

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?

"Education of society starting at early education level and upwards re-educating Australians that you don't have to "suck it up" "toughen up" or "move on". Education that it is okay to express your feelings and that when you do then it is acceptable. Education that we are all different and that genetics and life experiences will be processed differently by each individual and that we should never assume how another individual is feeling. Education that traumatic events can present immediately or years after the experience. Provide figures that demonstrate that all of us will experience some form of mental illness in our lifetimes and that mental illness is not limited to a few. Highlight that the outcome of assistance of people experiencing mental illness is heavily reliant on who they or their family seeks support from and also the capacity of family and friends to fully understand and assist someone with mental health illness. Encourage people to show concern, compassion and empathy to those experiencing mental health illness and to actively obtain knowledge to best assist them."

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?

It all starts at the local general practitioner. If a patient presents with any illness that can be attributed to them experiencing mental health illness then it is vital that they investigate further to ascertain the root cause. In today's 15 minute appointment slots the quick fix of prescription drugs is all too often reverted to and accepted by the patients. Privacy laws prevent many from assisting. If it was recommended that a family member or close friend accompany them to consultation then perhaps illness would be more quickly diagnosed and treated. A majority of people won't admit they are struggling due to the stigma but also their own difficulty in accepting that they are not coping and they feel that they are failures. You cannot successfully reason with an individual when they are experiencing mental health issues so having another person that they trust helping to communicate their situation and the services they may require would put everyone at ease and I believe produce better outcomes. Perhaps all GP's should have a nominated person for each patient for communications if the need arose. Much like having an advanced medical plan.

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

Individual services seem to work well on their own but issues arise when the patient needs to coordinate services across a variety of health organisations. There is a breakdown of communication between the different health organisations particularly when it concerns medications and changes to medication and implications of combining certain medications. There needs to be a greater understanding of suicidal thoughts and tendencies and patients need to be educated fully in ways to prevent or dilute suicidal feelings when they initiate.

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.

Starting from individuals being able to recognise what is acceptable behaviour and thoughts opposed to ones that indicate health issues. Then for local gp's to recognise patients presenting with mental health issues and recommend treatments very early as studies show that the earlier treatment is administered then the greater success rate in reducing the period the patient experiences mental health illness. Greater inclusion and support for family members and carers. Sometimes the immediate family relation or carer may not be the best equipped person to assist a person experiencing mental health issues. The practitioner needs to ascertain exactly what support network the patient has-this cannot be taken by word of mouth but needs to be verified.

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

Education and funding

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

"Greater education on how they can assist. More inclusion in treatment plans. Confirmation by practitioners that the family members and carers are best suited to take on assistance roles such as a carer. A spouse is not necessarily the best person to assist in the first instance. For practitioners to take into consideration on a higher level a families input, not just one person or just the patients opinion on health matters. "

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

Unsure need to ask them.

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?

Encouragement when patient is able to resume past activities they enjoyed which will benefit them or to facilitate ways to be involved in activities which they have shown an interest in. Perhaps there needs to be some sort of incentive to become more active. People who are recovering or have recovered from mental health issues need to be canvassed and asked their opinions as they are better qualified to know the answers.

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?

More streamlining and greater communication. Better venting of carers capability especially if a patient is being discharged into another persons care.

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?

Having watched a family member and indeed all the family deal with someone experiencing

mental health I would encourage you to ensure that prevention is the key. In my own circumstance I believe that had the family member had the right support when they first started exhibiting mental health illness then they would not have struggled for over 8 years. Unfortunately they passed away recently unrelated to mental health but possibly it was contributed to by all the medications and electroconvulsive therapy. The worst thing was being so helpless to assist especially when you are not the nominated point of contact and the privacy laws prevent so much. It was disheartening to hear people say such things as snap out of it or try harder when the patient has little control over what they are experiencing especially when they have multiply mental health illnesses. Our current system is built on an old existing antiquated one and it doesn't work. We need to do better for everyone including the many devoted staff who are trying their best to deliver services to those so very much in need.