‘Repat’
A Concise History of Repatriation in Australia

Philip Payton
In this book Professor Philip Payton tells the story of 'Repatriation' from the Australian Soldiers' Repatriation Act 1917 – brainchild of Senator Edward Davis Millen – which set up Australia's Repatriation Commission and Repatriation Department in 1918, through to today's Department of Veterans' Affairs (DVA), as it became known in 1976. He shows how the 'promise' made by Prime Minister W.M. 'Billy' Hughes in 1917 – that the Commonwealth Government would look after the interests of Australia's returned servicemen and women – has remained at the heart of the Department's endeavours, as significant in the early twenty-first century as it was a hundred years ago.

Professor Payton also illuminates the sheer diversity of 'Repatriation', even in its earliest days, from bringing the troops home after the First World War to the introduction of war pensions, health care, hospitals, vocational training, employment opportunities, support for dependents, housing, soldier settlement, and much more. Likewise, he demonstrates how the repatriation system has continually evolved, responding to new challenges and opportunities. The Second World War and early post-war conflicts introduced a new 'second wave' of veterans to be followed by a highly distinctive 'third wave' during and after the Vietnam war, and more recently by an equally distinctive 'fourth wave' as a result of operations in East Timor, Afghanistan, Iraq and elsewhere.

Professor Payton also highlights significant themes, such as the changing nature of health care provision (DVA shifting from being a leading provider of health care to becoming a major purchaser), the enthusiastic embrace of information technology (allowing DVA policy to become increasingly 'Veteran-centric'), and the increasing importance of commemoration, not least the centenary on 25 April 2015 of the dawn landing at Anzac Cove, Gallipoli, a hundred years before.
There is no blazed track for the work of Repatriation.

Senator Edward Davis Millen, Minister for Repatriation, 1919.
FOREWORD

In early 1917, in the midst of the First World War and with an Allied victory not yet in sight, Prime Minister W.M. ‘Billy’ Hughes made a promise to the country’s armed forces on behalf of the Australian people. ‘When you come back we will look after you’, he declared. It was a solemn and binding promise and Hughes recognised returning soldiers would be entitled to say to the Commonwealth Government: ‘You made us a promise. We look to you to carry it out’.

Earlier in the war, public opinion had imagined the numerous voluntary patriotic funds which had sprung up across Australia would be enough to support the rehabilitation of returning men and women into civilian life. By 1917, however, the enormity of the task had become clear and both State and Commonwealth Governments understood legislative action was required. The result was the Australian Soldiers’ Repatriation Act 1917, its chief architect Senator Edward Davis Millen who would become Australia’s first Minister for Repatriation. In April 1918, 100 years ago, the new Repatriation Commission and the Repatriation Department began work in earnest, aiming to fulfil the promise Hughes had made.

As well as bringing home the troops from overseas, ‘Repat’, as it was universally known provided war pensions, healthcare, education and training, employment and housing, soldier settlement and remembrance and commemoration. Ambitious in scope it attempted to address the widely varying needs of veterans and their dependants. The Repatriation Commission and Department were also anxious to work closely with the voluntary sector including the Returned Services League, Australian Red Cross, and Legacy, setting an example which continues to this day.

At first, it was imagined that once all the veterans of the First World War had been successfully ‘repatriated’, in the fullest sense of the word, the Commission and Department would quietly wither away, their job done. However, the outbreak of the Second World War in 1939 led to a new ‘second wave’ of veterans, perpetuating the work of the Repatriation Department, as did early post-war conflicts such as the Korean War, the Malayan Emergency and the Indonesian Confrontation. Soon there was to be a significant ‘third wave’ of veterans as a result of the controversial Vietnam War, leading to lengthy and often heated debate, as well as extensive new medical research, about Post Traumatic Stress Disorder and the effects of Agent Orange, from which many hard lessons were learned. More recently military operations in East Timor, Afghanistan, Iraq and elsewhere, have led to a ‘fourth wave’ of veterans, different in many ways from those who had gone before.
In October 1976 the Repatriation Department was renamed the Department of Veterans’ Affairs and in the years ahead it embraced change enthusiastically as it responded to new opportunities and challenges. The Department proved an early advocate of the possibilities of technology and moved from being a major provider to a major purchaser of healthcare services. Increasingly ‘veteran-centric’ in their outlook as they approached their centenary, the Repatriation Commission and the Department of Veterans’ Affairs embarked upon an all-embracing transformation process which aimed to engage with ‘all the domains of veteran well-being’ to ensure veterans and their families had a healthy and productive life. By now the methods of the Commission and Department had changed out of all recognition since those early days in 1918. But Billy Hughes’ promise, made a hundred years ago, still holds true as ‘Repat’s’ guiding principle.

In this concise history published to commemorate the hundredth anniversary of the Repatriation Commission and the Department of Veterans’ Affairs, written by Professor Philip Payton, himself a Navy veteran, the story of ‘Repat’ is told vividly in word and picture. This excellent volume is testament to the dedication of Repatriation staff who over the last hundred years have risen to numerous and sometimes almost overwhelming challenges.

The Hon Darren Chester MP  
Minister for Veterans’ Affairs  
March 2018

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ACKNOWLEDGEMENTS

In researching and writing this book, my first and greatest debt is to Ian Skinner – mentor, guide, facilitator, critic, colleague – who has steered me skilfully through this project, from beginning to end.

I am also most grateful to Veronica Hancock and Roger Winzenberg, who provided insight, clarity and vision to guide this effort, as co-chairs of the Repatriation Centenary publications sub-committee.

I am further indebted to others at the Repatriation Commission and Department of Veterans’ Affairs, who assisted in a number of ways and have cheerfully given of their time and expertise. Those deserving special thanks include (in alphabetical order) Neil Bayles, Liz Cosson, Rebecca Fleming, Chevelle Grey, Tara Hughes, Matt McKeon, Estelle Muspratt, Katherine O’Keefe, Craig Orme, Courtney Page-Allen, Kate Pope, Rodney Quinn, and Jo Wagner.

At Flinders University, I am especially indebted to Melanie Oppenheimer for her encouragement and great enthusiasm for this project.

As ever, thanks to Dee for her love and support.

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INTRODUCTION

‘Repatriation’ – or ‘Repat’ for short – is uniquely Australian in concept and meaning.

Soon after the First World War broke out, the Commonwealth Government recognised that provision must be made for the wounded and the widows and families of the war dead and enacted the War Pensions Act 1914. It was the aftermath of the dawn landing at Gallipoli on 25 April 1915 that galvanised public opinion, however, and in subsequent weeks and months there was a groundswell of voluntary activity as a wide range of groups – some local, some national (such as the Red Cross) – poured their energies into fundraising and other activities to support the injured who were already returning home. But it soon became apparent that voluntary effort, vital as it was, would not be enough and that a comprehensive repatriation program managed by the Commonwealth Government would be necessary. Accordingly, the Australian Soldiers’ Repatriation Act 1917 entered the statute book, and in April 1918 the newly formed Repatriation Commission and Repatriation Department began their work on behalf of Australia’s war veterans and widows.

By the war’s end, ‘Repat’ had become a household word, on the lips of all and sundry, and had already begun to take on its multiplicity of meanings – a meld that was distinctly Australian. ‘Repat’ referred to the return and demobilisation of the Australian Imperial Force – the able-bodied as well as the wounded – but it meant much more than this. As we shall see in this book, ‘Repatriation’ was many things – war pensions, health care, education, vocational training, employment assistance, help with housing, soldier settlement on the land, remembrance and commemoration – all administered through the Repatriation Commission and its department, with the continuing assistance of the voluntary sector, especially the Red Cross and the Returned Sailors and Soldiers Imperial League of Australia (today known as the RSL or the Returned and Services League of Australia).

The Second World War changed and expanded the repatriation system, making it far more accessible to the hundreds of thousands of demobilising men and women, and its provisions were continually under review. The Vietnam War and other post-1945 conflicts and peacekeeping tasks posed yet further challenges for the commission and department, which continued to innovate across the whole spectrum of provision, in the process becoming major initiators of health-care research in Australia. On 5 October 1976, the Repatriation Department was rebranded the Department of Veterans’ Affairs (DVA), a prelude to the decades ahead – at the end of the old millennium and into the new – when DVA would shift from being a leading provider of health care to become a major purchaser. This would also be the era of information technology, in its infancy at first but soon a remarkably powerful and flexible tool that would enable DVA to provide ‘joined up’, ‘veteran-centric’ support direct to veterans and their families, wherever in Australia they might be.
A hundred years after their foundation, the commission and department continue to provide a comprehensive range of repatriation services for veterans and serving Australian Defence Force (ADF) members. Although many of the provisions have changed out of all recognition during that century, the commitment to maintaining a range of support to meet emerging needs has remained steadfast, as has the wider Australian allegiance to the repatriation ethos. This, then, is a history of repatriation in Australia, from those tentative early steps at the beginning of the First World War to the root and branch transformation process of the early twenty first century that, a century and more after the dawn landing, typifies DVA today.
As the First World War drew to a close, so a new word was added to the everyday language of Australia: ‘Repat’. Soon it was on everyone’s lips, and by 1919 was already commonplace in what seemed to many observers a bewildering multiplicity of situations and contexts. So what exactly was ‘Repat’, people were entitled to ask, as they pondered this apparently variable and sometimes slippery term. Where had it come from, and what did it mean? There were plenty of examples for individuals to contemplate. In Launceston, Tasmania, an advertisement in the local Examiner newspaper, drawing attention to a new housing development, advised: ‘Soldiers, get your new Repat Home built here’. The Western Mail in Perth referred to public servants charged with the management of servicemen and women returning from the war as ‘Repat people’, while its left-wing competitor, the Westralian Worker, addressed ‘repatted Diggers’, those returned soldiers looking for employment, recommending (not entirely tongue-in-cheek) that they should think about joining the winegrowing industry. The Sydney Sun, meanwhile, reported favourably on ‘Repat Work’, the vocational training that was available to returnees with the aim of ‘turning soldiers into citizens’. As it passed into general usage, ‘Repat’ acquired pejorative as well as positive connotations. Frustrated soldiers, said the Huon Times in December 1919, sang a new refrain – ‘When you’re standing on the mat at the office of Repat’ – while the Sydney Mirror carried a short story titled ‘Shorty at the Repat’, in which it was observed of Repat officials: ‘If they had as much silk as they have method they wouldn’t have enough to make a necktie for an ant’. Likewise, the Perth Truth complained: ‘Strange how a blight seems to settle on “fine farming country” as soon as the Repat touches ‘em’. Sometimes this seemingly conflicting usage was just too depressing and confusing, the Perth Sunday Times confiding that some returned soldiers ‘are indignant at the very word repat’, annoyed at being labelled and categorised and too proud to accept the ‘charity’ that they imagined they were being offered. Besides, not all were sure what repat was all about. Of course, most were aware that ‘Repat’ was simply a typically Australian shortening of the official term ‘repatriation’. But that made it no less complex or perplexing, nor did it help in understanding the many areas of a returned serviceman’s (or woman’s) life where it might be applied. Repatriation as a concept had emerged early in the war, as the conflict’s first surviving victims – those whose wounds warranted their return to Australia, many to be declared unfit for further military service – arrived home. From the first, however, it was clear to many observers that repatriation would come to mean much more than this. In time, the entire Australian Imperial Force (AIF), much of it concentrated in Europe, would have to be brought home efficiently from half a world away – a logistical and administrative challenge of great proportions. Moreover, repatriation would of necessity extend to the demobilisation of those forces and to their rehabilitation back into civilian life. For many, rehabilitation would not be easy, especially for those disabled physically or mentally by their experiences

PREVIOUS PAGE:
‘Invalid Soldiers Return to Brisbane’. By 1919, when this photograph of wounded soldiers returning home to Queensland was taken, the sheer scale of the repatriation challenge facing Australia was only just becoming apparent to both politicians and the public.

(Shane Library of Qld 196226)
of war, and would involve a variety of supportive activities, from medical treatment and health care to vocational training and the provision of housing or land for ‘soldier settlement’.

Similarly, repatriation would also encompass provision for the dependants of those killed or missing in the war (including those who had died in accidents or from illness). But the dead themselves would not be repatriated. The logistical difficulties and expense, together with the macabre prospect of ‘death ships’ arriving in Australian ports laden with thousands of coffin’d corpses, made the repatriation of those who had died impractical as well as unwise. Instead, Australians were interred where they fell and soon organised into the extensive cemeteries of remembrance (and commemoration) in Australia, for example the Australian War Graves Commission. Thus memorialisation (and commemoration) would also fall within the scope of repatriation, broadly interpreted, and was often a significant preoccupation for those family members in Australia who had no hope of ever visiting their loved ones’ graves in distant lands.

Repatriation would also extend to the many so-called ‘English brides’ (often with their babies) – the British and Irish wives of Australian servicemen, married in the United Kingdom – who were brought to Australia in especially chartered ships, such as the SS Zealandia in Melbourne in January 1919, the wives were met by ‘hoots and vulgar jeers’ and ‘jokes at the English girls’ expense’.5

Initially, despite these first inklings of the eventual enormity of the task ahead, there was a general assumption that the many patriotic associations that had sprung up across Australia, already adept at fundraising and organisation, would meet the needs of returning servicemen and their families. At the copper-mining town of Moonta in country South Australia, for example, the Moonta Patriotic Committee was formed soon after war was declared, followed shortly by the Moonta Mines District Soldiers’ Aid League, and at the nearby agricultural settlement of Agery in July 1915 a fete was held in support of wounded soldiers returning home from Gallipoli. Twelve young girls performed a maypole dance, it was reported, ‘tastefully dressed in red, white and blue’, while an ‘enthusiastic auction sale’ raised gratifying amounts for a handmade quilt, half a ton of chaff, poultry, flowers, bacon, and a cigar. It was a typical scene replicated across Australia, as people clamoured to ‘do their bit’.6 In rural Victoria, for example, ‘the home front organised itself with amazing rapidity’.7 At Beechworth, a Patriotic League was declared, followed shortly by the Moonta Mines District Soldiers’ Aid League, and at the nearby agricultural settlement of Agery in July 1915 a fete was held in support of wounded soldiers returning home from Gallipoli. Twelve young girls performed a maypole dance, it was reported, ‘tastefully dressed in red, white and blue’, while an ‘enthusiastic auction sale’ raised gratifying amounts for a handmade quilt, half a ton of chaff, poultry, flowers, bacon, and a cigar. It was a typical scene replicated across Australia, as people clamoured to ‘do their bit’.
provision for the treatment or rehabilitation of incapacitated returnees). Moreover, in August 1915, the newly convened cross-party Federal Parliamentary War Committee edged tentatively towards further intervention, recommending (diametrically) that each state take firm action to support the activities of the various patriotic funds. Specifically, the committee advocated the formation of state war councils to plan for the retaining and employment of returned soldiers and to take care of their dependants. It also considered that state war councils should be responsible for the practical rehabilitation of servicemen who had lost limbs, as well as administering the registration of those returnees interested in settling on the land.

The states responded readily enough, protecting their spheres of interest, but there was little coordination or uniformity – each state decided its own policies and priorities. Only Tasmania demurred. New South Wales argued that it had adequate legislation already in place, insisting that its National Relief Fund Act 1914 was sufficient to control the patriotic funds. In Western Australia, by contrast, the War Council Act 1915 empowered the state government to take over the administration of any patriotic fund, if so required, but did not sanction state interference in a fund’s disbursement of monies. In Victoria, there was yet another approach: the state government decided that the approval of the state war council had to be sought by any patriotic fund before the fund could be allowed to launch a public appeal. And so it went on. South Australia passed the War Funds Regulation Act 1916, and Queensland likewise introduced its own Patriotic Funds Administration Act.

Adding to these difficulties was the relative financial weakness of the state war councils, which, despite their statutory status, were inadequately funded, as the state governments generally resisted the financing of repatriation through increased taxation. Moreover, great disparities emerged between the states, some of which were more generous than others in their repatriation provisions, causing confusion, resentment and even unrest. Premier’s conferences failed to resolve such inconsistencies or point to a viable way forward, and by the middle of 1916 many of the patriotic funds were beginning to run out of money, so extensive was the call now upon their resources. In response to this unfolding crisis, in May the Commonwealth Government passed its Repatriation Fund Act 1916, which was an attempt to bring together the efforts of the federal and state governments and the patriotic funds.

Although seen later as ‘ill-fated’ and ‘short-lived and disastrous’, at its inception the Australian Soldiers’ Repatriation Fund was welcomed as a timely attempt to achieve elusive coordination and uniformity and to inject a new spirit of generosity in an increasingly war-weary public. The fund won the attention and support of wealthy Melbourne and Sydney businessmen, who donated significant amounts to swell its coffers. To this was added £250,000 from the Commonwealth Government. However, the wealthy private donors argued that the Repatriation Fund ought not to be financed primarily by taxation and that there should be continued reliance on voluntary donations (perhaps with the incentive of tax exemptions) – an insistence that merely perpetuated the flaws of the existing system. The Commonwealth Government, however, was reassured by the prospect that the Australia-wide provision of standardised treatment across the states, in poor communities as well as in rich ones, would be a major improvement and a great step forward applauded by all.

Alas, the Australian Soldiers’ Repatriation Fund was ill-starred from the first. A Repatriation Day, designed to galvanise the nation, was planned for 27 October 1916. However, it was overshadowed by the first conscription referendum (another worryingly divisive aspect of Australian public life) and was postponed. Another date was set for December, but by now the momentum was lost. Only South Australia and Queensland managed to organise appeals, and the results were disappointing in both states, although the Brisbane Courier highly praised an entertaining production of the Repatriation Fund at the city’s Theatre Royal, staged ‘to swell receipts to £2,000’. In South Australia, the State War Council had issued collection tins to local committees, announcing a ‘self-denial month’ in which the public would be encouraged to focus on donation to repatriation causes. In the Adelaide suburb of Prospect, it held an evening of ‘Repatriation Euchre’ to raise funds, and on Yorke Peninsula the Rudius and Wellness Times expressed its editorial opinion that ‘Already a number of the wounded and maimed have come back to us, and the time is fully ripe for us to redeem the promise that was made to them when they set out for the scene of hostilities’.

In New South Wales, however, where the State War Council had failed to organise its own appeal, there remained much confusion surrounding the Repatriation Fund and its purpose. There was also doubt about the precise meaning of repatriation. Speaking at Gundagai, Premier WA Holman, tried to clarify and explain. On the one hand, he said, repatriation would be about the return to Australia of ‘a body of a hundred thousand unwounded men’ who would have to be found jobs and reabsorbed into civilian society. But, he added, repatriation also encompassed the smaller numbers of men ‘dribbling back wounded and invalided’ – there were already 100,000 of them in New South Wales alone, he said – who needed ongoing medical care, often in hospitals. Plainly, however, the public remained unconvinced by what appeared to be a hasty cobbling together of disparate activities and interests – Commonwealth, state and private – and there was little confidence that the fund would succeed in addressing those shortcomings it was designed to alleviate. Even in South Australia, with its collection tins and euchre evenings, only £34,773 had been raised. Queensland managed an embarrassing £12,338.

By now the Returned Sailors and Soldiers Imperial League of Australia (henceforth in this publication referred to as the RSL), founded in 1916, had already emerged as an important advocate for returned servicemen (by October 1916 it would boast no fewer than 114,790 members) and was lobbying hard, calling for more effective Commonwealth action. The conscription debate had brought into sharp focus the particular qualities of the AIF as a volunteer army and in contrast to those British and New Zealanders, and, irrespective of whether private schools might or might not support the introduction of conscription in Australia, almost all considered that this volunteer status entailed certain obligations towards those who had willingly agreed to risk life and limb for king and country. Volunteers attracted admiration and respect, many felt, in ways that conscripts might not. As one local politician, Councillor Sweeney from South Australia, explained it, because Australia’s armed forces were composed entirely of volunteers, it was easier to ‘do homage to those who had gone, and honour those who...
In late 1915, with Commonwealth Government encouragement, the individual states began setting up their state war councils to assist in the repatriation of returning servicemen. As this poster, issued by the State War Council of South Australia, indicates, part of the War Council’s brief was to find employment for veterans. Voluntary effort was seen as paramount; hence the exhortation to employers and citizens to help find jobs for ex-servicemen.

(State Records of South Australia GRG 32/16/23)

‘Hurry up, and wait’: Patient until the last, Australian soldiers just returned from overseas at the end of the First World War form an orderly queue behind the fence at a demobilisation depot in Melbourne, Victoria. The benches (so yet surprisingly empty) in the foreground are for visiting relatives hoping to welcome home their husbands, brothers or sons. These anxious women stand as one of the seats, searching no doubt for familiar faces among the crowd.

(State Records of South Australia 205/1/332)
will not return.’ ‘This was a theme picked up by the RSL, which argued that those who had served overseas were now ‘superior citizens’ who deserved privileged treatment, and that their repatriation included an ‘inalienable right’ to pensions, medical care and employment.’

Although some would later find this privileged treatment socially divisive, for the moment this sense of profound obligation suffused Australian society. It accounted for the enthusiasm with which the patriotic funds had been established and supported, and it explained the phenomenal growth of organisations such as the Red Cross. Remarkably, and in stark contrast to the unbending attitudes that characterised other armies in the Great War, the AIF hierarchy recognised its obligations to its volunteer members. It refused to execute deserters, for example, unlike the British Army, and recognised that there were particular circumstances (other than injury or illness) in which a volunteer might be released prematurely from further service. Here was a militarily unusual and yet typically Australian form of repatriation.

The example of Ross Jacob is instructive. One of several Jacob brothers from Kadina in South Australia, Ross had fought at Gallipoli, where he was wounded. Recovering, he had risen steadily through the ranks, and in February 1917 – now a major – was given temporary command of the 36th Battalion on the Western Front. Soon promoted to lieutenant-colonel, he was contracted influenza in the epidemic that killed millions worldwide as the war drew to a close. As he recuperated from his illness, he mused on the fate of his brothers in the war and on the increasing difficulty with which his ageing father struggled to manage the family farm back in Kadina. Accordingly, Ross Jacob wrote to his brigade commander, explaining that ‘I am the eldest of five brothers who have served in or are serving in the A.I.F., I have had 3 years and 9 months service and have only been absent from duty twice, once wounded and once sick... Two of my brothers have been rendered permanently unfit for any work and have been discharged’. A third brother, he added, ‘was badly wounded and taken prisoner in April 1917 and is now in Germany’. A fourth brother, Kenneth, who had fought at Gallipoli and on the Western Front, discovered that he could not even bear to live in a normal house. Instead, he went into the bush, trapping and shooting game and fossicking for gold. ‘When I got back I was hopeless’, he admitted, ‘it took me a while to straighten out’. Indeed, in 1915 and 1916 returned soldiers often engaged in what was seen as antisocial or even subversive behaviour, picking fights, clashing with police, drinking to excess, or merely hanging around aimlessly in the streets. Such men were easy targets for political extremism, left and right, and for politicians who tried to attract them to various causes. For example, former South Australian Premier John Verpan warned of ‘the spirit of Bolshevism’ that was abroad in the nation. ‘These things should be run out of Australia’, he insisted, and he was ‘looking to the returned men to assist in wiping them out’. He envisaged, he said, ‘a new brotherhood’ of returned servicemen who would bring ‘new aspirations to Australia’ and ‘stand together and dictate their demands to Australia’.

Meanwhile, the Lahar Call newspaper informed its readers that returned soldiers were ‘not going to quietly slip back into their pre-war life of constant worry, grind, want and semi-starvation’. Instead, they were going to ‘demand a decent living’ and demand decent conditions for themselves and their loved ones who had lived through the experience of war – usually traumatic, always life-changing – had altered individuals’ perceptions, values and ambitions. Those who had lived through the high drama of the battlefield would not easily settle back into mundane or routine jobs, where normal tasks would seem unbearably trivial. Corporal Leonard Harvey wrote from France to his father in Australia, looking ahead to the day when he might return home. ‘I am trying to get into a [military] school for motor mechanics’, he explained, ‘I have been thinking seriously of late what occupation I am going to follow when I return to Australia. It is pretty certain to me that I will not be content to sit at a desk and do clerical work’.
Convinced by the RSL (and public opinion) that a volunteer army deserved only the very best on its return home, yet alarmed by the disquieting behaviour of many of those who had come back already, the Commonwealth Government decided it was time to act. Moreover, disappointed by the failure of the combined efforts of the Commonwealth, states and patriotic funds to provide a coordinated, workable solution to the repatriation problem, the Commonwealth Government determined that it should now take the lead unequivocally. On 8 July 1917, therefore, Senator Edward Davis Millen, Vice-President of the Federal Executive Council and former Minister for Defence, introduced the Australian Soldiers’ Repatriation Bill into the Commonwealth Parliament. He spoke for two hours, explaining and recommending the new proposals. In a rousing conclusion, capturing the mood of the moment, Millen told his fellow parliamentarians that there was a Bill designed to honour Australia’s obligations ‘to those who on its behalf have gone down into the Valley of the Shadow of Death’. Furthermore, he added, here was an attempt to show that the Commonwealth Government itself ‘may be regarded as not altogether unworthy either of Australia or of those who heroically fought and suffered in its defence’. It was an echo of the point made passionately earlier in the year by Prime Minister WM ‘Billy’ Hughes:

We say that the care of the returned soldier is one of the functions of the Commonwealth Government. Our soldiers fight for Australia, not for Queensland, New South Wales, or Tasmania, but for Australia. They are enlisted under the Commonwealth banner. They go out to fight our battles. We say to them: ‘When you come back we will look after you’. … The soldiers will say to the Commonwealth Government: ‘You made us a promise. We look to you to carry it out’.

Few now doubted the legitimate primacy of the Commonwealth Government in repatriation affairs, and likewise the Commonwealth’s moral duty seemed clear to most. Accordingly, on 28 September the Australian Soldiers’ Repatriation Act 1917 was passed. Senator Edward Davis Millen became the first Minister for Repatriation, responsible for setting up the Department of Repatriation and making it work. At the same time, a Repatriation Commission was established to oversee policy and its implementation, prescribing the purposes and conditions for which assistance might be given to individuals, and hearing appeals from dissatisfied applicants. As Millen recommended, there was a ‘no blazed trail for the work of Repatriation’. Instead, he said, the ‘story of the re-establishment of the soldier in civil life in all those countries which are engaged upon the task, is, so far, a story of experiment, sometimes more, and sometimes less successful’.

The starting point was the registration of every returned soldier, which would be completed on the homeward-bound troopships, so that the repatriation process was underway for every individual even before they had stepped ashore in Australia. This, Millen explained, would eliminate that period of ‘prejudicial idleness and uselessness’ to which so many returned soldiers had been condemned in the past and led to public disquiet. For the physically incapacitated, there were programs of elementary workshop training, helping them to exercise damaged limbs or to use artificial ones, and where they would also be assessed for more advanced training in the future. Apprentices who had joined the AIF before completing their indentures would be allowed to complete their programs, with the government topping up the wages paid by private firms. Severely incapacitated returnees on full pensions would be cared for full-time in homes or hostels, and sanatoriums would be set up for those suffering from tuberculosis. There was as yet no suggestion for the establishment of repatriation hospitals, but Millen recognised that many returned soldiers would require medical treatment from time to time, and explained that this would be provided in local hospitals.

Millen saw soldier settlement as an extension of existing land settlement policy. He had been involved in closer settlement in New South Wales, and saw soldier settlement on the land as a means of providing returning soldiers with a start in breaking up larger holdings. He was cautious about some of the schemes that had been proposed but supported the increase of the minimum advance for a soldier settlement block from £500 to £750, arguing that the smaller the block, the more significant would be the settler’s own labour in developing it. Generally, the size of the holding would correspond to the amount of the settler’s available capital. Millen also shared the general view – vastly overoptimistic, as it turned out – that soldier settlement would produce a class of robust, self-reliant and successful farmers – former soldiers, now healed in mind and body, who would make a significant contribution to the agricultural and economic development of Australia. He reckoned the total cost of the soldier settlement project to be £60 million, which he considered an excellent investment in the country’s future.

Millen also planned to revise the Pensions Act 1914. Recognising that disabilities might become worse over time, he arranged for a pension review for each individual after an initial six months; further revisions were to be conducted at the request of the pensioner. While war pensions might be increased at review, they could not be decreased. Millen also thought that acquiring a home of one’s own would be a high priority for returnees trying to rebuild their civilian lives and achieve a sense of democracy. He therefore proposed a system of financial assistance on generous terms. There were also suggestions that returned soldiers might usefully become involved in national projects, from the manufacture of matting, felts and linoleum to the standardisation of railway gauges and the development of hydro-electric power. Significantly, Millen was clear that widows wishing to learn new occupations should also receive training, together with subsistence costs. Likewise, orphans would be afforded necessary care and help with education.

Alongside Millen, as minister, was Nicholas Colston Lockyer, a senior public servant, who was appointed Comptroller of the Repatriation Commission. It was a wise choice. Lockyer proved capable of prodigious hard work (even to the extent of wishing there were 48 hours in a day) and toiled ceaselessly to ensure that everything was in place for the formal launch of the Repatriation Department. He was committed to repatriation as a cause and saw the Repatriation Commission as a friend or mentor to the returned servicemen – a role ‘demanding the vision of a visionary. For example, Gilbert emerged as an early champion of the entitlement of Aboriginal war veterans to

Recognising that disabilities might become worse over time,
repatriation provisions. Although he acknowledged that war service did not remove Indigenous Australians from the ‘protection’ of the several state Aboriginal Acts, he was categorical in his insistence that an ‘aboriginal who has served as an Australian soldier is entitled to the benefits under the Australian Soldiers Repatriation Act and nothing in the Aborigines Act denies the right to such aboriginals of the full use and enjoyment of any benefits granted to him by the [Repatriation] Department’. 35

Although now firmly under Commonwealth control, much repatriation administration was to be devolved to state boards (which took over many of the functions of the erstwhile war councils and absorbed a number of their former employees, not always without trouble), and close liaison was to be maintained with organisations such as the RSL and the Red Cross. Finally, all the arrangements were in place, and the Department of Repatriation ‘stood up’ (in military parlance) on 8 April 1918.

1. Avon Gazette and York Times (Western Australia), 12 December 1919.
2. Examiner (Launceston), 27 December 1919; Western Mail (Perth), 24 December 1919; Australasian Worker, 25 December 1919, Sun (Sydney), 5 December 1919.
3. Hans Times, 12 December 1919; Mirror (Sydney), 11 May 1919; Truth (Perth), 21 June 1919; Sunday Times (Perth), 24 December 1919.
6. People’s Weekly (Moorinda), 5 September 1914; Kadina and Wallaroo Times, 9 July 1915; Yorke’s Peninsula Advertiser, 16 July 1915.
13. National Archives of Australia (NAA), A1/35775/151, Secretary, War Council of Western Australia to Secretary, Prime Minister, 8 December 1918. Quoted in Oppenheimer, All work no pay, p. 70.
14. Oppenheimer, All work no pay, p. 67.
15. ibid., p. 71.
17. Border Watch (Mount Gambier), 15 November 1916.
22. ibid.
23. NAA, B2455/3086280, Lloyd Allan Bishop; see also Sunday Mail (Adelaide), 22 July 2017.
24. Tony Stephans and Steven Stewart, The last Anzacs: lest we forget, Fremantle Arts Centre Press, Fremantle, 2003, p. 34.
26. Labor Call, June 1918; cited in Baumstein, Broken Nation, p. 133.
27. National Trust of South Australia, Mount Lofty Branch Archives, “in the best of health and spirits”, the letters and diaries of Signaller Lance Corporal Leonard John Harvey, unpublished manuscript compiled by Bob and Carol Harvey, Elizabeth M Scott, Diana Kay Aruba and John Campbell Harvey, letter, 29 October, 1918.
28. Lloyd and Rees, The last shilling, p. 5.
29. ibid., p. 19.
30. Oppenheimer, All work no pay, p. 23.
31. Lloyd and Rees, The last shilling, p. 86.
32. ibid., pp. 80–81.
33. ibid., p. 35.
34. ibid., p. 107.
BRINGING THE BOYS (AND GIRLS) HOME
BRINGING THE BOYS (AND GIRLS) HOME

Planning for the return of the AIF to Australia – repatriation ‘in the strict sense of the word’; according to at least one commentator – began in December 1916, long before the outcome or duration of the war could be forecast with any certainty. As late as January 1918, General William Birdwood had imagined that Australian and New Zealand troops would shortly be transferred from the Western Front to Egypt to await return home. But the impact of the German offensive in the northern spring of that year, and the major role played by the Australians in preventing a German breakthrough and then vigorously prosecuting the war to its conclusion, meant that Birdwood’s idea was quickly abandoned. On 23 October 1918, with the imminence of the German collapse now apparent, CEW Bean, the official Australian war correspondent, had dared to ask the vital question: ‘the question is the plan for repatriation of the troops in readiness for the moment when the war ends’. For the moment there was no plan, but he was to be surprised by how quickly a comprehensive answer was put in place.

There was early agreement that demobilisation was the responsibility of the Australian Defence Department, while the new Repatriation Department would be responsible for everything that happened next. Demobilisation was essentially a military function, while the rehabilitation of and care for former soldiers were civilian tasks. However, there was still room for confusion in what seemed otherwise a straightforward division of labour, and, as before, there were uncertainties about definitions and the extent to which ‘repatriation’ could be used as a generic umbrella term, including but not restricted to the work of the Repatriation Department. Despite (or because of) such debate, ‘repat’ in popular parlance had acquired that all-inclusive but sometimes vague usage that was already apparent by early 1919. However, the waters were muddied further by AIF Headquarters in London. First, the AIF sought to ask its soldiers what employment they would seek on return to Australia, which Millen saw as a gross intrusion on his department’s territory, and said so. Then Brigadier General T Griffiths, the Headquarters commandant, confused the issue further, suggesting that repatriation, properly understood, comprised three interlinked functions: the ‘repatriation’ (Griffiths’ term) of troops to Australia, their subsequent demobilisation, and then their ‘reinstatement’ (his term) into civilian life. Again, Millen was not pleased. What was clear, however, for better or worse, was that ‘repatriation’ now could – and would – be used to encompass the entire process, in all its complexities, while at the same time also referring specifically to the discrete activities of the Repatriation Department.

Fingers had been burned and relations strained, and there were renewed efforts to ‘ensure a perfectly co-ordinated policy’. But that was easier said than done, and departmental rivalries emerged again when it was decided to institute a program of education and training for AIF troops awaiting their return to Australia. The Repatriation Department saw that as part of its task (the program was merely a prelude, the department argued, to the extensive employment training schemes it was running in Australia), but that interpretation was rejected by the AIF, which pointed out that soldiers were its responsibility until formally discharged. Finally, the Repatriation Department accepted a face-saving compromise, in which the AIF would manage the entire program, with the

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Proseading page  
The arrival home of walking wounded at Port Melbourne, Victoria, during the First World War was further evidence that the repatriation and rehabilitation into society of Australian servicemen and women would be a lengthy and complex postwar task. (AWM J00327)
exception of technical drawing, for which the department would be responsible! Henceforth, the Repatriation Department would have virtually no direct involvement in the return of the AIF to Australia. Thus, a major element of repatriation, broadly understood, lay firmly outside the competency of the Repatriation Department.

This made administrative sense, even though some found the arrangements confusing or awkward.

In October 1918, Senator George Foster Pearce, the Minister for Defence, had estimated that it would take from two to three years to return and demobilise the troops. The AIF reckoned it could be done in six to nine months. As Prime Minister ‘Billy’ Hughes saw it, the man for the job was plainly Lieutenant General Sir John Monash, the Australian Corps Commander, who had been the supremely successful practitioner of all-arms warfare on the Western Front during 1918. Ten days after the armistice, on 21 November 1918, Monash was brought to London to be appointed Director General of the Australian Department of Demobilisation and Repatriation, taking command formally on 4 December. He deployed the same energy and zeal that had brought him victory on the battlefield, first shifting the Australian army from France and Belgium to Britain, then devising a wide range of education and training courses to occupy the men, and finally sending home to Australia on average 500 soldiers a day in ships he had commandeered for the purpose. It was to be a remarkable performance.

On 14 November, less than a week after the armistice, Birdwood, in his role as General Officer Commanding the AIF, had set the tone for the repatriation of the Australian forces, issuing a memorandum to all officers and men. The AIF would do its best to get everyone home in timely fashion, and in return he expected the troops to cooperate. He conceded that ‘demobilisation will undoubtedly be difficult and irksome’ and emphasised that ‘great personal restraint will certainly be required’. His message was a simple one: ‘Play the game, boys, during this time, and add more to the debt of gratitude which will also be acknowledged to you by the Empire and remembered by me as your comrade and commander’. If Birdwood aspired to the common touch, then so did Monash. In London he was visited by former Private Tom Ryan, now a member of the Victorian Parliament, who was left in no doubt as to Monash’s ability or to his genuine concern for his men. Monash fully understood ‘the repatriation problem’, Ryan thought, and Monash’s staff had ‘conceived a most common-sense practical and just [plan] for this work of repatriation … On the vocational, educational and industrial outlook, [Monash] is indeed more interested in their effective demobilisation than in punishment.

In all, between 3 December 1918, when the troopship Port Hacking left Plymouth for Australia, and 22 September 1919, when the Port Sydney docked at Fremantle, a total of 147 shipments had returned 135,005 men from Britain, when it went ‘on strike’, but the men were handled gently and, their grievances addressed, were soon pacified. This set a standard for how the AIF would be managed in the months ahead. By mid-January, Monash had issued his pamphlet Demobilisation of the AIF. Things which Australian soldiers ought to know, and he appointed a team of lecturers to explain to the troops exactly what was planned for them. This transparency was designed to create a positive ‘Reconstruction Morale’, as Monash termed it, so that men could feel confident about the arrangements that were being put in place on their behalf. A stream of pamphlets and leaflets, bulletins and news sheets, kept up the information flow. To the amazement of some observers, Monash was even relaxed about the 800 or so men who had enlisted in 1914 and 1915 but had gone absent without leave in Britain. He was more interested in their effective demobilisation than in punishment.

In total, there were about 161,000 men to return to Australia, most initially in France and Belgium but with sizeable numbers already in the United Kingdom, and some scattered in other theatres of operation, notably Egypt and the Middle East. Repatriation to Australia would, as far as possible, be on a ‘first in, first out’ principle, so that those who had fought at Gallipoli would be the first to go home. Inevitably, there would be difficulties, not least when a nationalist uprising against British rule in Egypt in May–June 1919 required the continued presence there (albeit temporarily) of Australian troops for ‘policing’ duties. But generally the process was handled with remarkable speed and efficiency and with the cooperation of the troops. As Monash had willing cooperation of the troops. As Monash had with unnecessary restrictions’. Finding enough ships was Monash’s problem, especially as there was intense competition from Canada, India, New Zealand and South Africa. Hughes had got things off to a good start in December 1918, when he had secured the allocation of sixteen troopships for Australia. Thereafter, Monash had to employ a mixture of bullying, forcefulness and subtle persuasion to ensure the continued flow of shipping. As Monash observed in April 1919, ‘it has been a better battle between me and the Shipping Controller than I have ever adopted every sort and kind of subterfuge, and every species of bluff to try to make it appear that he is willing and able to meet our requirement’. But Monash had seen through the ‘great pretence of being able to produce ships faster than I have been able to produce troops’ and, as a result, ‘I have now got the Shipping Controller absolutely beaten … I am not giving him any rest, and scarcely a day passes that I do not deliver an attack on him with a new angle’.

In all, between 1 December 1918, when the troopship Port Hacking left Plymouth for Australia, and 22 September 1919, when the Port Sydney docked at Fremantle, a total of 147 shipments had returned 135,005 men from Britain.
Senator Edward Davis Millen (1860–1923), c. 1914. Edward Millen was born at Deal in Kent, England, on 7 November, and as an adult worked in marine insurance until migrating to New South Wales c. 1880. He earned a reputation as an amusing as well as forceful orator. He worked in marine insurance until migrating to New South Wales c. 1880. He earned a reputation as an amusing as well as forceful orator. He was Minister for Defence on the outbreak of war in 1914, and shortly after became Leader of the Opposition in the Senate. In 1915 Senator Millen was appointed vice-president of the Executive Council, a task to which he brought his customary clear thinking and excellent administrative skills. By 1889 he was editor of the Western Herald and Darling River Advocate. Later, he set himself up as a land, mining and financial agent, with offices in Sydney. Millen had also entered the political arena, and was elected to the New South Wales Legislative Assembly in 1894. Subsequently, he represented New South Wales in the federal Senate from 1901 until 1923, where he served as a land, mining and financial agent, with offices in Sydney. Millen had also entered the political arena, and was elected to the New South Wales Legislative Assembly in 1894. Subsequently, he represented New South Wales in the federal Senate from 1901 until 1923, where he served as a land, mining and financial agent, with offices in Sydney. Millen had also entered the political arena, and was elected to the New South Wales Legislative Assembly in 1894. Subsequently, he represented New South Wales in the federal Senate from 1901 until 1923, where he served as a land, mining and financial agent, with offices in Sydney. Millen had also entered the political arena, and was elected to the New South Wales Legislative Assembly in 1894. Subsequently, he represented New South Wales in the federal Senate from 1901 until 1923, where he served as

Lieutenant General Sir John Monash GCVO KCB (1865–1931), portrayed in 1919 by the artist John Longstaff, when Monash was Director General of the Australian Imperial Force (AIF) Department of Demobilisation and Repatriation in London. Born in West Melbourne on 27 June 1865, of Prussian–Jewish descent, John Monash trained and practised as a civil engineer, and joined the militia, achieving the rank of lieutenant colonel in 1908. In 1915 he was sent to Gallipoli, landing on 29 April, but it was on the Western Front, with his meteoric rise to Corps Commander of the AIF, that Monash made his reputation as a brilliant all-arms strategist, achieving for the Australians a major role in the Allied Victory of 1918. Immediately after the Armistice, he was called to London to take charge of the Department of Demobilisation and Repatriation, a task to which he brought his customary clear thinking and excellent administrative skills. Monash's efforts resulted in the speedy repatriation of Australian troops. His job done, he left London for Australia, arriving to a hero's welcome in Melbourne on Boxing Day 1919.
and a further 35 ships returned 16,273 soldiers from Egypt. Despite Monash’s initial difficulties with the Shipping Controller, the rate of repatriation had reached a cracking pace by late March 1919 and accelerated still further during May, as the shipping situation eased. By late June, over half the AIF had embarked, and the majority of those left would leave during July. Those remaining thereafter were mainly administrative staff or those who had chosen to delay their departure for personal reasons. The job was almost done, and Monash released the office dress code so that he and his staff could now wear ‘civvies’ to work.

Monash kept a close watch on the progress of the homeward-bound ships, however, expecting regular reports from his commanders. Boredom was the main enemy on the long journey to Australia. While some soldiers were content to while away the time reading or in quiet contemplation, others needed entertaining. Wise commanders devised programs of diversionary activities. As one put it, reflecting upon his idle charges, ‘if I don’t break the monotony for him – he will do it for me’. The best disciplined ships were those where there was plenty to do. During its voyage, the Anchises offered 29 courses on subjects as varied as history, politics, economics, fruit and irrigation, wheat and sheep, and the safe operation of railways. Keen classicists could even study Latin. So popular were these classes that they were attended by an average of more than 250 returnees each day. Despite such efforts, there were occasional outbreaks of disorder, notably at Colombo in the early months of 1919. One ship was refused permission to disembark its passengers due to suspected hunger strikes among the troops. Such ships, however, were in the minority. Women also suffered the same fate and a further 56 shiploads returned 16,773 soldiers from Egypt. Although the repatriation of the AIF had been remarkably swift – by the end of September 1919 the AIF Department of Repatriation and Demobilisation was closing, and Monash had left for Australia – many servicemen had had to wait months before being allocated a ship to return home. As at sea, so ashore: it had been imperative to keep men occupied, as Monash recognised, but it was also important to equip the soldiers for their civilian lives ahead.

Perhaps not surprisingly, given the AIF’s determination to keep the Repatriation Department at arm’s length, Monash and his staff had little idea of what the Repatriation Department in Australia was doing. When, belatedly, a liaison officer from the department arrived in England in March 1919 and was attached to Monash’s staff, he was surprised to find that there were no copies to be had of the Repatriation Act or any of its regulations. The only Repatriation Department publication that had been distributed was Millen’s open letter, ‘What Australia is doing for her Returned Soldiers’. However, the varied training and educational programs that had been provided by and for the AIF, initially in France and Belgium and then more widely in Britain, and subsequently on the troopships as they voyaged home, had whetted men’s appetites. Many had acquired a taste for learning. Some were anxious about what awaited them at home and thought they should be prepared to do something, while others were positively enthusiastic about the prospect of building life anew with new training and employment opportunities.

Bringing the boys (and girls) home...
As a result, interest in the Repatriation Department sharpened as the troopships approached Australia. On one ship, the commander addressed the 900 embarked men on the work of the department and explained the terms and provisions of the War Pensions Act. As he observed, ‘By this means the troops will have a fair idea of what will happen to them, and what will be expected of them after disembarkation.’ He found the men responsive, asking him intelligent questions, and was optimistic about their readiness to react positively to initiatives and opportunities once ashore. Other commanders were less sanguine. Lieutenant Colonel AP Imlay in the Dongola in May 1919, for example, conceded that ‘interest in repatriation has been acute’. But he worried that ‘everybody is expecting everything to be done for them on their arrival in Australia, and are not making any allowances for the period of stagnation or disillusionment which inevitably follows’. Likewise, AR ‘Banjo’ Paterson drew a contrast between ‘the beautifully printed Government pamphlets setting out the things that a grateful country is doing for the returned soldier’ and the ‘sleepy and lethargic’ mood of the returnees themselves, in which he detected ‘unread, a look of waiting for something to happen. One sees many faces looking anxious and unsettled’. After long years away, the prospect of returning to civilian life was indeed a daunting one – ‘repatriation’ for the many was only just beginning.

If the returning soldiers found the prospects daunting, then so, too, did the Repatriation Department. By the end of September 1919, less than eighteen months after the department had been set up, some 265,000 soldiers had returned to Australia, all eligible to one degree or another for repatriation support. By 1920, more than 90,000 incapacitated soldiers were receiving war pensions, as were almost 49,000 dependants of those who had died. Yet eligibility for support, and at what level, would soon become a thorny issue, especially as financial constraints began to bear. Were men who had lost both legs more deserving than those who had lost a hand? Did the granting of a war pension disbar an old age pension? Should tuberculosis contracted during war service be categorised as a war wound?20

A gap between need and aspiration would shortly become apparent, and there would be those who considered that the department promised too much and was extravagant in its use of public funds. When Millen announced in March 1920 that the administration of war pensions (which were to be increased) would be amalgamated with the administration of repatriation more generally, and that allowances prescribed by the Repatriation Commission would be incorporated into the pension structure, there were those who expressed alarm. Sir John Langdon Bonython, for example, had long taken a close interest in repatriation. He had been involved in the work of the earlier state war councils and had supported the Australian Soldiers’ Repatriation Act 1917, becoming a foundation commissioner. ‘I am very glad to have been associated with the establishment of the Repatriation Department’, he wrote in April 1920, but now considered it increasingly ‘profligate’ as it tried to meet an array of expectations. ‘As he put it, the ‘Repatriation Department will be the biggest in the Commonwealth but people don’t see that now, or they would not be so ready with their reckless suggestions’. Bonython’s criticisms may have been unfair, his concerns exaggerated, but it was clear to all that the Repatriation Commission and its department would have their work cut out in the years ahead.

3. ibid., p. 111.
4. ibid.
5. National Trust of South Australia, Moonta Branch Archives, ‘In the best of health and spirits’: the letters and diaries of Signaller Lance Corporal Leonard John Harvey’ unpublished manuscript compiled by Rod and Carol Harbottle, Elizabeth M. Scott, Diana Key Ainslie and John Campbell Harvey, Memorandum: General Birdwood, 14 November 1918; to the officers, non-commissioned officers and men of the Australian Imperial Force.
7. ibid., p. 251.
8. ibid., p. 268.
11. ibid., p. 169.
12. Lloyd and Ross, The last shilling, p. 130.
13. ibid.
16. ibid., p. 249.
17. Lloyd and Ross, The last shilling, p. 122.
18. ibid., p. 130.
19. ibid.
REPAT IN PRACTICE:
THE INTER-WAR YEARS
Recently released from German captivity, Australian prisoners of war march down Horseferry Road, London, to Australian Imperial Force administrative headquarters before repatriation to Australia. In all, some 3,853 Australians were captured on the Western Front during the First World War. Although many of the Australians in German prisoner-of-war camps were reasonably well treated (thanks to the Red Cross), the 800 or so other ranks captured after the First Battle of Bullecourt in April 1917 were held in appalling conditions at Lille in France, enduring ten days without food or water and then forced to labour (including burial of the dead) within the range of Allied guns. Returning home to Australia, former prisoners of war were given a four-week furlough before being demobilised and discharged. Little thought was given to how the physical or psychological consequences of their imprisonment would affect these veterans in the years ahead.

(REPAT IN PRACTICE: THE INTER-WAR YEARS)

Even before the war had ended and the AIF had been brought home, the complexity of the Repatriation Commission’s task had become apparent to its seven members. By October 1918, the Repatriation Department, then only six months old, had indexed and filed records for more than 27,000 veterans, granting assistance in more than 7,000 cases. The commissioners were already experiencing the pressure of work and conflicting demands on their time. Senator Millen was chair, giving the commission a direct line to the cabinet, but during 1918 had hardly ever attended a full meeting due to other commitments. Others were in a similar position. Edward Grayndler, for example, secretary of the Australian Workers’ Union, was able to make only eleven of the commission’s thirty-four meetings between July and November 1918, while John Langdon Bonython managed just over half. HP Morehead, who had lost an arm and a leg at Gallipoli, represented the RSL on the commission (giving it, too, a direct line to the cabinet through Millen) and was able to attend more frequently, as he lived in Melbourne where most of the meetings were held.

Typically, commission meetings grappled with a dozen or more cases of varying difficulty referred for decision by the state boards. Early examples included a 21-year-old returned soldier who had lost his left leg. In receipt of a war pension, he was now applying for sustenance at the rate of 19s 6d a week for three years to allow him to undertake vocational training in analytical chemistry at the University of Western Australia. It was noted that before joining the AIF, he was ‘particularly clever at Chemistry’, and had been a student at Scotch College in Perth. The State Board requested adjudication as to whether the payment of sustenance was justifiable. The commission gave conditional approval, subject to the board determining whether the applicant had been accepted for a chemistry course before enlisting, and whether his parents’ financial position had deteriorated during the war. A further example concerned a widow who was in receipt of awards to the total of £35 18s 5d for furniture ‘and amelioration’ from the erstwhile State War Council, and had now applied for 12s 6d rental allowance from the State Board. The board had rejected the application, principally on the grounds that the widow was ‘living immorally with a man’ and that the house in question was being regarded ‘with suspicion’ by the police. The commissioners had no hesitation in upholding the board’s decision.

As well as concern to identify ‘deserving cases’ (and to reject the ‘undeserving’), there was also an early determination not to allow costs to spiral out of control – an anxiety expressed especially strongly by Bonython. Yet compared to the support offered in the equivalent Canadian and American schemes, the Australian repatriation provision was remarkably liberal. This was especially so in the area of vocational training, which, despite worries about the financial implications, became more generous as time went on, expanding its provisions in the light of experience and as demand for courses continued to rise. After April 1918, vocational training could be undertaken by all disabled servicemen and any other returned soldiers whose education had been interrupted by the war. In April 1919, with trade union approval, such vocational training was extended to include all able-bodied servicemen, provided they had joined up before they were 20 years of age. Significantly, following the
appointment of James Nagle as director of Commonwealth Vocational Training from 1919 to 1926, further and higher education institutions – technical colleges, teacher training colleges, universities – were made available to younger ex-servicemen, with a grant to cover fees and a loan to meet living expenses. After 1920, the scheme was yet more generous and accessible. Now any returned serviceman of any age might apply for vocational training, and that night was extended to returned nurses and to war widows.5

The increased scope of the vocational training scheme met widespread approval. Many soldiers had come back to Australia with new ambitions, their aspirations altered by travel and their wartime experiences, and in looking to rebuild their lives anew sought new skills and new forms of employment. In November 1919, the Diggers’ Gazette, an RSL publication, urged the Repatriation Department to do more to respond to this changed climate. Its editorial acknowledged that Australia was ahead of the other former belligerents in its repatriation provisions but insisted that ‘this I am certain of, that we could do more – and must’. Similarly, the magazine conceded that there was ‘not much fault to find with the men who administer the Department’. However, it thought the Repatriation Department ‘saturated with officialdom’, and that in its bureaucratic introversion ‘seemed to some extent to lose the soldier’s point of view’. Perceptively, the Diggers’ Gazette recognised that most men had been changed by war – some had been ‘hardened’, mentally and physically, but others were now of a ‘nervous’ disposition – and that this could affect the types of employment to which they might now be suited.

The present attitude of the Department, the Gazette complained, ‘is to examine your papers, find your pre-war occupation, plump you back in it, and, with a sigh of relief, mark your card “Repatriated”’. The RSL wanted a ‘little less regulation and a little more personal touch’, and was duly gratified when in the following year it was announced that all returned servicemen (and women) could apply for vocational training.6

Notwithstanding the criticisms from the RSL, flexibility (a ‘more personal touch’) was often exercised in the granting of ‘sustenance’, in the form of interim payments to men registered for employment to keep them solvent until something turned up. It proved a boon during periods of drought and high unemployment and protected veterans from hardship. Payments were modest and the duration typically short – in April 1920, the average sustenance was £8.00 to cover a period of about three weeks – but, as Millen recognised, they made a huge difference to those in need. Arthur Edmund McCallum, for example, an Aboriginal Australian from Alice Springs, whom the Digger had transported to Gallipoli and had later fought at Pozieres and Moquet Farm before being seriously wounded in March 1918. Repatriated to Australia and discharged in February 1919, he initially found sixteen days work with the Roads Board at Kirup in Western Australia (he was allowed him £9 12s 3d to purchase what it termed vocational ‘tools of trade’ – a tent, a rug, bush blankets, billy cans, a frying pan and other utensils. It proved a sound investment, as it set up Arthur McCallum in congenial and stable employment with the Roads Board until he moved on to other work in 1929.7

Alongside vocational training, of immediate significance to many returned servicemen was medical repatriation. It was also one of Australia’s first ventures into the arena of mass medicine, the tangible expression of the highest and most extensive public health initiative until after the Second World War. In September 1918, Millen approved a structure for the Repatriation Department’s new Medical Section and its various provisions. It was agreed with the Defence Department that invalids would be retained in the AIF until they no longer needed hospital treatment under military control as ‘an aid to their restoration’. The Repatriation Department, however, accepted responsibility for the subsequent recurrence of disabilities and further complications after an invalid had been released from the AIF. Through its system of hospitals in France (which were closed during the early months of 1919) and its widespread medical repatriation services in England, the AIF had managed the acquisition and deployment of artificial limbs and other surgical appliances. Subsequently, it continued to supply such items through the Commonwealth Artificial Limbs Factory. By the mid-1920s, however, the Repatriation Department had taken overall responsibility for the future issue of such aids, together with wheelchairs, spectacles, splints and other items.

The Repatriation Department appointed the Principal Medical Officer to manage its medical services, along with medical officers and a number of assistant medical officers in each state. Those officers as a matter of routine examined all veterans who applied for medical treatment, vocational training and, in certain cases, employment. The bedrock of the system was its network of local medical officers (LMOs) across Australia. By July 1920, there were 66 LMOs, of whom 537 provided both inpatient and outpatient care in their districts. Additionally, there were arrangements for 222 country hospitals to provide inpatient as well as outpatient treatment. A key part of the system was its flexibility, which allowed veterans with war-related ailments to approach their LMOs directly to seek treatment or advice.

To the array of directly employed medical officers were added the consultants and advisers available to the Repatriation Department. Four eminent medical specialists sat on the department’s Medical Advisory Committee, and among them was J Ramney Webb, who had served as a colonel in the AIF during the war and was a great enthusiast for medical repatriation. He had a particular interest in the treatment of tuberculosis and devised the system in which tubercular ex-soldiers were treated initially in sanatoriums, where they would be classified as either ‘arrested’ or ‘incurable’. The ‘arrested’ cases were sent to communal farms for fresh air, sunshine and outdoor work. There, they could be trained in agricultural work, leading (if their condition improved) to the acquisition of their own farms or to participation in the soldier settlement scheme. According to one report:

Still a further case is G, admitted with persistent haemorrhage, weighing 7st 13lbs, and with bacilli in his sputum. A patient F, weighing 8st 11lbs on admission, after 12 months treatment weighed 11st 8lbs and was transferred to farm work. More than a case is F, admitted with persistent haemorrhage, weighing 7st 13lbs, and with bacilli in his sputum. Six months later he was discharged weighing 9st 3lbs, with signs of the disease almost disappeared from his chest and an
absence of sleep. He is now grooming and caring for three horses, and looks forward to resuming his pre-war occupation at the end of three months.”

Ramsey Webb’s approach to dealing with tuberculosis was novel at the time, and was but one example of how repatriation medicine became an important innovator in medical treatment and administration in Australia.

The extent to which repatriation came to be seen as overwhelmingly a health matter was evident in the increasing linkage of the federal ministerial Health and Repatriation portfolios during the 1920s and 1930s. The transfer of medical responsibility from the Repatriation Department added to the range of facilities available, complementing the 300 civil hospitals across Australia where veterans could be treated at the department’s expense. The range of disabilities with which the department was faced continued to expand. ‘Trench nephritis’, as it was known, a kidney complaint, could develop into Bright’s disease. Gas poisoning could lead to chronic lung conditions. Tuberculosis remained widespread. Sufferers of malaria experienced periodic recurrence of the affliction. There were gastric problems, heart disabilities, rheumatism, and ‘gunners’ deafness’, all caused or aggravated by war service. There was also ‘self-inflicted’ venereal disease. However, a third of all patients in the inter-war period, both medical and surgical, were suffering the continuing effects of gunshot and shrapnel wounds.

The range of provision was impressive, but many individuals faced long years of medical treatment, their lives dominated by their relationships with the Repatriation Commission and Repatriation Department. To take one illustrative example, the case of William ‘Bill’ Kearsey demonstrates the personal and administrative as well as medical implications that often underscored such relationships. Kearsey was badly injured in the action at Glencorse Wood during the Third Battle of Ypres in 1917 when artillery shrapnel hit him between the eyes, leaving a deep gash to his forehead, which ‘obliterated’ (according to his medical records) his sinuses. Subsequently, in hospital in England, his face was operated on twenty-nine times over an eighteen-month period before he was repatriated to Australia. Arriving home in May 1919, he took the advice often given to badly disfigured men, to live out of town in the bush, where there would be fewer stares or difficult questions. Bill tried his hand at farming and, after several false starts, made a go of his new occupation. But he suffered severe sinusitis, chronic bronchitis, headaches and eye trouble. Fluids leaked from his nose and eyes, and the latter were usually red and sore, his left eye weeping pus. Consequently, Bill Kearsey often made the 25-mile trip from his property at Ashford, a ‘subsidiary associate’ of the Repatriation Department. 13 Working closely with both the Repatriation and Defence departments, the RSL helped him with his submissions and wrote to the Repatriation Commission on his behalf. As was his entitlement, Bill Kearsey submitted periodic claims during the early 1930s for reimbursement of travel expenses; the RSL helped him with his submissions and wrote to the Repatriation Commission on his behalf. Although the commission was prepared to make these reimbursements, it asked follow-up questions about expenses; the RSL helped him with his submissions and wrote to the Repatriation Commission on his behalf.

In your opinion, you deem necessary. Liggins replied to the effect that Bill’s ‘condition does not trouble him much’, which in turn prompted the Deputy Commissioner’s advice to the LMO: ‘I might suggest that in order to make it clear to Mr Kearsey that should he still require out-patient treatment for his war disability, you instruct him to report at intervals which, in your opinion, you deem necessary’. The commission had earlier wondered whether Bill Kearsey should be sent to the Prince of Wales Repatriation General Hospital at Randwick to see an eye specialist but now considered that ‘if you [Liggins] are satisfied that the eye condition needs no operative treatment and he benefited by the irrigations and Guttae Argyrol, Mr Kearsey need not come to Sydney for further treatment’. Bill Kearsey was remunerated for fewer visits to Inverell but his conditioned worsened over the years, and by the 1960s he could no longer see to read and write.

It is impossible to know whether Bill Kearsey would have benefited from more or different treatment, but his experience provides an insight into the imponderables that sometimes made the effective management of even routine cases difficult. The fundamental dilemma faced by the commission was that, if it were too lenient, it would open the floodgate to all kinds of claims – at vast expense – but if it were too harsh it would deprive bona fide applicants of prompt and effective treatment. A royal commission in 1941 recommended extending the period of discharge,12 in 1929, entitlement and appeal assessment tribunals were introduced to hear appeals against Repatriation Commission decisions, which introduced a new element of independence and review to the system. The 1920s had also seen the emergence of the ‘burnt out digger’ syndrome, with the accompanying belief that war service had prematurely aged many veterans, making them incapable of employment. Accordingly, in 1936 a new means-tested service pension (similar to those already in operation in Canada and New Zealand) was introduced for those veterans with qualifying service. Although, unlike the RSL, the RSL did not have a representative sitting as a commissioner, it was effectively a ‘subsidiary associate’ of the Repatriation Department. 13 Working closely with both the Repatriation and Defence departments, the Red Cross readily took responsibility for those totally incapacitated veterans needing continued hospital care. It also managed the Repatriation Department’s hospital treatment and aftercare of tuberculous cases. Similarly, it provided convalescence for ‘shell shock’ and ‘nerve’ cases, building upon the network of convalescent homes and hostels that had been opened during the war. In New South Wales, no fewer than 15,000 ex-servicemen had been treated in Red Cross institutions between July 1917 and June 1920. At five Dock in Sydney, was established as a specialist centre for alcoholic returned servicemen and for chronic neurasthenics – those who as a result of their war experiences suffered extreme lassitude and the inability to cope with any but the most trivial of tasks. Others with war-related psychiatric problems could spend up to twelve weeks recuperating at Russell Lea Hospital, also at Five Dock, where the more complex cases went to what

to Inverell were ‘presumably on private business’ and that the frequent Liggins appointments were a pretext for claiming the travel costs. The commission wrote to Dr Liggins, asking whether all these visits were strictly necessary. Liggins replied to the effect that Bill’s ‘condition does not trouble him much’, which in turn prompted the Deputy Commissioner’s advice to the LMO: ‘I might suggest that in order to make it clear to Mr Kearsey that should he still require out-patient treatment for his war disability, you instruct him to report at intervals which, in your opinion, you deem necessary’. The commission had earlier wondered whether Bill Kearsey should be sent to the Prince of Wales Repatriation General Hospital at Randwick to see an eye specialist but now considered that ‘if you [Liggins] are satisfied that the eye condition needs no operative treatment and he benefited by the irrigations and Guttae Argyrol, Mr Kearsey need not come to Sydney for further treatment’. Bill Kearsey was remunerated for fewer visits to Inverell but his conditioned worsened over the years, and by the 1960s he could no longer see to read and write.

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First formed in 1915 as the ‘Brighton Society for the Re-adaptation of Soldiers’, by the end of the First World War the society had become one of Australia’s most successful voluntary patriotic funds, opening its own ‘soldiers’ workshops’ in the Melbourne suburb of Brighton. In this photograph, taken c. 1920, civilian training staff and returned servicemen undertaking rehabilitation courses line up proudly together outside the workshops’ front entrance.

The official opening of the Anzac Hostel (formerly ‘Kamesburgh’) in Brighton, Melbourne, on 5 July 1919. When the property was acquired, with the generous assistance of the six Baillieu brothers, all prominent Melbourne businessmen, the Red Cross organised the preparation of the building for the receipt of its first residents.

The Brighton Anzac Hostel was finally closed on 30 June 1995, when the building became a school, although a new hostel was subsequently built alongside in the extensive grounds.
was known as the Russell Lea Auxiliary. Further treatment, if deemed necessary, was provided at Waley Home near Picton and at the Southern Red Cross Home at Exeter, which were both ‘farm-stay facilities’ where men could benefit from outdoor physical work from dairy farming to poultry raising.”

The Red Cross’s New South Wales division also managed Rose Hall in Darlinghurst (initially lent for the duration of the war but now run on a permanent basis), which could accommodate fifty incapacitated soldiers, together with sanatoriums on the North Shore and in the Blue Mountains. Likewise, the network of homes run by Red Cross executives included the Queensland division ranged from Laidley to Auchenflower (purchased especially for returned nurses) to Anzac House, which the Red Cross had lent to the Repatriation Commission to cater for veterans suffering from ‘nerves’ and those recovering after operations. More than 874 patients were treated at Simla before it was closed in 1936.16

A major area of Red Cross activity that directly complemented the work of the Repatriation Department was the treatment of patients with conditions that were not recognised as ‘war-related’ by the commission and were therefore deemed ineligible for its support. At Henley Beach, near Adelaide, for example, in 1927–28 the Lady Galway Convalescent Home reported that, of the 190 patients it had treated, only fifty-three had been referred by the Repatriation Department. Significantly, of the remainder sixty-eight were Amy sisters – returned nurses who had failed to persuade the Repatriation Commission that their health problems, often serious, were a result of their wartime experiences. The Red Cross had been able to assist when the commission had felt unable to do so.17

A further area of complementary activity was in the management of the Anzac hostels, which had been provided by both the general public and the Repatriation Department, and decided that he should be their advocate. As he put it:

**Have you ever seen a man possessed of devils? A man who by day or night, sleeping or waking, talking, or weeping, will never know a moment’s rest until he dies? – A man whose tongue shoots out, whose knee shoots up, whose giant hand shoots forward, whose hand jumps about like a sort of gigantic parched pea? Have you ever seen a shell-shock case?**

Smith also financed the production of Smith’s Weekly, the first issue of which appeared in March 1919, and which ran for all of 32 years until it eventually folded in 1951. During the inter-war period especially, the newspaper acted as a powerful critic of the Repatriation Commission and Repatriation Department. Although much of the paper’s content was exaggerated, sensational or merely defamatory and vituperative, it was popular among returned servicemen (as its longevity suggested), and it caught the attention of senior politicians.

Beyond the Red Cross, others became involved in the repatriation process. Legacy, a charity founded by ex-servicemen in 1923, provided a range of services to Australian families suffering after the injury or death of a spouse or parent, its efforts facilitated by a nationwide team of volunteers (or ‘legatees’, as they were known). Legacy was soon established as a permanent and significant element of the repatriation landscape. Prominent among individual supporters of the repatriation ethos was Sir James joynton Smith, a close friend of ‘Billy’ Hughes, who opened his mansion overlooking Coogee Bay, Sydney, as a forty-bed hospital dedicated to helping those suffering from ‘war strain’, as he called it. He considered that ‘shell-shocked’ veterans were treated poorly by both the general public and the Repatriation Department, and decided that he should be their advocate. As he put it:

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The principal effort of the commission and department during the 1920s and into the 1930s was vocational training and medical care. Edward Millen had retired from the ministry in February 1923 (but not before restructuring the overworked commission, formed now of three paid commissioners) and died on 14 September that year, aged

**Repat** – A Concise History of Repatriation in Australia

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 Returned soldiers learn the art of boot-making, a common occupation acquiring skills from carpentry to motor-car maintenance by the end of 1920. Funded by the Repatriation Department, 20,000 such men were (AWM H13040) ‘Repat’ – A Concise History of Repatriation in Australia ‘Repat’ – A Concise History of Repatriation in Australia Repat in practice: the inter-war years

only sixty-two – a premature death some said was a result of his exertions in the cause of repatriation. Among Millen’s other innovations had been the establishment of the War Service Homes Department, with its own commissioner, which was designed to make financial advances to eligible veterans at favourable interest rates for the building of new houses. Significantly, the commissioner was also empowered to build houses himself in anticipation of demand, and was permitted to buy sufficient land to allow the construction of whole estates. As well as providing homes for ex-solders, the scheme was also seen as a useful supplementing of Australia’s housing stock, additions to which had dwindled during the war years. Indeed, the program was soon expanded to encompass nurses and workers in munitions and other war industries. However, the first commissioner, Lieutenant Colonel James Walker, a veteran of the South African War, lacked business acumen (he was a former bankrupt) and proved a poor administrator. A backlog of applications from veterans soon piled up, but Walker insisted he could build 8,000 new houses a year. In the rush to build, however, unsuitable land was sometimes acquired, and some of the house construction was poor, while the purchase of ancillary infrastructure such as forests and sawmills was much criticised in the press. Yet Walker exceeded his construction targets, and after he was replaced in 1921 the total numbers of homes built each year by the commission declined sharply. For the remainder of the 1920s, the average completion rate fell to just 2,242 a year, although it was complemented by private builds and the purchase of existing homes.22

Alongside the War Service Homes initiative was the soldier settlement scheme. Even before the war’s end, the first soldier settlers were on the land, and during the 1920s and 1930s approximately 40,000 returned men and women took up land made available across Australia. Fifteen years later, fewer than half remained on their properties.23 Millen had seen soldier settlement as part of a grand plan to push forward the agricultural frontiers of Australia, and returned servicemen were often keen ‘to go on the land’, to become their own bosses and masters of their destinies. The Repatriation Department was deeply committed to the scheme, and in each state the local ‘Repat’ Department did its best to facilitate the allocation of selected blocks and to provide support to would-be settlers. But the whole process involved the accumulation of debt, and soldiers contemplating taking part in the process were advised that they needed at least some capital. In Western Australia, for example, those thinking of farming in the wheat belt were warned that they should have at least £300.

At first, it seemed relatively straightforward, and soldier settlers took up their land with a high degree of optimism, and sometimes an even greater sense of entitlement. Yet often such enthusiasm blinded settlers as to the marginal nature of the land they had been allocated. Only later did reality sink in, followed, for many, by disillusion. After a frustrating wait for his allocation, for example, Stan Denis received his block of 1,600 acres of virgin bush some 17 miles north of Burracoppin, east of Merredin, in Western Australia. Years later, he recalled his initial introduction to his new property:

Mum had come up on the train and she was with us on the cart. We brought a single bed out, some tucker and all that, it was a full load … There was a clump of t-t-tire bushes growing about a hundred yards from the front … of the survey peg, and we dumped all our gear there … We lived in the tent in this t-t-tire thicket … we put up a galvanised iron humpy with an iron fireplace … where mum did the cooking … all we had was a single bed in this tent.”24
he would use his truck to make money as a carrier in outback central Australia. He returned to Karadoc to find prolonged drought and there was very little money to be earned on the mallee'. He planned an interlude in which block on newly available land at Karadoc, near Mildura. He built a hut with hessian walls and no door and cleared walls of super-phosphate bags sewn together, and whitewashed, earthen floors’. In 1921, he acquired his own old unit at Nullawil, in the Murray Mallee in Victoria, where soldier settlers lived ‘in iron roofed dwellings with soldier settlers lived ‘in iron roofed dwellings with so much work, so much heartache’ then she leaned on the gate and started to cry. We put our arms around each
as Stan Diss struggled to clear his land (ringbarking the large trees), the Repatriation Department provided sustenance, together with a £250 loan to build a house and £75 for a horse and cart. As he recalled:
From the day of occupation of the farm you received a sustenance from the Repat of £11 14s 0d a month. That [was] only just (enough) to live on. The [Repatriation Department] inspector visited us once a month and if you’d done any clearing he’d pay you for that at so much an acre. When it came to the time to build the house that was paid for by Repat in Perth. When it came to putting the first crop in you [bought] your superphosphate and your seed wheat from a neighbouring farmer. When the next month came along, the inspector would write the cheques out.”
And so it went on. If development and thus yield kept pace with the advances for improvements and investments, then all might be well, especially when commodity prices were high. But all too often the task proved insurmountable, especially during drought and in the Depression years. Stan Diss was one of those who walked off the land:
I walked off the block for nothing. A feel wasn’t it? You see there were a few decent crops in the Depression years but there was no money. Wheat was selling at 5/6 a bushel but that was no good to anybody. I’d had a gut full of it. At last I said to Mum, ‘well I’m walking off, are you coming?’ And she said, ‘No, I came on this farm on a horse and cart and I’m not going off to go on a horse and cart.’ The Good Lord ... never intended anybody to work all his life for nothing.’ Didn’t he?’
Well, I said, ‘You get on to him and tell him I’ve been working for the last ten or eleven years for nothing.’
Sometimes it was the Repatriation Department that saw that there was no hope. James Longmoore, who had battled drought and the Depression on a marginal sheep farm at Limbri, near Tamworth in northern New South Wales, was told to leave his property in 1933, being over £1,000 in debt and with the property largely unimproved.
His son Mal long remembered the day when they finally forfeited the land:
Our very emotional eviction from the Limbri property ... will forever ech in my mind. Mother and I walked together to the gate to Ginaldew for the last time, at the gate Mother looked at our little slab home and said ‘so many broken dreams, so much work, so much heartache’ then she leaned on the gate and started to cry. We put our arms around each other and cried together until father called. We had nowhere to go.”
There were, of course, those who did make a success of soldier settlement and were able to survive the lean times. John Edey, who had served at Gallipoli and on the Western Front, began sharefarming with a man from his
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Memorialisation also continued apace at home. There were state memorials, such as that at Kings Park in Perth, the Tasmanian State Memorial on the Queen’s Domain in Hobart and the remarkable Shrine of Remembrance in Melbourne.33 Most significant was the Australian War Memorial (or Museum, as it was designated initially), which was housed temporarily in Melbourne and Sydney during the 1920s before being located in Canberra in 1941.

There was also Anzac Day. First commemorated on 25 April 1916, a year after the first landings at Gallipoli, Anzac Day grew in popularity during the 1920s. In 1920, it conveniently fell on a Sunday, and General Birdwood took the salute in Sydney as 5,000 ex-servicemen marched past. In 1921, the Commonwealth declared Anzac Day a public holiday, and one by one the states followed suit. Before long, Anzac Day had become for many ‘the centrepiece of collective memory in Australia’ and had ‘assumed a quasi-religious status’.34

3. ibid., pp. 164–5; see also Minutes of the Committee of the Repatriation Commission (A4999), 23 August 1918, p.69, Department of Veterans` Affairs Archive, Canberra.
7. National Archives of Australia (NAA), PP2/8 R6348, Arthur Edward McCallum; see also Aboriginal History Research Unit, They served with honour: untold stories of Western Australian Aboriginal servicemen at Gallipoli, Western Australian Department of Aboriginal Affairs, Perth, 2015, pp. 26–7.
8. Lloyd and Rees, The last shilling, p. 150.
11. NAA, A2/18 B544, William Keayney; see also Bruce Scates, Rebecca Wheatley and Laura James, World War One: a history in 100 stories, Viking, Melbourne, 2015, pp. 367–9.
14. ibid., p. 64.
15. ibid.
16. ibid.
17. ibid., p. 65.
18. ibid., pp. 71–2.
REPAT AT WAR AGAIN
REPAT AT WAR AGAIN

By the late 1930s, the repatriation system had become deeply entrenched in Australian life. The Repatriation Department was proud of its achievements, and the department and its client groups, especially the RSL, felt highly protective of its methods, policies and administration. When, in May 1939, there were calls in the Australian Parliament for a royal commission to scrutinise and review the workings of the department and the Repatriation Commission, there was strong resistance. Sir Gilbert Dyett, President of the RSL, firmly opposed any detailed examination of the existing arrangements. As he told the Prime Minister, Robert Menzies, ‘I desire to inform you that this League feels that such action is quite unnecessary’.

There were certainly anomalies that militated against the best interests of some pensioners and widows, and those were aired in parliament, but the RSL and other supporters feared that to investigate them too closely might lead all too easily to a reappraisal of the entire system, to the detriment of the overwhelming bulk of veterans and widows. The Repatriation Department, for its part, reckoned that overall the existing Repatriation Act worked more to the veterans’ and widows’ advantage than to their disadvantage.

It was certainly the case that repatriation provisions in Australia were more liberal and more generous than in any other comparable country. In 1939, Australian war pensions were 50 per cent higher than those in Canada and 25 per cent higher than those in New Zealand. As a proportion of enlisted men from the Great War, Australia could point to 30 per cent receiving veterans’ benefits, compared with 25 per cent in Canada and a miserly 5 per cent in Britain. This indeed appeared to be a record to be proud of, and, when the Second World War broke out in September 1939, the Menzies government thought it best to leave the system well alone, merely appointing a committee to consider how best to extend existing pension rights and medical treatment to a new generation of combatants. It was not until 1941, as the war progressed and grievances over the existing system grew louder, that the government made any real attempt to review repatriation legislation.

By mid-1940, however, the impact of the Second World War was already being felt in the repatriation system, especially in the area of medical treatment. Demand for hospital beds soared – in the first eighteen months of the war, 14,927 individual cases from the armed services were admitted to repatriation hospitals – and there were attendant staff shortages, especially as departmental medical officers joined the Army. Likewise, nurses from departmental hospitals became the backbone of the new Australian Army Nursing Service. As recruitment for the ‘Second AIF’ grew apace, so the repatriation system was also faced with the increasingly prevalent phenomenon of ‘malenlistment’. This referred to those cases in which, despite the rigours of the medical selection process, individuals with various disabilities had been able to conceal their unfitness for service – a deceit with serious implications in the future for the Repatriation Department’s administration and finances. As early as October and November 1939, a substantial number of malenlistments had been discovered. Among the worst cases, were:
Repat – A Concise History of Repatriation in Australia

The committee took evidence from a broad range of interested parties. Sir Gilbert Dyett, President of the RSL, was a leading witness, and he argued (successfully) that the word ‘directly’ be removed from the liability clause under which the Commonwealth was liable only for death or incapacity ‘directly attributable’ to war service. This significant widening of liability was reflected in the subsequent Australian Soldiers’ Repatriation Act 1943 and was to reverberate through repatriation policy and administration for decades to come. A similar widening of liability was achieved for those suffering from tuberculosis, whereby any veteran who had served in a theatre of war and subsequently contracted tuberculosis was deemed pensionable. Entitlement for repatriation benefits was extended unequivocally to all women in the nursing and auxiliary services (there was even a brief suggestion that a woman should serve as a Repatriation Commissioner, such was the contribution of women to the war effort). The composition of the commission was widened to allow for up to five commissioners, with provision for the appointment of assistant commissioners.

More generally, war pensions were raised by 20 per cent, with other increases of up to 75 per cent for children of deceased servicemen and women. Members of the armed forces who had enlisted for home service in Australia were now eligible for the same benefits enjoyed by those who had served overseas, and rates for employment and medical sustenance and children’s education benefits were also raised. A preliminary vocational guidance scheme was established to allow the Repatriation Department to train veterans, although by mid-1944 that task had been transferred to the Department of Labour and National Service. Perhaps the most significant of all the changes under the new Repatriation Act was the easing of some of the hoops that had to be jumped through by applicants for repatriation benefits. The Repatriation Department itself also reviewed some of its services and provisions during the war years. It put great effort into the improvement and usage of artificial limbs, for example, working closely with the Limbsless Soldiers Association, helping to design arms that would allow amputees to drive cars, play billiards and participate in other leisure and sporting activities, as well as improving their employment opportunities. The first artificial limb factory in Australia had opened at Caulfield Hospital in Melbourne in 1942, following the recommendation of the committee. By the end of the Second World War, there were six factories, staffed mainly by veterans, many of them limbless. Similarly, the department arranged training in braille and the provision of braille watches and typewriters, preparing an advisory booklet titled Helping the war blinded to see.

Men lied about their age as well as their fitness, and some attempted to conceal previous service in the armed forces. Sometimes Repatriation Department officials were able to compare existing Repatriation files with the new enlistment papers, resulting in the miscreants being discharged. An even more deplorable case was that of a man who had served in the First World War and was in receipt of a pension for total loss of vision in one eye and slight defective sight in the other. Somehow, he managed to enlist during the Second World War and fought in the Middle East, where he was taken prisoner. Following his eventual repatriation, it was found that he was almost completely blind. There was also the bizarre example of a man who managed to enlist no fewer than three times between April 1940 and April 1942, despite disclosing an existing history of abdominal trouble, ill health led to his discharge on each occasion. As one Repatriation official put it: ‘The cost to the country for the large part of the man’s service periods being spent in hospital, must have been enormous. That such a man could have enlisted three times is astounding and disturbing’. Following such cases, there was some hostility between the Repatriation Department and the Department of Defence, the former accusing the latter of ignoring the painstakingly assembled medical repatriation records when enlisting men for war service. There was also some friction when, to the Repatriation Department’s indignation, the Army sought to remove the pension rights of war widows who ‘misbehaved’ following their husbands’ deaths. The Australian Parliament recognised that now was the moment to comprehensively review the Repatriation Act, and in 1942 a joint parliamentary committee was appointed to consider what amendments to the Act might be desirable in the light of lessons learned during the war thus far. The members of the committee were all veterans of the First World War – a colonel, a captain, a sergeant, a sapper and a driver – who repatriation was seen almost entirely from the perspective of the returned serviceman or woman. The Repatriation Department feared that, in the patriotic atmosphere of the time, the committee might recommend the extension of a wide range of benefits beyond what was reasonable or affordable.
However, notwithstanding such innovatory work, as the war drew to its conclusion in 1945, so the Repatriation Department found that many of its traditional repatriation functions – especially rehabilitation and re-establishment in civilian employment – were absorbed in the new all-encompassing Department of Labour and National Service. The Repatriation Department organised transitional training programs for veterans discharged during the war, and, as a repository of experience and expertise, continued to advise on demobilisation, rehabilitation, retraining and postwar reconstruction. But many of the functions that the Repatriation administration had performed after the First World War now fell within the remit of the lavish Department of Labour and National Service. However, these shifts in responsibilities hardly lightened the load, for the demands on the Repatriation Department and commissioners continued to be immense. To the existing applications from veterans of the First World War were added those from the Second, and the widening of provisions under the 1943 Act added substantially to the department’s volume of work.

Moreover, the radically changing nature of warfare during the Second World War had ensured a greatly expanded pool of potential applicants for the Repatriation Department’s services. Although prisoners of war (POWs) had been a major concern during the First World War, those prisoners had generally been well treated by the Germans and Turks, their welfare had been carefully monitored by the Red Cross, and their repatriation to Australia was relatively straightforward. In the Second World War, by contrast, the lengthy incarceration and institutionalised ill-treatment of Australians by the Japanese regime put POWs at the top of the repatriation agenda, not least because of an enraged public opinion that demanded prompt action. By the end of 1946, it was already apparent that the treatment of POWs would become the most difficult medical challenge facing the Repatriation Department. Of 32,776 Australians taken prisoner by the Japanese in the Far East, 275 had died of wounds, 45 died of injuries, 2,204 were killed and 5,305 died of disease. By contrast, only 161 had died as prisoners of the Germans, mostly of wounds and disease.8 The numbers seemed to speak for themselves, and the Repatriation Department braced itself for a POW problem characterised by unique physical and psychological challenges.

However, the ex-POWs themselves resisted the suggestion that they were somehow a special group deserving of special attention. This was echoed by a medical committee of four doctors who had been POWs of the Japanese. Where that was not possible, it was advised that some aspects of medical examination and treatment should be presented by individual POWs who had been incarcerated about particular cases. The report agreed that former POWs suffered less from psychological damage than might have been expected – although in many cases what is now understood as post-traumatic stress disorder (PTSD) would not become apparent until later, sometimes much later. The medical committee appointed to consider POWs was under no illusion, however, as to the extent to which Australians had suffered, mentally as well as physically, in captivity. ‘Weary’ Dunlop had been commanding officer of the prisoners and also surgeon at the Japanese POW hospital at Tarsau in Thailand, which handled POWs working on the infamous Burma–Thailand railway. Like many others, Dunlop had experienced firsthand on several occasions the terrifying ordeal of mock execution, such as the occurrence in November 1943 that he described in his war diaries:

I was pushed and flagged along to a tree and my manacles taken off, my knees and arms tied with wire to the tree, my cuffs of trousers cut off, my trousers stripped away, my bare back turned to the tree, my back bared, my manacles linked behind my back. I was given a large bolt and a large block of wood and told to divide the wood. The block was about 1 foot square and 1 foot high, the bolts about an inch in diameter. They were placed in the form of a cross about 1 foot apart, I was told to stand between them one foot from each and tie my hands behind my back. As soon as I had tied my hands behind my back, the interpreter told me I was to have the grace of thirty seconds, which were grimly counted in Japanese. My eyes were locked on the flinty, impassive face of the ‘interrogating’ officer. Strange thoughts flitted through my mind, ‘This can’t be me. I don’t even know how I died.’

As Dunlop went on to explain, he was remorseful at the last second as part of the psychological torture he was to endure at the hands of his captors. Others, of course, experienced similar treatment, and no doubt were also afflicted with ‘strange thoughts’ and odd ‘reactions’—then, and much later. The medical committee, including Dunlop, recommended that the Repatriation Department undertake a complete medical overhaul of every former POW previously held in Japanese captivity. The department decided on a voluntary survey of all known POWs from Japanese camps. Each participating POW was given a preliminary medical examination, including clinical tests and X-rays, and then appeared before a final medical board that included a medical officer who had been a POW. Over 13,000 former POWs took part, which was an extremely high response rate. Significantly, it was found that many needed medical treatment and advice but for various reasons had been reluctant to approach

would involve, but stressed that the repatriation system should be aware of the distinctive problems likely to be presented by individual POWs. As it explained, it should be constantly borne in mind by the department’s officers that many such patients ‘have been subject for three and a half years to brutal captivity, with complete separation from any contact with civilisation’, and that malnutrition had led to a variety of deficiency diseases that, along with dysentery, had not been adequately treated.9

In one hospital POW camp of 5,100 men, it was pointed out, 1,800 men were suffering from malaria, and yet quinine had run out after only three weeks. Other examples illustrated equally deplorable conditions. Common ailments such as peritonitis, shrapnel wounds, and asthma had been exacerbated by captivity, and many a sufferer in the camps included hookworm, amoebiasis, strongyloides, scrotal dermatitis, beri-beri, nerve deafness and typhus. Interestingly, the report also noted that former POWs suffered less from psychological damage than might have been expected—although in many cases what is now understood as post-traumatic stress disorder (PTSD) would not become apparent until later, sometimes much later. The medical committee appointed to consider POWs was under no illusion, however, as to the extent to which Australians had suffered, mentally as well as physically, in captivity. ‘Weary’ Dunlop had been commanding officer of the prisoners and also surgeon at the Japanese POW hospital at Tarsau in Thailand, which handled POWs working on the infamous Burma–Thailand railway. Like many others, Dunlop had experienced firsthand on several occasions the terrifying ordeal of mock execution, such as the occurrence in November 1943 that he described in his war diaries:

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Wounded service men of the Australian Army Service Corps, only recently liberated from Japanese prisoner of war camps, are helped down the gangway of the aircraft carrier HMS Formidable by British sailors at Circular Quay, Sydney, in October 1945. Relief medical teams had been provided in the Formidable (and its sister ship HMS Glory) by twenty women of the Red Cross Voluntary Aid Detachment, just one example of the wide-ranging assistance rendered by the Australian Red Cross to the repatriation effort. By 1946 it was apparent that the treatment of prisoners of war would become the most difficult of the Repatriation Department’s immediate postwar tasks.

The ‘re-establishment pamphlets’ and other information booklets issued as the Second World War drew to a close evidenced the wide range of help now available to veterans and war widows. There was a leaflet on War widows’ entitlements, one on soldier settlement ‘Farms for fighting men’, one on housing, and an explanatory pamphlet on the workings of the Repatriation local committees. Yet the amount of information made available could be daunting, and the small print indicates the several government agencies by now engaged in the repatriation process. In addition to the Repatriation Commission itself, for example, the Ministry of Post-War Reconstruction and the Department of Works and Housing were both intimately involved in ‘re-establishment’. (DAH (L1) collection)
the Repatriation Department. Dunlop later became Federal President of the Ex-POW Association of Australia, and took a keen interest in POW affairs, encouraging and helping individuals to complete pension claims and lobbying on their behalf.

The POW question had added a new dimension to the Repatriation Department’s work. Repatriation concepts such as ‘theatres of war’ and ‘active service’ had also been broadened by the war. Not only had Australia become an Allied operational base, but the country had come under Japanese aerial and submarine attack, and for a time there seemed a very real threat of invasion. Servicemen and women had been killed and injured by enemy action on Australian soil. At the end of the 1940s it was estimated that the military hospitals in Australia had capacity for medical treatment, pensions and other repatriation benefits had tripled as a result of the Second World War, precipitating a sharp increase in Repatriation casework during the late 1940s and well into the 1950s. Sometimes, exhaustive and painstaking research was necessary to verify a particular claim. For example, one former Royal Australian Air Force (RAAF) serviceman insisted that he had been shot in the thigh over Surabaya in Indonesia. The RAAF medical services had no record of the injury, however, and the department was advised that the veteran’s squadron was at all times at Cairns in Queensland. But further delving told a different story, and an entry in the Darwin Operations Room notebook showed that a Cairns-based aircraft had indeed been involved in an incident over Surabaya, and that an aircrewman had been wounded in the leg.12

Assistance with demobilisation at the war’s end had also added to the Repatriation Department’s workload. Following the defeat of Japan, a demobilisation plan was launched on 1 October 1945. By the middle of 1947, 522,261 service members had been discharged, including some 14,000 POWs. Dispersal centres established in each of the states and territories to manage the release of veterans were staffed by members of the Repatriation Department, the new Department of Post-War Reconstruction, the newly established Commonwealth Employment Service, and other repatriation benefits had tripled as a result of the Second World War, precipitating a sharp increase in Repatriation Department casework during the late 1940s and well into the 1950s.11 Sometimes, exhaustive and painstaking research was necessary to verify a particular claim. For example, one former Royal Australian Air Force (RAAF) serviceman insisted that he had been shot in the thigh over Surabaya in Indonesia. The RAAF medical services had no record of the injury, however, and the department was advised that the veteran’s squadron was at all times at Cairns in Queensland. But further delving told a different story, and an entry in the Darwin Operations Room notebook showed that a Cairns-based aircraft had indeed been involved in an incident over Surabaya, and that an aircrewman had been wounded in the leg.12

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The Red Cross, meanwhile, working closely with the Repatriation Department, had expanded its provision of convalescent homes, so that there would be at least one in each state. The Red Cross undertook to transport individuals between medical treatment, pensions and other repatriation benefits had tripled as a result of the Second World War, precipitating a sharp increase in Repatriation Department casework during the late 1940s and well into the 1950s. Sometimes, exhaustive and painstaking research was necessary to verify a particular claim. For example, one former Royal Australian Air Force (RAAF) serviceman insisted that he had been shot in the thigh over Surabaya in Indonesia. The RAAF medical services had no record of the injury, however, and the department was advised that the veteran’s squadron was at all times at Cairns in Queensland. But further delving told a different story, and an entry in the Darwin Operations Room notebook showed that a Cairns-based aircraft had indeed been involved in an incident over Surabaya, and that an aircrewman had been wounded in the leg.12

One especially remarkable area of Red Cross endeavour at the end of the Second World War was the provision of twenty VADs to act as relief medical units in the British aircraft carriers HMAS Formidable and HMAS Glory. The two warships had been earmarked to repatriate Australian ex-POWs from Manila and places nearby, as well as to pick up homeland-bound British and Canadian ex-prisoners. Among these former prisoners were extremely ill, suffering from beri-beri, malaria, dysentery, tuberculosis and tropical ulcers, and some had psychological problems. For many of the VADs embarked, this was the first time they had left Australia and also the first time they had been exposed to such a disparate array of nursing challenges. However, the VADs displayed their customary tenacity and flexibility, not to mention a great deal of humanity and courage, in ministering to their charges. Thirsk was to be a distinguished contribution to the repatriation process.18

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More generally, women had been involved in the Second World War in ways that could not have been imagined beforehand. Apart from the Australian Army Nursing Service in the First World War, women had not participated directly in earlier wars. This time, however, some 50,000 women had enlisted in the three services, and a significant part of the rehabilitation program run by the Department of Post-War Reconstruction was aimed at their postwar employment. Ex-service women began training in areas such as bookkeeping, dressmaking, hairdressing, chiropody, millinery, interior decorating, journalism and animal husbandry. Others studied more academic subjects, such as French and economics, and some went to university to follow courses that ranged across the arts and sciences, including veterinary science, pharmacy and nursing. However, surveys indicated...
that the majority of married women and those intending to marry wished to perform ‘home duties’ rather than go out to work. Those actively looking for employment generally sought jobs as secretaries and in commerce, or as hairdressers and dressmakers.19

One area of traditional Repatriation Department activity that witnessed expansion and modernisation was the network of repatriation hospitals. The repatriation hospital system in 1939–40 was quickly shown to be unequal to its task, resulting in a new generation of army base hospitals in every state except Tasmania. When demobilisation had been completed, the Repatriation Department assumed responsibility for the hospitals at Greenslopes (Brisbane), Concord (Sydney), Heidelberg (Melbourne), Springbank (Adelaide, renamed Daw Park in 1967) and Hollywood (Perth). Modern and well equipped, these hospitals were major assets, and a new generation of veterans swiftly became fondly attached to them as the ‘Reps’. Veterans regarded the ‘Reps’ as theirs, and the facilities came to acquire almost sacred status. Nonetheless, the absorption of the repatriation hospitals into the Repatriation Department was a significant organisational challenge, in which the department exercised what it called ‘infiltration’, or the gradual taking over of one medical ward after another. When 60 per cent of the staff in a ward were department employees, it was time to move on to the next. Although the patients were sometimes confused about what was happening, the process was remarkably smooth and harmonious.20

Staffing was a problem (at one hospital, the Matron doubled as woodcutter), especially the need to recruit additional psychiatry specialists, but the repatriation hospitals coped somehow as between June 1946 and June 1948 the number of Repat inpatients almost trebled; the number of outpatients merely doubled.

Following Robert Menzies’ electoral victory in 1949, the new Commonwealth Government decided to abolish the Department of Post-War Reconstruction and to transfer its Commonwealth Reconstruction Training Service functions back to the Repatriation Department. Formally incorporated within the public service as a result of the Commonwealth Public Service Act 1947, the department had now become the second largest in terms of numbers of staff employed. The department was to move from its original home in Melbourne to Canberra in the late 1960s, ushering in its next period of development – which would include the Korean and Vietnam wars – until its metamorphosis into the Department of Veterans’ Affairs in October 1976.

2. Ibid., p. 266.
3. Ibid., p. 271.
4. Ibid.
When the Repatriation Department had been established in 1918, it was assumed that eventually it would fade away, its task completed, once all the returnees from the First World War had been effectively ‘repatriated’. The department was seen, therefore, as a ‘one off’ – a distinctive and peculiar body of limited duration that of necessity existed outside the body of the permanent public service. Similarly, the Repatriation Commission was thought to be a hybrid temporary creation, not quite a ‘commission’ in the way the term was often understood, and not exactly a department in its own right either. This ambivalence suited the Repatriation Department’s client base, the returned servicemen and women, who liked to imagine a special intimate relationship with ‘their own’ department. The prominence of ex-servicemen in the department’s staff at all levels also enhanced this sense of intimacy and empathy. Moreover, the RSL, as self-appointed advocate and guardian of the returnees’ best interests, was resolutely in favour of the status quo and always ready to defend the department and commission as currently constituted.

However, it soon became clear that the Repatriation Commission and Repatriation Department would not ‘fade away’. The task of repatriation proved lengthier and more complex than had been expected – especially in medical repatriation where chronic and newly emergent conditions continued to command attention and resources – and the outbreak of war in 1939 created a wide range of new demands. By 1945, it was apparent that the Repatriation Department was here to stay. At the same time, Ben Chifley’s Labor government had become increasingly concerned about the number of departments and agencies that existed outside the regulations and jurisdiction of the Public Service Act. Chifley appointed a committee of inquiry to investigate these apparent anomalies, and the status of the Repatriation Department was brought swiftly and sharply into focus. A suggestion that the department be merged with the Department of Social Services received serious attention, but the eventual recommendation was that the Repatriation Department retain its separate identity while becoming an integral part of the public service. Parliament agreed, and in 1 September 1947 the Repatriation Department became subject to the Public Service Act; its employees were now public servants rather than ‘officers’.

Although some of the Repatriation Department’s former ‘temporary officers’ found themselves at a disadvantage as a result of the new arrangements, and their status reduced because they lacked sufficient educational qualifications, most employees benefited from higher salary classifications and better promotion prospects. The department was also brought under the direct purview of the Public Accounts Committee (PAC), which in early 1953 began its scrutiny of departmental administration. Part of the PAC’s investigation centred on the Repatriation Commission, the functions of which were considered unconventional because they were quasi-judicial in character as well as administrative. Subject to the authority of the minister, the commission was nonetheless charged with the implementation and management of the Repatriation Act. Moreover, its funds were voted directly by parliament, to which it submitted an annual report, and its accounts were audited by the Auditor-General. Indeed, as early as 1923, this distinctive status had been the subject of High Court deliberation,
when it was ruled that the Repatriation Commission was de facto a Commonwealth department in its own right. ‘Parliament has simply created a very special department for a very special purpose’.6

For the PAC, however, by 1953 the Repatriation Commission had become in effect the senior executive arm of the Repatriation Department and was best understood in that light.7 The commission determined matters of policy, the PAC reported, and it offered advice to the minister on various matters, as well as determining applications in individual cases with peculiar features and hearing appeals. It also acted, the PAC explained, as the final arbiter on issues deemed beyond the authority of a deputy commissioner (at state level).4

As well as attempting to understand and describe the workings of the commission and department, the PAC examined the department’s financial arrangements in detail, finding that its medical provisions and institutions (the ‘repat’ hospitals) were less efficient than those of its ‘civilian’ counterparts. Yet the PAC was on the whole positive in its estimation of the department, accepting that the particular nature of its task (for example, maintaining the Appeals Tribunal) was inherently expensive, and concluding that its financial management was generally sound. The PAC recommended that the department compare notes with the public hospitals with the aim of streamlining its administration and that it should adhere more closely to the practices of the public service of which it was now a part. In so doing, the PAC effectively prepared the Repatriation Department for the postwar era, equipping it as a robust component of the public service and enabling it to respond to the new challenges that would inevitably emerge.6 Among them would be the department’s move from Melbourne to Canberra in the late 1960s.

There was now general recognition that repatriation was a permanent and significant aspect of governance in Australia, and that perspective enjoyed cross-party support. However, that did not prevent aspects of repatriation from acquiring a party-political dimension. An early postwar example was the debate concerning the provision of especially equipped motor cars for disabled ex-servicemen. Despite lobbying by the RSL, the Commonwealth Government declined to make such cars available, mainly on the grounds of costs and the difficulty of determining which injuries were of especially equipped motor cars for disabled ex-servicemen. Despite lobbying by the RSL, the Commonwealth Government declined to make such cars available, mainly on the grounds of costs and the difficulty of determining which injuries were caused by natural ageing that were blamed on war service; there was the retention of 100 per cent pensions for those suffering tuberculosis, despite the availability of modern drugs that made most cases curable; and so on. The most withering criticism was reserved for those thought to be malingerers in psychiatric wards: A fair percentage, whether alcoholics or not, are merely inadequate individuals, and treating them with tolerance and increased pensions only fosters their inadequacy. We cannot believe that these men are not sub-consciously or even consciously aware that their inadequacy is inherent and not due to war service, and we feel that their self-respect suffers when encouraged by the Department to believe that they cannot help themselves ... Unfortunately at present too many constitute the degraded group of pensioners whose care assuages so much contempt and ill feeling towards the Repatriation Department.8

This was the era before clinical recognition of PTSD, from which condition many of the alleged malingerers may have suffered, and such criticism reflected the widespread wartime hostility to perceived ‘inadequates’ lacking ‘moral fibre’. Nonetheless, the Repatriation Commission firmly rejected these allegations, and in protest several were pensioned off at 90 per cent, having written ‘I am not a war hero, nor do I wish to be’.9

During the 1950s, repatriation benefits were extended to veterans of the Korean War and operations in Malaya (later Malaysia) as well as to members of the Far East Strategic Reserve (based in Malaysia). The Native Members of the Forces Benefits Act 1957 similarly extended statutory provisions to members of those special units that had defended Papua New Guinea and the Torres Strait islands during the Second World War. Significantly, the Repatriation (Special Overseas Service) Act 1962 made available benefits for ‘special service’ overseas where Australian armed forces were engaged in ‘warlike operations’. This provision would later prove to be of fundamental importance in allocating pensions and benefits for Vietnam War veterans.9 Such legislation kept the Repatriation Department up to date and gave it the flexibility to deal with new situations as they arose. Yet the repatriation system in this period was not immune to criticism, and one perhaps surprising source of discontent was the medical profession itself. For example, letters published in the Australian Medical Journal during 1963 drew attention to what some doctors saw as both the lazy implementation of repatriation provisions and the over-treatment of incurable conditions. Thus, for example, a letter published in the Journal described the treatment of a veteran who had developed piles from peeling potatoes: ‘I thought that they would be treating war heroes, only to be confronted with oesophageal varices, hernias, gallstones, piles and a wrist fractured in a road traffic incident ... That Whiting had been awarded the Distinguished Flying Cross during the Second World War meant that his opinions could not be dismissed lightly. He argued that, in contrast to the First World War, many of those in the Second had been effectively civilians in uniform, seeing little or no action, and yet demobilisation had taken full advantage of all the benefits that had come their way, aided and abetted by the RSL and politicians eager to embrace the veterans’ cause, as well as a willing and naive Repatriation Department. There was, he said, the case of the ‘man who turned to drink because of the terrible mental agony of sitting at an office desk in Sydney’, and that of a ‘WRAN [who] developed piles from peeling potatoes’:10

Inevitably, Whiting’s book caused a stir, fuelling public suspicion of the repatriation system and prompting politicians to ask difficult questions of a department now suddenly on the defensive. Two years after the
Home from the Korean War! Smiling crowds look on approvingly, as a returning Australian soldier is greeted passionately by a loved one. The date is 22 November 1954, and troops have disembarked at East Circular Quay to be met by families before marching down George Street and past Sydney Town Hall to mark their return from Korea.

(State Library of NSW, Australian Photographic Agency–43247, photographer Curly Fraser)

Although by the end of the Second World War, registration and other enquiries had become less stressful than in earlier years, there was still the sense of a barrier between ‘them’ and ‘us’ at the ‘repat counter’ in the Repatriation Department’s offices. Here veterans wait their turn to come face to face with Repatriation staff, c.1950.

(DVA collection)
book’s publication, the department produced a lengthy rebuttal for the Senate Standing Committee on Health and Welfare. Prepared by PA Conde, an assistant commissioner, the report was a cool assessment of Whiting’s accusations. Refuting allegations that the repatriation system had become a ‘racket’, Conde demonstrated that, from the enactment of the War Pensions Act 1914 through to the present day, parliament had always taken the view that ‘multiple factors’ – social, economic, ethical, emotional – had to be considered alongside simple medical causation. At root, Conde explained, an illness sustained by a serviceman or woman during his or her period of service in the armed forces could not be dissociated from participation in ‘war-like’ operations, even if at the time he or she had not left Australia, and even if the illness had not been caused in a strict medical sense by war service. In other words, simply being in uniform as a member of the armed forces at the time the illness was contracted was enough to allow an application for repatriation benefits. Moreover, despite the insinuations in Whiting’s book, the Repatriation Department’s careful scrutiny of such applications was always as rigorous as it was fair. In 1969–70, for example, when the controversy was at its height, a total of 62,966 claims and appeals had been lodged, of which 12,224 were accepted or allowed. Australia’s repatriation system might have been the most liberal and the most generous in the world, but it was not the pushover that Whiting had described.11

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Conde’s assured performance did much to restore confidence in the repatriation system. However, whether or not Whiting’s book was a success is a difficult question. At first, Conde claimed in the introduction to his own book that this was the time to look more closely at the workings of the Repatriation Department. Initially, in July 1970, the cabinet asked the department to conduct its own internal review of the department’s ‘rationale and principles’, and in the following September the Senate directed its Standing Committee on Health and Welfare to examine all aspects of the repatriation system. The Senate committee reported in 1972, expressing a need to achieve a clearer balance between meeting the needs of veterans and giving the taxpayer value for money, but by now this early work was already overshadowed by the lengthy and detailed deliberations of the Independent Enquiry into the Repatriation System set up by the Commonwealth Government in 1971 under Justice Paul Toose of the NSW Supreme Court. The Toose inquiry took more than four years, its final report to parliament was not submitted until February 1976, and wags observed that its plodding review of the repatriation system had lasted longer than the First World War! When published, the Toose report ran to more than 800 pages and made 300 recommendations.12

Initially, Repatriation Department staff embraced the Toose inquiry with enthusiasm. But they were soon worn down by constant demands for more and more information and detail, and policy development was hampered by the constant refrain, ‘Wait for the report’. The major changes recommended by Toose were largely technical. For example, they included replacing the existing three-tier pensions scheme with a single scale of pensions based on disablement, and with less emphasis given to a pensioner’s employability. The report also recommended the elimination of some categories of dependants’ pensions, as well as changes to the eligibility for the service pension. The RSL and veterans’ organisations, predictably, supported those elements of the Toose report that appeared to benefit the veteran and rejected those that did not. The Repatriation Department, meanwhile, considered that the report’s recommendations would not have the desired outcome of simplifying the existing system, and that the practicability of some suggestions had not been assessed satisfactorily. Yet, although not always happy under the microscope during the 1970s, the Repatriation Department emerged strengthened from this lengthy scrutiny. Indeed, in 1976, in response to the Toose report, it was renamed the Department of Veterans’ Affairs (DVA), and acquired the administration of both the Defence Service Homes Scheme and the War Graves Commission. The Repatriation Commission retained its existing name, but its relationship with DVA remained unchanged.13

Under the new arrangement, with the War Graves Commission now in its portfolio, DVA assumed responsibility for more than 19,000 war graves in Australia, Papua New Guinea, Solomon Islands and Norfolk Island, and a further 3,300 names of war dead commemorated on memorials. Additionally, there were Australian war graves at Amboin in Indonesia, together with numerous graves in Australia in more than 300 civilian cemeteries. The Adelaide River Cemetery, south of Darwin, was the most visited in Australia; the largest military cemetery in Australia was Rockwood in western Sydney. Accordingly, commemoration became an increasingly important aspect of DVA’s activity. The principle of interring Australians where they had fallen, laid down explicitly in the First World War, had attracted increasing criticism. Alongside anxiety that cemeteries or individual graves in some locations overseas might be subjected to vandalism, there were also changing expectations. It was suggested that those Australians killed in Vietnam might be laid to rest in a war cemetery in Malaysia, next-of-kin and relatives responding by demanding the right to bury their own dead at accessible locations in Australia. Indeed, the remains of most Australians who died in Vietnam were returned home to Australia at government expense for burial according to their families’ wishes.14

Australia’s participation in the Vietnam War had proved highly divisive, splitting Australian society in ways reminiscent of the conscription controversy during the First World War. In May 1962, anxious to demonstrate its status as America’s willing ally, the Commonwealth Government committed the Australian Army Training Team to South Vietnam. The team, the members of which were specialists in guerrilla war, was only thirty strong, but this was the largest commitment by any Western country other than the United States. Put simply, Australia’s involvement in Vietnam was prompted by the desire to encourage and support an American physical presence in the Asia–Pacific region, which was seen as vital to Australia’s strategic security, especially as Britain moved inexorably towards withdrawal from east of Suez.15 Menzies declared himself an adherent of the ‘domino’ theory – the belief that South-East Asian countries would fall one by one to the communist threat if it was not confronted and stopped. In May 1965, Australia’s military commitment to South Vietnam was expanded to a full battalion. Less than a year later, not only was it still further, to two battalions plus supporting units. In January 1968, Menzies retired and was replaced as Prime Minister by Harold Holt, who confirmed that ‘in the long-run the threat to South Vietnam is a direct threat to Australia’.
Initially, Australian public opinion supported the Menzies–Holt analysis, but by 1969 it was beginning to fragment. A catalyst had been the amendment of the Defence Act in 1965 to allow conscription, and by June of that year the first so-called national servicemen were receiving their call-up papers. Conscription for overseas service was anathema to many Australians, and the lottery-style method of choosing those who would be called up was likewise repellent. Opposition to conscription proved politically divisive (the Labor Party was opposed), and the seeds of a resistance—the Vietnam moratorium movement—led to large anti-war demonstrations across Australia. By now, the conduct of the war had led to increased public disquiet about Australian involvement. American policy towards Vietnam had also changed, it now emphasised ‘Vietnamisation’, encouraging the South Vietnamese forces to do the bulk of the fighting. In response to these altered conditions, an Australian battalion was withdrawn in April 1970, and in August 1971 it was announced that the second battalion would also be brought home. Saigon finally fell to North Vietnamese forces on 30 April 1975. Three weeks earlier, Gough Whitlam, the Prime Minister, had opined that ‘who rules in Saigon is not, and never has been, an ingredient in Australian security’.19

For those Australians who had fought in Vietnam—not least the ‘noshos’ (national servicemen) who had not wanted to be there in the first place—the seemingly abrupt changes in public opinion and political judgement would be traumatic. In all, 142 Australians were killed in Vietnam, 15,542 of whom were conscripts. Many now wondered why they had been fighting and felt aggrieved by what they saw as a lack of respect and support at home. Some came back to an uncertain welcome and felt ostracised by former friends and civilian colleagues. Some detected resistance when they joined, or attempted to join, RSL sub-branches. A belated welcome home parade was held for Vietnam veterans in Sydney on 3 October 1987, which did much to ease the tension and mend the divisions. But the atmosphere remained uneasy, especially as returnees began to develop new symptoms and old illnesses.20

Initially, commentators found it hard to understand the sense of grievance expressed by many Vietnam veterans. Musing on the assertion of one veteran in 1982 that ‘We were betrayed then and we were betrayed now’, some observers considered that ‘there were no compelling reasons why the experience of Vietnam veterans should be in it, mate!'

Diagnostic and statistical manual of mental disorders

‘Repat’—A Concise History of Repatriation in Australia

To Veterans’ Affairs and Vietnam

access to ‘the benefits of a repatriation system maturing over half a century into a generous and effective public policy instrument’—a system that was ‘much more assured and sophisticated than it had been for any previous war’. There was more. In contrast to participants in earlier conflicts, it was pointed out, Australians serving in Vietnam understood what their pension and repatriation entitlements would be even before they were deployed, not least because they knew already how long they would serve in theatre. Improvements in casualty evacuation and medical facilities led to vastly improved treatment for the wounded. Medical records were also much improved (fewer files went astray), while documentation of troop movements and deployments was much more highly accurate. It was certainly true that, well informed about their repatriation entitlements and supported by expert and readily available medical documentation, Vietnam veterans were quick to apply for benefits. By the end of June 1989, more than 33,500 of the 49,200 veterans and eligible war widows had applied for housing assistance, of whom just over 85 per cent were successful. The Vietnam veterans were also advantaged by less restrictive burden-of-proof provisions than those that applied to returnees from earlier conflicts, and the rates at which they applied for (and were awarded) disability pensions were noticeably higher than those for Second World War veterans. In the early 1980s, the Vietnam Veterans Association of Australia (VVAA) estimated that between 10,000 and 15,000 Vietnam veterans were injured enough as a result of their service to DVA analysis, fewer than 3,500 of the 56,000 who had served in Vietnam were in chronic ill health as a result of their service. Approximately 9,000 Vietnam veterans held disability pensions at that time, and about 5,000 were on small pensions for conditions such as mild deafness and flat feet. According to one contemporary assessment of this evidence, ‘the claims of serious illness seem overstated’.22

However, as the same admission, ‘the retrospective impact of the Vietnam War gradually corroded the lives of an influential minority of those who fought it, forcing the Department of Veteran Affairs (DVA) into an adversary relationship with a significant part of its client group’. This was to be ‘one of the most traumatic and turbulent periods in its long history’.23 ‘Why was this?’ To begin with, PTSD was still imperfectly understood. So, too, was the full story of Australian combat in Vietnam, aspects of which—such as the battle of Long Tan—were every bit as horrifying and disturbing as those that had been experienced in earlier conflicts. In 1986, the American Psychiatric Association’s Diagnostic and statistical manual of mental disorders acknowledged PTSD as a mainstream condition, accepting that veterans’ psychological problems were a ‘normal reaction’ to stressful episodes. Put another way, it was now recognised by the medical profession that it was the acute stress of war, rather than any predisposed mental or personality disorder, that was the principal cause of psychological illness in veterans. Nonetheless, it took time for attitudes to change, and as late as 2005 one observer, echoing the sentiments of Be in it, mate!, complained that some PTSD sufferers were merely ‘lazy, notching mailmen who […] want pensions for being turned into drunkards’.24 There may have been some claimants who cheated the system, especially as the generous totally and permanently incapacitated (TPI) pension was available for some of these sufferers, but most claimants were judged to be genuine.
Indeed, following a DVA initiative and persistent calls from the veteran community, the National Centre for War-related Posttraumatic Stress Disorder was established in 1995. Funded exclusively by DVA for five years, the new centre was founded in collaboration with the University of Melbourne and the Austin & Repatriation Medical Centre. So successful was the centre that, in July 2000, DVA’s financial support was extended for a further five years. Later, as funding was attracted from other sources, and as the extent of PTSD in the wider non-veteran community became better understood, the centre broadened its remit, becoming Phoenix Australia (with an implied emphasis on recovery and rehabilitation); its subtitle explained that it was the ‘Centre for Posttraumatic Mental Health’.** Meanwhile, in 2000–01, DVA published Towards better mental health for the veteran community – a further indication of the extent to which PTSD was now at the forefront of the department’s thinking. In 2013, for example, DVA commissioned researchers at the Australian Institute of Family Studies to report on health and social issues among the children of Vietnam veterans. The resulting report, which was published by DVA in 2014, noted an intergenerational dimension to PTSD. The sons and daughters of Vietnam veterans, it suggested, were more likely than the national average to have experienced ‘harsh parenting’ as well as bullying at school, and noted an intergenerational dimension to PTSD. The sons and daughters of Vietnam veterans, it suggested, were more likely to have learning difficulties.**

However, PTSD was but one element of the Vietnam problem. More intractable was the debate about Agent Orange, a defoliant used extensively by the Americans to destroy the jungle hiding places and supply routes of the North Vietnamese and Viet Cong, was the root cause of many veterans’ ailments. An initial stumbling block was the wording of the Repatriation (Special Overseas Service) Act, which emphasised that eligibility for war pensions and associated benefits required that veterans have suffered from a ‘specific disease or injury’, that ‘this will ever be reversed’.** In fact, however, the debate continued with renewed vigour. In 1998, DVA published its exhaustive report Morbidity of Vietnam veterans: a study of the health of the veteran community. Drawing upon 40,370 veterans’ responses (an extraordinary response rate), the findings were revelatory and extremely disturbing. Some 25 per cent reported that they had been diagnosed with cancer since their first day in Vietnam, and at least 30 per cent reported mental issues such as anxiety disorders and depression. The cancer rates were between three and ten times higher than the national rates (depending on the condition); congenital abnormalities in veterans’ children were three to eleven times the normal rate – spina bifida in their children was ten times the average, and missing body parts in children were even higher. Women who had served in Vietnam (aid workers and Army and civilian nurses) also reported higher rates of cancer, heart disease and birth complications. A further indication of these findings, wrote Brand, was the record breakthrough of the national service Vietnam veterans: mortality and cancer incidence, published in 2005. In this way, DVA had at last corrected the erroneous conclusions of the Evatt royal commission and had scientifically confirmed many of the VVAA’s initial assertions. It had taken a long time. In 2014, the Australian War Memorial announced that it would be putting the record straight by commissioning a single-volume history of the health and medical problems experienced by Vietnam veterans, especially as they related to Agent Orange.***

Meanwhile, as the Vietnam drama played out, other significant issues also confronted DVA. By the mid-1980s, for example, the long-term future of the repatriation general hospitals (RGHs) had become a matter of serious debate. In early 1984, Ian Brand, a Victorian hospital administrator, was tasked with a comprehensive review of the RGH system. He was asked especially to note deficiencies in resources and administration, and to identify what developments were needed to meet the challenges of an ageing population. When he reported, Brand recommended the ‘total rationalisation of the RGHs within the state hospital system, advocating the complete integration of the two by the end of the century’.** In 1988, the Australian Government announced its intention to hand the RGHs to the states by 1995. There was disquiet among the various ex-service organisations, especially when the government brought the timetable forward to 1992. Prime Minister Bob Hawke responded by promising ‘priority hospital access’ to the veterans and war widows under the new system, but the veteran community, promised ‘priority hospital access’ for veterans and war widows under the new system, but the veteran community, and in March 1983 the incoming Hawke government announced a royal commission into the matter. Conducted by Justice Phillip Evatt, the Royal Commission on Agent Orange reported in July 1985. It concluded that only a minor part of the RGHs, notably Concord in New South Wales, were now underutilised. Additionally, DVA reported that some RGHs, notably Concord in New South Wales, were now underutilised. In the end, the divestment of the RGHs to state control was to be a little slower than expected. Heidelberg and
Daw Park were handed over in 1994–95, and the last hospital (Lady Davidson, Sydney) was handed over in 1997.

Hollywood (in Perth) and Greenslopes (in Brisbane) went not to the states but to the private Ramsay Health Care.

Among other detailed changes in this period was the abolition, in 1979, of the repatriation boards, which dated back to the earliest days of the repatriation system (they were originally known as ‘state boards’), and their replacement by Repatriation Commission delegates for primary level decision-making on claims. At the same time, the old 1929 entitlement and assessment appeal tribunals were replaced by the Repatriation Review Tribunal. The tribunal was short-lived, however, and in 1984 was replaced by the Veterans’ Review Board, which would now provide the first level of review independently of commission delegates for individual cases. In addition, the Repatriation Medical Authority and the Specialist Medical Review Council were set up in 1994 to determine the grounds on which death, injury or disease could be attributed to service.

The number of claims from veterans and dependants rose by almost 50 per cent between 1980 and 1983, and in addition, the Repatriation Medical Authority and the Specialist Medical Review Council were set up in 1994 to determine the grounds on which death, injury or disease could be attributed to service.

The new Veterans’ Entitlements Bill, which informed the interim process, combined with increasingly complex investigatory procedures associated with new legal structures, led to resource increases for DVA – but not the 100 per cent increase in staff that the department had sought! A new Veterans’ Entitlements Bill, which informed the interim Repatriation Legislation Amendment Act 1983, had proved controversial, not least because it had proposed to toughen the ‘onus of proof’ requirement. Again, the RSL led the counterattack, significantly altering the thrust of the Bill, and when the substantive Veterans’ Entitlements Act was finally passed in late 1985 and came into operation in the following year, it was described by DVA Secretary Derek Volker as ‘an acceptable compromise’. As he admitted, the ‘new Act is not perfect’, but it was at least timely. Until then, he explained, the accumulated ‘Repatriation Legislation was inconsistent and difficult to follow, the almost 60-year-old Act having been amended 90 times without consolidation’. The new Act rationalised and tidied up the earlier maze of repatriation legislation. Also, in a separate move, the Defence Service Homes Scheme was effectively quasi-privatised when, in November 1988, Westpac Banking Corporation acquired its assets and the right to make new loans. Under this new arrangement, DVA retained responsibility for determining entitlement for defence service housing, but the financing and administration of the scheme was transferred to the private sector. As Lloyd and Rees concluded in 1984 in their assessment of DVA as it approached the new millennium, the department’s ‘repatriation administrators were [still] in the vanguard of the Australian Commonwealth’s public policy and administrative development’.20

4. ibid.
7. ibid., p. 219.
8. ibid., p. 325.
10. ibid., p. 66.
11. Pk Goodie, Be in it, mate! by Dr John Whitting – an analysis (La Trobe University Press, Melbourne, 2013, pp. 67, 71.
13. ibid., p. 342.
14. ibid., p. 351.
21. ibid., p. 376.
22. ibid., p. 377.
23. ibid., p. 367.
25. ibid., p. 635.
32. ibid., p. 638.
33. Sydney Morning Herald, 11 May 2014.
34. Lloyd and Rees, The last shilling, p. 217.
35. ibid., p. 406.
36. ibid., p. 409.
INTO THE NEW MILLENIUM
The general assumption, commonplace after 1918, that the Repatriation Commission and its department would eventually become redundant was rudely overturned by the Second World War. Tens of thousands of new veterans, male and female, were added swiftly to the existing population of returned servicemen and women and war widows, perpetuating the workload of the commission and department into the foreseeable future. Similarly, post-1945 conflicts, notably the Korean War, contributed additional numbers, while the Vietnam War in particular created a whole new generation of veterans, and with it a whole new set of challenges.

Yet, in the years after Vietnam, a new conventional wisdom emerged, strangely reminiscent of 1918, which reckoned that the Repatriation Commission and DVA would some day both wither away, as their workload declined and disappeared with the inevitable passing of the more recent generations of veterans.1 It was a misapprehension that was dented during the 1990s, as Australia became involved in a number of peacekeeping and other military operations, and which by the early 21st century had been shown to be entirely misplaced. In fact, significant military commitments, especially in East Timor, Afghanistan and Iraq, produced a ‘fourth wave’ of veterans, distinct in many ways from those that had gone before, and made a range of new demands upon the commission and department.

In the aftermath of Vietnam, some wondered how Australia might respond to the prospect of further involvement in new conflicts or peacekeeping roles, or whether Australian public opinion would now be resistant to any kind of military deployment overseas. But times change: as one observer wrote in 2007, the ‘anti-war protesters and draft resisters are quieter now – installed in careers, enjoying their grandchildren or pursuing new causes: climate change, Africa, AIDS’.2 Moreover, despite the enduring trauma of Vietnam, it soon became apparent that Australian politicians and public opinion were prepared to support external military operations, especially in humanitarian roles or where Australia’s vital interests were seen to be at stake. In this way, Australia emerged as a strong contributor to the security of the Asia-Pacific region, while also acting ‘out of area’ when it was deemed necessary to do so. Certain commitments, notably in Afghanistan and Iraq, proved deeply controversial, but the broad principle of legitimate operational deployment overseas had been firmly established in Australia by the turn of the millennium.

As early as 1990–91, for example, Australia participated in the first Gulf War, committing some 1,800 ADF personnel and several Royal Australian Navy (RAN) warships to the coalition formed to oust Iraq from its illegal occupation of Kuwait. Australians also assisted in the United Nations peacekeeping operations in Cambodia from 1991 to 1993, contributing some 1,200 personnel, and similar numbers served under United Nations auspices in Somalia from 1992 to 1994. Closer to home, and more controversially, Australia became involved in Bougainville, and in 1997 joined the New Zealand-led Truce Monitoring Group (the other members were Fiji and Vanuatu) to support the ceasefire between Bougainville separatists and the Papua New Guinea Government. Later, in 2014, Australian
forces led the effort to rid Bougainville of unexploded ordnance. Solomon Islands also hosted Australian peacekeepers when the Australian-led Regional Assistance Mission to Solomon Islands was deployed in 2003.

Prominent among these regional operations was the deployment in East Timor (Timor-Leste, as it became in 2002), the former Portuguese colony that had resisted incorporation into Indonesia. A referendum sponsored by the United Nations in August 1999 indicated that some 86 per cent of the population did not wish East Timor to become an Indonesian province. Accordingly, the United Nations established a transitional authority to administer East Timor as it prepared for independence. Security was to be provided by the Australian-led International Force East Timor (INTERFET). Australia won international applause for its leadership of INTERFET and for its humanitarian effort, which included bringing the market in the capital, Dili, back to life and helping to construct a sustainable health-care system for the new country. Remarkably, the East Timor Reconstruction Project lasted approximately 16 weeks, compared with the World Bank expectation of an average of 15 months for this type of activity. It was an achievement that was also popular with the Australian public, which also applauded the humanitarian role, acknowledging the ADF as a ‘force for good’ in the Asia–Pacific region.

More controversial (and more costly, not least in lives lost) was Australian involvement in the NATO-sponsored International Security Assistance Force in Afghanistan, where from 2003 Australia deployed substantial forces to engage in counterinsurgency operations and to advise the Afghan National Army in the southern province of Uruzgan. Australian involvement had its detractors at home, but supporters of the intervention could note that by the early 21st century such operations had come to define the current role of the ADF. As one observer put it, the task of ‘stabilising threatened political systems and working with struggling nations to defend against a return to instability and suffering has become a routine activity for the modern ADF. An obvious example is Afghanistan.’

The deployment also produced the first recipient of the Victoria Cross to an Australian under the post-imperial honours system, when it was awarded to Trooper Mark Donaldson for conspicuous gallantry on 2 September 2008 after his patrol in Uruzgan Province was ambushed by a numerically superior and well-equipped enemy. Donaldson was posthumously awarded the companion of the Order of Australia (AO) in 2011.

Equally controversial was Australian participation in the second Gulf (or Iraq) War in 2003. The Australian contribution was larger than in the first Gulf War, including no fewer than 500 special forces troops. At sea, the RAN played an important role in the northern Arabian Gulf, including the assault on the AI Faw peninsula. In the air, fourteen F/A-18 Hornet fighters were among the assets committed by the RAAF. After the initial combat phase, Australian forces remained in Iraq, helping to train the reconstituted Iraqi armed forces, controlling air traffic in and out of Baghdad airport for six months, and providing security for international civil reconstruction workers. By now the Australians had acquired an enviable reputation as ‘the best trainers in the world’, and in 2016 Australia further enhanced its role and presence in Iraq, helping local police and border guards to ‘hold and stabilise’ territory only recently held by Islamic State insurgents in the country’s north.

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In this way, the ADF was more or less constantly engaged in overseas theatres of operation as the old millennium drew to a close and the new one dawned. Inevitably, this intense activity was mirrored within DVA, opening up entirely new areas of enquiry and veteran support. In 2003, for example, the department published the Gulf War veterans’ health study, investigating such concerns as the impact of depleted uranium shells, presumed proximity to chemical and biological weapons, and the effects of smoke from burning oil installations. This was the first ever comprehensively planned health study of a group of Australian veterans involved in a single theatre of war, and was undertaken by specialists at Monash University, the University of Western Australia and the University of Melbourne. Among other things, the study indicated that Gulf War veterans were more likely than those from comparable military units to report symptoms of suspected illness. A follow-up study was published in 2015.

In studies such as these, DVA further established itself as a major initiator of health research projects in Australia. At the same time, as the department divested itself of the repatriation general hospitals, it shifted from being a major direct provider of health and hospital services to becoming Australia’s largest purchaser of health services. In the mid-1990s, repatriation health entitlement cards (DVA Gold and White cards) were introduced. The Gold Card entitled holders (who included war widows and widowers) to DVA funding for all clinically necessary health-care needs and all health conditions, whether related to war service or not. White Card holders to DVA funding for treatment of injuries or conditions caused by war or that were service related. White Card holders were also entitled to treatment for malignant cancer, tuberculosis and any mental health condition – whether war caused or not – together with symptoms of other conditions that might arise within fifteen years of war service. Later, the Orange Card was introduced for Commonwealth and Allied veterans with qualifying service, to cover the costs of pharmaceuticals only.

There was now an increased emphasis on rehabilitation and support, including self- and peer-help, exemplified in DVA initiatives such as The Right Mix, At Ease, and Men’s Health Peer Education, which addressed such concerns as alcohol and lifestyle, coping with deployment, and the raising of awareness of men’s health issues. The Right Mix, an alcohol management program launched in 2001, was designed to help individuals achieve a balance between responsible alcohol consumption and a healthy lifestyle. Later, an interactive website was developed to encourage ‘hands on’ self-assessment and self-management. At Ease, introduced in 2002, aimed to help veterans identify normal health issues; its website explained that it is not unusual to experience sadness, distress or anger after a military deployment. Moreover, the program – aimed at veterans, serving members of the ADF, and their families – gave advice on recognising such symptoms and seeking timely help and treatment. Men’s Health Peer Education (MHPE) began as a pilot program in Tasmania in 1999, intended to help Vietnam veterans share responsibility for their own health and wellbeing. DVA provided training for volunteers from the veteran community, covering a range of topics such as social participation, sleep, mental health and illness prevention. The program was rolled out nationally in 2001, and by 2017 there were more than 200 active volunteers across Australia, including several women who engaged with the wives and partners of veterans to improve men’s health. A twice-yearly
magazine (with a distribution of about 15,000 copies per issue) and newsletters kept participants in touch and up to date, their content and tone became increasingly gender neutral as DVA evolved the MHPE program to suit the ‘fourth wave’ of post-Vietnam and female veterans.

In 1999, DVA’s purview was further extended when the department (looking for new business opportunities at a time when it still pondered its long-term viability) assumed responsibility for the Military Compensation and Rehabilitation Scheme, which was transferred from the Department of Defence. This, in turn, led to the Military Rehabilitation and Compensation Act 2004, the provisions of which, managed by DVA, were available to all permanent and reserve members of the ADF, along with cadets, their instructors, and others deemed to be acting at the direction of the ADF. These provisions included permanent impairment compensation, incapacity payments, special rate disability pension, and compensation following death.

The expansion of research projects and shifts in service provision were matched by advances in administrative efficiency. For example, the introduction of DVA’s new Claims Processing System in 1995-96 was reckoned to have resulted in a 30 per cent productivity increase. Shortly after, the Pension Information Processing System was also introduced. The growth of the internet, information technology and digitisation offered further opportunities for managerial innovation. DVA outourced its information and communication technology infrastructure to Ferntree Computer Corporation in 1992, and then to IBM in 1997, being one of the first Australian Government agencies to do so. By 1997–98, all DVA personal computers were enabled for internet access. The establishment of information technology links to the Department of Finance and Comsuper, and a trial of electronic forms lodgement, followed soon after. In 1998–99, the DVA intranet was established and DVA Factsheets online (with some 300 items) was launched. By 2000–01, all DVA forms were available on the internet. The establishment of information technology links to the Department of Finance and Comsuper, and a trial of electronic forms lodgement, followed soon after. In 1998–99, the DVA intranet was established and DVA Factsheets online (with some 300 items) was launched. By 2000–01, all DVA forms were available on the internet.

Shortly after the turn of the millennium, Neil Johnston, President of the Repatriation Commission and Secretary of DVA, reviewed progress across these several fronts. Noting ‘enhanced health data analysis’, greatly assisted by ‘the establishment of an e-business environment’, he described the ‘rigorous data analysis [that] has aided the purchasing work being undertaken in the health care area’. In particular, he explained, the department had now completed its ‘program of veteran partnering contracts with private hospitals’, and a new round of contracts for day procedure centres was underway. The shift from health provider to health purchaser was now all but completed. Johnston also remarked on the significance of ‘emerging demographic trends’ and their implications for the commission and DVA over the subsequent five years and beyond. For example, he estimated that the number of income support service pensioners would decline by 16 per cent over the next half-decade, despite an expected increase in the number of Vietnamese veterans becoming eligible as they turned 60 years of age, although he expected a 14 per cent increase in the number of war widow/widower income support supplement recipients over the same period. Disability compensation claims were also beginning to decline, he added.

It was a fair analysis, based on current assumptions as well as the available statistics. However, it could not anticipate the ‘fourth wave’ of veterans already in the making, or the long-term consequences of engagement in Afghanistan and Iraq, nor could it foresee the entirely new demands with which DVA would shortly be faced. Instead, Johnston’s review provided an insight into the demographic structure of surviving veterans as it stood in 2001–02, on the eve of fundamental change. There were still fourteen survivors from the First World War, together with a large but declining contingent of 243,700 from the Second World War. There remained 12,200 from Korea, Malaya and the Far East Strategic Reserve, 51,400 from Vietnam, 7,600 from other pre-1972 conflicts, and 20,500 veterans from post-1972 conflicts. To those were added 36,200 British, Commonwealth and Allied veterans with qualifying service receiving pensions, and 163,300 peacetime ADF members.

In January 2001, the increasingly large number of elderly veterans prompted the introduction of the Veterans’ Home Care program, which was designed to help veterans and war widows and widowers live independently in their own homes for as long as possible. In the year to 30 June 2001, 44,043 veterans, widows and widowers had already been assessed, and more than $81.9 million had been paid for services to those applicants. At the same time, DVA launched the Choose Health/health strategy, which was designed to guide the planning, implementation and evaluation of health promotion programs for the next half-decade. Again, the emphasis was on encouraging individual members of the veteran community to take responsibility for their own health.15

In the research field, DVA continued its work on the cancer and mortality study of Australian participants in the British atomic bomb testing program and commenced a health assessment of personnel involved in desal/ reseal maintenance of RAAF F-111 aircraft.16 Indisputably relevant and obviously important, such initiatives were nevertheless essentially backward-looking, tackling the problems of the recent past. DVA was as yet unable to predict (let alone respond to) the new challenges on the horizon.

Increasingly under financial pressure as governments responded to the assumed inexorable decline in the number of veterans and their dependants, DVA sought yet greater administrative efficiency. The department launched its internal One DVA program, which was first mooted in 2005, to identify and rectify inefficiencies across the DVA system, in particular the duplication and variation that existed in state offices, where management decisions were not routinely reported to Canberra. One DVA aimed to achieve greater coordination between the localities and to develop national consistency in the administration of the veterans’ affairs. However, while greater efficiencies were indeed made and new levels of consistency achieved, the restructuring created its own difficulties. There was the considerable challenge of managing geographically disparate teams across the localities, so line managers in Canberra created ‘virtual teams’ that communicated principally by video conferencing. Significantly, the deputy commissioners in each state found themselves effectively disenfranchised, their role and authority severely curtailed by the centralising of control in Canberra.17

All this was against the background of the sudden emergence of the hitherto unexpected ‘fourth wave’, as Australia became increasingly involved in Afghanistan, Iraq and elsewhere. Responding to the steep increase in veteran
Following the DVA divestment of the repatriation hospitals by the mid-1990s, a far wider range of hospital facilities across Australia became available to veterans and widows. This leaflet explains how the new Repatriation Private Patient Scheme in Victoria would work. (DVA library collection)

The Department of Veterans’ Affairs was justly proud of its new Compensation Claims Processing System initiative, the application of information technology resulting in a 30 per cent efficiency improvement. Here the system is being demonstrated by DVA staff member Mark Tozer at a ‘trade show’ in 1997. (DVA collection)
demand that had become swiftly apparent, DVA reacted by refashioning the role of the deputy commissioners as the department’s ‘frontline’ and ‘hands on’ authorities in each state, restoring their status and providing a means of meeting the new challenges. It was a timely initiative. Increasingly articulate, linked through social media, and often predisposed to create their own networks and veterans groups, the new generation of young veterans (and their dependants, and in some cases, widows) was sharply different from those that had gone before.24

A candid insight into this new generation of veterans was provided in an autobiographical memoir penned by James Prascevic, an Australian soldier who served in East Timor, Iraq and Afghanistan before sustaining serious injuries during parachute training, after which he had been discharged unfit from the Army. Close friends had been killed in action, and he had witnessed distressing scenes during active service overseas. Forced to abandon his chosen career, Prascevic experienced feelings of worthlessness and low self-esteem, punctuated by uncontrollable outbursts of anger, together with a pervading sense of guilt. All this propelled him into a spiral of decline, involving heavy drinking, the breakdown of his marriage and attempted suicide. He listed his darkest thoughts: ‘I hate myself’ – ‘I feel that I have failed in life’ – ‘Why did I survive when others didn’t?’ – ‘I feel like my career with the Army was worthless’ – ‘I hate when I see people doing things that I cannot do, e.g. running’.25 Diagnosed with depression and PTSD, James Prascevic attended a residential PTSD course along with other former ADF personnel, which resulted in a ‘feeling that a huge weight had been lifted off my shoulders’ – an improvement that was sustained through the continued support of his psychologist, psychiatrist and GP, as well as his own commitment to seeking help.20

Among the self-help tools that Prascevic found especially useful was a DVD titled ‘You’re not in the forces now’, produced by the Veterans and Veterans Families Counselling Service. Launched initially as the Vietnam Veterans Counselling Service in 1982, with its first centre in Adelaide, within two years the service had expanded to eight centres across Australia. It was rebranded and relaunched in 2006 as the Veterans and Veterans Families Counselling Service (VVCS). By 2015, there were fifteen centres across Australia making counselling services available to veterans of all conflicts, along with their families and current serving members of the ADF. A 24-hour telephone counselling service was complemented by an outreach program that allowed veterans and their families to receive counselling wherever they might be in Australia. This program arranged for private counsellors to provide services in remote areas where there was no ready access to VVCS centres. Advances in information technology also allowed access to VVCS counselling in regions where access to local counselling was problematic or non-existent:26 ‘More generally, as DVA aimed to achieve greater standardisation, rationalisation and consolidation under its One DVA initiative, it attempted to become ever more “veteran-centric”. Closer integration of claims processing across DVA’s various functions was one area. Another was the drive to move client services as close as possible to the clients, at the same time bringing client-related information together as the department’s “frontline” and “hands on” authorities in each state, restoring their status and providing a means of meeting the new challenges. It was a timely initiative. Increasingly articulate, linked through social media, and often predisposed to create their own networks and veterans groups, the new generation of young veterans (and their dependants, and in some cases, widows) was sharply different from those that had gone before.24

A major initiative in this area was the Coordinated Veterans’ Care (CVC) Program, a team-based program designed to increase support for Gold Card holders with one or more targeted chronic conditions or complex needs who might be subject to unplanned hospital admissions.27 The experience of Michael (not his real name), an Indigenous ex-Army veteran suffering from diabetes and PTSD, provided an insight into the program’s operation. Michael had become isolated from his family and friends and had relationship problems. Assessing him as being at high risk of unplanned hospital admissions, Michael’s GP at his local family medical centre drew his attention to DVA’s CVC Program, explaining how his care could be better coordinated and how he could be supported to achieve improved health outcomes. ‘Before CVC, Michael stayed in bed all day’, it was reported, ‘He was isolated, depressed, anxious and very ill and at risk of going to hospital from his poorly controlled diabetes and medications’. However, thanks to the program ‘he has progressed to the point where he is out about and even exercising a little. He has had no unplanned hospitalisations from his conditions and is more careful about taking his medications. He cooks his own meals and has now reconnected with his family’. At the medical centre, his care team was led by his GP and CVC nurse co-ordinator, and included an Aboriginal health worker, a diabetes educator, a mental health worker and a podiatrist. Key to the success of Michael’s management plan was the marshalling of all relevant information in one place. As the medical centre reported, ‘having the notes all here at the practice, managed and coordinated, has been invaluable to the improvements we have seen in Michael’s condition’.28

The further evolution of DVA’s At Ease program, aimed specifically at the new wave of veterans, was the launch of its web portal in 2013, providing a self-help website tool for post-discharge men and women. The experiences of one (anonymous) ex-serviceman offered an insight into the program in action, demonstrating the difficulties often encountered by veterans and highlighting changes in the ways veterans could access help and support. ‘It wasn’t the combat’, emphasised DVA’s informant, ‘Combat and taking action was what I was trained for. My problem was the way of life over there. It is just so different. Life is cheap. Women and children are abused, sold or killed so easily and I couldn’t do anything about it … having to stand on the sidelines made me feel helpless and guilty’. Moreover, he continued, after returning from deployment he still felt always on his guard, and it took a long time to stop reacting to loud noises and a quite a while to get ‘used to feeling safe again in Sydney traffic’. There was also difficulty at home. ‘I felt like I had changed but my family had stood still and now I was out of step’, he explained. ‘I couldn’t tell my wife what I wanted to protect her and the kids from. As soon as our son was born, they thought I was a hero, not realising how guilty I felt’. He started to shut them out, wondering whether he even wanted to live with them anymore, and spent solitary hours surfing the net to avoid having to do anything with the family. However, it was on the web that he discovered some YouTube videos about other veterans, and he soon realised that he was not alone in his feelings of despair. There was even a link to the DVA At Ease website. There he learned that his experiences were not unusual and that he could do something about them. There was advice on recognising the signs of mental illness and a guide to resources for taking action. He tried using some of the self-help tools that Prascevic found especially useful was a DVD titled ‘You’re not in the forces now’, produced by the Veterans and Veterans Families Counselling Service. Launched initially as the Vietnam Veterans Counselling Service in 1982, with its first centre in Adelaide, within two years the service had expanded to eight centres across Australia. It was rebranded and relaunched in 2006 as the Veterans and Veterans Families Counselling Service (VVCS). By 2015, there were fifteen centres across Australia making counselling services available to veterans of all conflicts, along with their families and current serving members of the ADF. A 24-hour telephone counselling service was complemented by an outreach program that allowed veterans and their families to receive counselling wherever they might be in Australia. This program arranged for private counsellors to provide services in remote areas where there was no ready access to VVCS centres. Advances in information technology also allowed access to VVCS counselling in regions where access to local counselling was problematic or non-existent: ‘More generally, as DVA aimed to achieve greater standardisation, rationalisation and consolidation under its One DVA initiative, it attempted to become ever more “veteran-centric”. Closer integration of claims processing across DVA’s various functions was one area. Another was the drive to move client services as close as possible to the clients, at the same time bringing client-related information together as the department’s “frontline” and “hands on” authorities in each state, restoring their status and providing a means of meeting the new challenges. It was a timely initiative. Increasingly articulate, linked through social media, and often predisposed to create their own networks and veterans groups, the new generation of young veterans (and their dependants, and in some cases, widows) was sharply different from those that had gone before.24
help tools on At Ease, which he found hard at first but which soon started to help. There were fewer arguments at home. He talked to his wife and then went to see his GP, who referred him to a psychologist. The psychologist ‘really opened my eyes’, he explained, making ‘me feel safe to talk about my sense of failure and guilt’. DVA was paying for the treatment, ‘and I didn’t have to have make a compensation claim’. Most importantly, ‘I am talking to my wife and kids – not about the bad stuff, but how I am feeling. It has made such a difference’.

The emergence of a 21st century fourth wave of veterans was matched by the increasingly diverse roles played by women in Australian society, not least in the armed forces. Indeed, with approximately 14 per cent of the ADF made up of women (in 2012, an average of 343 women served on overseas operations at any one time), and with ADF recruitment policy actively seeking to increase the number of serving women, female veterans were making up an increasing proportion of DVA clients. More than 11,000 veterans with one or more health conditions were women, and in 2012–13 DVA and the Defence Department established the ADF Service Steering Committee to inform both departments on the specific needs of women. By 2012, it was expected that women would be able to occupy any role in defence, including in special forces, diving and infantry roles, subject to meeting physical and intellectual requirements. As DVA put it, historically ‘in times of war women were the ones left behind. It is the same today – when their husbands and partners leave for active duty thousands of women take on a dual parenting role, often juggling that with a job and other family responsibilities’. Now, however, times were changing: ‘we are now entering a time when men are also taking on the responsibilities associated with staying behind and more women take an active role in the defence forces’. DVA was ‘prepared to adapt to a changing client base and welcomes the challenge of continuing to provide excellent support to all ex-service personnel, both men and women’.

DVA’s increasing engagement with female veterans and a younger cohort of people was demonstrated in the case of Emily, a promising young Army recruit. At 18 years of age, Emily was involved in an accident that caused severe damage to her arm. ‘After the accident’, she recalled, ‘I felt like I couldn’t even move my hand’. Sadly, Emily was now unable to pursue her chosen military career, but with DVA’s assistance she received the support and rehabilitation that she needed, working with an approved rehabilitation provider to develop a comprehensive management plan to meet her specific requirements. This, it was reported, was another example of the client-centric ‘holistic approach DVA now takes’, in which rehabilitation providers ‘coordinate referrals to doctors and therapists and arrange for services to be delivered, keeping their clients involved in every step of the process’. Thus ‘Emily’s journey with DVA began with intensive hand therapy – a functional restoration program to regain mobility in her hand – psychological counselling and a vocational assessment. Her tailored exercise program was designed to allow the damaged nerve in her arm to eventually grow back’. Exploring career options with her vocational adviser, Emily realised that ‘the only thing besides being in the Army that I wanted to do was cooking’. Accordingly, with DVA support, she enrolled in a Certificate III course in commercial cookery – the first step to her subsequent apprenticeship at a boutique chocolate store and cafe.

Alongside this fast changing provision of health care, DVA continued to be involved in a wide range of other repatriation activity. In 2009, shortly after the remains of the last of the six Australian servicemen missing in action in Vietnam were found and repatriated, DVA ran a feature on the six individuals in its annual report, describing the fate of each man. Later, in May 2015, the Australian Government extended an offer of repatriation to the families of thirty-five Australians interred in the Terendak Military Cemetery in Malaysia and the single remaining Vietnam War casualty interred in the Kranji War Cemetery Memorial Annex in Singapore. Located within an operational Malaysian defence base, Terendak Military Cemetery held the graves of twenty-seven Australian servicemen (twenty-four from the Vietnam War, one from the Malayan Emergency and two who died while posted to Malaysia), together with eight dependants (two wives and six children) who had died during the ADF’s presence at Terendak. Security and administrative formalities had made routine entry to the cemetery difficult, prompting the government’s repatriation offer.

In all, thirty-three families accepted the offer. The resulting repatriation was led by the Office of Australian War Graves within DVA, working closely with other government agencies and the Department of Defence. The governments of Malaysia and Singapore were also involved, as was the funeral provider InvoCare Australia. The careful and sensitive arrangements were informed by family preferences, and on 2 June 2016, 180 family members gathered at the RAAF base at Darwin for a ‘dignified and emotional repatriation ceremony. Among the forty official guests were the Governor-General of Australia (herself a Vietnam veteran), the Chief of the Defence Force, the Minister for Veterans’ Affairs, the Chief of Army and members of the veteran community. The repatriation process was completed on 7 July 2016, with the burial of the last of those who had been returned home – Gunner Thomas Checkley, who was laid to rest near his family’s home at Buxton in the United Kingdom. On that same day, Susan May, daughter of the late Corporal Robert Bowtell, looked back over those recent months as ‘a time of reflection, remembrance, understanding and acceptance of 50 years passed’, thankful that she and her family had accepted the offer to ‘return our much revered and loved father and husband’ and to have him ‘back home and close at hand’.

Education – to encourage reflection, remembrance, understanding and commemoration more generally – had also emerged as an integral part of DVA’s commemorative activities. The department provided all primary and secondary schools with educational materials linked to national curriculum objectives, mainly in areas such as studies of society, the environment and history. For example, the Rememberance Day 2001 education resource, We remember, was distributed to all 7,500 primary schools in Australia. It contained a ‘big book’ Rememberance Day story, together with teachers’ guides and student activities. Similarly, the Anzac Day 2002 education resource, Defence of Australia, included material on Australia’s involvement in the Second World War, conflicts such as the fall of Singapore, the bombing of Darwin, the midget submarine raid on Sydney, and battles in Papua and New Guinea during 1942. The Buzz for Kids, a school newspaper, was produced, featuring articles such as ‘A look at the Lovetts’ (about the celebrated Indigenous military family of that name) and ‘Women in war – not just nurses’. DVA and the Australian War Memorial organised school competitions, including a special category for
wartime history in the National History Challenge for students in years 5 to 12. The book Gallipoli 1915, written by Dr Richard Reid, the department's historian and published in 2002, was aimed at readers of all ages. 80 DVA also managed a continuing bi-annual direct mail outreach program to a wide range of non-school audiences as part of its commemoration community engagement activity, and in 2012–13 initiated the development of an education and community awareness portal to provide educational, commemorative and historical information for the then forthcoming Anzac Centenary.

This concern for education was also reflected in DVA’s Veterans’ Children Education Scheme, which provided support to individuals for travel assistance to children of certain deceased or severely incapacitated veterans or members of the ADF. By 30 June 2004, 5,117 children were benefiting from the scheme, which also incorporated the Long Tan Bursary. Vietnam veterans’ children up to the age of 25 and in full-time tertiary education were eligible to apply for the bursary, worth some $6,000, of which thirty were available each year. 81

Commemoration had become an ever more significant element of DVA activity. For example, the Australia Remembers 1945–1995 program marked the 50th anniversary of the end of the Second World War, culminating in national ceremonies held in Brisbane on 15 August 1995 to commemorate the 50th anniversary of victory in the Pacific. There were also commemorative missions (or pilgrimages) by veterans to Papua New Guinea, Borneo, Singapore and other places in the region where Australians fought during the Second World War. Those were followed by commemorative missions to other sites, to Vietnam on Long Tan Day (18 August 1997) and to the opening of the Hellfire Pass Memorial Museum in Thailand in October 1998. Built and maintained by the Australian Government and dedicated to Allied POWs and Asian labourers who suffered and died at Hellfire Pass and elsewhere in the Asia–Pacific during the Second World War, the museum was the brainchild of Prime Minister Paul Keating. Keating had visited Hellfire Pass (Konyu Cutting on the notorious Burma–Thailand railway) for the Anzac Day ceremony in 1994, when a portion of Sir Edward ‘Weary’ Dunlop’s ashes were interred at the site, and had been profoundly moved by the occasion. Garnering cross-party support in Australia, and with the approval of the Thai Government, he allocated $6.5 million for the construction of the museum, which was located on high ground just above Hellfire Pass. 82

In the previous year, 1997, commemoration in Australia had received a major boost when the Governor-General, Sir William Deane, signed a proclamation designed to renew the nation’s pledge of remembrance, to be broadcast of the landmark ABC documentary series Australia at war in 2001. The latter, a major project commissioned by the Australian Government through DVA, consisted of eight 55 minute television programs detailing Australian involvement in overseas conflicts from the Boer War to the wars in Iraq and Afghanistan. The series had already been broadcast in 1999 and received four major awards during 2001–02, including a Logie. Among the stream of high-profile commemorative events was the returning in 2000 of the MLC Tower in Canberra, then DVA’s national office, as the Lovett Tower. This change in nomenclature was in recognition of the Lovett family’s sacrifices and contribution to Australian military history. It also served as a wider salute to the service of Indigenous Australians in the armed forces. The Lovett family, who are members of the Gunditjmara people in Victoria, was seen to exemplify this valuable contribution. As DVA reported, the Lovett Tower’s distinguished service record began when five sons of Hannah and James Lovett enlisted in the First World War, seeing action on the Western Front and in Palestine. Each of the sons returned home safely to Australia and, remarkably, four of them volunteered for service in the Second World War, along with several women from the family who served in the Women’s Auxiliary Air Force. Again, all returned home safely. In all, some twenty members of the family served in the Australian armed forces, from the Somme to East Timor, and several continued to serve in the ADF. 85

Later, in 2007, DVA, in cooperation with local Aboriginal and Torres Strait Islander groups, hosted commemorative events in all Australian capital cities (except Darwin and Hobart) during Reconciliation Week, with the express intention of honouring Indigenous Service. This reflected similar initiatives elsewhere, such as the Victorian RSL’s commemorative service at Melbourne’s Shrine of Remembrance in 2006 and the Perth-based Honouning
Indigenous War Graves organisation, founded by Aboriginal Vietnam veteran John Schnaars. There had also been what Noah Roseman and Richard Trenbeth described as ‘a new surge in memorials dedicated to Aboriginal and Torres Strait Islander service’. Examples included the Narrungga War Memorial at Point Pearce in South Australia (1999), the Thursday Island memorial (2001) commemorating the Torres Islander Light Horse Battalion, and the poignant 2000 Anzac Day rededication of the memorial (originally erected in 1937) commemorating Cape Barren Islanders from Tasmania who fought in the First World War.40

The 90th anniversary Anzac Day service at Gallipoli, for example, was an opportunity for Norma Whitfield, whose father Private George Whitfield, but the journey to Gallipoli, the site of an earlier conflict, had particular meaning for her. Her father, Private Tennessee Christensen, fought at Gallipoli as a member of 15th Battalion, Australian Imperial Force. He participated in the desperate battle of Chunuk Bair, where he was shot in the mouth and neck and bayoneted in the arm before being evacuated to safety. Norma Whitfield also attended the New Zealand Anzac Day service at Chunuk Bair, which ‘was especially memorable for Mrs Whitfield as she reflected on the courage and sacrifice of her late father and his comrades in arms’.41

As anticipation of the First World War centenary developed apace, one remarkable and unexpected event was the discovery of the mass graves of Australian and British soldiers who died buried by the Germans after the battle of Fromelles on 19–20 July 1916. In 2002, an amateur historian, Lambis Englezos, drew attention to the possible site, and in 2008 archaeological investigation confirmed the mass grave’s existence.42 Subsequently, 250 Australian and British soldiers were interred with full military honours in individual graves at the new Fromelles (Pheasant Wood) Military Cemetery. The cemetery was formally dedicated on 19 July 2006. Two years later, on 20 July 2012, a further nine bodies were interred.43

The early 21st century also saw the dedication of the Australian War Memorial in London. In a service on 11 November 2003, Her Majesty The Queen dedicated the new memorial in Hyde Park Corner, the parkland in the heart of London. Principal architect Peter Tonkin, whose team was responsible for the design, wrote that the ‘form chosen for the Memorial reflects the sweep of the Australian landscape, the breadth and generosity of our people, the openness that we believe should characterise our culture’. The grey and green of the Australian granite used in the memorial evoked the subtle colours of the bush. Prime Minister John Howard, present at the dedication, explained that the memorial was ‘a lasting tribute to those Australians who lost their lives in defending those values which are the foundation of the democracy and freedom shared and cherished by Australia and the United Kingdom’, adding that it would become the focal point for Anzac Day services in London from 2004.44

Meanwhile, DVA was working systematically towards the commemoration of the 100th anniversary of the dawn landing at Gallipoli. The amphibious assault at Anzac Cove on 25 April 1915 was the momentous event that had first prompted popular enthusiasm in Australia for ‘repatriation’ – the desire to bring the wounded home, to nurture and support them, to ease them back into civilian society and employment, and to commemorate their sacrifice. That had led directly to the foundation of the Repatriation Commission and Repatriation Department in April 1916, along with the ever-widening scope of ‘repatriation’ documented in this book. Recognising that demand from Australians to attend the Dawn Service on Anzac Day in 2015 would be unparalleled and beyond what it would be usual to expect even for the First World War, the ABC and other networks televised the events and broadcast them to Australia and across the world.

The Australian Government also invited the widows of ten Australian First World War veterans to attend the commemoration: ‘These remarkable women, each accompanied by a carer, were active participants in the day’s commemorative activities’.45 At the Dawn Service, Mrs Niké Aldriddt, whose late husband Robert (Bob) Gregory Aldriddt fought at Gallipoli, laid a wreath on behalf of all war widows. Similarly, at the service at Lone Pine, Mrs Ann Beasley, whose late husband Lieutenant Frank Beasley also served at Gallipoli, laid a wreath on behalf of the war widows: ‘The Department conducted a solemn and dignified ceremony for the 100th anniversary’, DVA concluded, reviewing the day’s events. It was, of course, far more than that: in its conception and execution, it was a commemoration that exemplified the spirit of repatriation in Australia.
1. Personal communication, Veronica Hancock, Assistant Secretary Health and Community Services Policy, DVA Canberra office meeting, 24 October 2017; interview with Neil Bayles, Assistant Secretary Portfolio, Program and Assurance, DVA Canberra office, 26 October 2017.


5. DVA, Annual report 2009–2010, p. 73.

6. Frame, ‘The long road to peace and prosperity’, in Frame (ed.), *The long road*, p. 4. The assessment of Australian training qualities was made by United States Vice President Joe Biden.


11. Interview with Neil Bayles, 26 October 2017.


14. ibid., Table 1. Estimated numbers of surviving veterans as at 30 June 2002, p. 18.

15. ibid., p. 32.


17. ibid., p. 89.


21. ibid., p. 112.


25. ibid., pp. 90–3.


31. DVA, Annual report 2007–2008, p. 120.


37. DVA, Annual report 2008–2009, p. 120.


42. DVA, Annual report 2011–2012, pp. 81–82.

43. DVA, Annual report 2012–2013, pp. 81–82.


48. ibid.
EPILOGUE: TOWARDS TRANSFORMATION
EPILOGUE: TOWARDS TRANSFORMATION

In the early years of the new millennium, DVA expressed its determination to become more ‘veteran-centric’, to put ‘veterans first’ and to place them firmly at the centre of all the department’s activities. However, it was increasingly obvious to both DVA and the veterans that reality did not always match aspirations. Despite the plethora of recent initiatives and numerous success stories, many in the veteran community considered DVA to still be too adversarial, too slow, even unresponsive, and the younger new wave of veterans, in particular, was not shy about expressing its frustrations with what it saw as an overly bureaucratic system. As the Facebook page of the Australian Gulf War Veterans ex-service organisation put it: ‘It’s time to speak up and tell Veterans Affairs we deserve better’.

Although the older generation of veterans generally felt well supported, DVA’s infrastructure and administrative processes had become increasingly complicated and outdated, hindering rather than helping moves to become more veteran-centric. For example, by 2017 DVA had more than 200 separate contact telephone numbers, and the onus was on the veteran to know which one to call to access the service he or she required. It was often difficult for veterans to seek help when they needed it: It took a long time to make a claim, and an equally long time to receive an answer. DVA’s information and communication technology systems were nearing their end-of-life, were no longer supported by providers and were incompatible with the latest operating systems. Indeed, some systems were older than the clients they served! In addition, DVA’s culture had become more risk-averse; individuals were reluctant to make decisions that might be incorrect or unwittingly set precedents, or that could be interpreted as overgenerous or an unwarranted demand on the public purse. It was also painfully obvious to DVA that it ‘knew’ only one in five veterans and was failing to reach a full 80 per cent of veterans in the community. Remarkably, the ADF was unable to inform DVA when an individual enlisted or when they left the services, and the responsibility for making contact rested firmly with the veteran.

Accordingly, DVA launched an entirely new veteran-centric reform program as part of a root-and-branch transformation process first mooted in 2016. In the 2016–17 Budget, the Australian Government announced DVA’s first-pass business case for veteran-centric reform, agreeing to an investment of $24.8 million to develop a second-pass business case, which was effectively a road map for future change. The second-pass case was approved in the 2017–18 Budget, unlocking $166.6 million to finance what was hailed as the most comprehensive plan ever conceived to overhaul DVA and a significant turning point in DVA history. The aim was nothing less than the transformation of DVA and its culture from essentially a claims processing organisation to one that was client-focused and designed to ensure the overall wellbeing of the veteran during his or her lifetime. The core mission of DVA, however, would not change: to continue to support those who serve or have served in defence of Australia, and to commemorate their service and sacrifice.
DVA began by initiating the digitisation of veterans’ files as part of an ongoing streamlining of administrative processes, as well as consulting with ex-service organisations about proposed developments. Telephony consolidation also began: 109 inbound phone numbers were decommissioned by November 2017 as the first step to achieving just a single phone line. Similarly, My Service was launched as the digital ‘front door’ for compensation clients, enabling the average time taken to process claims to be reduced from 109 days to 31 days. Mental health provision and spending were also increased, not least through the expansion of eligibility for the Veterans and Veterans Families Counselling Service. Significantly, new protocols allowed for the registration of all who joined or left the ADF. At the same time, new links to ADF health data helped DVA to better understand the type of support veterans might need, the eventual aim being comprehensive knowledge of everyone who was serving or had served, and the identification of connections between service history and individual situations, especially for those ‘at risk’.

Among other planned innovations was a new website to help veterans and their families access information more readily and an expansion of DVA’s physical network to make the department more accessible for veterans who preferred to deal face to face. More generally, there was a greater determination to understand the veteran ‘ecosystem’ from the veteran’s perspective. The complexity of the transition from service to civilian life required a more nuanced appreciation. Individuals underwent significant and often unsettling changes in personal identity as they undertook the transition to civilian life, but in leaving the ADF sought (and deserved) continuing recognition for their service. Multiple influences affected a veteran’s wellbeing and life cycle – health, family, accommodation, employment, income, relocation, ex-service organisations, interaction with DVA and other governmental agencies – and it was the task of the transformation process to engage with each of those areas. It was a vision that encompassed all these ‘domains of veteran well-being’, designed to ensure for veterans and their families a healthy, productive and engaging life, with ‘dignity to the last’.

3. Meeting with Chevelle Greys, 24 October 2017; interview with Matt McKean, Veteran Centric Reform Transformation Project Management Office Lead, 24 October 2017; interview with Kate Popp, First Assistant Secretary Transformation and Engagement, 26 February 2017; interview with Liz Cosson, Deputy Secretary, and Craig Orme, Deputy President, 26 October 2017.
Hurrah! The day at last has come! The Armistice of 11 November 1918 brought an end to hostilities, which allowed even those in mourning to rejoice. These returned soldiers, photographed by the Sydney Mail and published in the newspaper on 20 November 1918, delight in the news that the war is over. But the euphoria felt across Australia was tempered by grief at the enormity of the country’s sacrifice. Over the decades to come, the sight of men disabled by war wounds was commonplace in communities across Australia, and many suffered mentally as well as physically. The task of rehabilitating returned servicemen – and women – back into society was enormous and exceedingly complex, and fell overwhelmingly to the Repatriation Commission and Repatriation Department after they began their work in earnest on 8 April 1918.

Photographs and images
A selection of buttonhole badges produced by the plethora of patriotic funds, organisations and fundraising events during the First World War, 'Partially Blinded Soldiers of Victoria Appeal', to the official lapel badge sported with pride by their owners to show their membership of volunteer bodies or to demonstrate their support for appeals and 'flag days'. They range from the 'Repatriation Day' appeal of 15 December 1916 and the 'Portably Blinded Soldiers of Victoria Appeal', to the official lapel badge of the Women's Auxiliary and commemorations of the Gallipoli landing and the armistice.

(AWM PUBSS002-003-001-001-001)

The Royal Australian Navy had established its reputation early in the First World War, when HMAS Sydney destroyed the German raider Emden, and patriotic funds were keen to remember and assist 'Jolly Jack' – the Australian sailor – alongside the country's soldiers and airmen. Accordingly, 1 November 1918 – a little over a week before the armistice, as it transpired – was designated 'Jack's Day', a fundraising event in support of Navy personnel.

(AWM REL39050)
The intimate involvement of the Australian Red Cross in the repatriation process is demonstrated in this c.1920 image of the Men’s Section: Joinery Shop of the Brighton Red Cross Society, Melbourne, where returned servicemen are acquiring new skills in carpentry. The veteran in the left foreground is learning how to use his prosthetic left arm in practical woodwork.

(AWM 12884)

Returned soldiers from the First World War being trained in the use of horsedrawn harvesting and digging machinery at the Agricultural College at Dookie in the Goulburn Valley in Victoria. Many veterans trained at Dookie went on to take up their own soldier settler blocks.

(AWM H12907)
Officers of the 10th Battalion Australian Imperial Force at Mena Camp in Egypt on Christmas Day 1914 (not 1915, as the photograph suggests). On the far right is Captain (later Lieutenant Colonel) Ross Blyth Jacob, who was repatriated to Australia in 1918 on compassionate grounds to help his father on the family farm at Kadina in South Australia, all his four brothers having been killed or incapacitated in the First World War. (AWM PO2321055)

English wives’ and their babies, bound for Australia in the SS Borda in 1919 after the First World War to join their returned servicemen husbands and new families in a land they had never seen and could barely imagine. (AWM D00935)
Senator Edward Miller, Minister for Repatriation, makes his address on the occasion of the official opening of the Aveuc Hostel in Brighton, Melbourne, by Sir Arthur Stanley, the Governor of Victoria, on 5 July 1919. The hostel was established to provide a home for totally and permanently incapacitated men whose disabilities were due to war service, and who required nursing care but no active medical or surgical treatment.

Originally ‘Kamesborough’, a mansion in private hands, the Repatriation Department led negotiations which resulted in its purchase for £25,000 by the Baillieu brothers, Melbourne businessmen. This was the largest single philanthropic gift for Australian veterans of the First World War, and was formalised in the Repatriation Fund (Baillieu Gift) Act 1937.
In March 1919 Repatriation was launched, a monthly bulletin published by the Department of Repatriation with the aim of reaching as wide a readership as possible to publicise its work, including details of achievements. After only ten months of operation, for example, the department had received 60,287 applications for support, of which 44,188 had proved eligible, with a total value of £583,566 granted for assistance. Likewise, the Department had placed 29,300 men in employment and had approved 4,880 men for training by whom 2,571 had already completed their courses, as well as providing £5,772 to assist the passages from overseas of 485 soldiers’ dependants.

For many returned servicemen after the First World War, registering with the Repatriation Department was a daunting and sometimes tedious experience, involving much patient queueing, form filling, and the ability to give the right answer to a range of questions. Here veterans are seen registering at the department’s employment section counter in Melbourne.
Seen from inside the office, the quiet and methodical, if sometimes slow, processing of veterans’ particulars contrasts with the clamouring for attention by the returned soldiers queuing beyond the wire screens at the employment section windows of the Repatriation Department in Melbourne, c. 1920.

(AWM H13027)

Little more than a year since the Repatriation Commission and Department began work, the typing room of the commission in Melbourne c. 1919 is a scene of studied efficiency as staff strive to keep on top of the burgeoning administrative task.

(AWM DAX2257 Darge Photographic Company)
Staff of the Repatriation Department’s Central Office in Melbourne, c.1920. Not surprisingly, male staff are in the majority, many of them ex-servicemen themselves. Given the scale of the department’s task, staff numbers seem surprisingly modest, although much of the routine business was managed at state level by the department’s state boards, which had replaced the erstwhile state war councils in 1918. (DVA collection)
Returned servicemen, several of them disabled (as evidenced by the crutches leant against the wall), train for their new roles as Repatriation Department officers. The department recruited heavily from former soldiers, sailors and airmen after the First World War, partly in response to the requirement to find jobs for returnees but also because it was felt that ex-servicemen would best understand the experiences, needs and aspirations of their former comrades-in-arms.

(AM01172013)

The staff of the Repatriation Office in Adelaide, South Australia, c.1920, many of whom had worked for the erstwhile State War Council and had now to adjust to the different regime of the State Board and greater central direction from the Central Office in Melbourne.

[DVA collection]
Senator Edward Millen was anxious that every serviceman and woman returning from the First World War, and all eligible dependants, should have a clear idea of the range of benefits now available to them. Accordingly, the Repatriation Department published a wide range of explanatory leaflets and booklets, including this summary of assistance and benefits provided under the Australian Soldiers’ Repatriation Act. Helpfully, the booklet was arranged alphabetically, making it easier for the reader to identify the particular assistance or benefit about which he or she sought further information.

What Australia is doing for her Returned Soldiers, another of Millen’s information initiatives, was distributed widely to Australian troops in the United Kingdom prior to their return home in 1919. 

(DVA library collection)
Auxiliary nursing staff and recuperating returned soldiers at the Fourth Australian Repatriation Hospital (later the Prince of Wales Hospital) at Randwick, Sydney, in 1918.

(AWM P01561.002)

Inside the Anzac Hostel (formerly ‘Kamesburgh’) at Brighton, Melbourne, c.1919. A group of residents and nurses are in the sunroom, with the hostel matron, Christine Manne (later Gorrie), standing in the far right background. Four of the residents lie in coach-wheel beds, while two in the foreground are seated. In all, six nursing staff were employed to care for between 20 and 25 totally and permanently incapacitated veterans at any one time, and there were four gardeners to tend the extensive grounds.

(AWM P03098.004)
Staff in an operating theatre at No.16 Australian General Hospital, Macleod. In October 1918 the magazine The Number 5, published by staff Surgeon at Macleod (pictured third from left) was Major Richard Horace Gibbs. Initially a civilian general practitioner in Colac, Victoria, Richard Gibbs became involved in securing recruits for the Australian Imperial Force and conducting medical examinations for volunteers. Both his sons enlisted. Lieutenant Richard Horace Maconochie Gibbs MC was killed in action at Fromelles on 19 July 1916; Corporal John Harbinger Gibbs died of illness at his home in Colac on 13 October 1917. Following the loss of his two sons, Richard Gibbs gave up his practice and devoted himself to the care of sick and wounded returned servicemen. Given the rank of major, he was appointed Senior Surgeon at Macleod. Alas, he was killed in a tram accident in Melbourne in July 1919.

Originally opened as the Australian General Hospital Hobart to treat veterans of the First World War (as in this scene c.1919), in the 1920s it was transferred to the Repatriation Commission, when it became the Repatriation General Hospital Hobart. It retained this identity until 1 July 1992 when the hospital was acquired by the Tasmanian State Government.
In response to the widespread physical disabilities suffered by soldiers during the First World War, Australia’s first Commonwealth Artificial Limb Factory (shown here in 1919) was opened in Caulfield, Melbourne, in 1917. By the end of the Second World War, there were six repatriation artificial limb factories located across Australia, staffed mainly by veterans, many of them disabled.

(IAA collection)

Returned servicemen receive treatment to restore the full use of damaged limbs in a massage ward at Repatriation General Hospital Rosemount c.1918. Built as a substantial private residential property, Rosemount (near Brisbane) was acquired as a military hospital during the First World War, specialising in massage and ionisation. In 1916 the hospital was extended with the opening of eight open-air wards (such as that shown here) with sunbathed general areas and bedrooms and a central kitchen. Further buildings were added in 1918. In the early 1950s, as the Repatriation Commission rationalised its hospital provision, the decision was made to make Greenslopes the dedicated Repatriation General Hospital in Brisbane, and Rosemount subsequently became part of the Royal Brisbane Hospital.

(AMH H02258)
For many Australians in the First World War, the repatriation process had commenced even before they had returned home. Here an artificial limb is being fitted at the No.2 Australian Auxiliary Hospital (which specialised in artificial limbs) in Seashull, England, on 22 May 1919. (AWM D00571)

The desire to commemorate emerged strongly and swiftly after the First World War. Here a memorial service is in progress on the beach at Anzac Cove, Gallipoli, on 25 April 1923 to commemorate the landings by Australian and New Zealand forces in 1915, ten years before. (AWM H15729, donor Captain JW Richards)
Nursing staff take recuperating ex-servicemen for a stroll through the neat garden alongside the rows of huts that constitute the Repatriation General Hospital Hobart in 1927. (DVA collection)
The training and rehabilitation of returned servicemen had begun in earnest even before the First World War had ended. ‘At the Brunswick Technical School’, the Melbourne Argus reported on 8 November 1918, ‘a class of returned servicemen is being taught all the work pertaining to the making of pottery ware. The class at present numbers 18, and a room has been set apart for them as a dining and recreation room . . . The course of instruction includes the drawing of designs, the making of moulds, and the moulding and completion of articles of domestic and sanitary ware.’

In Melbourne, Victoria, soldiers returned from the First World War, along with soldiers’ dependants, attend a stenography vocational training class. Although stenography was traditionally thought to be ‘women’s work’, it is interesting to note that several men have chosen to acquire the skill to enhance their postwar employment prospects.
Two First World War returned soldiers learn what appears to be the highly dangerous skill of log sawing, the first stage in the manufacture of tobacco pipes in the pipe factory of a vocational training school in Melbourne. Pipe-smoking was a popular activity in inter-war Australia, resulting in constant demand for well-crafted pipes.

Filing in the 1930s. In the inter-war years, it was a constant struggle for the Repatriation Commission and Department to keep up with the growing demand for assistance. ‘The file’ was the all-important instrument for determining a returned serviceman’s entitlements, and was the repository for all his personal ‘history’ and correspondence, including advocacy by bodies such as the RSL and Legacy. It was vitally important that each file should be handled and stored with the greatest of care. In what appears to the uninitiated a scene of organised chaos, Repatriation staff are exercising great diligence in removing and replacing files that are being actioned.

(Repatriation Commission collection)
An Australian soldier considers his options for his postwar future at a Civil Rehabilitation Centre in Melbourne in March 1946. Immediately after the Second World War, many of the Repatriation Department’s traditional functions were vested in the Department of Labour and National Service, although the department, drawing upon its experience and expertise, continued to advise on demobilisation, rehabilitation, re-training and postwar reconstruction, as well as coping with its own expanding workload.

(AWM 126088)

Australian soldiers receive their discharge certificates at Royal Park, Victoria, 27 August 1946. Demobilisation provoked mixed feelings. Many were happy to be escaping the dangers and uncertainties of war, and looked forward to being with their families and building a more stable civilian future. However, leaving the armed forces was an enormous wrench for men and women who found the deep bonds of wartime comradeship difficult to break. For many there was a great sense of loss and disorientation, and others found it difficult to forget the horrors they had experienced on the battlefield.

(AWM 131260)
On 15 November 1944, Private William Kenneth Wotherspoon of the 2/1st Machine Gun Battalion, originally from Lismore in New South Wales, leans on the counter as he provides details to the reception clerk at the Recruit Reception and General Details Depot at Sydney Showground. Private Wotherspoon was among a group of recently repatriated former prisoners of war.

Wives and children of Australian servicemen disembark at Walsh Bay, Sydney Harbour, from His Majesty's Australian Transport SS Euripides on 2 October 1944. Officers of the Repatriation Commission had come onboard the ship before docking to explain arrangements to the passengers, to ensure their smooth arrival in Australia. As in the First World War, so in the Second the timely migration of servicemen’s families was seen as important for maintaining morale and building stable domestic structures for the future.

(Images: AWM 083275, AWM 080985)
Edward Roddy with his wife and their son Francis Alan Roddy on their soldier settlement property at Lacmalac, near Tumut in the Riverina in New South Wales, c. July 1941. Edward Roddy had served in Egypt in the 4th Light Horse as a shoeing smith until repatriated to Australia in January 1919, suffering from malaria. His son, Francis Alan Roddy, serving with the Australian General Base Depot, was taken prisoner by the Japanese in Malaya (probably Singapore) on 15 March 1942, less than a year after this photograph was taken. He died of acute enteritis as a prisoner of war in Thailand on 10 December 1943. (AWM P07129.002)

Between 1943 and 1945, the Atherton Tableland in Queensland hosted the largest concentration of military bases and personnel in Australia. Here, on 8 February 1945 in the YMCA Hut at HQ 9 Division, Ravenshoe, Private K Lowe of 2/24 Infantry Battalion completes his application for land settlement in New South Wales. Captain RT Eldridge acts as witness, with Mr DS Mulley, chairman of the local Classification Committee, in attendance. (AWM 086654)
In Victoria, where this photograph of a soldier settlement development was taken c.1950, a Soldier Settlement Commission was established in 1940 and began work the following year. By early 1941, the commission had decided to concentrate on the development of three major areas of Crown land in Victoria – Heytesbury, Yanakie and Nyora – and in December 1953 the scheme was extended to young civilian men without prior war service. The Victoria soldier settlement scheme officially ended in 1961 but it was not until 1969–70 that the last settler obtained his purchase lease.

Spacious, modern and well-designed homes were an important feature of the post-Second World War soldier settlement initiative. The Soldier Settlement Commission engaged the Melbourne architectural firm Buchan, Laird & Buchan to produce drawings for buildings, such as this ‘New farm house type’, specifically for the scheme.

(Pictures Collection, State Library of Victoria, SLVH2016.136/1)
Although soldier settlement is commonly associated with the aftermath of the First World War, there was a further soldier settlement scheme in Australia after the Second World War. On a more modest scale and generally more successful, the new scheme was devised after the Premiers’ Conference in October 1944, where it was agreed that New South Wales, Queensland and Victoria would be the ‘principal’ states, assuming the major financial and administrative responsibilities, while the other states would become ‘agents’, with the Commonwealth meeting most of the costs and undertaking the administration. Eventually, the War Service Land Settlement Scheme, as it was known, provided farms in every state for a total of about 12,000 returned soldiers, compared with more than 37,000 who had taken up land after the First World War. The short-term failure rate was about 10 per cent but in Victoria, where half the settlers lived, only 4 per cent had given up farming by 1962. Better planned and managed than the earlier scheme, post-Second World War soldier settlement benefited from closer attention to matters such as infrastructure – as in this row of newly constructed houses in Victoria.

In this publicity shot, a young woman stands proudly outside her new home on a soldier settlement block in Victoria. Many women had heard horror stories of poor accommodation and inadequate facilities on soldier settlement properties in marginal land far from anywhere in the years after the First World War, and so after 1945 there was a concerted effort to demonstrate that full consideration had been given to infrastructural amenity – including housing – in the new settlement initiatives.

(Pictures Collection, State Library of Victoria, H2016.137/61)
The Second World War resulted in an upsurge in demand for prosthetics, as wounded veterans were repatriated to Australia. Sydney’s Artificial Limb Factory was situated in the Penfold Building, Elizabeth Street, until relocated to the Repatriation Building in Chalmers Street in November 1951. Here we see staff in the factory’s main office in July 1944. The gentleman in the white coat in the left background is WE Greenaway, the Factory manager and prosthetics specialist.

On 15 November 1944, a day after registering personal details with the reception clerk, Private WK Wotherspoon, a recently returned prisoner of war, is being interviewed by Mr Penemot at the Rehabilitation Section at the Recruit Reception and General Details Depot at Sydney Showground.
Commissioned in 1939 as a general hospital for the Australian Army, when Concord was opened in Sydney in 1942 it possessed 2,000 beds and was the largest hospital in the Southern Hemisphere. After the Second World War, Concord was transferred to the Repatriation Commission as a repatriation general hospital, and in 1963 became a teaching hospital of the University of Sydney. In 1993 Concord was transferred to the State of New South Wales, as part of the Department of Veterans’ Affairs division of repatriation hospitals. (DVA collection)

JC Appleton of East Preston, a Melbourne suburb, was a survivor of the sinking of the heavy cruiser HMAS Canberra on 9 August 1942 in the Battle of Savo Island in the Solomon Islands, near Guadalcanal, when there were 193 casualties (including 84 fatalities) from a ship's company of 819. By 28 August 1945, when this photograph was taken, Mr Appleton was working at the Caulfield Artificial Limb Factory, using a lathe to manufacture hooks for himself and for the use of other veteran amputees. (AWM 131242)
One of the most significant repatriation provisions for returned servicemen after the First World War, was the War Services Home scheme, the brainchild of Senator Edward Millen, architect of the Australian Soldiers’ Repatriation Act 1917 and the first Minister for Repatriation, who set up the War Service Homes Department with its own commissioner. As well as arranging loans at favourable interest rates for returned servicemen, the War Service Homes Department purchased land and constructed its own housing stock, helping to redress the run-down in house building that occurred during the First World War. As this example in the Sydney suburb of Mosman demonstrates, War Service Homes were often substantial, attractive dwellings.

The son of a deceased or permanently incapacitated serviceman is interviewed by representatives of the soldiers’ education board, c.1950. The stern but kindly board members are assessing the young man’s suitability for financial support under the Repatriation Department’s Soldiers’ Children’s Education Scheme. Such assistance might enable a young person to attend university or undertake an apprenticeship, or could facilitate professional training in a number of areas, including (by the 1960s) accountancy, surveying, librarianship, teacher training, and drama.
An aerial view of Repatriation General Hospital Greenslopes, Brisbane, in 1968, showing its impressive extent. Opened in 1942 as an Australian Army hospital, it was transferred to the Repatriation Commission after the Second World War. Becoming a teaching hospital of the University of Queensland in 1970, Greenslopes shortly after opened its doors to the general public alongside veterans and their dependents.

In contrast to the cluttered and claustrophobic office environments of the 1930s, the post-Second World War era ushered in ergonomic planning and designs, resulting in cleaner lines and a calmer working atmosphere for Repatriation Department clerical staff, such as these women creating data cards in the Queensland State Office in Brisbane, c. 1960s.

(DVA collection)
Haematology technician, AJ Burton, tests blood samples on highly sophisticated equipment at the Repatriation General Hospital Daw Park, Adelaide, c.1980. At the time, this device, a Coulter Counter S-Plus II, was one of very few of its type in Australia.

(DVA collection)

In its role as a leading teaching hospital, Repatriation General Hospital Heidelberg hosted both undergraduate and postgraduate education, including from 1971 research and training in its Nuclear Medicine Department, seen here.

(DVA collection)
At the Repatriation Hospital Hollywood, Perth, in September 1966, Private T Gott, injured in Vietnam, is greeted by his wife, Julie, a nursing aide at the hospital.
(DVA collection, photograph by AJ Nutt & Associates)

Repatriation general hospitals were centres of training excellence as well as medical excellence. Here graduating nurses ‘cut the cake’ after successfully completing their training course at the Repatriation General Hospital Greenslopes, Brisbane, in 1960.
(DVA collection)
The industrial scale and heavy mechanisation as well ample staffing in the laundry at Repatriation General Hospital Concord in 1960, is an indication of the hospital’s immense size as well as the demand on the laundry’s services.

Photographed in 1960, the cheerful kitchen staff of the Repatriation General Hospital Heidelberg, tongs at the ready, prepare to serve-up meals to be delivered to the wards. Located in Melbourne, the hospital was one of several built by the Australian Army during the Second World War, and in 1947 transferred to the Repatriation Commission. In April 1995, Heidelberg was transferred to the Victorian Government and was amalgamated with Austin Hospital, to form what the latter hailed as ‘Victoria’s largest tertiary referral centre providing a broad range of patient services whilst enhancing established teaching and research profiles’.

(DVA collection)
Enjoying the late afternoon sun in the twilight of their own lives, those old soldiers relax comfortably on the veranda of the Edward Millen Home in Victoria Park, near Perth, Western Australia, in 1961. First opened in 1912 as a maternity hospital (the Rotunda Hospital), in the 1920s the facility became a sanatorium for ex-servicemen, and later a home for elderly veterans.

(VAM collection)

Vocational training has always been a significant element of the repatriation process. Here c. 1970 a veteran is instructed in the use of a timber lathe at the Rosemount Rehabilitation Hospital, Windsor, in Queensland.

(VAM collection)
Four Australian servicemen, recuperating from illness and wounds during the Second World War, are about to take tea on the lawns of the Repatriation General Hospital Heidelberg, assisted by two nurses (wearing caps) and a volunteer of the Voluntary Aide Detachment (who is pouring the tea). This image originally appeared in the book *Soldiering On*, published in 1942, a collection of true stories contributed by Australian soldiers serving around the world, and was captioned ‘Convalescent Diggers’. The photographer was Ronald Keith Munro, a prolific war and nature illustrator, who died in 1945.

Soldiering On (AWM P03014.005. Photographer Ronald Keith Munro)

Making music, something to which everyone can contribute, is an integral part of the therapy in the geriatric unit at Repatriation General Hospital Concord in 1964.

(DVA collection)
Concentration is apparent on every face in what is clearly a keenly fought carpet bowls match at Rockingham Red Cross Convalescent Home in 1967, a group therapy activity designed to create a social context for rehabilitation. In August 1940 Rockingham, a private residential property owned by Mrs Herbert Syme, was officially handed over to the Victorian Red Cross Society for use as a convalescent and rehabilitation home for ex-servicemen. With twenty rooms, including a ballroom and billiard room, together with grounds covering eight acres, the home had room for eighty beds.

One of the many facilities provided by the repatriation general hospitals after the Second World War was occupational therapy such as that depicted here, offering engaging and satisfying activities for patients that developed both mental and physical dexterity.
Increasingly, by the 1960s, home visits were an important element of Repatriation Department care. Here a sister from a specialist renal unit is preparing for a home visit to a dialysis patient. (DVA collection)

A home visit by staff from the Lady Davidson Hospital at North Turramurra, Sydney, c. 1970, taking Repatriation Department care into the heart of the community. Originally a Red Cross convalescent home for returned servicemen from the First World War suffering from tuberculosis, Lady Davidson Hospital was transferred to the Repatriation Commission in 1923, later specialising in rehabilitation, palliative care, and other non-heart care services. (DVA collection)
Lance Corporal Munday tries out his new artificial leg on steps at Repatriation General Hospital, Concord, 18 October 1965. (Photograph Sydney Sun-Herald/Fairfax Syndication)

More than twenty years after his initial employment at the Artificial Limb Factory, Mr Appleton is still working there in November 1967, but now fitted with an electronic artificial hand, such has been the advance in prosthetics over recent decades. (DVA collection, Australian News and Information Bureau)
During the Vietnam War years, the Army base at Puckapunyal, near Seymour in central Victoria, was a training establishment for national servicemen (excluding those from Queensland and New South Wales) conscripted under the National Service Act 1964. There were up to 4,000 troops stationed in Puckapunyal at any one time. This photograph, taken in 1967, shows repatriation staff visiting the base to conduct interviews and chat informally about Repatriation issues and provisions. (DVA collection)

Despite their considerable resources and ‘high-tech’ equipment, repatriation general hospitals could sometimes devise simple but effective homespun solutions, such as this improvised physiotherapy apparatus at a hospital c.1970. (DVA collection)
Skilled artisans engaged in the manufacture of prosthetics at a repatriation artificial limbs factory workshop in 1961. Each artificial limb was tailo-made to meet the requirements of the intended recipient. (DVA collection)

By the 1960s postwar developments in office machinery made life simpler and quicker for Repatriation Department staff, as in this depiction of duplicating equipment in action in the Queensland State Office in Brisbane. (DVA Queensland office collection)
This early example of office information technology, with a staff member inputting data, demonstrates the eagerness with which the Department of Veterans’ Affairs (as the Repatriation Department had become in 1976) embraced the digital age. Any innovations promising advances in administrative efficiency, especially in dealing with veterans’ claims and enquiries, were welcome.

Staff training across a range of skills and competencies has always been a key feature of Department of Veterans’ Affairs personnel policy and practice. In this 1970s image – the era of the ‘overhead projector’ and ‘vu-graph’ – new staff at the department’s Sydney office are undergoing orientation instruction, in this case a talk on the structure of the Public Service.
By the early 1960s, the Repatriation Department was stressing its accessibility and approachability, as well as its gender sensitivity, inviting ‘ex-service-men and women’ to contact their local repatriation committees for friendly advice and an opportunity to address ‘all your problems’. It was a message that, in one form or another, would characterise the outreach strategies of the Repatriation Commission and Repatriation Department (later the Department of Veterans’ Affairs) in the years ahead.

In the closing decades of the twentieth century, DVA became increasingly concerned about veterans’ general welfare, and began to issue advice on a large number of topics. In cooperation with the Pharmaceutical Society of Australia, for example, the department distributed its ‘Being MediWise’ advice, aimed at encouraging veterans to take responsibility for the proper management of their medications.

In the years after the Second World War, many ex-service-men and women wished to participate in the explosion of home ownership in Australia. This leaflet, with its tempting title ‘A home of your own’, set out to explain the provisions of the Defence Service Homes Act and the favourable terms available to veterans.
By the mid-1980s, as this array of early computers and accessories at DVA’s National Office in the Lovett Tower in Canberra shows, information technology was being embraced with enthusiasm. In 1982 the department outsourced its infrastructure to Ferntree, and in 1992 forged an agreement with IBM, one of the first Commonwealth Government departments to do so.

(DVA collection)

DVA staff get to grips with recently introduced office equipment at the department’s National Office in Canberra c.1985; part of the drive to harness new technologies to achieve greater administrative efficiency and accuracy.

(DVA collection)
By the 1980s, as the front counter of the DVA in Hobart demonstrates, the department had adopted a more relaxed and welcoming style, increasingly less formal and bureaucratic in appearance, designed to put visiting veterans at ease.

(DVA collection)

The personal approach. DVA Advisory Service Officer Mary Xiberras discusses a claim face-to-face with a Second World War veteran, Mr Eric George, at the department’s Sydney office c.1980.

(DVA collection)
The DVA ‘Quality of Life Program’ in the 1990s was designed to address everyday wellbeing issues confronting veterans and their dependants, resulting in pamphlets such as this one, which gave practical and easy to follow advice on simple measures to prevent fires and electrical and gas accidents in the home.

(DVA library collection)

Keeping veterans and war widows and widowers up to date on their pension provisions and entitlements remained a constant concern, resulting in, for example, the booklet ‘You and your pension’ which has been published every year since 1998.

(DVA library collection)
Introducing DVA staff to new computer technology and software as it was rolled out in the 1980s was a major training task, and a significant way of increasing the department’s administrative efficiency.

(DVA collection)

Mr AC Stone of Blair Athol, Adelaide, South Australia, has his blood pressure checked by Sister DT Marziale in the intensive care unit in the Daw Park Repatriation Hospital, c. 1980.

(DVA collection)
The dedication of the Isurava Memorial on the Kokoda Track on 14 August 2002, when the memorial was unveiled by Australian Prime Minister John Howard and the Prime Minister of Papua New Guinea, Sir Michael Somare, to mark the 60th anniversary of the series of gallant actions fought by the Australians in the vicinity of Isurava village in August 1942. The memorial remembers all those Australians and Papua New Guineans who fought, including those who died, during the gruelling Kokoda Track campaign of August–November 1942. It is flanked by four black granite pillars, each inscribed with a single word – COURAGE, ENDURANCE, MATESHIP, SACRIFICE – to reflect the values and qualities of those who participated in the campaign. The Kokoda Track itself was opened to hikers in 2001, in anticipation of the anniversary, and at the end of 2002 a trekkers hut, complete with twelve bunk-beds, was constructed at Isurava to provide shelter from the sometimes tempestuous weather of the Owen Stanley Range for those walking the track.

Remembrance Day at Hellfire Pass, 2008. Opened in October 1998 near the notorious Burma–Thailand railway, the now Hellfire Pass Interpretive Centre in Thailand is dedicated to all Allied prisoners of war and Asian labourers who died in the Asia-Pacific region during the Second World War, including those who lost their lives during construction of the railway. The museum underwent significant refurbishment in 2018, almost twenty years after its opening.
The Repatriation Health Card for Australia’s World War 2 Veterans. The Repatriation (Gold Card), first introduced in the mid-1990s, was a major step forward in providing comprehensive health care for eligible veterans. The Gold Card entitled holders (which included war widows and widowers) to funding for all clinically necessary health care needs and all health conditions, irrespective of whether they were related to war service or not.

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Over the course of the last hundred years, the application of current medical technologies has been a constant focus, as shown here with selection and instruction on wheelchair use during post-operation recovery.

(DVA collection)

Physiotherapy and exercise rehabilitation remain a key part of any management plan coordinated by DVA, for those recovering from injuries or recuperating after surgery.

(DVA collection)
No less than in the years after the First World War, when the fledgling Repatriation Department established all kinds of training courses for returned servicemen and dependants, vocational training is today a vital component of the benefits and support provided by the DVA.

(DVA Collection)

The On Base Advisory Service, operational since October 2011, exists to provide easily-accessible and expert advice to serving Australian Defence Force personnel on DVA services, including compensation, rehabilitation and other support. Experienced DVA staff ensure a full-time or part-time presence on more than thirty-five ADF bases across Australia.

(DVA Collection)
Situated behind these neat rows of Australian graves at the Pheasant Wood cemetery, is the bunker-like edifice of the Museum of the Battle of Fromelles, opened in 2014 with Australian Government support to tell the story in perpetuity of the terrible battle that took place there on 19 and 20 July 1916.

(Photograph by Ian Skinner)

Dawn begins to break at Anzac Cove on Anzac Day 2015, exactly 100 years since the landing at Gallipoli by the Australians and New Zealanders, where a solemn and dignified commemorative event was planned and managed by the Department of Veterans’ Affairs.

(Photograph by Jan Armitage/Scopix)
The Office of Australian War Graves is part of the Department of Veterans’ Affairs, and is an agent of the Commonwealth War Graves Commission. It has responsibility for maintaining war graves and memorials, including the replacement of damaged or worn gravestones and the production of new ones. The inscribing of war grave stones is a highly skilled task, performed to exacting standards and a precise format and style. (Office of Australian War Graves collection)

The maintenance of official Australian war grave cemetery grounds is divided between the Office of Australian War Graves and the Commonwealth War Graves Commission, the division of responsibility dependent on global location and the date of the conflict. All cemeteries receive the same high standard of care, including professional gardening services. (Office of Australian War Graves collection)
Remembrance Day 2015. To mark Remembrance Day during the Gallipoli Landing Centenary Year, DVA installed a large remembrance poppy on the windows of its National Office (the Lovett Tower) in Canberra.

This photograph and a time-lapse video of the poppy being installed achieved over 200,000 views through DVA’s social media channels. (Photograph by Ian Skinner)
More than 10,000 Australians and New Zealanders attended the Dawn Service at Gallipoli on Anzac Day in the centenary year, 2015. In the background is the distinctive rocky outcrop nicknamed ‘the Sphinx’ by the Anzacs in 1915 (they had trained in Egypt amid the pyramids), whose menacing presence seemed to preside over the deadly battles in the tangled hills and gullies below.

(Photograph by Joe Armao/Fairfax Syndication)

This Anzac Day poster, produced in 2016 as part of a bi-annual DVA education and outreach campaign that has run every year since the late 1990s, reached every primary and secondary school in Australia, as well as aged care facilities and many other community organisations.

(DVA collection, photograph by Julie Arnott)
Over 6,000 people endured pouring rain to participate in the Dawn Service at the Australian National Memorial at Villers-Bretonneux on Anzac Day in 2015.

Situated adjacent to the Villers-Bretonneux Military Cemetery, the Australian National Memorial commemorates those Australians who fought and died on the battlefields of France and Belgium in the First World War. The memorial consists of a great central tower, flanked by walls carrying panels that record for perpetuity the 15,772 Australians who died in France and Belgium and have no known grave.

(Photograph by Ian Skinner)
Derek Holyoake, a Royal Australian Navy veteran of both the Second World War and the Korean War, is seen here with DVA staff member Emma Keogh during the Korean Commemorative Mission in 2013. (DVA collection)

The Veteran Mission Party to Korea in 2016 at the Joint Security Area, Panmunjom. From left to right:
Major General Simon Stuart DSC AM; Simon Lewis, Secretary Department of Veterans’ Affairs; Mr John Murphy; Mr John ‘Jack’ Long; Colonel Francis ‘Pete’ Scott DSC (Retd); Mr Spencer Ray ‘Spower’ Rua; Hon. Dan Tehan, Minister for Veterans’ Affairs; Mr Ravi Kewalram, Chargé d’Affaires, Australian Embassy to the Republic of Korea; Mr Leslie Lox; Hal; Mr Gordon ‘Tally’ Hughes OSM; Lieutenant Commander Leslie Lox; Powell RAN (Retd); Mr Graham Cavendish; Major General Mark Kelly, AO DSC, Repatriation Commissioner. (DVA collection)
The repatriation in June 2016 brought home the remains of thirty-three Australian servicemen and dependants, from cemeteries in Malaysia and Singapore. Here Australian Defence Force personnel carry some of the thirty-three coffins from a Royal Australian Air Force C-17A Globemaster aircraft during the repatriation ceremony at RAAF Base Richmond in Sydney on Thursday 2 June 2016. (Department of Defence photograph by Sergeant Janine Fabre)

The Sir John Monash Centre on the Australian National Memorial site at Villers-Bretonneux is the central hub of the existing Australian Remembrance Trail which links first World War sites in France and Belgium of significance to Australia, including museums, battlefields, memorials and cemeteries. At its heart is a large multimedia interpretative area, with a 360-degree theatre designed to immerse visitors in the real-life stories of Australian soldiers, allowing them to experience vividly the emotional as well as historical significance of the site. It educates visitors about the Western Front in a manner unlike any other memorial or museum. (Office of Australian War Graves collection)
DVA staff members Francoise Le Gall, Mark Travers and Jacob Memm preview the MyGenius app during beta testing. MyGenius began the streamlining of the DVA claims application process, replacing a 36-question paper form with an intuitive website that only asks three to seven questions, depending on specific circumstances, and is accessible from any device.

(DVA collection)

The 2017 Female Veterans Policy Forum, Canberra. This important consultative group, along with the Veteran’s Families Policy Forum, was formed in 2016 to provide platforms for female veterans and veteran family members to raise issues directly with the government and DVA. Many of the suggestions from the two forums have informed the work of the Veteran Centric Reform program.

(DVA collection)
APPENDIXES

REPATRIATION TIMELINE

World/national events
1914–1918, First World War
September 1914, Australian Red Cross formed
25 April 1915, dawn landing at Gallipoli
1916, Battle of the Somme
(Fromelles, Pozieres, Mouquet Farm)
1916, Returned Sailors and Soldiers Imperial League of Australia (RSL) formed
1917, Third Battle of Ypres
1918, German ‘Spring Offensive’; Monash’s ‘all arms’ Australian victories
11 November 1918, armistice
28 June 1919, Treaty of Versailles

Repatriation events
October 1914, War Pensions Act
May 1916, Australian Soldiers’ Repatriation Fund Act
September 1917, Australian Soldiers’ Repatriation Act
8 April 1916, Repatriation Commission and Repatriation Department begin operating
4 December 1918, Monash appointed Director General of AIF
Department of Demobilisation and Repatriation in London
22 September 1918, troopship Port Sydney arrives in Fremantle with last Australian soldiers returning home
1919–1939, transfer of military hospitals to Repatriation Department; establishment of Anzac hostels, establishment of War Service Homes Department; soldier settlement scheme
World/national events
1939–1945, Second World War
1948–1960, Malayan/Malaysian Emergency
1950–1953, Korean War
1962–1966, Indonesian Confrontation
1962–1975, Vietnam War
1980, Post-traumatic Stress Disorder recognised as a mainstream condition in American Diagnostic and statistical manual of mental health disorders
July 1985, Evatt Royal Commission Report on Agent Orange
1990–present day, involvement of Australian Defence Force in Gulf War, East Timor, Afghanistan, Iraq and other theatres of operation

Repatriation events
1942, Joint parliamentary committee considers changes to 1917 Australian Soldiers’ Repatriation Act, resulting in new 1943 Act
February 1976, Toose Report recommends changes to repatriation system
5 October 1976, Repatriation Department becomes Department of Veterans’ Affairs (DVA)
1994–1997, repatriation general hospitals divested by DVA to state governments and Ramsay Health Care
1995, National Centre for War-related Posttraumatic Stress Disorder established with DVA support

1999, Men’s Health Peer Education self-help initiative launched
2001, The Right Mix alcohol management program launched
2003, dedication of Australian War Memorial in London
2007, At Ease mental health program launched
2015, 100th Anniversary of dawn landing at Gallipoli
2016–2017, launch of DVA Veteran Centric Reform and Transformation process
## MINISTERS

### FOR REPATRIATION

<table>
<thead>
<tr>
<th>Year</th>
<th>Minister</th>
</tr>
</thead>
<tbody>
<tr>
<td>1917–1920</td>
<td>Senator Edward Millen</td>
</tr>
<tr>
<td>1920–1921</td>
<td>Arthur Rogers A/g</td>
</tr>
<tr>
<td>1922–1923</td>
<td>Senator Edward Millen</td>
</tr>
<tr>
<td>1923–1929</td>
<td>No minister*</td>
</tr>
<tr>
<td>1929–1931</td>
<td>Frank Anstey MP</td>
</tr>
<tr>
<td>1931–1932</td>
<td>John McNeil MP</td>
</tr>
<tr>
<td>1932</td>
<td>Charles Hawker MP</td>
</tr>
<tr>
<td>1932–1934</td>
<td>Sir Charles Marr MP, KCB, DSO, MC</td>
</tr>
<tr>
<td>1934–1935</td>
<td>Billy Hughes MP, CH, KC</td>
</tr>
<tr>
<td>1935</td>
<td>Joseph Lyons MP, CH</td>
</tr>
<tr>
<td>1937–1938</td>
<td>Billy Hughes MP, CH, KC</td>
</tr>
<tr>
<td>1937–1939</td>
<td>Senator Harry Fisk</td>
</tr>
<tr>
<td>1939–1940</td>
<td>Sir Eric Harrison MP, KCMG, KCVOD</td>
</tr>
<tr>
<td>1940</td>
<td>Geoffrey Street MP, MC</td>
</tr>
<tr>
<td>1940</td>
<td>Senator Sir Philip McBride KCMG</td>
</tr>
<tr>
<td>1940–1941</td>
<td>Senator George McLeay</td>
</tr>
<tr>
<td>1941</td>
<td>Senator Herbert Collett CMG, DSO, GD</td>
</tr>
<tr>
<td>1941–1946</td>
<td>Charles Frost MP</td>
</tr>
<tr>
<td>1946–1949</td>
<td>Claude Barnard MP</td>
</tr>
<tr>
<td>1949–1960</td>
<td>Senator Sir Walter Cooper MBE</td>
</tr>
<tr>
<td>1960–1961</td>
<td>Frederick Osborne MP, CMG, DSC and Bar, VRD</td>
</tr>
<tr>
<td>1961–1964</td>
<td>Sir Reginald Swartz MP, KBE, MBE</td>
</tr>
<tr>
<td>1964–1969</td>
<td>Senator Colin McKellar</td>
</tr>
<tr>
<td>1969–1972</td>
<td>Mac Holten MP, CMG</td>
</tr>
<tr>
<td>1972</td>
<td>Lance Barnard MP, AO</td>
</tr>
<tr>
<td>1972–1974</td>
<td>Senator Reg Bishop, AO</td>
</tr>
</tbody>
</table>

* Prime Minister Stanley Bruce chose not to have a Minister for Repatriation.

In some ministries the portfolio of repatriation was held jointly with another portfolio (usually Health) but there was no portfolio of repatriation during the period 1923 to 1929, instead there were two ‘ministers in charge’ of the portfolio:

- The Rt. Hon. Sir Earle Page GCMG, CH, MP (1923–1925)
- Sir Neville Howse VC, KCB, KCMG (1925–1929)

## FOR REPATRIATION AND COMPENSATION

- Senator John Wheelton 1974–1975
- Senator Don Chipp, AO 1975

## FOR VETERANS' AFFAIRS

- Peter Durack MP, GC 1976
- Eva Adamann MP, AO 1979–1980
- Senator Tony Messner AM 1980–1983
- Ben Humphreys MP 1987–1993
- Senator John Faulkner 1993–1994
- Con Sciacca MP, AO 1994–1996
- Bruce Scott MP 1996–2001
- Danna Vale MP 2001–2004
- De-Anne Kelly MP 2004–2006
- Bruce Billson MP 2006–2007
- Alan Griffin MP 2007–2010
- Warren Snowdon MP 2010–2013
- Senator Michael Ronaldson 2013–2015
- Stuart Robert MP 2015–2016
- Dan Tehan MP 2016–2017
- Michael McCormack MP 2017–2018
- Darren Chester MP 2018–
SECRETARY OF REPATRIATION/VETERANS’ AFFAIRS

PRESIDENT* REPATRIATION COMMISSION

CHAIR MILITARY REHABILITATION AND COMPENSATION COMMISSION**

Sir Nicholas Lockyer*** CBE, ISO 1917–1918
David Gilbert*** 1918–1920
Senator Edward Milken (as–officier) 1918–1920
Lt Col J M Siemens OBE, VD 1921–1935
Sir Norman Migelli CMG 1935–1941
John Webster (acting) 1941–1945
Major General Sir George Wootten KBE, OBE, DSO, ED 1945–1958
Brigadier Sir Frederick Chilton KBE, OBE 1958–1970
Dale Volk OAO 1981–1986
Nigel Tomor AC 1986–1989
Lionel Woodward AG 1989–1994
Dr Allan Hawke AC 1994–1996
Dr Neil Johnston AG 1996–2004
Mark Sullivan AG 2004–2008
Ian Campbell AG, PSM 2008–2013
Simon Lewis PSM 2013–

*Referred to as Chairman until 1970
**From 2004
***Referred to as Comptroller

DEPUTY PRESIDENTS*, REPATRIATION COMMISSION

MEMBERS, MILITARY REHABILITATION AND COMPENSATION COMMISSION**

Heatlie Gascogne Roy DCM, OBE 1953–1959
Alfred Gould OBE 1960–1963
Ralph Human OBE 1963–1968
James Greenwood OBE 1968–1974
Ron Kelly AM 1975–1983
Keith Lyon 1990–1999
Ian Campbell AG, PSM 1999–2005
Shane Carmody 2009–2014
Craig Onna DSC, AM, CSC 2014–

*Referred to as Deputy Chairman until 1970
** From 2004

Note: It appears that prior to 1953 various state based arrangements were in place before the position of national deputy chairman was established.

REPATRIATION COMMISSIONERS

MEMBERS, MILITARY REHABILITATION AND COMPENSATION COMMISSION*

James Neagle 1956–1962
Charles Costello 1962–1976
Major General Alan Morrison AG, OBE, MBIE 1981–1989
Rear Admiral Neil Ralph AG 1989–1995
Major General Paul Stevens AG 1997–2003
Rear Admiral Simon Harrington AG 2003–2007
Brigadier William (Bill) Rolfe AG 2007–2010
Major General Mark Kelly AG, DSC 2010–

* From 2004

Note: It appears that prior to 1953 various state based arrangements were in place before the position of national deputy chairman was established.

Appendices
MEMBERS

MILITARY REHABILITATION AND COMPENSATION COMMISSION

Brian Adams  2004
Barbara Bennett  2004–2006
Steven Gruziskiak  2005
Mark Evans  2006
Martin Oslan  2006–2008
Malcolm Pearce A/g  2007
Major General Michael Slater DSC, AM, CSC  2007–2008
Major General Craig Orme AM, CSC  2008–2009
Paul O’Connor  2008–2011
Major General Gerard Fogarty AO  2011–2013
Kyri Emery  2013–2014
Rear Admiral Robyn Walker AM, RAN  2014–2015
Jennifer Taylor  2014–
Air Vice-Marshall Tracy Smart AM  2016–
Rear Admiral Brett Wolski AM, RAN  2016–

ABBREVIATIONS

ADF  Australian Defence Force
AF  Australian Imperial Force
CVC Program  Coordinated Veterans’ Care Program
DVA  Department of Veterans’ Affairs
LMO  local medical officer
MHPE  Men’s Health Peer Education
PAC  Public Accounts Committee
POW  prisoner of war
PTSD  post-traumatic stress disorder
RAAF  Royal Australian Air Force
RAN  Royal Australian Navy
RGH  repatriation general hospital
RSL  Returned and Services League of Australia (previously known as the Returned Sailors and Soldiers Imperial League of Australia and by other names until it became the Returned and Services League of Australia in 1990)
VAD  voluntary aid detachment
VVAA  Vietnam Veterans Association of Australia
VVCS  Veterans and Veterans Families Counselling Service
Philip Peyton is Professor of History at Flinders University, Adelaide, and Emeritus Professor of Cornish & Australian Studies at the University of Exeter in the UK. He spent part of his childhood in Perth, Western Australia, and later studied at the University of Adelaide. He served in the Royal Navy for thirty years, a dozen as a Regular and the rest as a Reservist, and was, inter alia, Senior Lecturer in the Department of History & International Affairs at the Royal Naval College Greenwich. In 2003 he was recalled to active service in the aircraft carrier HMS Ark Royal during the Iraq war.

Philip holds doctorates from the Universities of Adelaide and Plymouth, and is the author or editor of more than fifty books. He has written extensively on Australian, military and maritime history, including such titles as Regional Australia and the Great War (2012), The Maritime History of Cornwall (2014), Australia in the Great War (2015), and One & All: Labor and the Radical Tradition in South Australia (2016). His most recent books, both published in 2017, are A History of Sussex and Cornwall: A History.

Philip lives in Adelaide with his wife Dee, also a former Naval officer.