



Royal Commission into Victoria's Mental Health System

These notes are a contemporaneous record of the interview that took place between [REDACTED]. They are not intended to be a complete record of the interview and have not been edited beyond fixing minor typographical errors and editing in parts to ensure readability.

Interview with [REDACTED]

First contact with the mental health system

- 1976 – sister got me in contact with psychiatrist
- Didn't like going, doctor said can come in voluntary, hard road to get out if involuntary
- Lived with parents for a while and refused to take medication, did bad things because not on medication, trying to make amends now
- Went overseas, ran out of money, in countries that didn't speak the language
- Lived with parents again, paid debts off
- Marriage break up, Professor [REDACTED] sat and listened
- Lost licence, driving on Ring Road, wasn't arrested but gave up licence
- Travel around Victoria for free on public transport now
- Brother has passed away and brother in law takes care of day to day things
- Saw [REDACTED] from the local area, local psychiatrist – excellent, tells me to "always say g'day"
- Helps with depression
- New psychiatrist, other psychiatrist moved, going well so far – close to home
- Asadi – always be positive, say that you are excellent when someone asks how you are – worked fantastically

Hospitals

- 2008 – suicide attempt – police saved my life, they sat me down and talked to me and did a fantastic job, couldn't speak of them highly enough
- They haven't got the training, great benefit to people in my condition to have emergency training

Living circumstances

- Living in a unit owned by twin brother
- Council come in (NDIS) personal care (shaving), home care (cleaning), going for gardening, home maintenance and shopping – hoping that through NDIS get these things
- Brother-in-law helping with paperwork, even he found NDIS forms daunting
- People with mental illness maybe need someone to go through paperwork with them and help them figure out what they are entitled to



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- I didn't acknowledge that I was unwell at first, I thought that I was fine
- [REDACTED] wrong, needed attending to
- With medication it has helped, not the whole answer but part of the formula, church, family, friends who are honest with you, patron (artwork) doing something I love and getting paid for it
- Painted my house, thought I was an artist
- Incident with painting on walls - explained to the doctor what happened to us, doctor said those kids have been punished enough
- Magpie the cat, I know when I'm unwell because he's unwell, he's always at the front door waiting for me
- If I'm supposed to be drawing, the cat will go to the studio – inspiration and motivation are two key areas of schizophrenia that aren't acknowledged, two key factors. Not motivated and not inspired
- Takes a period of time to do a piece of work, work through the night on a piece of work.
- What I've been doing through the day, thinking and dreaming. Tea ceremony and meditate. Helps me to be inspired.
- 3am was creative window.
- Arts Access support me and look after me and sales for me. At the moment sales will go straight to rotary.

Recommendations

1. More early intervention – community nurse, instead of going to the doctors straight away, go to a community nurse straight away, he's staying up all night and talking to himself and needs to see someone (not diagnose first – no need), looking at it straight away
2. Stigma means that people don't apply – confession a good idea in one sense because they got it off of their chest and they respond to it. Reconciliation and acknowledgement two parts of going to the police. If people could speak about what was happening to them then they could seek help (early intervention).
3. People being treated like adults – aboriginal people treated like teenagers and what they say is not acknowledged, but disregarded
4. More respect
5. Took away the hospitals and had nothing to replace them with, retreats available around Victoria (secure but in a retreat setting), not enough community care, good idea to get rid of the hospitals
6. No problems with the system in particular
7. Survey of people dealing with the mental health system – need to get a more accurate estimate of people using system. Tailor a system that works for more Victorians.
8. Indigenous children – need elders to have experience in mental health, know what to look out for and how to treat it/deal with it

Dated: { DATE \@ "d MMMM yyyy" }