

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

SUB. 0002.0018.0038

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

Greater community awareness of eating disorders through- -education in schools -television programs eg ABC program - You Cant Ask That -general community awareness that eating disorders are not a life choice but rather an extremely complex and severe illness

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?

"Things that are working well/ or will work well once introduced- -The introduction of 20 visits per annum to dietitians and mental health practitioners -Eating Disorders Victoria and Butterfly Foundation websites which contain lots of relevant/helpful information -Beyond Blue messages in public toilets What can be done - -Early education in primary schools about body image and balanced eating (rather than just focussing on ""healthy"" foods to avoid obesity) -General community education through awareness campaigns to reduce the stigma of all mental illnesses - Clear, accurate information in the media about balanced lifestyle rather than constant focussing on dieting -Expansion of the Peer Mentoring Program for those suffering from eating disorders - Greater awareness of symptoms of eating disorders -More facilities and resources made available specifically for eating disorder treatment -More promotion, with practical, lived examples, that recovery is possible"

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

N/A

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.

"My experience has been that the health team is not cohesive and that there is a real lack of understanding in the medical profession and associated services about eating disorders, in particular, and what services are available to help sufferers. For example, my daughter has been suffering from Anorexia Nervosa for 9 years and I have only just become aware of the allied services offered by Alfred Health in our area. Even our local, caring GP mustn't have been aware of this service, otherwise I believe she would have recommended our attendance. Had I known of this service at the start of our eating disorder journey, maybe recovery would have occurred by now, rather than the eating disorder, and associated anxiety, depression and OCD being so entrenched in my daughter that she feels hopeless and is refusing treatment. I feel health care professionals, in general, need to be much better educated about eating disorders. For example, about 8 years ago my daughter was not only restricting her eating, but also her fluid intake. I took her to Emergency, in the hope of getting support/treatment, which would hopefully make my daughter realise just how seriously she was harming herself and hopefully give her a ""wake

up"" call, as we were in the early days of her disorder. Instead, my daughter had to stay an hour or so in Emergency, until she had drunk about 300mls of water and was allowed to go home. I was made to feel we were just wasting the staffs' time and here we are some 8 years later and my daughters health is quite dire. On the face of it, there were probably many other people more deserving of treatment, however it was clearly overlooked or misunderstood (through lack of training) that my daughter was also deserving of treatment also. If the treating doctor was better educated in eating disorders, the outcome may have been different. On another occasion, my daughter had developed a 24 hour gastro type sickness. With already being severely undernourished, she collapsed when getting out of bed. I rang an ambulance, and advised the operator what had happened and that my daughter had anorexia. She then advised it was probably just low blood pressure that caused the collapse, and the wait for an ambulance would be 2 hours. Again, due to ignorance about eating disorders, on the part of the operator, the system let us down. If my daughter had been admitted to hospital at that point, she may have received the treatment that she needed to get her on the road to recovery. "

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

N/A

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

"Family members need to have information and access to education about the illness and what they can do to assist the sufferer. Currently, information and education seems patchy and not necessarily easy to access. In the example I gave earlier in this submission, I have only just found out, after 9 years, of the services offered by Alfred Health, which I believe would have been extremely helpful we had accessed it in the early days of my daughter's illness. Helplines are very good, if you can actually get through! On several occasions I have rung the Butterfly Foundation and Eating Disorders Victoria helplines but, I assume that due to lack of funding, there is just a recorded message. If you are desperate enough to ring a helpline, you want to speak to someone NOW, not leave a message and hope they will ring back at some unknown time. On call services for home visits would be very helpful. My daughter is unable to attend a GP or other health care professional to receive the help she so desperately needs, as her anxiety (caused by the eating disorder) levels are so great she can't even sit in a waiting room. "

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

N/A

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?

"- Ensuring employers are well educated in relation to mental illness - More opportunities for meaningful volunteering, by providing support for organisations to take on volunteers with mental illness"

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?

"-Relevant, on going training for all health care professionals e.g. Training for dietitians to focus more on eating disorders rather than primarily on weight loss/obesity. -In particular more education for GPs as they are usually the first point of contact when presenting with an eating disorder - More funding for helplines, in patient and out patient eating disorder facilities, and home visit consultations for those unable/unwilling to attend conventional treatment centres due to the anxiety component of their illness -Education of the general community and school children about mental illness awareness, which would hopefully remove the stigma and enable sufferers to be better supported by their friends and community in general. "

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

"-Ongoing education of health care professionals -Education of school children about mental illness -Advertising campaigns to destigmatise mental illness -Positive messages to demonstrate support is helpful and recovery, where applicable, is possible"

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

"My daughter developed her eating disorder at age 15. When she turned 18 I was excluded by the health care professionals she was seeing at that time from being involved in her treatment program/attending consultations unless my daughter gave permission. Eating disorders are extremely secretive illnesses, so this just played into the eating disorders hands. I believe this was detrimental to her progress and extremely frustrating as her parent/carer. I have spoken to many other parents who have had the same experience. Could the commission look at the rights of parent carers in these situations with the view to there being some flexibility afforded by health care professionals in such situations where the parent has been involved in treatment prior to their child sufferer turning 18?"