their civilian environment and with their home units.

Implementation of these strategies should allow the reservist to have considerable flexibility in respect of their reserve service to enable this, particularly in the months following return from deployment. Recognition of their status and use of their operational experience enhances their self-esteem and sense of value and purpose, and provides an experience base for the training of others.

Major General Brereton is Head Cadet, Reserve and Employer Support Division. He enlisted in the Sydney University Regiment in 1975 as a private soldier and was commissioned in 1979 in the Royal Australian Infantry. He commanded 4th/3rd Battalion, the Royal New South Wales Regiment (1997-99), and 5th Brigade (2008-10). In civilian life, he was admitted as a solicitor in 1982, called to the Bar in 1987, appointed Senior Counsel in 1998, and a Judge of the Supreme Court of NSW in 2005.

Lieutenant Colonel Orme is a psychologist in the Australian Army Psychology Corps and has deployed on ADF operations to Bougainville, East Timor, Middle East, the Solomon Islands and Afghanistan. In civilian life, he is an organisational and consulting psychologist in the corporate sector. He is completing a PhD through the Centre for Military and Veteran’s Health and the University of Adelaide on the post-deployment adjustment of Australian Army reservists.

Lieutenant Colonel Kehoe is in the Australian Army Psychology Corps, where he serves as senior consultant to the Head of Corps. In civilian life, he is Professor of Psychology and Director of Organisational Psychology at the University of NSW, where he has been on staff since completing his PhD at the University of Iowa in 1976.

ACKNOWLEDGMENTS

The authors are grateful to Professor Christopher Dandeker and the participants at the NATO National Reserve Forces Committee meeting, Warsaw, Poland, 4 August 2011, for their comments on earlier versions of this article.

NOTES


8 Fear et al., 'What Are the Consequences of Deployment to Iraq and Afghanistan on the Mental Health of the UK Armed Forces?', pp. 1783-97. Also Thomas et al., 'Prevalence of Mental Health Problems and Functional Impairment among Active Component and National Guard Soldiers 3 and 12 Months Following Combat in Iraq', pp. 614-23.


As shown in ANAO, 2008-2009 Army Reserve Forces, Audit Report No. 31.


Orme, ‘Post Deployment Reintegration of Australian Army Reservists’.

Orme and Kehoe, 'Left Behind but Not Left Out?', pp. 26-32.
