

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

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Name

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

The Victorian public needs to be educated regarding the fact that mental illness is an ILLNESS. Because it cannot be quantified it is difficult to measure appropriately. We need to realise that we can't support adequately that which we do not understand. If we could understand that it is an illness like any physical illness then we would make some progress.

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?

"If we could have all teachers in schools to understand mental illness that would be a start. There needs to be many of us being prepared to be mental illness first aiders. I can't stress enough the education of the community. There needs to be adequate venues, which are known to ALL, to meet the community's needs. There needs to be fewer individual services around the state so that we know who to contact instantly when things are not right. We need an instant response from these services. When you need one you really need it."

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

Orygen's programs are good but their service is not available to everybody. We are fortunate. Their model of care in the adolescent sphere works well but it is under resourced and under a lot of pressure. The internet work that they are doing is good too but there still needs to be more help available when a person is in that position. Again education of the public just being aware would be helpful.

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.

"We are fortunate in that we live close to ORYGEN and can access their care when we need it. I don't know what it would be like if I had not known about them. They turn away many people, 1 in 4, from their under resourced system so what happens to these people. Headspace is great but also under resourced. Every parent or indeed person should know about how to get in touch with professional help when it is needed. There is little value in being told that you can't be seen for weeks or that you can't be seen at all. Emergency Departments are not the place to learn about this. There needs to be an interconnected service that is statewide and easy to access. It shouldn't be lots of different services duplicating their work depending upon where you live."

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

Country areas are really disadvantaged because of the distance and availability of services. They probably need additional services within the area to cover the problems because they are

desperate for assistance. There is really no point being stoic in these areas because they really need help. Communities with peer support workers may be the way to go but every life in Victoria is valuable and they need the best care available within the community as well. There are not city people and country people. It is not them and us. All Victorians deserve world standard care.

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

"Families are being torn apart by a system that does NOT include them in care. Once a person is over 16 years of age there is little opportunity for a parent to know what is happening to their child/adolescent/adult. This does not happen with any other facet of health care where there is family involvement. When someone in the family has a mental illness everyone is affected but we don't really know what is happening and why. There should be the ability to have a family briefing/meeting to discuss what is happening and why. This doesn't really exist at present. For the most part it is the families who are most aware of what is happening to the mentally ill person. I am a registered nurse who knows the system but I feel like it has failed us terribly. If I knew what I now know in the beginning I would have been more proactive. We need more services, more visits when the person is in crisis and everyone needs to know what is happening to their child."

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

There needs to be good support for workers within mental health care. There should be lots of debriefing and care for the carers. We are very bad at this because we can barely provide care for the person with mental health issues! Education must be continuing and supportive and must meet the needs of these people. We need the right people for the job with no bias/prejudice. It needs to be structured and also be tailored to individual needs -flexible.

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?

"ORYGEN does have these programs but we haven't accessed them. I think that my son would benefit from them but perhaps he is too acute at present??? No doubt they do appear to help. Working is a normal part of life and would benefit so many people who suffer mental illness. There needs to be a plan for everybody about how their recovery may be effected. A statewide "plan" may be helpful."

Thinking about what Victoria's mental health system should ideally look like, tell us what areas and reform ideas you would like the Royal Commission to prioritise for change?

"I would like there to be access to all who need mental health care. It needs to be holistic and care of the families should be a priority. This should include ways in which we can help the person affected to gain control of their lives again. 10 sessions a year is clearly ridiculously few. There needs to be no limit on what is needed. Fortunately we can pay but for those who can't it is a very inappropriate number of sessions. Do people with COPD or heart disease or diabetes get locked into a number of visits. I don't believe that they do. We need to educate the public on what mental health issues are and how to get access to the services provided. We need to have a degree of uniformity provided so that any of us at any time know who to contact when required and there needs to be a 24 hour, 7 days a week service available to everyone with a real person at the end of the phone. Mental illness is not a 9 to 5 Monday to Friday problem! The services must not hang

on to clients and not share information with other services. There needs to be communication. There needs to be a lot more services available for ALL Victorians."

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

Education of the public. Education of mental health care personnel. Encourage holistic care. Allow parents/siblings to know what is happening to the person with mental health issues. It is all so scary to us too. There needs to be inbuilt rises in money spent on mental health which keep up with the real world situations so that we never are in this situation again. We need a commitment from all governments to do this. People need treatment so that they can get back to work / study and not spend their adolescent years in a fog. No limit to the sessions of care available. Not 10 sessions.

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

"My 20 year old son has been suffering from mental illness for almost 5 years. Headspace helped a bit but it was not enough. 10 sessions a year is ridiculous. I think that had he been properly sorted out initially he may not have gone down the path that he is now on. His week of care at the Royal Melbourne Hospital was appalling. First was the switchboard operator who spoke to me as though my son was some "Looney". Her manner was disturbing. When I pulled her up on her attitude she was at least pleasant but the damage was done. Then I was put through to the ward and spoke with the nurse in charge. He took a very adversarial position and didn't even listen to what I was saying and hung up on me for reasons known only to him. Because i trained at the hospital I spoke to people there about the situation. Two days later the resident called me to tell me all that had gone on with my son. When I pointed out that I was apparently on a "no information list" he said "Oh Fuck". The whole situation could have been handled better. This is the kind of thing that happens to parents on a regular basis across the state and it shouldn't. Everyone needs to be on the same page and everyone should be educated about mental illness. I was made to feel like a third class citizen because of my sons illness. As a result my son moved to a relatives home to stay. After a period of 8 months he has returned home and is doing all right with the love and support of the family. He talked about the situation and said that he realised that I was hurt in the process and that he didn't intend that. Eight months of hell on earth. Not knowing what was happening to him but continually caring for him."