



Royal Commission into
Victoria's Mental Health System



Witness Statement of Federation of Chinese Associations (Vic.)

I, Junxi SU, President of Federation of Chinese Associations (Vic.), says as follows:

1. I make this statement on the basis of my own knowledge, save where otherwise stated. Where I make a statement based on information provided by others, I believe such information to be true.
2. I am the President of Federation of Chinese Associations (Vic.). The Federation of Chinese Associations Vic. (FCA) has been delivering social services to the Victorian Chinese Communities since August 1979. FCA also is the peak body representing 140 member associations who are actively participating in the Chinese community across Victoria. FCA provides social and interpersonal support services across the greater Melbourne area. We also work closely with the local councils and other local organizations on gambling therapeutic counselling service, community programs supporting people's integration and multicultural awareness, Chinese culture promotion and holding events.
3. I am expressing points of view in represent of my associations on evidence basis.

Knowledge of and attitudes towards mental health in the Chinese Community

The Chinese Service Centre (former: the Social Welfare Centre) of the Federation of Chinese Association is the information and service centre to the general public who have issues in their settlement (new migrants) in Melbourne, including but not limited to life crisis, domestic violence, suicide, mental health issues, addictions, homelessness and family supports. From the front line, both our intake team, settlement service team and counselling team observe a large number of Chinese-speaking residents here used to or have been experiencing different levels of mental health issues. We work with the Chinese families suffered from severe level of depression, anxiety, borderline personality disorder, delusional disorder or gaming or/and gambling disorders, and we also work with lower risks mental health clients who still find difficulties to getting social supports and affordable treatments within current Mental Health care system in Victoria.

G.P. and clinical institutes (e.g. public hospitals or private psychologists) are the access points for the general public. However, Chinese-speaking clients report issues, including:

- They are not satisfied the quality and outcome about interpreting services when doing counselling service with English-speaking professionals. The quality of interpreting may relate to the interpreter's personal knowledge about mental health terminology and approaches in both languages when conducting their role. On the other hand, the service providers may be lack of cultural awareness about the Chinese patients with mental health issues.
- They are struggling to seek for helps at the early stage and always regard mental wellbeing to physical wellbeing. We are told that they prefer to approach to the doctors for general medical treatments for curing their mental health issues instead of accessing to mental health related services. The reason of the decision making is that they cannot tell the difference between psychical illness and mental illness because a lack of awareness of mental well-beings.
- Counselling is a missing puzzle in Chinese culture, and this is a new concept to general Chinese. Therefore, the Chinese people regard counselling as psychiatric treatment and it symbols that they have mental disorders. However, in fact, counselling is a general treatment for mental health issues. Mental wellness is a general public health issue and every one in two Australian in all their life stage could experience, and most of Chinese people in Victoria have no concern on the fact. In some cases, clients suffered from domestic violence refuse to see a counsellor or a psychologist, as they do not want to be diagnosed as mental disorders, which they found it powerless in Asian culture. Stigmas about mental wellbeing are the barriers to encourage Chinese residents with mental health issues to seek help.
- They report to us that when they access to the system via hospital and support service from mainstream human services industry, they are not well supported in the community, including they find it difficult to use support hotlines and/or approaching to the carer support network due to lingual barrier and financial hardship.
- Carers for the mental health patients also report stress in dealing with the daily communications and needs with their family/friends, since they are lack of the knowledge to self-care and work with the patients. Conflicts are found and some of them lead to suicide or abusive offences, and both the carers and patient even well-known to the police station. We can see most of the carers are experiencing different levels of mental health issues as well, especial the ones provide long-term care to them and live in the same property.

Mental Health Issues in the Chinese community

As the front line workers, we also find issues when navigating mental health clients to the mainstream services. It is difficult to navigate the clients who need a higher care plan to mainstream mental health services or/ and the mental health system in the health sectors. G.P. The reason could be concluded to the limited Chinese-speaking mental health workers and professional health practitioners to provide affordable treatments, hard to access to existed mental health systems due to language barriers about diagnosis and, the patients who refuse to medical support, limited empowerment and insufficient in-language supports to Chinese-speaking patients across Victoria.

Detailed observations are that,

- When we have regular professional development sessions with the mental health service providers, most of the professionals who worked with Chinese patients before found difficult to apply narrative approaches or imagination questions to them and the outcomes are either not ideal or failed. They admitted missing the awareness of Chinese cultural aspects and Chinese patients may find it difficult to understand the terms about Mental Health in their own language since less equivalent terms between Chinese and English. In Chinese vocabulary, the terms of emotions and descriptions about feelings of different levels are limited; terms about negative emotions results down sides and personal shames and failures in the Eastern Cultural values.
- Some clients with mental health issues refuse to approach to the G.P. and mental health workers are failing to provide home visit to them. Referrals cannot be finalised and those clients are referred back to our information centre due to our workers can speak Chinese and provide limited level of emotional support. Resources to support CALD clients with mental health issues are limited, and it always results a dead knot in our database.
- There are gaps in current mental health system. 1. Chinese-speaking clients with low-risk and medium-risk mental health issues are vulnerable in the community sectors, where limited in-language support groups and education program for mental wellbeing can be found and guidelines and suggestions in CALD language can be found. On the other hand, Chinese community leaders also need to be empowered and they need supports to design their programs to deliver messages to the local Chinese residents. It is urgent to raise the awareness of mental wellbeing among the CALD groups in Victoria. 2. The accessing point connect counselling services to psychiatry has not been set up. Multiples referrals need to be made between community services and public health sector on mental wellbeing, and it is easy for people to get lost in the current structure which stressed and reduce their confidence to being cared or receive proper mental health treatment. 3. Guidelines or Process for mapping clients with different levels of mental health issues are missing, which stresses the front line community workers when dealing with difficult or aggressive clients.

Solutions to address the needs about Prevention and Intervention for Mental Wellbeing in the community

According to the *Victoria's 10-year Mental Health Plan*, high quality and integrated services are in a great need to ensure “the service system is accessible, flexible and responsive to people of all ages, their families and carers”. We are now working together to better the Victorian Mental Health System. FCA also advocates for collaboration among local councils, mental health service providers, and local Chinese community leaders to work closely to address the needs to raise the awareness of mental well-being and to build a stronger network of support people Eastern Cultural at all ages and genders to all Victorians Chinese experience their best possible health. Therefore, suggestions from the perspectives of prevention and intervention are as followed:

Firstly, prevention is as important as intervention about Mental Wellbeing Promotion in the community. Campaigns for Mental Health Awareness in CALD community can be launched, educating and advocating the fact of CALD community are experiencing, abridging the gap about accessing to the mainstream services and knowledge and the support from the community level can give people choices to recover and make possible changes available within the interpersonal and social context; it is also important for mainstream workers to build more knowledge about working with CALD mental health patients.

The issues we found in the Chinese community are not a single piece and they can widely found in CALD community as well. The commons of settlement and life stress in studying, working and living in a new country are similar and mental health topics are taboo in most of the CALD communities since FCA has worked closely with other CALD groups over past four decades. We strongly believe campaigns for Mental Health Awareness in CALD community can be a solution to address the gap of accessing to the Mental Health system in Victoria at the Marco-, Messo- and Micro- levels.

Secondly, on-going empowerment and advocacy workshops are sufficient also for CALD community to open the dialogues to break the stigmas about mental wellbeing and encourage them to use counselling service for early treatment or low risk mental health clients. Community leaders among CALD communities can also be supported and empowered to address the mental health issues. Bilingual First Aid program for Mental Health can be a powerful tool to support more CALD language volunteers, carers and/or active community workers to provide on-time supports to the community. In Addition, specific activities for support mental health clients in CALD languages can be organized, designed and reviewed with the help of CALD community leaders. Social Support plays an important role to enrich the choices of recovery at the community level.

Thirdly, affordable and high-quality in-language counselling services could be a supplementary mandatory to the current public mental health system. It is an important piece to connect the individuals and CALD community to the professional health industry. Better treatment outcomes are collected for first language counselling service and secondary consultant sessions in our centre; the data are based on our fully funded therapeutic counselling in-language service from Victorian Responsible Gambling Foundation. The team in our centre provides 'one-stop' and 'no-wrong-door' integrated service to the Chinese-speaking gamblers and the affected ones. Gambling disorder is also one of mental health disorders in DSM5, and our team is specialized in work with clients with addiction disorder issues. However, we are willing to deliver a comprehensive care model for the local Chinese community. We sincerely hope that general counselling services for Chinese community could be established in current Mental Health system for providing accessible support and care. It is essential for state government to consider funding allocation for a boarder mental health care and treatment sector in the CALD community.

Sign:



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