

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

Organisation Name

N/A

Name

India Francic

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

"My suggestions on ways to improve the mental health system include: 1. Providing health care workers with more education on mental health issues so that they can be more easily identified and understood so that patients, families and victims of mental health can feel cared for more holistically and thoroughly. More education of signs and symptoms of mental health issues can help increase the chance of diagnosis earlier rather than later, this is particularly important for mental health issues like eating disorders where the longer eating disorders go undetected the more physical, long term and irreversible damage is done to the patient's body. 2. Allow families to be more included in the care plans and treatments of those with mental health systems, both for underage and adult patients. Patients with mental health issues often are not in a stable mindset to properly understand their diagnosis and care plans, therefore families are an integral part of supporting loved ones with mental health issues and increasing the chance of recovery and positive treatment outcomes. 3. School talks, media campaigns and mental health conferences among all varieties of workplaces will, help increase the awareness of mental health issues. This would be beneficial as it means those suffering will be surrounded by more people who have a more educated and correct idea of mental health issues and the burden and struggles involved with such issues as well as people being able to identify if they themselves or someone they know is feared to be having a mental health issue and the appropriate course of action and support systems in place to help such a situation. In regards to eating disorders in particular, positive body image campaigns in the media and in schools can help reduce the increasing societal pressure to look a certain way and therefore help reduce levels of bullying about appearances and encourage people that they are beautiful and they are enough as who they already are rather than seeking validation only if they look a certain way they deem is beautiful. School talks need to be aimed at younger people as well as later years of schooling too, I emphasise this because my brother struggled with Anorexia for six years until he took his own life this March 2019 and the common age for eating disorders to begin is around the age of 13, yet most schools eating disorder awareness and education programs do not begin until year 11 and 12, but for my brother Dane this was too late, he was already too far into his eating disorder to prevent it from occurring and therefore he became very ill and in a physically critical health status due to years of misdiagnosis' and lack of education and awareness of ED's. 4. A comprehensive eating disorders strategy which responds to service gaps now and plans for the future. Well located and accessible services across the continuum of care, from early intervention to specialist care and across inpatient and community. It was hard for my family to find support before my brother Dane was diagnosed which meant it was hard to prevent him becoming so unwell because we didn't have the proper education and awareness on what we were dealing with and strategies on how we could help him.

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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?

"Parts of the mental health system that are already working well - based off my family and I's personal experience is the small handful of healthcare workers who we were lucky to stumble upon who had a factual and empathetic understanding of eating disorders. This meant my family and I, as well as Dane felt properly heard and understood, and also effectively educated on what eating disorders are and how Dane's Anorexia affected him. Unfortunately though this education was only given to us after he had been formerly diagnosed and was already in critical physical condition and undergoing a hospital admission to stabilise his heart rate and increase his weight. Eating disorders, as well as most mental health issues are often followed with a societal taboo which makes families feel isolated when talking about and dealing with watching a loved one struggle, so having two health professionals (Local GP and Psych Nurse) who understood what they were dealing with and made us feel properly heard really helped make us feel supported and more equipped to deal with Dane's anorexia."

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

"The increase in media campaigns is a great first step in breaking down the taboo and stigma of mental health and suicide, particularly in males, yet there needs to be more formal ways of portraying the same message. What I mean by this is having more talks in schools and workplaces that forced people to take time out and learn about the staggering suicide rates we have in Australia and what can be done to prevent these rates from increasing and hopefully to allow them to overtime decrease. There needs to be more campaigns that empathise its okay to not be okay. Health care workers need to understand that people with mental health issues do not choose to be unwell and nor are they doing it for attention and that each person presents their own mental health struggles differently. Take my brother for example: he was a very private yet charismatic person who was often successful at hiding his mental illness from everyone but my family, this meant that if he were to try and open up about his struggles or if my family and I tried to inform people of his struggles it was hard for outsiders to believe he had Anorexia at all, yet the extent of his suffering was frighteningly much more than just what met the eye. This idea that people have often of mentally ill people not being sick enough to take seriously or at risk of suicide needs to be dismantled because each person handles their illness differently, how one person copes with it may present itself the same way as another person who is deeply struggling with 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.

"It is hard to experience good mental health when there are increasing societal pressures of seemingly being perfect, skinny, healthy, and overall together. On top of that, when those who do struggle with reaching or maintaining a good level of mental health there aren't enough awareness of mental health support services out there for such circumstances. Certain groups of services should not be exclusive. I say this because my brother Dane struggled to find a psychologist within ██████ Health that he liked and felt like he could open up to, but when he eventually did find one they were not part of ██████ health and therefor he was not allowed to see them beyond an initial consultation visit as ██████ health would not release his documents and data to someone what wasn't part of their programs. This was detrimental to Dane and as a result he decided he was never again going to seek professional medical support as he lost hope in the system truly trying to be able to help him recover. "

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

"Youth and males have alarming mental health issues and suicide rates. Since my brother Dane took his own life in March 2019, my family and I have spoken about his struggles and his story, I have been lucky enough to speak at Parliament on behalf of eating Disorders Victoria as a guest speaker to tell Dane's story at their Feed The Soul' event in front of politicians and healthcare workers from all over Victoria as well as I had an article in three of my local The Leader' newspapers where I briefly talked about Dane's story, all of the awareness my family and I have done to share Dane's story in hope of preventing another case like his has come as a real wake up call to our community but it shouldn't take someone dying for this awareness to take place. If there are more programs in place to prevent and support teenagers struggling with mental health issues then maybe suicide rates could decrease and particularly males could be made to feel like it's okay to not be okay and more importantly it's okay to seek help if they don't feel okay. "

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

"The shame, taboo and false negative stigma often associated with mental health issues results in families feeling isolated and unsupported when dealing with the everyday struggles, which in my family's case was my brother's Anorexia Nervosa. We struggled to feel heard, understood and supported by our friends and family in our community and health care professionals we tried to seek guidance and advice from. Most people couldn't believe his Anorexia affected him badly because he was a boy (this idea is incorrect and old fashioned and needs to be entirely eliminated). My parents attended support group meetings for loved ones of people with eating disorders which was a very useful and positive service provided by Eating Disorders Victoria that helped them feel less alone and that their feelings about Danes struggles were validated and okay. "

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

More funding would help ensure current services in place remain open and running and well as more funding into services that can help fill in the gaps in the system would help increase a variety of services so that people struggling with mental health issues either themselves or have a loved one struggling can have options on services they feel will most help and support 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?

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?

"For my family and our own personal experience with eating disorders and unfortunately suicide as well, it would have been highly effective if there had been more comprehensive eating disorder strategies and education which could have helped my family feel more supported and educated on Dane's illness and therefore could have perhaps prevented him from becoming so unwell. Well located and accessible services across the continuum of care, from early intervention to specialist care and across inpatient and community would have helped increase Dane's chance of ED

recovery, as well as preventing suicide had he had more hope that recovery was even possible with the right care and medical attention at the right times."

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?

N/A