

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

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Name

[REDACTED]

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

"Education . Teachers, anyone providing services for children ie: coaches etc, to be trained and equipped to identify and diffuse potential immediate safety concerns. To educate public in general that mentally ill children may affect your child and how they can be instrumental in not alienating or being fearful of the child by giving strategies to help by being understanding that it's no different to a physical disability. "

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?

Nothing can really prevent mental illness there is obvious triggers but no one really understands the varying reasons or degree as mental illness covers such a broad spectrum. I did not experience understanding or help for my daughter as she presented very young and when she did begin therapy finally it was only once she'd attempted suicide many yrs later. I was not listened to and the therapy was useless due to the much later discovery that she required medicating which I had to reach out to other agencies to identify and assist.

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

Every time my daughter has attempted suicide by many varying degrees her current therapists were contacted and they told me they could do nothing and told me to take her to the emergency department which I have done more than five times only to wait up to 7-8 hours for a psych register whom I found more helpful and resourceful . Her own therapists ([REDACTED]) never even followed up to see how she was doing. The therapists are clueless to the real issues for young ppl and come across so out of touch with the issues that haunt these kids minds and don't listen to the parents intuition with potential triggers and the real issues for these kids. They don't believe the child to be capable of the manipulation lies and deception very often associated with these children's conditions.

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.

"That no one believes the parent until it's too late. The child not being forthcoming about their feelings of despair. The child not wanting to or capable of telling the truth some harm for pleasure , pain , hurt or anger. Some because the voices told them too. The children's hosp the police and emergency departments were helpful after the fact but I found out about necessary services through a teacher at her school after expressing my utter frustration with my dealings with [REDACTED] [REDACTED] A full diagnostic treatment center like America has to ensure physiological, brain scans , chemical etc tests are available to ensure the whole child is evaluated and individually given a

treatment and care plan. "

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

Isolation prejudice up bringing expectation financial homelessness too many list... not the right type of care. Not every mental illness requires talk therapy it may help in the long term treatment but not the symptom. People need to realise a desperate person will do desperate things. Some things aren't able to be fixed being poor homeless vulnerable being a single parent makes you subject to persecution by ppl who say they mean well but kick you while your down when your just doing your best to keep them safe or warm or their family together etc. please tell me what can be done. Ppl with less degrees and more life experiences into these jobs?.. sounds like a great place to start. Ppl who listen and are prepared to get their hands dirty to get to the real issues. Not patronising tones of voice and helping when it's actually needed just to state a few.

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

"The affects on the other family members. to really listen and effectively take action to ensure safety support resources and ppl to talk to . To not undermine you, to have someone meet you at hosp in crisis situation not to be told if they're misbehaving the police will b called the psych services should have specialists teams of doctors that only deal with psychiatric medical care. Inpatient units are always full and if your child has self harm issues they are declared ineligible to impatient unit as there's no access to dangerous items there. It seems as long as my child is only trying to harm herself or harming family members it's okay. School hospitals publicly this is absolutely not tolerated so families are the real mental health workers whilst our other children are exposed to the varying psychotic breaks attacks or dysfunction that it entails day to day. No one cares. "

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

"People who have life experience , more community resources for kids to participate in interests. Knowledge of peer support workers I found out co/ police. State of the art new diagnostic and recovery treatment centres. Have consumer consultancy reviews of services every two years. They don't work for the service they work to improve the gap between service and clients and families. Have ppl who are prepared to take the walk with the families or the child instead of treating them as just a client . A good model is the neuropsychology Dept at children's hosp they to date have been the only light through the darkness for me and I can't follow on with them because we were zoned to [REDACTED]. "

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?

Other than head space and the odd tafe placement not much. Most in our area pan handle scab smokes or money and most ppl are scared of them or find them a nuisance. Some are aggressive and met with security or police protocol when most just want someone to listen or care . Homelessness and lack of financial care or social responsibility welfare organisations harshly demonise many mentally ill ppl they get black listed or find the expectations of the government to qualify for pensions harder than just living on the streets often the decision to eat will supersede

the need for medications. How do they go to school with such adverse behaviours ...let alone work ? The issues facing these ppl are so vast so diverse so life threatening so crippling all consuming to the ones that function at a reasonable level but require Support and understanding when overcoming challenges or need the odd mental health day off . How do u change attitudes and discrimination?

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?

"A super center .. state of the art research treatment and diagnostic centres with everything under one roof . One for children one for dual diagnosis drug n alcohol associated mental health and one for adults with resources for help ,medication, programmes run in service and externally . This should include links to social security housing schools etc medical facilities 24 hour support , no more zoning centres should be avail to center equipped to deal with conditions not one size fits all. Carers /pensions for parent caregivers should not be cut off at 16 and then given to child it should only be reviewed and given independently if young person moves out or turns 21 as is the considered age of a mentally ill child to a legally recognised adultS. "

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

Get the best minds the newest technology the resources equipment the focus groups the community groups the funding the ones eager to be driving force to take mental health into dynamic areas never seen before. With a focus on the individual as a whole clear directive on relevant services and better hopefully life changing out comes care therapeutical settings stays and therapies individually catered and fully funded. Not privatised organisations public regulatory standards and transparency a service for the ppl by the ppl .

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

I've felt chewed up and spat out by this system so many times. Primarily for my child but the experiences are so many that I feel traumatised and at times mentally scarred by a system I find untrustworthy non personable frustrating difficult to navigate for the services testing and management strategies. The care feeling heard etc and if I'm the mentally well one where does this leave the mentally ill?