



SENSOR

Promoting National Security and Defence

RUSI of SA

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August/September 2015

Issue No. **458**

PRESIDENT'S REPORT

Going to Glenside

I make no apologies that my President's article for this edition of Sensor picks up where I left off in the last one – on the subject of Post Traumatic Stress Disorder or PTSD.

Part of Australia's national identity is formed around the courage and sacrifice of those who have served our nation in times of conflict. The issue of unseen wounds and mental health consequences has been less clear.

A look at the World War I records of my wife's grandfather is instructive in this regard. He was a medic on the Western Front and gassed three times. The medical assessment annotation on his record of movement to Salisbury Plains Hospital in the United Kingdom simply reads 'Sick'. Years later I would have the rare opportunity to talk with him about those times and his medical condition while we shared a couple of drams (see post script below) of good malt whisky.

He had understood all too well that the term 'sick' referred to shell shock. But did it mean an organic injury from blast force? Or neurasthenia, a psychiatric disorder inflicted by the terrors of modern warfare? Unhappily, the single term 'shell shock' encompassed both conditions. From early in the 20th century, the assault of industrial technology upon age-old sensibilities had given rise to a variety of nervous afflictions. As the war dragged on, medical opinion increasingly came to reflect recent advances in psychiatry, and the majority of 'shell shock' cases were perceived as emotional collapse in the face of the unprecedented and hardly imaginable horrors of trench warfare.

By 1917, the time my wife's grandfather was being medically assessed, medical officers were instructed to avoid the term 'shell shock', and to designate probable cases as 'Not Yet Diagnosed (Nervous)'. Processed to a psychiatric unit, the soldier was assessed by a specialist as either 'shell shock (wound)' or 'shell shock (sick)', the latter diagnosis being given if the soldier had not been close to an explosion.

Less than thirty years later the situation as to the recognition and handling of the mental health of combatants had gone backwards. The Bomber Offensive of World War II brought its own horrors as witnessed in John Bede Cusack's under rated book *They Hosed Them Out*. Yet airmen who developed 'shell shock like' mental conditions were described as having LMF, or Lack of Moral Fibre, a punitive term that brought widespread approbation.

Over recent decades both the nature of our service community and our awareness and understanding of the effects of service-related mental health conditions have changed. In addition, new demographics, such as younger contemporary veterans, female veterans and an ageing World War II, Korean War and Vietnam War cohort bring new health care challenges.

The Repatriation General Hospital (RGH) here in Adelaide is the last Repatriation Hospital as such in Australia. This follows the decision taken more than twenty years ago by the Commonwealth to hand over responsibility for running repatriation hospitals to the States which saw only South Australia maintain a dedicated capability for veteran health support.

The RGH occupies a special place in our hearts and minds. It was built for soldiers returning from the Second World War to provide support and rehabilitation for physical and mental injuries of war. I have vivid memories of my own visits as a child to the RGH to see my father or even more poignantly to talk with the fathers of my friends who had been held Prisoners of War by the Japanese. They were particularly scarred and none were destined to live long.

Current veterans continue to require ongoing long-term medical care for mental health issues arising from their service. Many veterans from current and previous conflicts present with complex psychological problems including PTSD, depression, anxiety, anger, aggression, substance abuse, suicidality and relationship issues.

Ward 17 is a designated veteran mental health facility that has been located at the RGH site for over 50 years. It provides services to veterans and ex-serving members, war widows and ADF personnel over the age of 18 years. Services provided at Ward 17 include, but are not limited to, inpatient care, outpatient clinics, ambulatory programs such as counselling services and day programs and a research and teaching program.

Over its 50 year history, Ward 17 and its staff have developed considerable expertise and empathy in the management of veteran mental health disorders. Close relationships with the veteran community have enabled a deep trust and understanding of veteran experiences and military culture, which underpins the efficacy of the service. Existing services currently provided at the RGH Ward 17 are housed in buildings that are unsuitable for a leading service and do not meet the needs of contemporary mental health management.

Under the SA Government's Transforming Health Plan announced in March 2015, many of the current services at the RGH site will move to more appropriate locations. This has implications for the ongoing services provided by Ward 17; specifically the ongoing treatment of veteran mental health consumers within SA Health and the Plan included a new purpose built \$15 million Post-Traumatic Stress Disorder Centre for Excellence to provide high-quality facilities to match our reputation as a leader in the delivery of mental health care to our veteran and service community.

An Expert Advisory Panel was established at this time to provide advice to the Minister for Health on current and future veterans mental health needs, the model of care for PTSD services for the veteran community of South Australia, potential location for the Centre of Excellence and links to broader services for the Veteran community. Membership of the Expert Panel provided a broad experience base, bringing together clinical experts (including academics, allied health professionals and lead clinicians), experienced Veteran representatives (across a range of deployments including Vietnam, Peacekeeping, Middle East and contemporary operations), consumers, carers and senior Department of Health and Ageing staff.

Given the emotional links to the RGH it was always going to be the case that the proposed site for the new PTSD Centre of Excellence would attract close public attention. The Panel considered each of the eight possible sites but only one – the Glenside Health Service precinct - was considered to offer both the necessary clinical and non-clinical co-dependencies.

Specifically in terms of clinical co-dependencies Glenside is an existing SA Health site, support to inpatient and outpatient care can be met and specialised electro convulsive therapy services exist, along with on site (inpatient and outpatient) drug and alcohol services. For non-clinical co-dependencies Glenside offers a centralised location for access for patients, families and workforce, it has easy access to the city, good public transport, cycle paths, there is available space for car parking and the level of amenity is high with gardens, well established trees, football fields, open space and gym facilities. In addition there are over 20 on site supported accommodation units (NGO supported) and a flexible footprint with access to land and buildings that enables creation of a purpose built, multi- use facility. Moreover, it is a low stimulus site with a high level of privacy and separate access can be made to reduce the 'stigma' associated with the main entry of the site.

As Deputy Chair of the Board of Governors of the Repat Foundation I look forward to the roll out of this PTSD Centre of Excellence at Glenside. I encourage readers to also follow this journey. The challenge will be to set up governance, management and clinical arrangements that at all times go the interests of the Veteran Community in its broadest sense and their families. In this modern world of ever present fiscal rectitude, we should never underestimate this challenge.

Brent Espeland

State President RUSI-SA

August 2015

Post Script: I could not sign off without asking and answering the question of what is a dram or indeed a wee dram of Whisky? In typical Scottish fashion it is defined as 'that measure that gives comfort to both the host and the guest'. A delightful observation.

Monthly Luncheons

Monday 7 September 2015

Speaker: David Gray, Chairman of Legacy Australia.

Topic: "Legacy Past, Present and Future and Need for Collaboration".

Wines presented to guest speakers are generously donated by SKYE CELLARS, 578 The Parade, Auldana 5072.

SKYE CELLARS has been operating for over 28 years. It is a family owned and operated business situated in the heritage listed Auldana Estate Winery in the Adelaide foothills.

All members are invited to attend our luncheons. Indeed you are encouraged to invite partners, friends and colleagues to join us and, if they like what they see and hear, to nominate them for RUSI membership.

The dress code for the luncheon is neat casual. We assemble in Building 34A, Keswick Barracks, Keswick, at approximately 11.30 am for drinks and good fellowship. Members are asked to be seated by 12.00 noon when our President welcomes members and guests and lunch is served.

The cost of the buffet is \$26 for members and \$31 for non-members. Wines, beer and soft drinks will be available for purchase. We also conduct a raffle to help cover expenses. Our caterer has agreed to provide vegetarian meals and sweets for diabetics, but these must be ordered before midday on the Friday before the lunch.

For those who do not have time to enjoy lunch, but wish to hear the lecture, chairs are provided around the perimeter of the hall. Please be seated before 12.55 pm. The address is of about 30 to 35 minutes duration with 15 minutes for questions, after which coffee or tea is available. We aim to complete the program by 2.00 pm.

Cancellations must be advised to the RUSI-SA Office by midday of the Friday before the lunch. Subsequent cancellations will attract a fee of \$26.

DINING IN NIGHT

The RUSI of SA Dining in Night will be held at the Naval, Military and Air Force Club, 111 Hutt St, Adelaide, at 7pm for 7.30 pm on Friday 18 September 2015.

A two course menu with standard drinks included will cost \$75 pp for members and \$85 pp for partners and non members.

Official guests will include

His Excellency the Honourable Hieu Van Le AO,
Governor of South Australia and Patron of the RUSI of SA,
and his wife Mrs Le.

RUSI - SA LAPEL PINS

The Council has been considering the value of ordering lapel pins, patches and cuff-links based on the RUSI of SA logo.

Members are asked to respond to this suggestion please with an indication of whether there is any interest in such a venture. The decision to go ahead and order such memorabilia will depend on the level of interest shown by members. The price is anticipated to be in the order of \$10 to \$15 each.

It may be that a National lapel pin would be appropriate in the interests of economies of scale and marketing. Most federated organisations have a pin common to all their component branches.

A brief email response to the secretary at

rusikes@bigpond.com

would be appreciated please.

Otherwise, a telephone call to Vicky during office hours on 8305 6378 would be acceptable.

Vale

It is with regret that the recent death of

LT Denis Colin Gerschwitz,

member of the RUSI of SA,
was announced.

The Members of Council extend their condolences to his family and friends.

On Monday, 1 June 2015, Neil James, Exec Director of the Australian Defence Assoc. addressed the RUSI - SA on the subject of “Why does governance of the Defence portfolio face such persistent problems?”

The following is a synopsis of his presentation.

Perennial problems in the Defence portfolio generally receive media, political and other publicity without much, and often indeed any, analysis of the underlying causes. As a frequent result, one of the regular victims of these causes and the recurring problems – our defence force – is wrongly blamed when things go wrong.

But the main result is that the more serious problems generally re-occur. They will not be resolved unless all the recurring causes are tackled comprehensively and in an integrated way.

For decades, especially since the amalgamation of the defence group of departments in 1974, the Australia Defence Association has pointed out that the Department of Defence has been reviewed regularly (generally at three to four year intervals) without solving most of the recurring problems.

The obvious question is not why reviews keep failing but why there have been so many of them. The clear answer is because most of them have been piecemeal approaches and none of them have gone back to first principles.

Moreover, the main cause of all the failed reviews from 1981 to the present day stemmed from the 1974 departmental amalgamation not being based on first principles. Many defenders of the amalgamation remain in denial about this, or that more than a discussion or re-evaluation of diarchic management of the department is involved. Too often arguments have got sidetracked into discussing the advantages and disadvantages of the diarchy, and missed that the main result of the 1974 changes has been a diminution in the required ministerial grip over the portfolio on behalf of Parliament.

Based on the last first-principles review of the national defence function being conducted as long ago as 1957 (the Morshead Review), the policy to undertake the recent “first-principles” review (FPR) stemmed from the suggestion of the Australia Defence Association when the current government was in opposition.

What the ADA proposed was a genuine first-principles review of how the national defence function was best managed, both constitutionally and administratively, including how civil-control-of-the-military by Parliament and Ministers was best exercised in modern Australia.

Furthermore, such a review should not be focused on whether the diarchy was retained or not as this would form only a part of any truly functional review. If the diarchy was to be retained or not should be clearly evident from a first-principles analysis, rather than just being defended from habit because of its institutional longevity, and many of those involved being so culturally acclimated that they are unable to consider alternatives objectively.

Unfortunately the FPR’s terms of reference were nobbled by a mixture of influences. These included intra-party personal and organisational politics, staffing changeovers during the transition from Opposition to Government, an element of bureaucratic intrigue, tensions in the relationship between the PM and his first Minister for Defence (and their staffs), and an apparent failure of governmental nerve or vision (or both).

The decision to include a former Minister for Defence (rather than, for example, a former minister in another portfolio) in the review team also had several consequences that the ADA had warned would probably occur, even though the former minister concerned had been one of the more capable ones.

Tragically the review team did some great work but ended up by being confined to only examining the structure and processes of the Department of Defence. In other words it became a departmental and largely administrative review, rather than a constitutional, functional and portfolio one from the highest level to the lowest.

This was an improvement on the Proust Review in 2007 which was forbidden to examine structure and hence could not fully tackle departmental dysfunction, but several of the FPR terms of reference also meant that some areas of departmental function could only receive a second-principles examination.

Inevitably, several key problems bedeviling the national defence function will continue to re-occur until the entire defence function, not just the Department of Defence, is genuinely reviewed and the deficiencies actually remedied across the board.

For information about the ADA, and for Neil James biography, please go to <http://ada.asn.au>



On Monday 6 July 2015, Representative Colonel Commandant Royal Australian Army Medical Corps, BRIG Rob Atkinson AM RFD (Retd), Vice President of the RUSI of SA, spoke about the RAAMC. His talk was entitled “Private Bosisto, The Debt and the Challenge”. Following is a brief summary of his presentation.

BRIG Atkinson covered the 100 years history of the RAAMC which from 1903 includes a nucleus of the Permanent, Militia and Volunteer Army Medical Corps, the Reserve of Officers and the Army Nursing Service.

Private Bosisto was an ordinary Australian soldier killed during WWI. He was typical of the focus of all the efforts made by the Medical Corps for the soldiers, sailors and airmen who place themselves in harm's way for the citizens of this nation. Private Bosisto, with his initiative and courage, his joie de vivre and his attitude to authority, is that building block. In 1916 the Anzac tradition was just beginning, but it has gone on from there and is the very ethos of how business is done in the ADF. The Private Bosistos of the ADF are alive and well and if we are to train for war, and train to win, it is our work to nurture the Private Bosistos. Therein lies the debt and the challenge of how to deliver, in modern times, the health care our soldiers deserve.



Operational practice has to be balanced against civilian medical practice. More people suffering wounds can be saved if they are treated early enough and it is important to have strong international structures in place to allow this. To satisfy people, government and the national interest, conflict requires success with low risk and low casualty rates. The most common injuries occur during waiting periods, from sporting activity and other accidents but more people die from disease than they do from combat. During the Gulf war, the most common operation was for arthroscopy of the knee, with 75% of patients returning to duty.

In war and other military operations, there is an increasing demand for medical services. The knowledge edge needs to be brought to the cutting edge of operational health. The knowledge edge rests in the teaching hospitals and civilian practices in peacetime. Balancing civilian medical skills and operational requirements is the key to training for war and training to win. The concept of using robotic aids in surgery is already well practiced and several companies market such technology.

Long range remote operation has been demonstrated from France and the US. The overall aim is to conserve manpower and maintain effective troops. The application of modern medical technology in the field is the foundation for future developments.

For more information about the RAAMC, please go to

<http://www.raamc.org.au>

ONE OF OURS

The sun shone bright, on hearts young and brave,
Who marched into glory, with a world to save,
Then the sun grew dim, and nights grew cold.
Yet those valiant men, were ever more bold.
The men of the 27th.

With thunder roaring both left and right,
On they fought, with all their might,
Victory was gained, but the price was paid,
Tragedy and sacrifice, their lives they gave,
The men of the 27th.

One who perished in the relentless fight,
Lost in time, forever in night,
A fallen warrior, within the ground,
A new day dawned, and he was found.
A man of the 27th.

"He's one of ours" was cried with pride,
And was heard in places far and wide,
Now they honour him, for the life he gave,
And lay him gently in a Christian grave.
The men of the 10th/27th.

Rick James McLaren - June, 1998

From *Fighting Fit - Defence Health*

The past tempts us, the present confuses us and the future frightens us.

The title of this blog came from a quote from beloved Science Fiction series, Babylon 5 (Ep. 1, Disk 3, Season 2, the line spoken by an ailing Centauri Emperor) and was deemed appropriate to the subject matter at hand.

“President Obama’s announcement Wednesday that he is sending 450 more military advisers to Iraq highlights the central dilemma of his faltering strategy there: how to shore up the country’s fragile government without being pulled into a war he never wanted” (G Jaffe & M. Ryan, [Washington Post](#), June 10, 2015)

America’s reaction to 9/11 was swift and for Afghanistan and Iraq – catastrophic. Both countries were invaded and occupied by US-led international coalitions. Their invasion put neighboring countries on notice. The message was clear. In the case of Afghanistan – let no country harbour or in any way give support to terrorist organisations; in the case of Iraq – let no country think it can outfox or be continuously provocative to American interests.

For the United States, these messages came at a huge cost. Thousands of dead and injured service personnel. Hundreds of millions of dollars spent on nation building projects that did not have the anticipated positive impact. The result? International criticism of American motives for these wars. Afghanistan did not stabilise and coalesce to become a safe and progressive country. The Taliban still holds sway over a significant part of Afghanistan ([the Pashtu south/southeast](#)), while Kabul’s political leadership struggles with ethnic, tribal and clan factionalism. In Iraq, the end of the Hussein regime brought about sectarian war, the rise of ISIL due to Sunni Iraqi disenfranchisement and the political and social rise of the long oppressed Iraqi Shia majority under-class, supported by the imperial ambitions of Iran. America’s reaction to 9/11 unleashed horror and confusion on local Afghanis and Iraqis.

In Afghanistan, the enemy, the Taliban, were pushed out of Kabul and cornered in the Pashtu lands, but not defeated. If the measure of war is to ensure a decisive peace – Afghanistan was a failure. Similarly in Iraq, no peace was won. Indeed in Iraq new enemies were created, adding to that country’s volatile mix of ethnic and sectarian conflict. Minus a strong Baghdad, only Tehran has the will to step in and fight ISIL and consolidate its hold over Iraq’s Shia political elite.

The US is war weary for now. It is also going through the ritual of finding a new President. Assuming a hawk were to enter the Oval Office (unlike the current political leadership), how would a new hawkish president react to another event like 9/11, especially one where a non-state actor were to successfully detonate a ‘dirty bomb’ or a significant chemical weapon? It is likely that the public mood for vengeance would be high. But would it be high enough to tempt the Pentagon into another war,

occupation and counterinsurgency? Unlikely. Surgical ‘conventional’ cruise missile and stealth bomber strikes? Unsatisfactory. A series of Special Force raids to capture the head of the guilty non-state actor? Considering the long search for Bin Laden, not an attractive option. As none of the traditional methods for dealing with America’s enemies would be considered timely, decisive or effective enough, we are left to contemplate the unthinkable, that is, using the long ignored and feared tactical nuclear weapon. The destruction of Raqqah, a city of some 220,000 people by a low-yield W-80-1 armed cruise missile or a B-2 delivered B61/83 free fall gravity bomb would certainly shock the world. But if taken as a pure statistical analysis – the cost in terms of lives lost, property destruction, other casualties sustained and munitions expended, this type of military action would be far more effective and affordable than a conventional military intervention, forcible regime change, and protracted ‘training’ programs for identified and unreliable local proxy forces. The destruction would be highly concentrated in one area (e.g. Raqqah). ISIL headquarters would cease to exist.

Of course, such a scenario is presently unthinkable, but in a world of disorder where populations are becoming apathetic to organised violence by state and non-state actors, where forces at the non-state actor level are becoming more emboldened and enabled owing to the proliferation of miniaturised, easily accessible dual-use technologies, there will come a time when one of the world’s nuclear powers will consider its options. While such a radical strategic re-thinking is nowhere near reality, the fact that the US, still the most powerful country on Earth, has gone from wrecker of nations to meek, vacillating and passive-aggressive, shows that the Washington beltway is bereft of ideas on how to restore American power. Just like the atomic bombings of Hiroshima and Nagasaki punctuated US dominance of the post World War II order, the destruction of an out of the way ‘terrorist capital’ might well serve as a reminder to the international community – state and non-state actors alike – that the days of US dominance are not at an end.

But it would take a set of extraordinary circumstances and an extremely hawkish and brave president to contemplate the use of ‘limited tactical nuclear war’ as an instrument of American strategic policy. And how would the key powers of the Shanghai Cooperation Organisation – the Russian Federation and China view such a development? Would this set a precedent for the Israeli use of tactical nuclear weapons in the Middle East? To paraphrase Isaac Newton’s oft quoted phrase: *“to every action there is always an equal and opposite or contrary, reaction”*. Nonetheless in a more complex international setting, all cards must be placed on the table and all possibilities discussed so as not to continually repeat the mistakes of the past.

As part of the First Principles Review implementation, from 1 July 2015 the Defence Science and Technology Organisation (DSTO) has been renamed as the Defence Science and Technology Group. This change gives effect to the One Defence business model recommended in the First Principles Review.

See more at:

<http://www.dsto.defence.gov.au>

Defence and Australian industry partners have collaborated to manufacture the first-of-a-kind counter improvised explosive device equipment.

Australia continues to be on the cutting edge of the development of defence science and technology needed to address the global threat posed by improvised explosive devices.

Micreo, Ultra Electronics Australia, Associated Electronic Services, AXIOM Precision Manufacturing and Lintek have worked in close partnership with the Defence Materiel Organisation, the Defence Science and Technology Group and Defence's Counter-

requires minimal operator training and limited logistic support.

Through this project, the Australian Government will invest up to \$50 million in the Australian defence manufacturing industry, demonstrating Defence's ability to transfer domestically developed counter improvised explosive device technology into jobs for Australians.

This project is an example of Australian industry and Defence collaboration, entrepreneurship and innovation to deliver a unique solution that is able to help address a persistent threat in almost every conflict zone. With defence industry partners supporting an accelerated production schedule, delivery of this vital equipment to Afghanistan commenced in January.

The Afghan National Defense and Security Forces are now deploying this equipment in the current fighting season, their first without significant coalition support. Australia will continue

working with our Afghan partners to defeat the threat of improvised explosive devices, including supporting future Afghan National Defense and Security Forces requirements for these force protection systems.

© Commonwealth of Australia 2015



Radio controlled Counter-IEDs for use by dismounted elements.

Improvised Explosive Device Task Force to produce this potentially lifesaving equipment. Under Defence's REDWING program, Australia has developed low cost, robust and lightweight force protection systems. The equipment has particular application for use in austere operating environments by military and police units as it

Warradale Barracks is holding an Open Day on Saturday 29 August 2015 from 2 to 7pm.

The 9th Combat Service Support Battalion will host the open day with an open air concert and a family picnic.

Full details may be seen at

<http://www.rslsa.org.au/events/a-day-on-the-khaki-green>

The open day will be supported by Defence Force Recruiting and the Defence Reserves Support Council. The Army Reserve and the Army and Air Force Cadet capabilities within Warradale Barracks will be showcased, providing recruiting opportunities for members of the community.

The 'Day on the Khaki Green' coincides with the start of Legacy week, allowing the community to support a charity that provides vital support to Defence members and their families.

ANZAC CENTENARY

As part of the Anzac Centenary Commemoration, The Freedom of Entry to the City of Adelaide was exercised by 10th/27th Battalion of the Royal South Australian Regiment on 8 August 2015.



© 2015 Australian Defence Image Library

The Freedom of the City is an honour conferred by a city council upon a military unit in recognition of its dedicated service.

REMINDER

The Defence Teaming Centre – SA has launched a new campaign called *Australian Made Defence*.

Australian Made Defence is about informing all Australians that Australia has the indigenous industrial capacity to build and maintain many of Australia's Defence capabilities to international standards while being globally competitive in terms of value for money.

The campaign will initially focus on the need to build our future ship and submarine fleets in Australia in order to maximise the benefits to our nation.

To support *Australian Made Defence* go to

www.australianmadedefence.com.au

and register.

MELBOURNE MUSEUM

The WWI Centenary Exhibition is currently showing at the Melbourne museum and closes on 4 October 2015.

350 artifacts from the Imperial War Museum in London are on display.



This 13 pounder Horse Artillery Gun fired the first shell of the war on 22 August 1914 and was still in use in decisive battles in 2018. See <http://museumvictoria.com.au/melbournemuseum/whatson/the-ww1-centenary-exhibition/>

WWII THERAPY

Some prisoners of war during WWII used to pass the time by stitching samplers, such as the one shown here.



MAJ Alexis Casdagli passed the long hours in captivity by creating this sampler in cross stitch. His captors displayed the sampler widely, not knowing that it contained a secret message in Morse code reading "God saves the king" followed by "F... Hitler".

See <http://www.telegraph.co.uk/news/9009004/British-prisoner-of-War-stitched-hidden-anti-Hitler-message-into-Nazi-quilt.html> from where this information was taken, for more details.

SUBMARINE INSTITUTE

The Submarine Institute of Australia (SIA) Inc will be conducting its third technology conference from 16 to 19 November 2015 in Adelaide.

The 3rd SIA Submarine Science, Technology and Engineering Conference will be held at the Adelaide Convention Centre over three days with a wide range of issues addressed that reflect the theme of the Conference: *The Future Submarine: Australia's greatest Science, Technology and Engineering Challenge?*

In a year where the Government has promised to select its design partner for the Future Submarine, the Conference acts as a pivotal week in the submarine calendar. The program includes tours of submarine-related industry and academic institutions, an Opening Reception, a Conference Dinner and three days of high quality presentations from the cream of the submarine community.

For details of the conference and to register, please go to

<http://www.eventbrite.com.au/e/sia-3rd-technology-conference-2015-tickets-16407482221>