

CASE TWO - JIM

Our worker Jim* calls in from an ex-service organisation, ANZAC & Friends, which provides social support, welfare assistance and wellbeing programs to veterans. He has some training in community welfare and a lot of experience in working with veterans.

Jim is working with a 39 year old female. She was an Aircraft Technician in the RAAF, one of few females in her trade. She was in service for 10 years and was a CPL on discharge. She was referred to Jim's social support groups which included some regular physical activities such as park walks, yoga, and bike rides, and social BBQs every few months. She got referred because she spoke to an Advocate about her back condition and the difficulties getting it recognised by DVA, and told him that she didn't have any close family that she lived with and didn't really want to be involved with any ex-service stuff.

The client has a history of depression and suicidal ideation following a motor-vehicle accident. She was hospitalised briefly to manage this and subsequently referred to a Psychiatrist for ongoing management, although Jim is not sure how engaged she is with the Psychiatrist.

Jim reports that his client can be difficult to manage. She often gets very angry with him about DVA not recognising her claim and that even though he tells her he has nothing to do with DVA this makes no difference to her. Despite this she is frequently calling him seeking support. Last week she came into the office in a distressed state asking to speak to Jim. She told him that she had been speaking with another female vet who she met at a recent BBQ who told her about being raped whilst she was in the army. Jim's client broke down in tears and says she cannot stop thinking about her friend's story and has been having nightmares since she heard it. She then discloses to Jim she also was raped whilst in the RAAF but has never told anyone about it. She tells Jim that she does not want anyone else to know about it and that he is not to pass it on to her GP or Psychiatrist. Jim is not sure what to do.

What is your advice, expert panel?

* The information provided in this case is based on a combination of cases that the service have responded to. Specific names, personal information and event details are fictional.