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Submission to the Royal Commission into Victoria's Mental Health System

We welcome the opportunity to share our experience and expertise with the Royal Commission.

Social Security Rights Victoria has provided legal assistance to thousands of Victorians seeking to navigate the social security system. Many of those clients live with mental illness.

Although the social security system falls under Commonwealth legislation and is administered by the Federal Government, Victorians living with mental illness who experience difficulties accessing that system face significant economic and social detriment. The cost of those access barriers flows on to Victoria's mental health system and, more broadly, to the State of Victoria.

As such, we believe the following observations and recommendations fall squarely within the purview of this Royal Commission.

About us:

Social Security Rights Victoria (SSRV) is an independent, state-wide community legal centre that specialises in social security and related law, policy and procedure. Our vision is a fair and just society in which all people are able to receive a guaranteed adequate income in order to enjoy a decent standard of living. SSRV's contribution to this vision is the provision of legal services to vulnerable and disadvantaged Victorians, and those that support them, which assist them to secure and protect their right to equitable social security entitlements.

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Three systemic issues:

This submission will address the following systemic issues – chosen because they best demonstrate the intersection between Victoria’s mental health system and the Commonwealth social security system:

1. How Newstart Allowance activity requirements and medical exemptions affect Victorians living with mental illness;
2. How the Disability Support Pension eligibility criteria and application process affect Victorians living with mental illness; and
3. How barriers to Centrelink benefits affect a wide range of Victorian Government funded services and the Victorian community.

After a brief explanation of the relevant law and policy¹, the bulk of our submission will comprise the stories of four SSRV clients living with mental illness who’ve experienced systemic barriers to social security support. We will conclude with seven recommendations to ameliorate the adverse effects of those systemic shortcomings.

Newstart Allowance and mental illness:

Across Australia there are 722,923 Newstart recipients of whom 200,000 are sick or disabled. However, Newstart Allowance is not meant for people with disabilities. It is designed as an ‘allowance’ of approximately \$40 per day until the recipient finds work. Living with a disability has expenses which a Newstart Allowance does not cover. People with a disability in Australia are 2.7 times more likely to be at risk of poverty than in other OECD countries.

Newstart Allowance is considered an ‘activity-based payment’. This means that recipients are obliged to undertake reporting, work and training requirements called the ‘activity test’ or ‘mutual obligations’. If a recipient does not comply with these requirements, their payment may be suspended, or cancelled, or they may be penalised up to eight weeks without payment. For people living with a debilitating mental illness, complying with the activity test is often difficult or impossible.

Where a recipient cannot comply with their activity test because of a health condition, they can apply for a medical exemption. To apply for an exemption a Newstart recipient is required to attend their GP, who must complete a Centrelink medical certificate form. They must then submit the form to Centrelink and hope that it is accepted.

Problematic to many Newstart recipients living with mental illness is that for a medical exemption to be accepted, the condition must be either temporary or an exacerbation of an existing condition. For someone who has been struggling with a mental illness for years, when their GP writes on the form that the condition is permanent – the exemption will not be valid.

¹ Much of the content on law and policy has been reproduced from fact sheets of the National Social Security Rights Network, of which SSRV is a contributing member. The original fact sheets can be found here: <http://www.nssrn.org.au/factsheets/>

Even if the exemption is accepted it will only be granted for a maximum period of thirteen weeks. At that stage the recipient may apply for a further exemption. However, a further exemption may not be granted where the medical certificate lists the same condition as listed on the previous certificate or if the certificate states that the condition is permanent or likely to last more than two years.

If a Newstart medical exemption is not granted, the recipient has three real choices. The first is to cease receiving payments. The second is to comply with the activity test. For many people with a debilitating mental illness, neither of these choices is an option. The third choice is to apply for Disability Support Pension (DSP).

Disability Support Pension and mental illness:

Over 4 million Australians have a disability and over half of them are of working age.

Notwithstanding this, over the past five years, the number of DSP recipients has fallen from 832,024 to 750,045. This decrease is not because there are less people with disability, or less people applying for DSP. It is because the rate of successful DSP claims has declined. It has become a lot harder for a person with a disability to demonstrate their eligibility for DSP.

Eligibility for DSP requires that an applicant's condition is fully diagnosed, treated and stabilised, that the functional impact of their condition(s) meets 20 points or more on the 'Impairment Tables' and that they have a continuing inability to work for 15 hours per week or more, or to retrain for work, for at least the next two years. The applicant bears the evidentiary burden to demonstrate they meet the eligibility criteria.

The functional impact of mental illness is considered under Table Five of the Impairment Tables.²— To prove the applicant meets the requisite level of severity for DSP eligibility, the applicant must submit medical reports that address very prescriptive indicators. It is not sufficient for a GP to certify they have been treating a patient with mental illness for many years and they're not able to work. In accordance with the rules for applying Table Five, mental illness must be diagnosed by a psychiatrist or a clinical psychologist. Unless it is considered unreasonable, treatment would typically need to include pharmaceutical and counselling intervention. Depending on the duration of the treatment, the applicant also risks a ruling that it is too early to determine that the illness is stable – even if their GP has previously filled out Newstart Allowance exemptions stating that the illness is permanent and unlikely to improve.

Sadly, for many Victorians living with mental illness, access to a psychiatrist or clinical psychologist is limited by financial hardship, availability and wait times, or both – particularly for people living in remote, rural or regional areas. A more common scenario is that the applicant will have seen their GP or a registered psychologist for years, only to be told that neither is adequately qualified to make a DSP – related diagnosis.

Often mental illness is not the only health condition affecting a DSP applicant's continuing inability to work. Where an applicant has multiple conditions, their impact will often be assessed across

² <https://www.legislation.gov.au/Details/F2011L02716>

several Impairment Tables. It may be that none of the conditions warrants 20 points on one individual Impairment Table but greater than 20 points accumulated across several Tables. This is not a reason to reject a DSP claim per se, but it does trigger an additional requirement – namely that the applicant has actively participated in a Program of Support for 18 months over the last three years.

A Program of Support is a tailored program to help job seekers overcome barriers to employment. Medical exemptions from a Program of Support can be submitted, but for any period an applicant was exempt from their Program will not count towards the requisite 18 months for a DSP claim.

If an applicant is rejected because they have not been able to demonstrate their eligibility for DSP, they will continue to receive Newstart Allowance as long as they comply with their activity test or lodge another medical exemption. If that exemption says their condition is permanent – they will have to decide whether to apply for DSP again. Thus continues what one of our clients below has described as *“a highly stressful absurd circle of disrespect and unrealistic expectations of someone chronically ill”*.

Alternatively, if the DSP claim is rejected, the applicant can appeal the decision internally and, if still unsuccessful, to the Administrative Appeals Tribunal (AAT) tiers One and Two. For people living with mental illness, who may never have been involved in a legal process, this appeals process can further exacerbate the severity of their condition.

These policies and procedures are complex and confusing. Rather than delve any deeper into technical detail, in the following pages we would like to share a selection of client stories to demonstrate the real-life effect of the complexities described above.³

³ In most instances we have altered personal identifiers in order to preserve our clients' confidentiality.

█'s story:

Demonstrating: Newstart Allowance – activity test medical exemption rejected; DSP – legal interpretation of ‘fully treated and stabilised’; DSP – access to treatment; DSP – traumatising appeals process; DSP - reliance on service provider support.

█ is █ years old and lives with her parents in the outer suburbs of Melbourne. Until a few years ago █ was a talented university student with a bright future in the creative arts. Then █ developed chronic paranoid schizophrenia. She had to stop studying. She could not work. She now rarely leaves the house.

█ hears voices. Those voices protect her from the dangers outside her house and tell her that she must resist treatment if she wants the voices to help her stay safe.

█'s mother, who is █'s carer, has worked hard to find a psychologist or psychiatrist whom her daughter will trust. Finding a specialist who is prepared to do house visits is difficult – especially for a family with limited income.

Due to █'s inability to work, for almost two years she received Newstart Allowance. She presented medical certificates signed by the family GP to exempt her from Centrelink's job activity reporting requirements. In early 2018, Centrelink told █'s mother that if █ had a permanent health condition that prevented her from looking for work she would have to apply for the Disability Support Pension (DSP). Her medical exemptions would no longer be valid.

█ applied for DSP. Centrelink rejected █'s application. █'s mother helped █ appeal that decision to the Administrative Appeals Tribunal Social Security and Child Support Division (AAT). The AAT rejected █'s application. Both Centrelink and the AAT said █'s condition was not permanent because it hadn't been fully treated and stabilised.

█ was deeply traumatised by attending the AAT hearing and having her case rejected. █'s mother contacted SSRV and asked for our help.

An SSRV lawyer helped █ appeal the DSP rejection at the AAT General Division. SSRV made written submissions to the Litigation Team of the Department of Human Services (Centrelink's lawyers). The case settled in █'s favour before it went to another hearing. █ is now receiving DSP.

Here's █'s mother, telling her daughter's story:

“Before █ was receiving DSP, her life was extremely stressful. The arduous claim process with Centrelink impacted on █'s mental health in an adverse way. Dealing with Centrelink created massive triggers for █ that increased the frequency and length of her psychotic episodes. █ felt at times like killing herself and her distrust of people and paranoid and isolating behaviours worsened during this time. It also increased her aggressive voices through the fear of this process.”

“When a Newstart recipient with a severe mental health condition is required to lodge medical exemptions and is told her condition is too permanent for Newstart but not ‘permanent enough’ for DSP it creates a huge amount of anxiety and frustration for the entire family. It causes feelings of being unheard and disbelieved. The requirement to attend Centrelink every three months with a new medical exemption or in between times because of administrative errors such as requiring █ to attend a job appointment despite having a medical exemption caused a lot of stress. It was a

degrading process. Centrelink staff were at times dismissive. The blatant disregard of the medical evidence presented to Centrelink was also frustrating. The supporting medical professionals were horrified and they had to spend more time on it than necessary - and it wasn't resolved until SSRV got involved."

"Now that ■ receives DSP ■'s life is slowly improving. ■ now has time to heal without the pressure from Centrelink triggering her. She is taking medication a bit more frequently and this is an improvement from before. Her frequency of psychotic episodes is slowly reducing. She is not so alarmed every single day. The relief of the financial burden is helping a lot."

Before receiving DSP, ■'s parents were covering additional costs. "Now ■ has more choices. The little bit of extra money makes her life a little bit more liveable –even just being able to buy some new clothes makes her feel better."

The battle for support did not just affect ■.

"Life was stressful for the entire family," says ■'s mother. "It felt like our lives were on hold during this process. It is very difficult looking after someone with paranoid schizophrenia in and of itself – but having to fight with Centrelink at the same time almost tipped me over the edge. I had to be the pillar of strength in the house. It gets to you - especially when Centrelink is making mistakes all the time. There is no consistency when you are dealing with them. There needs to be more training for Centrelink staff to deal with people with mental illness. I worry about those people who do not have a carer – how would they deal with Centrelink. They would end up on the streets with no support."

The stress of the process brought ■'s mother to tears. It resulted in a loss of joy. She often wondered 'why does this have to be so difficult when ■ is so clearly unwell?' She was left feeling that it didn't matter what she said or did – it made no difference – Centrelink did not hear or believe her. *"We were treated in such an unfair way – it was obvious on the evidence that ■ was terribly unwell and Centrelink staff demonstrated no caring – to the contrary – it was almost like they had a disdain for people with mental illness."*

■ and her mother had a more positive experience with SSRV. ■'s mother says, *"SSRV treated ■ with kindness, sensitivity, patience, understanding and professionalism. The whole family could not have gone through this horrible process with Centrelink without SSRV's help. SSRV has been literally life-saving. SSRV believed in ■'s condition and made her feel heard, safer and supported. ■ is most grateful for SSRV's support."*

■'s mother feels relieved now that they've won and ■ is on DSP, but there is still a lingering fear. *"I'm worried that in a few years they will review ■ and kick her off the pension. I am trying to find ways for ■ to keep engaging with treatment – but her condition makes her not want to see anyone. I don't want to have to go through this process again."*

"Some people have the idea that anyone on DSP is a bludger. ■ is not like that. ■'s voices are very real to her. She wants to improve. She is a very talented composer. People still remember her for her music but the condition means she can't do that for now. I am hoping it will be a gradual process. My husband and I won't be around for ever. I hope and pray that within a couple of years ■ will improve and be able to live in the world – but at the moment I can't say for sure whether that will happen. It breaks my heart."

█'s story:

Demonstrating: Newstart Allowance – activity test medical exemption rejected; Newstart Allowance – cancellation; Newstart allowance - reliance on service provider support.

█ lives in the northern suburbs of Melbourne. He suffers from depression, anxiety and chronic asthma. He has been a patient of his local medical practice for 20 years where he is treated for his conditions.

█ began receiving Newstart Allowance in 2017. In April 2018 Centrelink sent █ a letter saying that he was required to attend an appointment with his employment service provider in compliance with his Newstart activity requirements. █ and his mother attended the local Centrelink office with a medical certificate stating █ was incapable of working due to his longstanding depression and anxiety.

█ and his mother spoke with a Centrelink worker who advised that █ should take his medical certificate to the employment service provider two floors above in the same building. The lift was not working. █ feared that should he have tried to climb the stairs, he may have suffered asthma symptoms as this is what has happened previously when climbing a substantive number of stairs. Instead, █'s mother went up to the employment service provider on █'s behalf.

█'s mother provided the medical certificate to █'s employment service provider case manager. The employment service provider case manager advised █'s mother that she wanted to see █ in person and that █ would need to call.

█ called his employment service provider after returning home but was unable to reach his case manager. █ left a message for her but he did not receive a return phone call. In the following days, █ attempted to call again numerous times a day. █ did not receive a return phone call.

Centrelink advised █ by letter that his Newstart Allowance had been suspended. It advised that he was required to call his employment services provider as soon as possible to discuss the reasons for not attending and, if required, attend a new appointment. █ was able to exchange one email with his case manager who again advised that he needed to attend an appointment.

Centrelink advised █ by letter almost a month later that his Newstart Allowance had been cancelled. It stated that Centrelink's records showed that █ did not contact his employment services provider to make a new appointment and or discuss the reason that he did not attend.

█ found the cancellation very distressing, which compounded his anxiety and depression. For the duration of the cancellation he was without an income and was forced to use his credit card to pay for his living costs. This resulted in the accumulation of thousands of dollars' worth of credit card debt.

█ sought to have the cancellation reviewed by a Centrelink Authorised Review Officer, but they confirmed the original cancellation.

█ was referred to Banyule Community Health Service to the LIFT program by his GP due to his deteriorating mental health. A LIFT Care Coordinator helped █ apply for Newstart Allowance again. The worker also assisted him lodge an appeal of the original cancellation with the Administrative Appeals Tribunal ('AAT'), then contacted SSRV and asked if we could represent him at

the hearing.

SSRV helped █████ get further medical evidence, and made extensive written legal submissions to the AAT, arguing that █████'s NewStart Allowance should never have been cancelled. SSRV also represented Travis at the hearing. Ultimately, the AAT agreed with the submissions put forward on behalf of █████ and found that █████'s Newstart Allowance should not have been cancelled. As a result of the AAT's finding, █████ received several months' back pay.

█████'s story:

Demonstrating: Newstart Allowance – activity test medical exemption rejected; DSP – Multiple health conditions including mental illness; DSP - Program of Support; DSP – barriers to diagnoses of mental illness; DSP – access to treatment for regional client; DSP – traumatising appeals process; DSP reliance on service provider support.

█████ is a █████ year old mother of three adult children. She is a former aged care worker and lives outside Ballarat in regional Victoria.

█████ has an acquired brain injury, chronic lower back pain, a left shoulder injury, a right knee injury, diabetes, and a skin condition. She also has borderline personality disorder, severe depression, and anxiety.

█████ struggled for four years to prove that she was eligible for DSP. She first applied for DSP in 2015. Centrelink asked for further medical evidence and █████ provided reports from her GP, her orthopaedic surgeon, radiologist and registered psychologist.

Centrelink then rejected her claim. █████ then appealed at the AAT Social Security and Child Support Division, AAT General Division, the Federal Court and again at the AAT General Division.

In October 2016 █████ submitted a fresh DSP claim, which was also rejected by Centrelink and the AAT Social Security and Child Support Division. In late 2018 █████ asked SSRV to represent her at the AAT General Division.

An SSRV lawyer and █████ worked for many hours to prepare her hearing. SSRV arranged for a video link in a Ballarat community health service so that █████ did not have to travel to Melbourne. The SSRV lawyer prepared expert witnesses, liaised with the Secretary's lawyers, lodged written statements and liaised with the Tribunal's administrative staff.

The hearing was conducted in January 2019 over two days. The SSRV lawyer led evidence from █████ and her witnesses describing how her health conditions impacted her ability to work. █████ testified that she loved her job as an aged care worker and wished she could still work. During emotionally moving testimony, █████'s adult daughter detailed the changes she had witnessed in her mother. Because of her poor health, █████ was not the same dynamic person as before.

In May 2019, the AAT held that █████ had been eligible for DSP at the time of her claim in 2016. █████ is now receiving DSP.

This is how █████ describes her struggle:

My life was put on hold for four years while I struggled to get DSP. My physical conditions have caused pain and suffering but mentally my struggle for DSP has crushed me.

I had to fight all the way. It takes a toll. It stripped away everything about me. It stripped away layers

of skin – it is like an empty shell they have left. I broke down many times. It has been a strain on my marriage. When you struggle to claim DSP – you have to have family support. You have to have people there for you. You have to have people who understand you. The pressure affected my relationships. I have had fall outs over the years – even with my own daughters. The struggle caused frustration, anger and anguish. I have contemplated suicide.

The first time I applied for DSP, Centrelink put me on NewStart Allowance and said that I had to report on a fortnightly basis and look for work even though all the medical evidence said that I could not. This upset me.

Being on NewStart Allowance instead of DSP pushed me to my limits. I had to travel half an hour into Ballarat every two weeks to report to my employment consultant. I had to sit there and go through the job plan agreement – she would ask me how I was going. It was useless. She knew that nobody would employ me – even if I could work. She accepted my limitations and told me she did not think I would benefit from any retraining due to my ABI and other conditions.

Dealing directly with Centrelink caused problems. Due to my personality disorder and mental health conditions they perceived me as trouble rather than as a person who had mental health issues who needed their help. Centrelink wouldn't accept my medical exemption certificates – because the doctor said my condition was permanent. Even when I had a life-threatening necrosis of my leg I was still reporting to Centrelink from the hospital bed.

When they rejected my claim I found it hard to accept they did not believe me. I was made to feel like a liar. They made me feel that I was just applying for DSP because I wanted more money.

One of the reasons they rejected my first claim for DSP was because my mental health conditions had not been diagnosed by a psychiatrist. I was already seeing a psychologist, but getting access to a psychiatrist was difficult. I think it is unfair that a person with no money has to pay to see a psychiatrist. Centrelink should have seen this was a requirement and sent me to a psychiatrist to corroborate my psychologist's assessment of my mental health. Instead, I had to miss out on food so I could pay for the private psychiatrist and get a report. I was only receiving \$442 per fortnight and the psychiatrist cost \$300.

Centrelink did not help me through this process. I had a lot of Job Capacity Assessments and each time it was to no avail. Each time I left the Assessor I felt worse. I did not understand their reasons. They are not doctors but they are interpreting medical information. Centrelink is supposed to send us to a Medical Assessment Team or a Government Contracted Doctor to make an assessment. In the four years Centrelink did not do this. Centrelink didn't inform me what to do when they rejected me. Centrelink should have helped me understand this. I think the rejection letter they send should include more information so that I could understand the reasons I was rejected. This was sad for me and I'm sure it is very sad for a lot of people.

I think there should be a separate disability application section at Centrelink. Sometimes I had to wait in pain and suffering up to an hour or an hour and a half just to speak with someone. Centrelink did not offer me support with my suicidal ideation, my pain, my frustration.

I am a very tenacious person. My father was a prisoner of war in the world war. He was a survivor and I am too.

When I went to SSRV in 2018 – I got a good lawyer who listened, looked into the facts, and looked into my case tirelessly. Once I got the right lawyer he listened to my story and my frustration and my

anger towards Centrelink and how I was treated. The lawyer gave me hope because he believed what was wrong with me and what I was going through at the time. The number of hours I spent on the phone – weekly, daily – me being frustrated, me crying, at the other end the lawyer always listened. He believed.

I was apprehensive about the AAT hearing. It frustrated me that the Government lawyers were still arguing that I wasn't eligible even though all the medical evidence was before them.

I had travelled to Melbourne before for the case but I couldn't do it again due to my mental and physical conditions. Having the video link for the hearing was very helpful – I was more comfortable in my environment. I had my support people and witnesses there for me. And it was much better than a telephone hearing because I wanted the Member to see me.

During the hearing I got the opportunity to finally be heard. The Tribunal Member, Anna Burke, really listened. She looked at all the facts. That made a big difference. The Member was patient – she listened, she questioned, she tried to understand.

It helped to have my lawyer at the hearing. The lawyer is important – they have to question the Impairment Tables, the legislation, the reports – they have to make sure that those questions are being examined. The lawyer was there representing me – he was there in my corner.

Now that I have been granted DSP I feel an enormous physical and mental relief. I don't have to go to Ballarat once every two weeks to report. I won't be called in by Centrelink anymore. Of course, there is also a financial relief – I can afford to keep up with the bills, buy more medication, more food and petrol. But more than that - there is a comfort in knowing that they have finally acknowledged I'm unwell.

I still don't know what my future is. At the moment I am taking things day by day. All I want is to live as a person should live – without suffering. I couldn't do that while waiting for a decision about DSP – about my life. I lost myself – my healthy self. Now I want to be able to understand my conditions, live with my conditions and live out my life. It's so difficult to prove eligibility for DSP and I'd like to be able to help other people understand.

██████'s story:

Demonstrating: Newstart Allowance – activity test medical exemption rejected; DSP – Multiple health conditions including mental illness; DSP - Program of Support; DSP – traumatising appeals process; DSP reliance on service provider support.

██████ is a ███ year old Aboriginal single mother who lives in Melbourne's west. █████ has Multiple Sclerosis, Arthritis, Anxiety and Depression. Her health conditions make simple chores difficult and social activities overwhelming. During acute MS episodes she is bed-ridden - sometimes for weeks.

As a result of her health conditions █████ was incapable of working. For several years she was receiving NewStart Allowance, but as her health conditions deteriorated the ongoing Centrelink reporting requirements became more difficult and she needed additional financial support. █████ applied for Disability Support Pension three times and Centrelink rejected the claim each time.

Then the MS Society recommended she contact SSRV. SSRV spent many hours working with █████ to prepare her appeal and represent her at the Administrative Appeals Tribunal (AAT) Social Security and Child Support Division. The appeal was not successful. SSRV and █████ did not accept the

decision. They appealed the case to the AAT General Division. SSRV made written representations with the law firm briefed to represent the Secretary of the Department of Human Services. They accepted SSRV's legal argument and the matter settled in ██████'s favour – thus avoiding a time-consuming, energy draining and expensive hearing at the General Division.

Prior to receiving SSRV's support, ██████ was ready to give up. She did not believe that she would ever be granted the DSP, despite her crippling health conditions and her inability to work.

"Without the support of SSRV, there is no way I could have even completed the process, let alone be successful".

██████ says that before she was receiving DSP, her life *"was a highly stressful absurd circle of disrespect and unrealistic expectations of someone chronically ill"*. Now that she gets DSP, ██████ says *"I can focus my remaining abilities and energy to look after myself and my child the best I can."*

Victorian services affected

If it is not clear from the above stories, any Victorian living with mental illness who struggles to access social security will also require a myriad of state services and support. When Newstart is cancelled, recipients like ██████ will turn to local community organisations for help. When clients like ██████ can't afford a Victorian psychiatrist, they're at risk of languishing without adequate support for years. When clients like ██████ are traumatised by the system, they're at risk of disconnecting or taking their life.

SSRV works closely with other Victorian government funded service providers who also work with clients with mental illness. Their message, like ours, is clear: hurdles to federal social security affect Victorians, Victorian support service providers and the Victorian community.

Through the Victorian government funded SSRV Workers' Help Line, SSRV has advised 450 Victorian workers in the past year. Those workers - doctors, social workers, disability advocates, counsellors, financial counsellors, community legal centre lawyers and others - call us for advice about how to best support their own clients when navigating the social security system. Many of their clients have mental illness.

Through the Victorian government funded SSRV Integrated Services Project with Financial and Consumer Rights Council, Victorian financial counsellors and SSRV lawyers work together to improve client outcomes. Financial counsellors often report significant financial difficulties for their clients suffering mental health conditions and attempting to access Centrelink benefits.

Through SSRV's Victorian government funded SSRV Family Violence Project, SSRV works with Victorian partner organisations to address the intersection between barriers to social security and family violence. In our experience there is a strong correlation between family violence, economic abuse, and mental illnesses such as PTSD for victim / survivors who receive social security payments. Victim/survivors need to be able to quickly and easily access appropriate mental health services. Without adequate access to mental health services, the issues they experience with their mental health can create a further barrier to successfully engaging with a complex social security / family assistance system.

SSRV receives limited core Commonwealth funding and a small level of state funding through Victoria Legal Aid. Victorian government funding for SSRV projects also helps to support the SSRV

services described above. However, SSRV has insufficient resources to meet an overwhelming level of legal need. Without ongoing funding from the Victorian government many social security recipients with mental illness would be left to navigate a complex system by themselves. As ■'s mother said above: *"I worry about those people who do not have a carer – how would they deal with Centrelink. They would end up on the streets with no support."*

Recommendations:

In light of the above, SSRV recommends:

1. That both State and Federal decision-makers acknowledge and address the nexus between a flawed national social security system and its grave consequences for Victorians living with mental illness – particularly the additional social and economic costs for the Victorian community and State Government funded service providers.
2. That the Victorian Government play a leadership role in moving for Commonwealth amendments to social security legislation and policy to make it easier and fairer for people living with mental illness to access adequate and appropriate income support.
3. That the Victorian Government support low-cost, community-based health services so that low or no income Victorians living with mental health can receive a formal diagnosis and treatment of their mental illness and the necessary suitable medical reports to demonstrate eligibility for DSP.
4. That the Victorian Government support multi-disciplinary integrated services that can support vulnerable Victorians in an integrated fashion.
5. That the Victorian Government adequately fund community legal centres – often the first point of help for people living with mental illness who must navigate the legal system.
6. That the Victorian Government provides adequate funding to SSRV. As a state-wide Victorian specialist community legal service with the necessary social security expertise, we are best-placed to ensure fair legal outcomes and the resultant improvement in quality of life for Victorians living with mental illness who need the social security system for income support.