

Please receive this submission, from the Listening to Voices Theatre Group. Listening to Voices Theatre Group are this years Minster for Health Volunteers of the Year : Outstanding Achievement in Supporting Diversity. On receiving this award, a few of our members had the pleasure of meeting with Minster Jenny Mikakos and sharing their work and vision for a better mental health system with the judges and the wider audience for this award. Jenny recommended that Listening to Voices made themselves and their messages known to the Royal Commission.

Just as The Royal Commission aims to hear from Victorians, Listening to Voices Crew have performed for and been hearing from Victorians for the past 3 1/2 years as we have travelled and performed this creative community development project..

As a part of this submission we would like to share portions of the individual and collective knowledge that both informs the creative work and provides an advocacy platform on topics of mental health and the mental health system.

We welcome this Royal Commission into Victorias mental health system and are encouraged by the increasing presence of honest and fearless dialogue that highlights the experiences of those who have been without a voice when confronted by a world and a system that has often seemed absent of compassion, been more punitive than caring and limited in the models of prevention and care. We are energised at this time in history, knowing that the Victorian Government has chosen to listen and respond with action.

The name of this group and project "Listening to Voices" came from this very notion that there were many people who did not have the platform from which to speak up about their experiences of society and systems in regard to mental health, but who had much to say. In fact, the director of this project began this grassroots work with the first question to participants in 2016... "If someone would listen, really listen, what would you say"? Our submission offers you some of the performers and the wider communities answers. .

This submission contains comment in the form of quotes and statements from the many conversations and feedback gathered each time we perform. Our key areas of focus include !. The expertise of lived experience and the future of leadership, 2. Stigma, (misunderstanding and mistreatment) 3. Power and choice, and the spreading of hopeful messages through alternative models that explore human distress as much more than a biomedical condition that places emphasis on individual pathology and thus, limited responses..

What we have also discovered on our journey, is the transformative power of theatre as a modality to create conversation and increase the capacity of communities to connect and

understand together. This has been both refreshing and inspiring and we advocate for the arts to always have a place in health strategies .

Listening to Voices Theatre demonstrates the power of arts in personal growth and community engagement and learning, its ability to challenge stereotypes, and create a safe space for all to speak up, often being able to say “Me Too”. The work honours the lived experiences of the performers, placing them as the experts and exploring what works, and what urgently needs attention. Through their story telling, powerful and confronting, they are stimulating very important dialogue.

About Listening to Voices.



Listening to Voices Theatre, Gateway Health

Listening to Voices Theatre is both an evidenced based arts health intervention for wellbeing and participation as well as an active space of advocacy; part of a broader vision for increasing mental health prevention and responses throughout community, to find support in tough times, to increase hope and helpful responses and to reduce stigma.

Listening to Voices Theatre Group of Gateway Health in Wodonga was seeded over 3 years ago with funding through the Stop Stigma Campaign with PIR,. The concept being, to engage a community development theatre specialist with people who have a lived experience of mental health challenges, to understand their experiences and their needs,

to build participation and confidence utilising theatre methods for self-expression. This initial project and performance was so generously received by community that through small grants, agency support and paid engagements, Listening to Voices Theatre has now toured and engaged over 1500 Victorians.

The committed volunteers/performers ([REDACTED]), often joined by others) have continued to develop their own story telling utilising theatre methods and have presented to numerous community and health/education groups, including the general public, across regional Victoria and NSW, including Melbourne and Sydney. Large employers and health services have engaged them to help change the culture and understanding of people living with mental health issues. .

“People are not a one note song, they are complex and their experiences are unique” ([REDACTED] Pearson, performer, volunteer).

When Kate Fiske (project manager) envisioned the “Listening to Voices’ project it was a response to some of the structural and institutional modalities of support that she witnessed as oppressive and silencing. She desired to activate a space in which people were honoured and accepted in their diversity, hoping this could be explored with the wider community, so that we might consider our similarities more than differences. The aim, to create opportunities for liberation through expression. “If I have learnt anything in my 15 years of mental health support work, it is that a diversity of responses is necessary. This work is relevant in so many spaces to drive other initiatives and conversations; domestic violence and childhood trauma, mental health, suicide, bullying and importantly, stigma and its personal and social impacts”. (Kate Fiske)

Since early 2016, Listening to Voices Theatre have presented more than 20 community and over 1500 people. Large employers and health services have engaged them to help change the culture and understanding of people living with mental illness and to create a more diverse dialogue about the construct of mental illness. Their work has been utilised with high schools and universities, each time with powerful reflection and feedback.

The stories in this work, all seed form the first question posed in this project.... one question "If someone would listen, really listen, what would you say". The work emphasises the shifting of paradigms, from 'what's wrong with you' to a greater understanding of 'what's happened to you'. The Listening to Voices Theatre group offer their stories, not as professional actors, but as people who came to this project hoping to see some changes in themselves - but amazingly, ended up being powerful advocates for others. See: Minster for Health Awards.

<https://www2.health.vic.gov.au/health-workforce/recognition-and-awards/minister-for-health-volunteer-awards>

"This is not just a performance, This is an intervention" (■■■■, performer)

See below, the short film exploring the people and the process, their thoughts, experiences and purpose.

<https://vimeo.com/300229963/b28f6a771e>

Also: Feedback from people who witnessed the performance in Wangaratta in 2018.

Audience reflection on Listening to Voices Performance 2018

Listening to Voices audience response. HOPE is the reason why Chris (Aboriginal Community Worker/Artist) thinks more people should see this powerful theatre.

<https://vimeo.com/252639424>

"You have given me a new perspective and I will always be grateful"

"Such honesty and courage, I will remember this and it will inform my practice as a nurse"

Powerful, engaging, sees people as individuals and not an illness. Experts/ health professionals need to see this inspirational and helpful to those who suffer a mental illness. Reduces stigma.

As a fellow sufferer I was completely taken and mesmerised. The hard truth with a light heartedness. A real winner. Put your performance on DVD PLEASE!

Show the health professionals – show them how they make you feel.

Continue, continue, continue you are reducing the stigma. Loved it. Made it OK.

I was really moved for the third time & believe in the transformative and healing power of

this medium/ format. Its in the doing that the harm of stigma can be dismantled and undone.

Thank you so much for sharing your individual experiences. Please take your performance to schools to teach kids about mental illness, but also training institutions/ universities to show people studying to be counsellors/therapists/psychologist that mental illness is more than a classification/diagnosis/label!!

“Well done! Please keep this play going & building awareness – it is worthwhile. Again, well done & thank you for sharing your experiences. It has made me more aware of the reality people experiencing mental health issues face but also how experience can be turned into a positive & empowerment J”

“Interesting and insightful.”

“Very well done. Worthwhile. Insightful. Highlights the need to listen attentively. More understanding is so needed amongst most of us. Thanks to the whole team for a great, entertaining & educational show <3”

“Please take this performance into schools. Our teenagers need to hear this so they can be less afraid when they are given a label of mental illness. Bring “it” out of the closet. Gave me a strong insight. People are so often stigmatized as stupid and worthless – all proved them to be so wrong. Normalizing mental illness is so important.”

“Great show, helps you to people with mental illness and that there is hope and companionship out there and to learn about the illness and support each other. A+++ Great for the community.”

“Interesting & powerful – offering hope, purpose to carry on”.

“Opened my eyes to mental health. Everyone should come, put it into schools. Well done J”

“That was amazing. It took a lot of courage from everyone involved. It made me feel less alone in being diagnosed with a mental illness”.

“Fantastic – perhaps a short video clip (YouTube link or the like) would allow people to have a sneak peek so more people feel comfortable in coming. WOW! Amazing”.

“Great insight. Noted the word “LISTEN” as a nurse I am sure I have said, “you will be right I will be back later”. Honest and real life we all suffer anxiety. I hate the label Mental Illness”

“This show was amazing. I almost cried. It gave me a huge insight on mental illness, it was amazing to hear all the experiences”.

“Really inspiring! I wasn’t expecting anything like this. Set up and structure were very smart, worth watching indeed!”

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

By challenging preconceived ideas (often perpetuated by media) , by standing up and acting out their own stories, this group is directing the mental health conversation for professionals and community alike toward more diverse and compassionate responses for people in distress, as well as highlighting areas of prevention.

“Each time we perform, people tell us that more people should see this work, that it creates a great deal of understanding and empathy” (project manager Kate Fiske).

The group is not only creatively exploring some of these answers through their own story telling, but, constantly shattering the stigma and challenging outdated paradigms of “chemical imbalances” with personal accounts, each unique but collectively relatable. The work is particularly working to demystify psychosis and voice hearing.

What mainstream psychiatry has tried to do for such a long time is to try to establish a system of classification that maps onto causes and thus allows you to focus on treatment. This has proved a huge waste of time and billions of dollars, a waste of time looking for genes, as we know through brain based neurobiology, that the human organism is in constant communication and relation to their environment. It is the environment that matters both for prevention, early intervention and recovery.

TRAUMA INFORMED

Continue to bring attention to the impact of childhood trauma and the broader knowledge of trauma across a life span. This performance provides community with a sense of how they may help one another. Though some tough and raw content at times, honest personal accounts ultimately share a message of hope, connection and recovery.

"My friend has been going through a tough time. She has seen a doctor and got put on medication for her mental health, but says it isn't helping much. After seeing this, I feel more confident to talk with her and listen" (High school student)

Their stories emphasise the shifting of paradigms, from 'what's wrong with you' to a greater understanding of 'what's happened to you'. The Listening to Voices Theatre group are not professional actors, but through the process of personal and collective recovery and discovery they put on one very professional show.

What we need are resources and money put into things like this royal commission, an enquiry into the way we do our practice, the models upon which we view and conceptualise these human experiences that are very often understandable responses to adverse experiences.

"We need little short of a revolution in mental health care to end decades of neglect, abuse and violence," Mr. Pūras, United Nations Report

"Paternalistic and excessively medicalized concepts must give way to participatory, psychosocial care and support in the community. Cost-effective and inclusive options with successful outcomes do exist and are being used around the world today - they just need to be scaled up and maintained." Puras

The group has become accidental advocates for systemic change simply through sharing their own journey.

Present Listening to Voices, and, in doing so, help change the language and approach to mental health. Correct the false perception that mental health is an

illness, like diabetes. It is a normal human reaction to adverse life events.

Medicalisation has attempted to address mental illness shame and stigma by promoting for an illness 'like any other'. Although these understandings may help order and understanding for some, in my experiences, they can be disempowering. These discourses do little to acknowledge the psychosocial and spiritual impact of living in the societies we live in, they disregard the impact of trauma and the place the power to help within professional circles, not the wider community.

The universalizing of drug use for social and emotional problems is problematic. The underreporting and willingness to discuss the long-term side effects and disability caused by many drugs is alarming.

Increase training and education in the Hearing Voices approach.

Members of the Listening to voices theatre are advocates for more compassionate and diverse responses to experiences labeled psychosis. In their own words

"If I had not found another paradigm to understand my experience and learn to live with it, I would most likely be dead today" ([REDACTED] performer L2V)

The International Hearing Voices Network

Through the international Voice Hearing community, there continues to be a growing consumer movement to place greater compassionate understanding around the many psychotic experiences in general and to work within a framework of hope and recovery, rather than a deficit disease model.

Hearing Voices is a human experience and many people who hear voices live well or actually feel benefited by these experiences. Too often in media and even in psychiatry the messages people tend to receive about voice hearing equates to Mad, Bad or Dangerous. This pervasive attitude is nothing short of stigma. Listening to Voices wishes to highlight and challenge this dominant discourse through stories of discovery, connection, healing and hope. Many of the performers have received labels of schizophrenia in their journey of finding people to talk to about their experiences, Things are changing though and now with the emerging international network of voice hearers and their allies, people have many more opportunities to open up conversations about some of their personal experiences, however unusual. Unlike the often-misdirected

media attention on mental illness and violence, it is actually much more likely that those people who are distressed by their voices have often experienced overwhelming trauma and disempowerment.

Reduce the emphasis on having a diagnosis to receive support, i.e. can someone be in distress and receive help without a diagnosis?

Stop labeling emotion and suffering as a medical illness. Yes, it is real, but it has different outcomes and requires a different approach (healing)..

Provide workers in the field access to training in the hearing voices approach. Understand childhood development and adversity.

Community feedback.

"I am a support worker with NESAY. This performance has really made me think about the way I speak to my young people, and how much better I can do in the future. Absolutely inspirational and raw and so brave for these people to tell their stories." (Audience)

A beautiful piece of verbatim theatre. It was so incredible and feel so understood. This needs funding from the Education department, Arts, Australia. Thank you much love shine on you crazy diamonds.

It makes me feel connected. I am realising now that connection is a key for me. Hearing people on stage makes me feel "we are all in this together". It is not just I. I really loved it. Thank you. From Jane.

2) 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?

Listening to Voices Theatre explores the impact of adverse childhood experiences and the resulting strategies to cope that were referred to as

symptoms of mental illness.

"My voices came to protect me because I couldn't protect myself" (██████, Performer L2V)

Protect the wellbeing of children, and give children the foundations to deal with emotions in a healthy way. Support programs that engage families, support parents and focus on strengths of children. Childhood is the key to a large percentage of severe mental health challenges.

Continue to offer HOPE. Hope that there is a way to understand what a person is experiencing. See previous link (Hope gives you help)

"It was helpful to me to know I was responding normally to abnormal circumstances" (██████ Performer L2V).

Consider completely different understanding of the issue: eg

Alternative Models of Conceptualizing and caring:

Power Threat Meaning Framework

- aims to restore the links between personal distress and social injustice and inequality
- acknowledges the power of lived experience, including trauma and adversity
- can help people create more hopeful narratives about their lives and difficulties.
- fosters respect for the many ways in which distress is experienced, expressed and healed across the globe.

Jointly developed by psychologists and people using services, Power Threat Meaning offers a conceptual alternative to psychiatric diagnosis. It has been welcomed as a radically new approach to understanding psychological and emotional distress and unusual experiences.

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

Explore the meaning of suicidal thoughts in context of a person's individual experience. Make time for people, to understand their needs and provide help. There is no "wrong door". Workers should provide an open dialogue, exploring alternatives to suicide.

Look at peer led support such as "Alternatives to Suicide".

Often people naturally associate the problem to be because of them and our language of self-help and individualism can perpetuate this, rather than locating health with social wellbeing.

"When I was diagnosed with Border Line Personality Disorder and given a brochure on what it meant, this very idea that my personality was flawed stayed with me for a long time. To me, my personality was I, the essence of who I am, and if it was disordered then I was the thing that was wrong! I felt confused, like the sexual abuse that took place at the hands of my father was my fault, and the diagnosis confirmed what I thought all along; It was me who was the problem " (██████, Listening to Voices performance 2016)

As a 9 year old I took an overdose of tablets. I thought that all the conflict at home was because of me. It was me who was the problem" (██████, performer, L2V)

4) 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

Dysfunction, deregulation. All these ideas that emphasize that mental distress is something lodged inside of someone, remove responsibility from governments and schools and communities.

Difficult to find help that's actually helpful

Lots of red tape and lack of communication between agencies makes it difficult to find any help, let alone the exact type a person might need

The disempowerment within the medical model doesn't promote recovery

“There is now unequivocal evidence of the failures of a system that relies too heavily on the biomedical model of mental health services, including the front-line and excessive use of psychotropic medicines, and yet these models persist,” Mr. Pūras United Nations).

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

Accurate information about: 1) What the family member is experiencing; 2) What is being done; 3) What other providers are out there and what they could do for them

More support in general

Support parents to learn to process their emotions, so they can support their children to understand their own.

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

Listening to Voices has had the opportunity to perform for professionals and students of the health industry.

Improve conditions, opportunities for advancement, pay and hours

Lessen stigma around peer workers. Value knowledge and diversity.

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?

The dominance of the medical model in diagnosing children is short sighted and ignores too many environment social factors, including trauma. This is problematic and potentially harmful, yet this is on the rise! We must change the language and rhetoric to stop the mass drugging as the first response. .

The universalising of drug use for social and emotional problems is problematic. The underreporting and willingness to discuss the long term side effects and disability caused by many drugs is alarming.

Increase connection and understanding so that we can empathise with each other. Present Listening to Voices in schools, TAFEs/ Unis, mental health clinicians etc.

Change the language used around mental health.

Correct the perception that mental illness is a chemical imbalance to a normal response to abnormal circumstances.

Reduce the emphasis on needing a diagnosis to receive support.

Mental health services need to stop stigmatising those with a diagnosis, which can be seen when people are treated by their diagnosis, not by what they actually want or need (trying to fit people into boxes doesn't work).

Provide support to victims of abuse/neglect/bullying. Help them feel safe and heard. Don't treat normal reactions to trauma as an illness.

Medication can make it very difficult to feel any emotions, which is not helpful when trying to process and learn to deal with trauma. Emotions are there for a reason. They are not to be feared! Use medication wisely.

Teach children at school effective ways to process their emotions.

People should not have to get to a crisis point in order to receive support.

People do often ask for support early, however support is either denied or inadequate. Increase communities of support, not just services.

Training in trauma informed care should be mandatory for clinicians. However, just training them is not enough. Workers (especially in clinical settings) need to actually use the approach in a consistent and streamlined manner. Part of the issue at present is the quality and approaches of workers are very hit and miss. This creates more fear and trauma for people who are already in distress, and does not work!

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

Thankyou and we hope you gain some helpful information from this collection of ideas and reflections.

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

Name

Project Manager Kate Fiske

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

"Please receive this submission, from the Listening to Voices Theatre Group. Listening to Voices Theatre Group are this year's Minister for Health Volunteers of the Year : Outstanding Achievement in Supporting Diversity. On receiving this award, a few of our members had the pleasure of meeting with Minister Jenny Mikakos and sharing their work and vision for a better mental health system with the judges and the wider audience for this award. Jenny recommended that Listening to Voices made themselves and their messages known to the Royal Commission. Just as The Royal Commission aims to hear from Victorians, Listening to Voices Crew have performed for and been hearing from Victorians for the past 3 1/2 years as we have travelled and performed this creative community development project.. As a part of this submission we would like to share portions of the individual and collective knowledge that both informs the creative work and provides an advocacy platform on topics of mental health and the mental health system. We welcome this Royal Commission into Victoria's mental health system and are encouraged by the increasing presence of honest and fearless dialogue that highlights the experiences of those who have been without a voice when confronted by a world and a system that has often seemed absent of compassion, been more punitive than caring and limited in the models of prevention and care. We are energised at this time in history, knowing that the Victorian Government has chosen to listen and respond with action. The name of this group and project "Listening to Voices" came from this very notion that there were many people who did not have the platform from which to speak up about their experiences of society and systems in regard to mental health, but who had much to say. In fact, the director of this project began this grassroots work with the first question to participants in 2016 "If someone would listen, really listen, what would you say"? Our submission offers you some of the performers and the wider communities answers. . This submission contains comment in the form of quotes and statements from the many conversations and feedback gathered each time we perform. Our key areas of focus include !. The expertise of lived experience and the future of leadership, 2. Stigma, (misunderstanding and mistreatment) 3. Power and choice, and the spreading of hopeful messages through alternative models that explore human distress as much more than a biomedical condition that places emphasis on individual pathology and thus, limited responses.. What we have also discovered on our journey, is the transformative power of theatre as a modality to create conversation and increase the capacity of communities to connect and understand together. This has been both refreshing and inspiring and we advocate for the arts to always have a place in health strategies . "

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?

"Listening to Voices Theatre demonstrates the power of arts in personal growth and community engagement and learning, its ability to challenge stereotypes, and create a safe space for all to speak up, often being able to say Me Too. The work honours the lived experiences of the

performers, placing them as the experts and exploring what works, and what urgently needs attention. Through their story telling, powerful and confronting, they are stimulating very important dialogue. The Listening to Voices Theatre Group wish to highlight the importance of protecting children and supporting families as a means of prevention. In regard to getting support early, we advocate for peer led safe spaces to develop personal meaning. Approaches that understand the person in context of social and environmental factors is primary before diagnosis. Professionals must learn to listen. Please refer to attachment Please take 14 minutes to watch our short film. below. <https://vimeo.com/300229963/b28f6a771e>"

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

Please refer to the document attached. Aboriginal worker talks about the importance of HOPE. Hope gives you help. <https://vimeo.com/252639424>

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.

please see document

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

please see document

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

"please take a moment to listen to what community have said in their comments following a Listening to Voices Performance. <https://vimeo.com/289830585/369ce3d161> Accurate information about: 1) What the family member is experiencing; 2) What is being done; 3) What other providers are out there and what they could do for them. Open Dialogue Model More support in general Support parents to learn to process their emotions, so they can support their children to understand their own."

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

please see document

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?

please see document

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?

"please see document The dominance of the medical model in diagnosing children is short sighted and ignores too many environment social factors, including trauma. This is problematic and potentially harmful, yet this is on the rise! We must change the language and rhetoric to stop the mass drugging as the first response. . The universalising of drug use for social and emotional problems is problematic. The underreporting and willingness to discuss the long term side effects

and disability caused by many drugs is alarming. Increase connection and understanding so that we can empathise with each other. Present Listening to Voices in schools, TAFEs/ Unis, mental health clinicians etc. Correct the perception that mental illness is a chemical imbalance to a normal response to abnormal circumstances. Reduce the emphasis on needing a diagnosis to receive support. Mental health services need to stop stigmatising those with a diagnosis, which can be seen when people are treated by their diagnosis, not by what they actually want or need (trying to fit people into boxes doesn't work). Provide support to victims of abuse/neglect/bullying. Help them feel safe and heard. Don't treat normal reactions to trauma as an illness. Medication can make it very difficult to feel any emotions, which is not helpful when trying to process and learn to deal with trauma. Emotions are there for a reason. They are not to be feared! Use medication wisely. Teach children at school effective ways to process their emotions. People should not have to get to a crisis point in order to receive support. People do often ask for support early, however support is either denied or inadequate. Increase communities of support, not just services. Training in trauma informed care should be mandatory for clinicians. However, just training them is not enough. Workers (especially in clinical settings) need to actually use the approach in a consistent and streamlined manner. Part of the issue at present is the quality and approaches of workers are very hit and miss. This creates more fear and trauma for people who are already in distress, and does not work! "

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

please see document

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

"please see document If you would like to see what the performance contains, here is a link to a vimeo page of the film maker Irene Metter. The performance highlights experiences and areas for reform. <https://vimeo.com/285487108/bf0b11e95f>"