

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

Organisation Name

N/A

Name

Mrs Donna-Louise Wilson

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

"It is an illness that can affect anyone at anytime, and that it is not always associated with alcohol or drug abuse."

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?

"Gp's need to act immediately if a patient presents with suicidal ideation. Do not let them walk out of their office without implementing care. I turned up 2 times before I was taken seriously. Better access to private health services including physio, massage, yoga on a mental health plan. A personalised mental health package made available through the private health providers tailored to the individual's needs. Psychologists need to be readily available and better access to CAAT. "

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

Talking about it and meeting others who have survived suicide helped me realise I wasn't alone or that you can survive and once you have the thoughts doesn't mean you are a ticking time bomb. Advertising a suicide survival guide for those who are suicidal or for those who witness that someone is suicidal.

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.

"GPs, psychologists and psychiatrists need to work as a team. Pharmacists need to be involved and take more responsibility in ensuring the medications are available when needed. I don't know how bad I was until I couldn't speak and walk and lost excessive weight and didn't eat for 6 days. Luckily a friend of mine was a psychiatrist and she had me admitted into the CAAT care until a hospital bed was available. She explained to me what was happening to me as I didn't know. I was three days away from the date that I was going to kill myself. She literally saved my life."

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

I am out of pocket for all of my psychology beyond my \$400 private limit. I am having to self fund my care and weekly psychology appointments. A young friend I met in hospital can't afford this and has had to go without. I would not be alive today if I was still not seeing my psychologist 2 years post trigger event. My psychologist is actually not a qualified psychologist by credential despite offering CBT and psychotherapy so her services are not covered by private insurance

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

"Financial support given how can't work. Psychology support for family members. Home help with house work, shopping etc Specialists to support children whose parents are suicidal. The WorkCover process has been said to be so detrimental to ones mental health that applying for it takes years and is counterproductive to the patient's recovery."

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

More opportunities for each element of the workforce to work as a team for the individual. They all work individually and do not talk much to each other.

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?

"Suicide support groups like Alcohol Anonymous. Meeting people who have walked the suicide path. Employment needs to understand the healing process is years not weeks or months. Return to work opportunities need to be very flexible, not compulsory based on individual circumstances. "

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?

"Access to weekly psychology for an extended period of time like 3-6 months minimum once identified as suicidal Carers allowance Sick leave allowance of sorts as I can't work and the lack of income and ongoing medical expenses are crippling. A caseworker, who actually looks after the big picture of services and medical workers that may be needed something like CAAT on an ongoing basis."

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

"Educate society about warning signs, of suicidal ideation. The difference between thinking about it and being deep in the hole or in a dark place are very different. Promote healthy mental well being habits like a slip slop slap advert, tell the community what they can do to develop mental well being. Educate the community on the language around mental health, I didn't know what words meant like: psychosis, "

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

"There are many loop holes in the system, and I and those I now know that are in the system take advantage of the system. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]