

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

Organisation Name

N/A

Name

Ms Donnalyn Wigan

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

"My suggestion to reduce stigma is to encourage the public to stop dismissing the mentally ill by glibly telling us to ""get help"" or ""get some counselling"" and inform them that under the current system, there is no access to adequate treatment."

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?

"We need at least 50 mental health sessions on rebate. Nothing can be done in 10 sessions. Mental health care sessions need to include cognitive behavioural therapy, as CBT in conjunction with medicine has the highest efficacy rate for depression. Poverty and mental illness is cyclical; mentally ill people end up trapped in poverty because we cannot get or sustain jobs due to mental illness, yet we cannot get treated for our mental illness due to poverty. We are completely, 100% dependent on social services to get any treatment whatsoever, and 10 sessions does nothing. Lack of treatment allows mental illness to progress to extreme, less treatable severity including suicidality. We need nothing less than access to appropriate treatment. With adequate treatment, we could cease treatment, stop being dependent on disability pensions and support ourselves in the workplace. Investing in appropriate mental health care may be more cost effective than allowing hundreds of thousands of people to languish in poverty and dependence on government pensions for life."

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

"Far more beds need to be available to treat suicidal people. Psych wards are constantly at 100% capacity, and the majority of suicidal people must be turned away, with only the most extreme of the extreme cases being admitted (only to be discharged prematurely to make room for new patients). People have died directly because of this. There needs to be enough beds and enough staff to meet demand, with extra room for fluctuations in demand. Fewer and fewer people are choosing to work in mental health care, especially public health care, and participation in this field needs to be encouraged. If the psych wards are large enough to admit patients with a range of severity in mental illness (instead of being made up solely of the most dangerous patients), fewer mental health care workers will drop out of the field. Mental illness needs to be aggressively treated before it gets to this stage to begin with. There is no access to adequate treatment in public health care (10 sessions is a fraction of what is needed), and this allows mental illnesses to progress in severity, including to the point of suicidality. Mental health care sessions on rebate need to include cognitive behavioural therapy, as CBT in conjunction with medicine has the highest efficacy rate for depression. "

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.

"Mentally ill people end up trapped in poverty because we cannot get or sustain jobs due to mental illness, yet we cannot get treated for our mental illness due to poverty. Furthermore, poverty exacerbates mental illness, allowing it to progress in severity, and both poverty and untreated mental illness lead to various physical health problems, housing issues, debt, etc. These issues, as well as the despair of being trapped in these increasingly-worse circumstances, go on to exacerbate the mental illness. It is a negative cycle from which suicide increasingly seems like the only escape. People in poverty need access to adequate health care more generally. The intertwined relationship between mental health issues, physical health issues and poverty needs to be addressed. Giving people in poverty more access to both mental health care and necessary physical health care (dental care, sleep specialists, physiotherapy, etc.) will prevent many cases of mental illness. The despair of inescapable poverty and the hopelessness of being unable to afford physical medical care causes a lot of mental illness. Most importantly, there need to be at least 50 mental health care sessions on rebate, and there needs to be far more room in psych wards in public health care. Mental health care sessions on rebate need to include cognitive behavioural therapy, as CBT in conjunction with medicine has the highest efficacy rate for depression."

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

"Communities experiencing higher rates of poverty will have more mental health issues, and less access to treatment. Economic inequality needs to be addressed to help prevent mental health issues, and public mental health care needs to be adequate. This means at least 50 mental health care sessions on rebate, and there needs to be far more room in psych wards in public health care. Mental health care sessions on rebate need to include cognitive behavioural therapy, as CBT in conjunction with medicine has the highest efficacy rate for depression."

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

N/A

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

"Psych wards need to be large enough to admit people with a range of mental health issues and a greater range in severity. Currently, psych wards are so small that only the most extreme cases can be admitted, and this means that mental health care workers in public health care end up working solely with the most extreme and most dangerous cases. "

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?

"There is no opportunity to improve our circumstances. We become impoverished because we cannot get and sustain work due to mental illness, and we cannot get treatment for our mental illness because we cannot afford it. We need at least 50 mental health care sessions on rebate, and there needs to be far more room in psych wards in public health care. Mental health care sessions on rebate need to include cognitive behavioural therapy, as CBT in conjunction with medicine has the highest efficacy rate for depression."

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?

"Mental illness needs immediate and thorough treatment, or else it will escalate in severity. We need at least 50 mental health care sessions on rebate, and there needs to be far more room in psych wards in public health care. Mental health care sessions on rebate need to include cognitive behavioural therapy, as CBT in conjunction with medicine has the highest efficacy rate for depression. Policy needs to reflect the fact that poverty, mental illness and physical health problems have an intertwined relationship, with all three causing and exacerbating each another. Economic inequality and lack of access to physical medical health needs to be addressed as a major causal factor in mental illness and a major obstacle for treatment, with more access to both mental health care and health services in general (eg. dental care, sleep specialists, physiotherapy) provided to those in poverty. "

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

"We need at least 50 mental health care sessions on rebate, and there needs to be far more room in psych wards in public health care. Mental health care sessions on rebate need to include cognitive behavioural therapy, as CBT in conjunction with medicine has the highest efficacy rate for depression."

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

"There has been a lot of effort spent towards encouraging mentally ill people to reach out and seek help. We need to make sure there is adequate treatment available to those who do. Australia prides itself on its public health care system and its accessibility, yet tens of thousands of us depending on this system are finding it failing us utterly and completely. To us, this pride in our health care system appears to be based on a lie. I want to be proud of our health care system, and Victoria should lead the way in making these necessary changes."