

2019 Submission - Royal Commission into Victoria's Mental Health System

Organisation Name

N/A

Name

Dr Stewart Proper

What are your suggestions to improve the Victorian community's understanding of mental illness and reduce stigma and discrimination?

Thinking about suicide is not a crime and those who talk about suicide should not be treated as criminals

What is already working well and what can be done better to prevent mental illness and to support people to get early treatment and support?

Some centres are far kinder and more caring than others and it is mostly due to the degree of intent to help rather than harm.

What is already working well and what can be done better to prevent suicide?

There are many more platforms open to the public on social media to allow further discussions

What makes it hard for people to experience good mental health and what can be done to improve this? This may include how people find, access and experience mental health treatment and support and how services link with each other.

"It is all too easy for a psychiatrist to proclaim someone mentally ill and slam a treatment order upon them more to cover their own arses than to help the individuals. The DSM criteria are ignored, the Mental Health Act is treated with contempt and the psychiatrists get away with lying to cover their tracks."

What are the drivers behind some communities in Victoria experiencing poorer mental health outcomes and what needs to be done to address this?

The outcomes are directly related to the care factor exhibited by the staff at the centres. Care in rural communities can be as beneficial as in other areas if the staff are seen as caring.

What are the needs of family members and carers and what can be done better to support them?

Supports for individuals should be made before they are discharged.

What can be done to attract, retain and better support the mental health workforce, including peer support workers?

The care factor is paramount. Kindness can be symbiotic and can be as enjoyable for the carer as it is for the patient. It is the frustrations of not being encouraged to care that hold back many people's enjoyment of their roles.

What are the opportunities in the Victorian community for people living with mental illness to improve their social and economic participation, and what needs to be done to realise these opportunities?

Susceptible individuals need to be helped preemptively. It is not acceptable for a patient to be discharged and then to say it will take three or four weeks for the paperwork to get done for that person to receive financial or housing support.

Thinking about what Victorias mental health system should ideally look like, tell us what areas and reform ideas you would like the Royal Commission to prioritise for change?

"The psychiatrists must be held accountable for their decisions. Those decisions must be based on sound reasoning. Psychiatry is NOT an exact science but the guidelines for diagnosis are in the form of internationally accepted criteria as outlined in the DSM V. Psychiatrists should be made to familiarise themselves with the criteria required to make a diagnosis and this will lead to a reduction in inappropriate "labelling". Similarly the care of patients is subjected to the Mental Health Act and psychiatrists should be made to adhere to the principles as set out in the Act. Stronger penalties should apply for those psychiatrists treating the Act with contempt. It is unrealistic to expect a patient suddenly put on an involuntary Treatment Order to know his rights. A social worker or similar from an external independent source should be made available within 12 hours of someone being placed under a Treatment Order. Every patient who requests a Mental Health Tribunal Hearing should have immediate legal aid available to discuss the requirements of the Tribunal. The patient must be able to have legal representation at the Tribunal. Any changes to the timing of the Tribunal must be made in a mutually acceptable manner so that the treating psychiatrists cannot then take advantage of a lack of available legal representation by the patient. The Tribunal should ensure that appropriate questions are asked of the treating psychiatrist to ensure they have a justifiable reason for the Treatment Order, regardless of whether the patient makes a plea in this regard or not. It must be made absolutely clear to the patient and his legal representatives of the courses of action open to the patient to question the Tribunal either in the running of the Tribunal or its findings. "

What can be done now to prepare for changes to Victorias mental health system and support improvements to last?

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Is there anything else you would like to share with the Royal Commission?

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