



Statement of Principles concerning schizophrenia (Balance of Probabilities) (No. 84 of 2016)

made under subsection 196B(3) of the
Veterans' Entitlements Act 1986

Compilation No. 1

Compilation date: 24 September 2018

Includes amendments up to: Veterans' Entitlements (Statements of Principles—Category 1B Stressor) Amendment Determination 2018 (No. 87 of 2018) (F2018L01188)

The day of commencement of this Amendment Determination is 24 September 2018.

Prepared by the Repatriation Medical Authority Secretariat, Brisbane

About this compilation

This compilation

This is a compilation of the *Statement of Principles concerning schizophrenia (Balance of Probabilities) (No. 84 of 2016)* that shows the text of the law as amended and in force on 24 September 2018.

The notes at the end of this compilation (the *endnotes*) include information about amending laws and the amendment history of provisions of the compiled law.

Uncommenced amendments

The effect of uncommenced amendments is not shown in the text of the compiled law. Any uncommenced amendments affecting the law are accessible on the Legislation Register (www.legislation.gov.au). The details of amendments made up to, but not commenced at, the compilation date are underlined in the endnotes. For more information on any uncommenced amendments, see the series page on the Legislation Register for the compiled law.

Application, saving and transitional provisions for provisions and amendments

If the operation of a provision or amendment of the compiled law is affected by an application, saving or transitional provision that is not included in this compilation, details are included in the endnotes.

Modifications

If the compiled law is modified by another law, the compiled law operates as modified but the modification does not amend the text of the law. Accordingly, this compilation does not show the text of the compiled law as modified. For more information on any modifications, see the series page on the Legislation Register for the compiled law.

Self-repealing provisions

If a provision of the compiled law has been repealed in accordance with a provision of the law, details are included in the endnotes.



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
SCHIZOPHRENIA
(Balance of Probabilities)
(No. 84 of 2016)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

Dated 28 October 2016

Statement of Principles concerning
Schizophrenia (Balance of Probabilities) (No. 84 of 2016)
Veterans' Entitlements Act 1986

1

Contents

1	Name	3
2	Commencement	3
3	Authority	3
4	Revocation	3
5	Application.....	3
6	Definitions.....	3
7	Kind of injury, disease or death to which this Statement of Principles relates	3
8	Basis for determining the factors	5
9	Factors that must exist.....	5
10	Relationship to service	7
11	Factors referring to an injury or disease covered by another Statement of Principles.....	7
Schedule 1 - Dictionary		8
1	Definitions.....	8

1 Name

This is the Statement of Principles concerning *schizophrenia (Balance of Probabilities)* (No. 84 of 2016).

2 Commencement

This instrument commences on 28 November 2016.

3 Authority

This instrument is made under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

4 Revocation

The Statement of Principles concerning schizophrenia No. 16 of 2009 made under subsection 196B(3) of the VEA is revoked.

5 Application

This instrument applies to a claim to which section 120B of the VEA or section 339 of the *Military Rehabilitation and Compensation Act 2004* applies.

6 Definitions

The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

7 Kind of injury, disease or death to which this Statement of Principles relates

- (1) This Statement of Principles is about schizophrenia and death from schizophrenia.

Meaning of schizophrenia

- (2) For the purposes of this Statement of Principles, schizophrenia means a disorder of mental health meeting the following diagnostic criteria (derived from DSM-5):
- A. Two (or more) of the following, each present for a significant portion of time during a one-month period (or less if successfully treated), at least one being (i), (ii) or (iii):
- (i) delusions;
 - (ii) hallucinations;
 - (iii) disorganised speech (for example, frequent derailment or incoherence);

-
- (iv) grossly disorganised or catatonic behaviour; or
 - (v) negative symptoms (that is, diminished emotional expression or avolition).
 - B. For a significant portion of the time since the onset of the disturbance, level of functioning in one or more major areas of life, such as work, interpersonal relations, or self-care, is markedly below the level achieved prior to the onset (or when the onset is in childhood or adolescence, there is failure to achieve expected level of interpersonal, academic or occupational functioning).
 - C. Continuous signs of the disturbance persist for at least six months. This six-month period must include at least one month of symptoms (or less if successfully treated) that meet Criterion A and may include periods of prodromal or residual symptoms. During these prodromal or residual periods, the signs of the disturbance may be manifested by only negative symptoms or by two or more symptoms listed in Criterion A present in an attenuated form (for example, odd beliefs, unusual perceptual experiences).
 - D. Schizoaffective disorder and depressive or bipolar disorder with psychotic features have been ruled out because either:
 - (i) no major depressive or manic episodes have occurred concurrently with the active-phase symptoms; or
 - (ii) if mood episodes have occurred during active-phase symptoms, they have been present for a minority of the total duration of the active and residual periods of the illness.
 - E. The disturbance is not attributable to the physiological effects of a substance (for example, a drug of abuse, a medication) or another medical condition.
 - F. If there is a history of autism spectrum disorder or a communication disorder of childhood onset, the additional diagnosis of schizophrenia is made only if prominent delusions or hallucinations, in addition to the other required symptoms of schizophrenia, are also present for at least one month (or less if successfully treated).

Note: *DSM-5* is defined in the Schedule 1 – Dictionary.

- (3) While schizophrenia attracts ICD-10-AM code F20.0-F20.3, F20.5 or F20.9, in applying this Statement of Principles the meaning of schizophrenia is that given in subsection (2).

-
- (4) For subsection (3), a reference to an ICD-10-AM code is a reference to the code assigned to a particular kind of injury or disease in *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (ICD-10-AM)*, Ninth Edition, effective date of 1 July 2015, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-020-5.

Death from schizophrenia

- (5) For the purposes of this Statement of Principles, schizophrenia, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's schizophrenia.

Note: *terminal event* is defined in the Schedule 1 – Dictionary.

8 Basis for determining the factors

On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that schizophrenia and death from schizophrenia can be related to relevant service rendered by veterans or members of the Forces under the VEA, or members under the MRCA.

Note: *relevant service* is defined in the Schedule 1 – Dictionary.

9 Factors that must exist

At least one of the following factors must exist before it can be said that, on the balance of probabilities, schizophrenia or death from schizophrenia is connected with the circumstances of a person's relevant service:

- (1) having experienced severe childhood abuse before the clinical onset of schizophrenia;

Note: *severe childhood abuse* is defined in the Schedule 1 - Dictionary.

- (2) experiencing a category 1A stressor within the three months before the clinical onset of schizophrenia;

Note: *category 1A stressor* is defined in the Schedule 1 – Dictionary.

- (3) experiencing a category 1B stressor within the three months before the clinical onset of schizophrenia;

Note: *category 1B stressor* is defined in the Schedule 1 – Dictionary.

- (4) experiencing the death of a related child within the two years before the clinical onset of schizophrenia;

Note: *related child* is defined in the Schedule 1 – Dictionary.

-
- (5) having substance use disorder, involving cannabis, within the 20 years before the clinical onset of schizophrenia;
 - (6) using cannabis at least twice a week for a continuous period of at least two years before the age of 18 years, within the 20 years before the clinical onset of schizophrenia;
 - (7) having alcohol use disorder or substance use disorder involving a drug or a drug from a class of drugs from Specified List 1 of drugs, within the five years before the clinical onset of schizophrenia;
Note: *Specified List 1 of drugs* is defined in the Schedule 1 – Dictionary.
 - (8) experiencing a category 1A stressor within the three months before the clinical worsening of schizophrenia;
Note: *category 1A stressor* is defined in the Schedule 1 – Dictionary.
 - (9) experiencing a category 1B stressor within the three months before the clinical worsening of schizophrenia;
Note: *category 1B stressor* is defined in the Schedule 1 – Dictionary.
 - (10) experiencing the death of a related child within the two years before the clinical worsening of schizophrenia;
Note: *related child* is defined in the Schedule 1 – Dictionary.
 - (11) being treated with a drug which results in the re-development or worsening of signs or symptoms of psychosis, where the treatment with the drug was undertaken for at least the two days before the clinical worsening of schizophrenia;
 - (12) taking a drug or a drug from a class of drugs from Specified List 2 of drugs within the 30 days before the clinical worsening of schizophrenia;
Note: *Specified List 2 of drugs* is defined in the Schedule 1 – Dictionary.
 - (13) having ceased, reduced or changed antipsychotic drug therapy, within the seven days before the clinical worsening of schizophrenia;
 - (14) having a clinically significant disorder of mental health as specified at the time of the clinical worsening of schizophrenia;
Note: *clinically significant disorder of mental health as specified* is defined in the Schedule 1 – Dictionary.
 - (15) inability to obtain appropriate clinical management for schizophrenia.

10 Relationship to service

- (1) The existence in a person of any factor referred to in section 9, must be related to the relevant service rendered by the person.
- (2) The factors set out in subsections 9(8) to 9(15) apply only to material contribution to, or aggravation of, schizophrenia where the person's schizophrenia was suffered or contracted before or during (but did not arise out of) the person's relevant service.

11 Factors referring to an injury or disease covered by another Statement of Principles

In this Statement of Principles:

- (1) if a factor referred to in section 9 applies in relation to a person; and
- (2) that factor refers to an injury or disease in respect of which a Statement of Principles has been determined under subsection 196B(3) of the VEA;

then the factors in that Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

Schedule 1 - Dictionary

Note: See Section 6

1 Definitions

In this instrument:

category 1A stressor means one of the following severe traumatic events:

- (a) experiencing a life-threatening event;
- (b) being subject to a serious physical attack or assault including rape and sexual molestation; or
- (c) being threatened with a weapon, being held captive, being kidnapped, or being tortured.

category 1B stressor means one of the following severe traumatic events:

- (a) killing or maiming a person;
- (b) being an eyewitness to a person being killed or critically injured;
- (c) being an eyewitness to atrocities inflicted on another person;
- (d) participating in the clearance of a corpse or a critically injured casualty; or
- (e) viewing a corpse or a critically injured casualty as an eyewitness.

Note: *corpse* and *eyewitness* are also defined in the Schedule 1 - Dictionary.

clinically significant disorder of mental health as specified means one of the following conditions, which is of sufficient severity to warrant ongoing management, which may involve regular visits (for example, at least monthly) to a psychiatrist, counsellor or general practitioner:

- (a) acute stress disorder;
- (b) agoraphobia;
- (c) alcohol use disorder;
- (d) anxiety disorder;
- (e) bipolar disorder;
- (f) depressive disorder;
- (g) eating disorder;
- (h) obsessive-compulsive disorder;
- (i) panic disorder;
- (j) posttraumatic stress disorder;
- (k) psychotic disorder due to another medical condition;
- (l) sleep-wake disorder;
- (m) social anxiety disorder;
- (n) specific phobia;
- (o) substance use disorder; or

(p) substance/medication-induced psychotic disorder.

corpse means the human remains or body parts of one or more persons who have met a violent or horrific death.

Note: Examples of a violent or horrific death may include death due to suicide, gunshot, improvised explosive devices, natural and technological disasters, terrorist attacks or motor vehicle accidents. Seeing a closed body bag or viewing a body in an open-casket coffin are excluded from this definition.

DSM-5 means the American Psychiatric Association: *Diagnostic and Statistical Manual of Mental Disorders*, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013

eyewitness means a person who experiences an incident first hand and can give direct evidence of it. This excludes persons exposed only to public broadcasting or mass media coverage of the incident.

inhalants means breathable chemicals that produce psychoactive vapours or fumes and include organic solvents, aerosols and anaesthetics.

Note: **organic solvents** is also defined in the Schedule 1 – Dictionary.

MRCA means the Military Rehabilitation and Compensation Act 2004.

organic solvents means:

- (a) aliphatic hydrocarbon solvents; or
- (b) aromatic hydrocarbon solvents; or
- (c) chlorinated organic solvents; or
- (d) oxygenated organic solvents.

related child means your biological, adopted, step- or foster child.

relevant service means:

- (a) eligible war service (other than operational service) under the VEA;
- (b) defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
- (c) peacetime service under the MRCA.

Note: **MRCA** and **VEA** are also defined in the Schedule 1 - Dictionary.

schizophrenia—see subsection 7(2).

severe childhood abuse means:

- (a) serious physical, emotional, psychological or sexual harm whilst a child aged under 16 years; or
- (b) neglect involving a serious failure to provide the necessities for health, physical and emotional development, or wellbeing whilst a child aged under 16 years;

where such serious harm or neglect has been perpetrated by a parent, a care provider, an adult who works with or around that child, or any other adult in contact with that child.

Specified List 1 of drugs means:

- (a) amphetamines and amphetamine-type substances, including methamphetamine and 3,4-methylenedioxymethamphetamine (ecstasy);
- (b) cocaine; or
- (c) opioids.

Specified List 2 of drugs means:

- (a) amphetamines and amphetamine-type substances, including methamphetamine and 3,4-methylenedioxymethamphetamine (ecstasy);
- (b) anabolic-androgenic steroids;
- (c) cannabis;
- (d) cocaine;
- (e) ephedrine;
- (f) fenfluramine;
- (g) hallucinogens;
- (h) inhalants;
- (i) interferons;
- (j) mefloquine;
- (k) opioids;
- (l) phencyclidine;
- (m) phentermine;
- (n) phenylephrine;
- (o) phenylpropanolamine; or
- (p) pseudoephedrine.

Note: *inhalants* is also defined in the Schedule 1 – Dictionary.

terminal event means the proximate or ultimate cause of death and includes the following:

- (a) pneumonia;
- (b) respiratory failure;
- (c) cardiac arrest;
- (d) circulatory failure; or
- (e) cessation of brain function.

VEA means the Veterans' Entitlements Act 1986.

Endnotes

Endnote 1—About the endnotes

The endnotes provide information about this compilation and the compiled law.

The following endnotes are included in every compilation:

Endnote 1—About the endnotes

Endnote 2—Abbreviation key

Endnote 3—Legislation history

Endnote 4—Amendment history

Abbreviation key—Endnote 2

The abbreviation key sets out abbreviations that may be used in the endnotes.

Legislation history and amendment history—Endnotes 3 and 4

Amending laws are annotated in the legislation history and amendment history.

The legislation history in endnote 3 provides information about each law that has amended (or will amend) the compiled law. The information includes commencement details for amending laws and details of any application, saving or transitional provisions that are not included in this compilation.

The amendment history in endnote 4 provides information about amendments at the provision (generally section or equivalent) level. It also includes information about any provision of the compiled law that has been repealed in accordance with a provision of the law.

Misdescribed amendments

A misdescribed amendment is an amendment that does not accurately describe the amendment to be made. If, despite the misdescription, the amendment can be given effect as intended, the amendment is incorporated into the compiled law and the abbreviation “(md)” added to the details of the amendment included in the amendment history.

If a misdescribed amendment cannot be given effect as intended, the abbreviation “(md not incorp)” is added to the details of the amendment included in the amendment history.

Endnote 2—Abbreviation key

ad = added or inserted	o = order(s)
am = amended	Ord = Ordinance
amdt = amendment	orig = original
c = clause(s)	par = paragraph(s)/subparagraph(s) /sub-subparagraph(s)
C[x] = Compilation No. x	pres = present
Ch = Chapter(s)	prev = previous
def = definition(s)	(prev...) = previously
Dict = Dictionary	Pt = Part(s)
disallowed = disallowed by Parliament	r = regulation(s)/rule(s)
Div = Division(s)	
exp = expires/expired or ceases/ceased to have effect	reloc = relocated
F = Federal Register of Legislation	renum = renumbered
gaz = gazette	rep = repealed
LA = <i>Legislation Act 2003</i>	rs = repealed and substituted
LIA = <i>Legislative Instruments Act 2003</i>	s = section(s)/subsection(s)
(md) = misdescribed amendment can be given effect	Sch = Schedule(s)
(md not incorp) = misdescribed amendment cannot be given effect	Sdiv = Subdivision(s)
mod = modified/modification	SLI = Select Legislative Instrument
No. = Number(s)	SR = Statutory Rules
	Sub-Ch = Sub-Chapter(s)
	SubPt = Subpart(s)
	<u>underlining</u> = whole or part not commenced or to be commenced

Endnote 3—Legislation history

Name	Registration	Commencement	Application, saving and transitional provisions
<i>Statement of Principles concerning schizophrenia (Balance of Probabilities) (No. 84 of 2016)</i>	31 October 2016 F2016L01685	28 November 2016	
<i>Veterans' Entitlements (Statements of Principles—Category 1B Stressor) Amendment Determination 2018 (No. 87 of 2018)</i>	28 August 2018 F2018L01188	24 September 2018	

Endnote 4—Amendment history

Provision affected	How affected
Schedule 1 – Dictionary – category 1B stressor..	rs. No. 87 of 2018
Schedule 1 – Dictionary – eyewitness.....	rs. No. 87 of 2018
Schedule 1 – Dictionary – corpse.....	ad. No. 87 of 2018