

Sengelman, Jeffery MAJGEN

From: Cromptvoets, Samantha DR
Sent: Monday, 22 February 2016 8:53 PM
To: Campbell, Angus LTGEN; Sengelman, Jeffery MAJGEN
Subject: follow up note [SEC=UNCLASSIFIED]
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Gentleman,

Further to the reflections on the SO study I gave you, I wanted to elaborate on the parameters of the information gathered in order to address the questions that you had.

I sincerely apologise for the time taken to get back to you. I have been thinking about it all a lot.

Importantly, no one I spoke to situated themselves as the first person protagonist in any of the scenarios I described. This is understandable given the content of their assertions. Further, only one person explicitly described having witnessed events first hand. This discussion in particular was fraught as the person describing it was undoubtedly deeply and profoundly affected by it.

Other descriptions were given to me as a kind of 'common knowledge', thus distancing themselves from involvement in the actual event; akin to a bystander with a diffused or absolved sense of personal responsibility perhaps.

No conversation regarding potentially illegal activity was tape-recorded, nor did I take notes as these parts of the conversations were progressing. The respondents either declined to be recorded or more often volunteered the information after the conclusion of the interview, when the tape recorder was switched off. I received two phone calls from soldiers who would not meet with me in person, but instead described their own experiences to me anonymously over the phone. One person, who I understand was not a soldier but a Defence lawyer (who would also not meet with me in person) instead wrote a letter and left it on my desk in R1-4.

I have no reason to question the authenticity of what they told me, either by phone or in writing, or under the guise of 'in passing information' (or more accurately the very apt Latin phrase *obita dicta*). What these modes of communication tell me is that there is a palpable need for their story to be told, to be heard, to be vindicated. Equally there is a palpable need felt by participants in the study for their identity to remain hidden, particularly by those who provided information regarding potential illegal activity. By way of example, even though the information was not 'first hand', I observed multiple authentication points across different interviews that would verify the sometimes vague information to the initiated insider i.e. names of senior lawyers who attempted to change the 'rules of engagements' in an attempt to introduce more accountability, or particular events and physical descriptions of the locations that would be clearly identifiable by a knowledgeable insider.

The nature of the stories I was told have been described before, having emerged in numerous media stories over the last decade or so. Although, not every particular incident is exposed in the press. It seems however that just as soon as these stories emerge, they are gone. The over-arching consideration is that when looked at as a whole there appears to be sufficient detail for the stories to be triangulated and authenticated. There doesn't seem to be a lack of evidence of the concerns raised, rather an historical reluctance to examine that evidence.

I passed the stories on to you in good faith because I felt a moral obligation to do so, following introspection and an ethical examination of the scenarios described. As a package, the stories present a deeper, somewhat uncomfortable, angle to the culture within the SO community which is important to the broader study of this social group.

There are very real reasons why the people who contacted me want to remain anonymous. Some of them genuinely feel fear for their safety, their family's safety and their career in (and beyond) the ADF. For those individuals I did meet in person I would feel seriously conflicted to disclose their identity. It was explicitly said to me that being a lone whistle-blower in the SF world on these atrocities would be met with intense resistance: shaming, ostracising, scapegoating, hostility and vindictiveness.

There is always a question of influence and power and why otherwise decent people would let something go unchallenged. Whistle-blowers rarely if ever enjoy hero status. Rather, things can become hidden until it's almost impossible for them to stay covered up.

As a contractor to Army for this SO project the Intellectual Property of what I produce belongs to the Commonwealth (Department of Defence). Whilst I retain the moral rights to authorship, my notes, interview transcripts, audio files, and other material collected in the process of research and in the process of producing

reports are all materials created for the contract and therefore Defence owned.

As an academic researcher the biggest breach of my professional ethics is disclosing the identity of persons who have spoken to me in confidence and with an assurance of anonymity. Trust is my most valued asset in the work that I do and breaching that would compromise my ability to do future research and pursue future paid work, at the very least within Army and the ADO.

The body of research into healthcare scandals provides an analogy for some of the social behaviour displayed in the SF community. It shows that there are often repeated occurrences over decades that involve the same basic story of poor quality care becoming endemic in a clinic, hospital or department. In some cases clear concerns were raised and ignored, but in others it appears staff became so accustomed to poor standards they no longer saw a problem about which to raise concerns. They had normalised this situation as being the status quo. Newcomers to the situation may view it differently, but finding that their colleagues appear to have few concerns they may be unsure whether the situation is serious enough to warrant whistle blowing. When there is an expectation of hostility to acts of whistle blowing research has shown that newcomers are motivated to make sense of the situation in ways which privilege inaction over action.

An intervention in the SF community should support a narrative about correcting normalised (dysfunctional) behaviours and moving forward. Not about blame. The Canadians disbanded an entire airborne regiment to "cut off a cancer to save the whole body". That intervention perhaps lies at one extreme. I am confident there are [redacted] interventions by which to both achieve significant cultural and behavioural change in SF and retain this important capability unscathed and uncompromised, perhaps even enhance and contemporise it in the process.

An important part of an intervention may be to build a narrative such as "Special Operations require special oversight" and then support it with an empowered independent oversight body.

It is up to leaders to create a narrative of whistle blowing as something that is valuable and valued. Framing who the ultimate stakeholder is (the patient rather than the hospital for example, and in this case the people of Australia rather than SF members) can make raising concerns seem more legitimate and important. Further the narrative needs to focus on learning and improvement, not a witch-hunt for perpetrators, illegal conduct notwithstanding.

There are numerous reasons why serving members would not speak up if asked direct questions by senior leaders. Cultures of silence thrive when people are victimised for speaking unpalatable truths. Disclosure must be shared and must be safe. This is not about protecting those who may very well be guilty of some of these crimes by being witnesses or accomplices, rather it's providing an environment in which they can speak up without feeling they are isolated. They will need to be respected for speaking the truth, whilst not absolved of any wrongdoing.

Regards,

Sam

Dr Samantha Crompvoets, PhD
[redacted]

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