

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

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

"Mental health issues are often seen as shameful by those with mental health conditions and those who care for them because unlike physical health issues, mental health issues are difficult to diagnose and treat (if the person is lucky enough to have access to and can afford a mental health practitioner), not well understood by the community and often result in behaviours which are either illegal, violent, socially inappropriate/awkward or require endless patience and understanding to continually deal with and support loved ones. Therefore, to improve the Victorian community's understanding and tolerance of the issue, they need to be better informed as to why people suffer from mental health issues, have a better understanding of the different mental health conditions and be guided as to how to best support the person they know with mental health issues. Supporting a loved one with mental health issues will depend on a number of criteria, how old is the person suffering mental health issues, how well do they know that person, is that person seeking help already, are their issues life threatening or not and their location (so they can be guided as to what professional help is available). An easy to understand and well promoted Victorian Government "one stop shop" web site could be established which provides the following key information (or links to other resources) would help provide a one stop shop to understand mental health conditions and what resources are available to help: - a brief description of different types of mental health conditions; - where to get help at various stages of severity of mental health conditions. This should include not for profit agencies (such as Beyond Blue, Orygen, Head Space), a list of psychologists in Victoria and their specialties (eg eating disorders, bipolar), psychiatrists and their specialties, a list of private clinics and how to access them, a list of public mental health facilities (including whether they are for children or adults and what regions they service), psychiatric triage details and when to use them, what to do in the event someone has told you they are feeling suicidal and advice on how to have conversations with someone you are concerned about. (ps It would be helpful if the website was attractive and didn't look like a government website!)"

### **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?**

"Not for profit organisations such as Beyond Blue, Orygen and Head Space are well known and accessible however, they do not have sufficient resources to meet the demands placed upon them. Therefore, organisations such as these need to be provided with greater Government funding to meet the needs not provided by the public health system. Prevention of mental health and support of people to seek early treatment is a factor of: - the ability of the person or those around them to recognise they need help; - an understanding of where and how to seek help; - the availability of resources to provide help; and - the cost of seeking those resources. If the community is better educated in the first two factors (through schools, online forums and people speaking more openly about mental health issues), then it is up to the government to ensure

sufficient resources are available to help people and it is affordable. "

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

"Very little is working well to prevent suicide. Currently, if someone has made an attempt on their life, they are taken to an emergency department at the closest hospital, treated, maybe seen by a mental health nurse and then sent home. There is no follow-up, assistance or treatment path provided to the patient or the carers - everyone is left on their own wondering how to deal with the situation which has just happened and terrified of when and how it may next occur and what they can do to stop it. Public hospitals have very few if any mental health professionals. Patients who are admitted to hospital for mental health related conditions in non life threatening situations (such as Eating Disorders) will not see a mental health professional, even if they show significant signs of significant signs of depression and that help is continuously requested."

### **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.**

"There needs to be many more mental health professionals in both the private and public sector in Victoria. Even when the patient has financial resources, it is extremely difficult to find psychologists and psychiatrists who have capacity to take on more patients. In addition, admissions to private clinics are difficult as it may be to a clinic that your psychiatrist is not associated with (requiring an assessment with another psychiatrist at a cost of \$550!) and there may not be any available beds in private clinics as they are in high demand. The public health system is even worse. There are very limited, if any beds available and the facilities are embarrassing. Patients aged under 18 are zoned to substandard mental health facilities such as [REDACTED] at the [REDACTED] Hospital. It is disgraceful that in a public health precinct that boasts a modern public health facilities such as the [REDACTED] Hospital and the world's best practice Cancer [REDACTED] Centre, Victorian adolescent children who are in desperate need of the best mental health care possible, are placed in a dark, old and antiquated building which is more than 100 years old, with the most basic decor that would not be out of place in the 70s and a rundown outdoor space. This is not exactly an environment where adolescents feel like they are loved and cared for, be focused on recovery and start to feel good about themselves. There should also be more beds provided in public hospitals (or some other public health facility) for children with eating disorders. Those wards should be separated into ages 14 and under and 15 to 18 so that children can be: - self supported by age appropriate peers; - provided with a better out of school education program. At the moment, there is a generic education program provided for a few hours a day for all children. This does not provide enough support for older children (in Year 10 to 12) to be able to continue their studies during the 4+ weeks they will be in hospital. The very likely outcome of them not keeping up will exacerbate their isolation from society and their depression. They must be given every chance to complete their studies and the. See also suggestion re website at question 1."

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

"School age children experience significant mental health issues because of either: - not meeting their own or parents expectations; - physical or online bullying; - social isolation because they perceive they are different, or - suffering significant disappointment. These are all different problems but children need to be fully informed how they can seek help for both the cause and the

mental health outcomes. This could be either at school or outside help. Every child should have a self help ""cheat sheet"" with agencies, web sites and phone numbers they can pin up at home. For poorer Victorian adults, one of the biggest issues facing patients with mental health issues is the lack of public housing. If mental health sufferers can remain housed, they are in a community and are therefore more likely to have better mental health and seek help for their mental health issues. Furthermore, they are more likely to retain their dignity, are less exposed to physical risks and drugs and have a greater chance of being employed. There must be more public housing provided by the government to overcome this problem and in the end it is a cheaper option than trying to recover the broken life of a homeless person with mental health issues. There also needs to be more mental health professionals in both the public and private sector. There is nothing more devastating for carers than after finally getting an agreement from a person suffering mental health issues that they are happy to seek help than being told by every psychiatrist you call that they either are not taking more patients or they will see you in three months time. "

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

"Family members and carers are the silent victims of the mental health epidemic. The impact on carers and family members of dealing with a person with mental health issues is long term and profound. The impacts on carers and families include: - households no longer become safe havens; - everyone in the house is treading on ""eggshells"" depending on the mood of the mental health sufferer; - money and valuables are stolen to fuel addictions; - family members are physically and verbally abused; - possible instruments of self harm have to be locked up; - family members being scared to leave home in case the mental health patient suicides or self harms resulting in loss of employment and no social activities; - family members and carers have to protect and help their loved ones who have attempted to suicide (sometimes multiple times) and sent home from the ED to manage volatile and unstable patients by themselves whilst managing their own grief and sadness; - carers spend hundreds of hours taking patients to appointments and in waiting rooms (sometimes waiting up to two hours after the appointed time to be seen) for the struggling public health system to deliver their service; and - carers spend thousands of dollars on health professionals and medications and loss of employment income whilst they care for their loved ones. It is also very difficult for carers and family members to talk about their experiences and situations because a) people who are not in that situation could never be able to understand what it is like and b) carers and family members often don't want to make a big deal of it because it adds to the guilt, shame of their condition and sadness of the mental health sufferer. The best way to help family members and carers is to: - have a public and private system that can be easily understood and navigated; - have enough resources so that carers can easily find the right help - for carers of patients with complex or life threatening mental health issues, provide support for them through the establishment of a mental health liaison co-ordinator service. This person is not solely a counsellor to the carer and family but someone who can provide advice as to how and where the patient should be managed and fast track patients receiving that help. If there was a better and more efficient mental health system and carers felt supported by someone, they will hopefully be able to get some of their own lives back on track. This will make them feel happier and more able to cope. "

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

Providing a better resourced public system (through recruitment of more professionals on better

pay) will make everyone's jobs easier.

**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?**

"If the community had a better understanding of mental health issues, people would be more willing to talk about mental health. When people in the community talk more about mental health they will realise how many people suffer from mental health issues and how many people (carers and family members) are affected by mental health. This would remove a lot of the stigma around mental health and normalise it. It is critical that people with mental health issues are provided with as much opportunity as possible to be able to study and work. For study opportunities, this may mean that tertiary institutions be highly flexible with respect to their admission criteria (ie young adults who have suffered diagnosed mental health issues) to generic courses such as Arts and Science through a quota system, no minimum ATAR or adding a set amount to a mental health person's ATAR. The Government could encourage mental health sufferers to study with a half price HECS for students with diagnosed mental health issues. The cost of this scheme would be outweighed by reduced mental health treatment costs and that person be able to join the workforce as a tax payer far sooner than they would otherwise. These approaches would be far more transparent than the current special consideration (as it applies to mental health patients) is. For employment opportunities, providing employers with a rebate for employing people with diagnosed mental health issues would encourage employers to be aware of, (ie be tolerant) and employ people with mental health issues. "

**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 ""one stop shop"" website solely dedicated to mental health and the Victorian mental health system (refer question 1) to educate the community and provide information to mental health patients and their carers and supporters More psychiatrists More psychologists More and better quality adolescent mental health facilities More and better public and private adult mental health facilities More eating disorder beds (with better education programs for young adults to enable them to continue their education) Concessions provided by tertiary facilities and with employers to enable more mental health patients to study and work Better formalised support for carers and family members More public housing"

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

"Given the Royal Commission is about to occur, it would be premature to pre-empt its findings with any course of action now. The issues need to be fully understood, prioritised and solutions found. However, the Victorian Government MUST ensure they they are prompt in executing the findings of the Royal Commission and ensure they are fully funded."

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

Thank you for providing a forum where mental health patients issues and those of the carers and families can be heard and give them hope that their lives will become easier.