

04/07/2019

Submission to The Royal Commission into Victoria's Mental Health System:

Dear Sir/Madam,

My story begins 21 year ago when my eldest daughter was admitted to the local rural hospital psychiatric ward with her first psychosis.

I will call her "Sally".

Sally was a bright 18 year old brought up in a loving family who had just attained her dream of entry to ██████████ Universtity to study Arts.

Unfortunately for whatever reason this psychosis was the first of many over the coming years, and a diagnosis of scizoeffective disorder.

Each time Sally would be prescribed medications either oral or in depot injection.

The focus was always on the medication which was necessary in the recovery process. The nature of the side effects of medications meant Sally would usually stop taking the oral meds.(Hence the depot on some occasions). This evolved into a cycle of hospital admission, discharge, becoming unwell and so on.

When admitted as an involuntary patient, Case Management and a Community Treatment Order would ensue on discharge for a few months (if she was lucky). On other occasions, and this occurred in both large Melbourne hospitals and rural hospitals, Sally would be admitted for a week or so then discharged back into the community, only for things to escalate and to be returned to hospital via police or ambulance when her behaviour became unsafe and/or intolerable to those around her.

Sally has never been able gain employment, and housing is a huge issue for her. She was living in a boarding house situation for several years in Brunswick (totally unsuitable or safe for a young woman) and is now registered with ██████████ who find her accomodation in a series of share house situations in Broadmeadows. 1 step away from homelessness.

Due to Sally's deteriorating mental health and now drug use I cannot have her in my home. Sally also has become estranged from the rest of her family and has missed out on meeting her little neices and nephews. I fear for her safety in this substandard housing. Sally has told me she doesn't want to have anything to do with me because I call the police and have her sent to hospital. I have not seen her for 3 years; she will sometimes txt me for my birthday. I could go on and on. I could literally write a book. I miss my first born child; my sadness is profound:I grieve for her potential to contribue to society and the fact that it most probably will never be

realised. don't talk about it much and can only cope by not dwelling on what has come to pass or what may come to pass.

Basically the system has failed my daughter. It has failed my family.It has failed me. It is based on crisis response,hospital admission if a bed is available and inadequate follow up.

I don't blaim any individual or hospital. The staff can only do so much.

My vision would be for more beds in mental health wards; more funding for community services following discharge from hospital;ongoing monitoring of wellness or relapse and addressing relapse so as to avoid readmission to hospital; assistance with housing; assistance with gaining employment and training; more seVICES for drug and alcohol counselling, and rehabilitation centres.

I beg the Commision to recommend immediate improvements to the mental health system in Victoria before it is too late for my daughter.

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

Submission number: 0002.0028.0430

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

" Greater community awareness through media releases, public forums, and encouragement of individuals to share their lived experience of mental 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?

"Community awareness is growing with more and more high profile celebrities and sports people announcing their battle with mental health. Social media, despite its down side has become a valuable tool to reach out to a wide network to encourage support and recognition of mental health issues."

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

"Recent years has seen a greater focus on men's health, with men's health forums in our local community and the popularity of the Men's Sheds. Information should be available to secondary age children with a focus on suicide prevention, self worth and recognising and addressing anxiety. "

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.

"The pressures of modern day society, breakdown of relationships, housing stress and lack of access to mental health services. First point of contact is often the person's GP who needs to be able to recognise the signs of decline in mental health and refer the patient on to appropriate services."

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

"The downturn in the rural sector with ongoing drought, lack of water allocation for irrigation farms, low price of milk , farmers being forced to sell stock, closure of milk factories with loss of employment. This has a flow on effect for the towns retail sector when people don't have money to spend in town. This results in a negative effect on mental health and combined with a lack of services, and a reluctance for (mainly) men to seek help results in poor outcomes. A mobile service going out into rural towns and onto properties to the 'coal face' may be a way of showing these communities they haven't been forgotten. "

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

"Family members/cares need education on all aspects of the relevant mental illness and how it

affects the person, what to expect, how to react to difficult situations and how to access respite if and when needed."

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?

N/A

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?

"My vision would be for more beds in mental health wards; more funding for community services following discharge from hospital; ongoing monitoring of wellness or relapse and addressing relapse so as to avoid readmission to hospital; assistance with housing; assistance with gaining employment and training; more services for drug and alcohol counselling, and rehabilitation centres. "

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

N/A

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

See attachment