

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

SUB.0002.0015.0023

Name

[REDACTED]

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

"Provide hope to the person with Mental Illness, not just leave them struggling on their own. "

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?

No idea.

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

Psyc staff removed all hope from my brother. They offered a service then when we asked for it they told him no they wouldn't be doing it. So he killed himself rather than suffer any more. This is a different issue to my sister who is still struggling but less inclined to try and kill herself nowadays. Yes I had a brother with schizophrenia and a sister who still has it.

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.

"Treatment is hard to get. From what I've been through, the person just has to struggle with their thoughts till they are bad enough to be carted off by the police to the psyc ward. (both my brother and my sister at different times.)"

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

The staff don't care. Probably less choice of where to work in regional areas so regional areas get the ones who have been there too long and no longer care for the person properly. They should listen to carers. They don't.

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

LISTEN TO THEM.

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

No idea but ones who are not performing well should not be left in the job.

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?

Supposedly the NDIS but that system doesn't seem to work very well either. Not from my

experience being nominee for my sister.

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?

"Good quality staff who actually know how to care for someone with the mental illness. DO NOT REMOVE HOPE FROM THE PERSON WITH MENTAL ILLNESS UNDER ANY CIRCUMSTANCE. Listen to the carer. They know more about the person with the mental illness than the psyc staff who only see that person occasionally. When I say my sister is struggling, then she needs help. Not be told their is nothing they can do!!!!!!!!!!!!!!!!!!!!!!!"

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

Invest in Community psyc staff to visit long term and care for the person with a mental illness. It could prevent a lot of re-entry into the psyc ward as an involuntary patient.

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

Please fix the system. My brother is dead. They didn't help him. My sister still struggles.

For the Royal Commission into Mental Health Services in Victoria.

My sister has diagnosed Schizophrenia for over 40 years. It is near impossible to obtain any assistance unless she is dragged off by the police and admitted to the psyc ward as an involuntary patient. Then they take notice and the psyc nurses visit her for a short while after discharge, then they drop her and leave her struggling. I live 1.5 hours away and I am and always have been, her only supporting family member. She does not have any friends. She can go weeks without answering her phone so I don't know if she is dead or alive. The city council were coming fortnightly to do home care but they dropped that a year and a half ago straight after they said she had to go on the NDIS. The NDIS declined her application. I chased for 9 months for them to review their decision. Eventually they gave her some funding but now we find the support worker only turns up occasionally – twice in the past 6 months. My sister did decline 2 visits but someone should be visiting and checking she's at least still alive. That's a total of 4 in 6 months. Even they are not supportive of mental health clients. Nil assistance from any psyc nurses. She is now getting over another bad patch but the poor lady just has to go into hibernation and ride it out till she feels and copes better. Her life is of very poor quality. She doesn't cope with housework. She doesn't go out. She has very little motivation and no-one to encourage her. It's not much of a life.

My brother was diagnosed with Schizophrenia – the Psyc community staff said they would assist him with something then when he asked for that exact help, they said they couldn't do it. They removed all hope – he then felt he had no point to life anymore so he killed himself. If they had of done what they said they would do, he may still be with us. If he obtained proper treatment he might have had a reasonable life. Maybe. But I doubt the regional areas run as well as in the city.