

**FAIR GO FOR PENSIONERS (FGFP) COALITION
VICTORIA INCORPORATED A0061591N
TO
ROYAL COMMISSION INTO VICTORIA'S MENTAL
HEALTH SYSTEM**

Submitted via email: contact@rcvmhs.vic.gov.au

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Type of submission	<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Organisation Please state which organisation: Fair Go for Pensioners (FGFP) Coalition Victoria Incorporated A0061591N Victoria Please state your position at the organisation: Executive Member, Victorian Steering Committee Please state whether you have authority from that organisation to make this submission on its behalf: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Group How many people does your submission represent?
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Please indicate which of the following best represents you or the organisation/body you represent. Please select all that apply	<input type="checkbox"/> Person living with mental illness <input type="checkbox"/> Engagement with mental health services in the past five years <input type="checkbox"/> Carer / family member / friend of someone living with mental illness <input type="checkbox"/> Support worker <input type="checkbox"/> Individual service provider <input type="checkbox"/> Individual advocate <input type="checkbox"/> Service provider organisation; Please specify type of provider: _____ <input checked="" type="checkbox"/> Peak body or advocacy group <input type="checkbox"/> Researcher, academic, commentator <input type="checkbox"/> Government agency <input type="checkbox"/> Interested member of the public <input type="checkbox"/> Other; Please specify:
Please select the main	<input type="checkbox"/> Access to Victoria's mental health services

<p>Terms of Reference topics that are covered in your brief comments. Please select all that apply</p>	<input type="checkbox"/> Navigation of Victoria’s mental health services <input type="checkbox"/> Best practice treatment and care models that are safe and person-centred <input type="checkbox"/> Family and carer support needs <input type="checkbox"/> Suicide prevention <input checked="" type="checkbox"/> Mental illness prevention <input checked="" type="checkbox"/> Mental health workforce <input checked="" type="checkbox"/> Pathways and interfaces between Victoria’s mental health services and other services <input checked="" type="checkbox"/> Infrastructure, governance, accountability, funding, commissioning and information-sharing arrangements <input checked="" type="checkbox"/> Data collection and research strategies to advance and monitor reforms <input type="checkbox"/> Aboriginal and Torres Islander communities <input type="checkbox"/> People living with mental illness and other co-occurring illnesses, disabilities, multiple or dual disabilities <input type="checkbox"/> Rural and regional communities <input checked="" type="checkbox"/> People in contact, or at greater risk of contact, with the forensic mental health system and the justice system <input type="checkbox"/> People living with both mental illness and problematic drug and alcohol use
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INTRODUCTION

This submission is made by Fair Go for Pensioners (FGFP) Coalition Victoria Incorporated established in Victorian in 2007. Refer Appendix 1 for further details

The issues and concerns reported here have been told by a diverse range of people:

- FGFP affiliates, including members own experiences as prior workers and/or carers
- working with Friends of Public Housing Victoria (FOPHV) and Hands Off Public Housing (HOPH) including meeting with public housing tenants on the Estates identified in the so-called *Public Housing Renewal Program*.
- hundreds of Victorians listened to at various awareness raising activities and events over the past 5 years, and
- evidence drawn from international research studies into mental health models of care, and into the mental health industry in Australia.

FGFPs submission addresses questions related to aspects of prevention, stigma, inpatient care (adult), and safety of staff. The recommendations made are given below.

ABBREVIATIONS

ACOSS	Australian Council of Social Service
CRPD	United Nations Convention on the Rights of Persons with Disabilities
FGFP	Fair Go for Pensioners (FGFP) Coalition Victoria Incorporated
FOPHV	Friends of Public Housing Victoria
HOPH	Hands Off Public Housing
The Act	Mental Health Act 2014 Victoria
UITA	FGFP ‘Up in the Air’: A Civil and Caring Society Background Paper.

RECOMMENDATIONS

Recommendation 1 Prevention

- Victoria State Government to:
 - i increase understanding, knowledge, and application of the fact that structural issues are significant problems to be addressed in prevention and/or early intervention plans, programs and services;
 - ii invest in the growth of public housing, and the delivery of needs based support services including for homeless people living with mental illness;
 - iii deliver job creation programs as part of mental health recovery care plans;
 - iv seek to ensure Victorians living with mental illness have equitable access to high quality publicly funded and provided mental health treatment and support services regardless of ability to pay;
 - v seek to ensure older people living in aged care residential facilities have a safe environment free from threats, maltreatment, abuse, violence, and/or exploitation so they may live in dignity with respect; and
 - vi advocate for the federal government to increase the rates of all income support payments to a decent living income for recipients.

Recommendation 2 Stigma

- Victoria State Government to:
 - i fund and deliver a state-wide public awareness initiative/s to counter relentless and harmful messaging about mental illness and people living with mental illness supported by all relevant Departments and in collaboration with the *Office of Public Advocate Victoria*;
 - ii promote awareness of the importance of the fundamental role of government in the provision of fair and just policies for essential public 'welfare' services for all; and
 - iii take stronger action to change their market-based language, and boycott government providers of goods and services that continue to peddle such destructive economic, political, and cultural stereotypes.

Recommendation 3 Inpatient care (adult)

- Victoria State Government to:
 - i increase investment in the provision of public adult acute psychiatric units;
 - ii reconfigure current adult acute psychiatric units to single sex units and/or single sex wings within units;
 - iii new developments to be designed for single sex units; and
 - iv strengthen reforms towards a recovery model of care that empowers service users, and ensures the safety of mental health workers.

Recommendation 4 Safety of staff

- Hospitals within the public health system providing in-patient mental health services to:
 - i provide 100% of wages when staff recovering from work-related injuries through patient violence;
 - ii fully compensate affected mental health workers for travel expenses related to out-patient treatment and care;
 - iii ensure that an appropriate transparent and accountable safety framework is in place to accurately report serious incidences;
 - iv provide appropriate ongoing training for new mental health workers including

- assessment of risk and dealing with angry and aggressive behavior of patients likely to harm others, and
- assessment, treatment and management of those who sexually offend.
- Victoria State Government to:
 - i fund a research study to investigate the outcomes for both patients and workers of the interaction between the *Mental Health Act 2014*, the *The Crimes (Mental Impairment and Unfitness to be Tried) Act 1997* and *The Occupational Health and Safety Act 2004 Victoria* and associated regulations in regard to:
 - role of police when staff are threatened with extremely serious harm by a patient;
 - conditions under which relevant legislation should be amended to enable senior hospital administrators to charge patients threatening extremely serious harm rather than as currently the affected staff member; and
 - balance between patients' rights and rights of workers for a safe working environment and need to amend relevant legislation to ensure those with forensic history or potential, and those on in-patient compulsory treatment orders wait in jail until a bed is available in a forensic unit and NOT admitted to general adult acute psychiatric units.

BACKGROUND – 'THE ACT'

Victoria's Mental Health Act 2014 (The Act) came into effect on 1 July 2014. 'It delivers major reforms to Victoria's mental health system, placing people with a mental illness at the centre of their treatment, care and recovery.'¹

The Act provides a framework of care shifting towards the basic human rights of people living with mental illness in dignity, autonomy, and with respect: a recovery model of care. It also focuses on minimising compulsory treatment, improved communication between health practitioners, clients, the family, and carers.

The Act enables steps to be taken to improve mental health practices since Australia's ratification of the United Nations Convention on the Rights of Persons with Disabilities in 2008 (CRPD).²

A glaring gap in the core principles and objectives of The Act is the lack of attention to the safety of mental health workers.

1. PREVENTION relates to question 5: What are the drivers behind some communities in Victoria experiencing poorer mental health outcomes and what needs to be done to address this?

The structural issues addressed below are understood as constituting part of effective prevention of mental illness.

In general, a lack of 'affordable' housing, income poverty (low-wage workers, unemployment and under-employment, meagre income support payments) and inequality are recognised as drivers of peoples' mental health and can and do lead to emotional and mental ill-health as FGFP has been formally reporting to the Victorian State Government since 2016.

While the critical role of housing to employment, education, job search and health is recognised in research studies and various government reports, income poverty less so as a driver of poor mental health.

In particular, and in the following order: public housing, unemployment and income poverty is discussed.

i. Public housing in Victoria ³

Privatising Victoria's public housing has led to increased anxiety, stress and at times hospitalisations of public housing tenants (public tenants) having been told to leave their homes for unknown locations, unknown durations, and unknown location returns many months before they unwillingly leave.

Public tenants were left with insecure housing and the impending destruction of their mostly stable and secure Estate communities with access to jobs, schools, health services, faith groups, public transport, and recreation and social amenities.

Many times over FGFP, Friends of Public Housing Victoria (FOPHV) and Hands Off Public Housing (HOPH) were told by public tenants that these relocations from their homes:

- 'will kill me'
- 'I do not want to leave'
- 'I am depressed'
- 'I am being asked to leave my memories behind'
- 'I am too fearful of being targeted to protest'
- 'I am "sick with worry" as I do not know when I will be evicted other than it will be late 2017 - close to Christmas! This is what the Department is doing to tenants'.

Some public housing tenants had lived in their affordable, safe and secure homes for more than forty years. In meetings, they also said 'as far as we are concerned this was without warning and without choice.' 'We are now living in housing insecurity not even knowing where and what school our children may end-up at.'

FGFP continues to point out that people with disability physical and/or mental and age pensioners - increasingly single older women - are the two main groups living in public housing. Now or in the near future those affected will be told to leave their homes and local communities. There is no 'informed choice'.

Since 2016, FGFP has regularly engaged with the state government both in written correspondence and in delegations to State Ministers for Housing, and infrequently to the Australian government recording our deep concerns for the **need for more** public housing **not less** as the only affordable safe and secure rental housing for vulnerable people.

FGFP continues to call for a moratorium on any further redevelopments until the Government invests in:

- collection and evaluation of a range of much needed data such as the actual value of the public housing land in Victoria being lost for any public purpose, evaluation of cost, and outcomes for public housing tenants relocated.
- implementation of improved regulatory mechanisms and accountability frameworks for the delivery of public services, in this case public housing;
- undertaking research on the outcome of previous privatisations of public housing in Victoria; and
- releasing its response to the recommendations from the 2016 public inquiry to allow for informed public debate and public endorsement by election.

In May 2017, FGFP was one of four foundation members of Hands Off Public Housing (HOPH) with a key objective of building a social movement to build citizens support for the well-resourced delivery of public housing and homelessness support services funded by Federal/State-Territory governments based on equitable formulae.⁴

ii. Unemployment

During 2015-2016, FGFP worked on a campaign for actual job creation programs delivered through Victoria's public services pointing out that the privatization of Commonwealth employment services was failing: leaving unemployed people without access to ongoing paid work, and temporary work at best, often left those unemployed feeling ashamed, embarrassed and depressed. Yet at the same time, there was increased compliance introduced for the unemployed now branded as job seekers to search for non-existent paid work – they continue to be hounded.

As shown in case study 3 titled '*Public to privatized employment services*', in FGFP '*Up in the Air: A Civil and Caring Society, Background Paper (UIAP)*', there is a lot of money to be made out of unemployment BUT not for unemployed Australians or taxpayers. 'The fact remains that being willing and able to work is not enough. There is not enough paid work. It has also been shown the levels of despair and depression arising from too few paid jobs.'⁵

ii. Income Poverty

Drawing on the work of UIAP, research reports demonstrate that in 2016:

- 1.5 million older Australians living on the Age Pension as their only or main source of income were at risk of poverty;
- 33.3% of women over the age of 60 live in permanent income poverty;
- over 19% of Aboriginal and Torres Strait Islander peoples lived in poverty
- 1 in 3 older people 65 years and over living in poverty were born in a non-English speaking country;
- close to 19% of migrants whose first language is not English lived in poverty compared to 11.6% of those who were Anglo-Australian born;
- close to 2.9 million people are either jobless or seeking more hours of work, of whom:
 - 730,000 were unemployed
 - 1.3 million workers were underemployed, and
 - 1.02 million comprise the "hidden" unemployed.⁶

Women's inability to leave family violence situations keeps women economically tied to violent men and can and does lead to emotional and mental ill-health. The majority of single women with their children live on or below the income poverty line.

FGFP acknowledges that the Victorian Government has begun to address concerns through its gender equality strategy.⁷

Exploitation, abuse, and/or maltreatment of the elderly within aged care facilities and by aged care corporate providers of residential aged care, can and does lead to emotional and mental ill-health as widely reported by the current *Australian Royal Commission into Aged Care Quality and Safety*.⁸

FGFP submission to this Royal Commission highlights the physical and psychological harm caused by exploitation and/or maltreatment, and abuse and this poor quality care is related to corporate providers putting profit before people, reduction in care hours, and inadequate levels of staffing and skill mix.

Increasingly, research studies are indicating that loneliness and isolation affects mental health levels in seniors. This important issues is beyond the scope of this submission.⁹

The structural issues of lack of public housing and its increasing privatization, unemployment and underemployment, low paid work in general and lower pay rates for women in particular, women's child care responsibilities, income poverty and inequality are structural problems that should be fixed as part of any strategic plan to effectively prevent mental illness.

2. **STIGMA relates to question 1: What are your suggestions to improve the Victorian community's understanding of mental illness and reduce stigma and discrimination?**

The following material is reproduced from FGFP Background Paper.

There is an immediate need to turn around messaging used to blame the individual, and which does affect language, mindset and culture. Labels peddled by politicians and commercial media outlets include those identified by Falzon:

- demonised - dole bludgers, lay-about, leaners
- criminalised - cheats, fraudsters, liars
- pathologised. - mental case, unhinged, crazed.¹⁰

Such individuals are not self-reliant, hardworking, responsible, competing for success and rewarded for their own efforts: they are unproductive and therefore undeserving of rewards and respect.¹¹

These are market values of competitive individualism and are important in shaping public attitudes toward public welfare policies. As was shown in the Background Paper, competitive individualism is central to 'neoliberalism'.

The demeaning messaging is also a powerful tool promoting disdain more generally for all people doing it tough and influences public attitudes about what kind of welfare policies the government should provide, and who should benefit.

Income support recipients know there is no respect due; only meager incomes allowing a frugal standard of living at best or deepening poverty at worst. Mental health issues can and do arise in part driven by the constant struggle to survive on too little or living in income poverty and to the stigma.

An increasing body of research into 'welfare' in Australia demonstrates that the language of privatization as a major tool of neo-liberalism is a key factor in reshaping the language, and shifting the mindset and culture of the general public on social assistance issues.

Watts calls such messaging "toxic deceits" - language used either to deliberately distort, mislead, or confuse.¹²

Such myths are extremely harmful to those people affected, the wider society, and also significantly contribute to reshaping public values about government provision of care, in this case mental health treatment and services, democracy and culture.

These myths should be publicly shown to be unfounded claims, and the destructive stereotypes addressed.

3. **IN-PATIENT TREATMENT relates to question 8: 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?**

FGFP addresses this question in relation to in-patient care, specifically acute adult psychiatric units.

FGFP understands that close to two-thirds of those admitted to public adult acute psychiatric units in Victoria are those with low-incomes (low-waged workers, migrants,

refugees, sole parents, unemployed) and/or those with special needs (disability, aged over 60 years, family violence, and/or recently homeless).

- i. recovery plans to include working with the government to provide permanent rental public housing leases for patients in need of 'affordable' housing and following their hospital discharge into transitional housing. Patients should not be discharged without a place in transitional housing.
- ii. recovery plans to link patients into publicly provided employment and training services and other support services as appropriate.
- iii. recovery plans to include an ongoing review mechanism.
- iv. Government to advocate for low-income Victorians to federal government for for all income support payments to increase to a decent living income.
- v. immediate investment in eliminating physical barriers of old acute adult psychiatric units to substantially improve safety features for patients and workers. For example, separate single sex wings within units to protect patients from predatory behaviours by mostly male patients, adverse events and poor outcomes for those affected.
- vi. establish separate detoxification facilities across the State for drug and alcohol dependent people.
- vii. invest in safety measures to improve the occupational safety of mental health workers.

Of deepening concern are reports to FGFP of increases in admissions of 'forensic patients' to these units as too often there are no beds available for inpatient care in specialist forensic mental health services. As Forensicare indicates, if a person is on a supervision order, receiving mental health treatment is compulsory.¹³

- i. invest in another specialist facility for Forensic patients in the greater metropolitan area.

4. SAFETY OF STAFF relates to question 7: What can be done to attract, retain and better support the mental health workforce, including peer support workers?

The **safety of workers** has been a key concern identified in discussions and open conversations, especially during the past 3 years.

As Al-Azzawi reports,

'in policy, grey literature and academic research surrounding mental health service provision, there is a notable absence of direction on how to preserve the safety of mental health service workers'.¹⁴

FGFP has been told that ensuring the safety of workers is about the need to:

- ii. find ways to improve the safety of in-patient mental health workers within the broader reforms in policy and practice under the *Victoria Mental Health Act 2014*;
- iii. increase the ratio of mental health workers to patients;
- iv. stop overcrowding units with too many admissions;
- v. prompt action to move extremely mentally unwell patients threatening serious harm to workers out of area to another acute mental health unit;
- vi. explore difficulties with differing Acts producing unintended consequences
 - *Victoria Mental Health Act 2014*
 - recovery model of care
 - occupational health and safety laws, and
 - *The Crimes (Mental Impairment and Unfitness to be Tried) Act 1997*;

- vii. delays in providing and/or providing inadequate training for new and inexperienced staff in dealing with angry, aggressive, and/or predatory behaviours of some patients;
- viii. bust the myth that mental health workers lack resilience;
- ix. run-down physical facilities making it harder to introduce improved safety measures; and
- x. inaccurate and under-reporting of serious incidences which seem to be diluted by the data input categories available through the computerised 'riskman' statistical tool available for such reporting.

Immediate action is required to find the balance between the rights of patients and the occupational safety rights of workers to a safe place of work.

Citations

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FAIR GO FOR PENSIONERS (FGFP)
COALITION VICTORIA INCORPORATED A0061591N Appendix 1

WHO WE ARE

Fair Go for Pensioners (FGFP) Coalition Victoria Incorporated was established in Victorian in 2007. It is an independent volunteer not-for-profit coalition of community-based organisations, unions, faith groups, peace groups and individuals advocating for social justice for pensioners, single parents and their children, unemployed people, affordable housing for renters in all housing types, especially public housing tenants and other low-income groups marginalised by financial hardship, poverty and inequality. FGFP is non-party political.

WHAT WE DO

FGFP advocates for and mobilises pensioners, single parents and their children, unemployed people and other low-income groups and their supporters to gain significant improvements in income and related services for those living in poverty or in financial hardship.

Our work includes direct action, advocacy, community organising, building the coalition, media, public education and research and is underpinned by human rights and activism. We work towards a just society where everyone counts and gets a fair go for life.

COALITION MEMBERS

Representative organisations on FGFP Victorian Steering Committee include Australian Unemployed Workers' Union, Australian Manufacturing Workers' Union (Retired Members Division), Council of Single Mothers and their Children, Combined Pensioners & Superannuants Association of Victoria, Ethnic Communities' Council of Victoria, Friends of Public Housing Victoria, Democritus Greek Workers League, Housing for the Aged Action Group, Maritime Union of Australia (Victorian Veterans), Independent Peaceful Australia Network, Melbourne Unitarian Peace Memorial Church, Polish Community Council of Victoria, Rail Tram and Bus Union Victoria, The Pen, Les Twentyman Foundation, Victorian Trades Hall Council. FGFP joins other community groups including churches, faith groups and peace groups on a single issue or a range of issues and/or endorse our annual activities. FGFP also has an individual section established in December 2013.

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[https://www.facebook.com/pages/Fair-Go-For-Pensioners Coalition/240292362816033](https://www.facebook.com/pages/Fair-Go-For-Pensioners%20Coalition/240292362816033).

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FGFP coalition acknowledges the owners of the land on which we meet the Wurundjeri people of the Kulin Nation. We wish to pay our respect to their Elders -past, present and future.

Authorized by **FAIR GO FOR PENSIONERS (FGFP) COALITION VICTORIA INCORPORATED A0061591N – 2019**.

www.fgfpcoalition.com