

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?

"Much more public education is needed so that the whole wider community gains an understanding of what Mental Illness actually is, and how to access treatment options, and why it's crucial to do so, to reduce the huge suicide toll. More public education is needed to reduce the stigma for people needing to access treatment, in particular males, ethnic communities and the elderly. Males due to the stigma of masculinity, ethnic communities as the stigma is often perceived as shame on the family of someone who is crazy, and the elderly who because Mental Illness wasn't acknowledged or understood in their lives, often project negative stigma to younger people with Mental health conditions, labelling them as lazy or silly or not trying hard enough. "

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?

"Services such as Headspace and Beyondblue are working well to support early intervention and support young people. In my experience, growing up in a European household with a mentally ill Mother, it took multiple suicide attempts at the age of 50, before a diagnosis was made, of Borderline Personality Disorder. At that age, my Mum wasn't able to accept, let alone understand what her conditions were, after a lifetime of being told that people with mental problems cause shame on the family. Also by that age my Mum's BPD thoughts & behaviours had become so normal to her she simply could not accept that she had a problem that needed treatment. We need public education to support not only young people, but Adults who have lived with Mental Health conditions without knowing or understanding that there are treatments available, and it's never too late to start addressing your Mental Health no matter what age you are."

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

"LifeLine is helping, CAT Team through calling 000 is helping, GP Mental Health Plan with subsidised psychological sessions is helping, but nothing is working well enough at all. People who have experienced trauma need at least 2 years of consistent psychological sessions in order for proper and sustained Mental Health recovery. 10 sessions isn't enough for the majority of people needing psychological therapy. Even after the Medicare rebate, the out of pocket costs to access psychological treatment are still completely out of reach for many people. The waiting times to see a psychologist are too long. When will the Suicide Toll be published alongside the Road Toll? The media needs to be able to report on this, so that the wider community are aware of the daily reality and impact of suicide, instead of it being hushed away and not spoken about. "

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.

Not having skills to know how to deal with stress in life is a big factor. Not being able to afford

psychological sessions when theyre needed. Finding a psychologist thats the right fit can take a long time. Waiting lists to access treatment are too long. There seems to be a huge gap in support when a mentally ill person is discharged from an Acute Mental Health hospital ward. The onness seems to be on the mentally ill person to follow up with their GP or outpatient treatment. This is how people slip through the cracks.

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

N/A

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

"I was so angry that the hospital Acute ward nurses and doctors refused to give me any information about my Mums mental health conditions while she was there recovering from a Suicide attempt. I was told over and over again that it was against patient privacy for anything to be discussed with a family member unless my mentally ill Mum gives permission. I wasnt allowed to know if she had been diagnosed with a mental health condition, or what it was unless she told me herself. I didnt find out that my Mum had been diagnosed with Borderline Personality Disorder until after she committed suicide. To this day I still dont know what support there is for family members living and caring for someone with a Personality Disorder. "

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

Better pay to represent the importance of the life saving work they do. Better and compulsory ongoing training about mental health conditions that are still not fully understood such as Personality Disorders.

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?

Increase Medicare rebate and the number of psychological sessions per year. Reduce waiting times. More Acute Care beds in hospitals. More Mental Health Nurses in hospitals.

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