

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

## Organisation Name

N/A

## Name

Mr Clive Kempson

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

"The stigma is reducing with the advertising on TV, celebrity and sport stars coming out admitting mental health issues. I have found people judge you because of your mental state. More public talking and advertising to bring it to people's attention that it is acceptable. Easier access to information about services available. More emphasis on everyone not judge children and young people. It affects all ages for all sorts of reasons."

### **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?**

"I think that the system while under stress does help a large portion of people. Although when is the support best received? As a stroke survivor I found the lack of attention to my mental health was very disturbing. In hospital services should be available for everyone, and a mental health assessment should be mandatory. This would reduce stigma about receiving help."

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

"More support when people are asking for help. 10 sessions on a care plan may not be enough, so the professionals should be able to authorise more sessions. More beds for people who are needing supervision when suicide is an issue."

### **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.**

"Asking for help is the hardest thing to do. As I know personally, after my stroke I needed help but was stubborn and didn't ask. I think people just shutdown and try to cope. Finding services to suit your issues is hard and not all GPs know who or where to get you help. More education for GPs on services and providers."

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

"Where you live has a bearing on services available. Country and regional areas have less access to services, not just mental health. Providing services to these areas would help, maybe newly qualified people can be made to spend some time practising in these areas. Giving them a reality check on people's issues in these areas. Telehealth will be a great addition to mental health in both regional and city areas, giving people access to help without leaving home."

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

Family and Carers are the forgotten people in any mental health journey. I think that these people

should be approached and offered advice if they want it. These people are integral to the improvement of the person suffering.

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

"I do not know how to attract the mental health workforce; I think these people have a calling to help others. Keeping these people in the space is a difficult one. My view is it is not all about money although money is important, its about helping people. The satisfaction of knowing you have helped someone through there dark times to a better outcome. Engaging people who have suffered to become involved in groups for others, with the help of support workers."

**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?**

"The system needs to allow for engagement with groups, sporting clubs and employer groups to allow people with mental health issues to become part of something without fear of ridicule and whispers. They deserve the same respect as anyone else. Being part of something can make a big difference"

**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?**

"I would like to see the current mental health care plan be revised. 10 sessions for me didn't get me the help I needed as it can take this long to find a therapist you connect with, then you have to pay. If the psychologist, psychiatrist or therapist deems it necessary they should be able to get approval for more sessions. This in turn will reduce the burden on the system long term, as the people will receive the help needed and not stagnate or get worse."

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

"Engaging with Government and your local MP to share your story and enlighten them to the downfall of the current system. Obviously the Victorian government will need to increase funding to mental health, but it needs to be a funding model that will make services available to everyone. Not just specific groups and service providers."

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

I am uploading my submission of my journey

## Clive's story

In November 2015, at age 52, I Clive Kempson suffered a stroke. I remember being admitted to hospital, and spending 10 days on the stroke ward while undergoing a battery of tests, all to no avail. No one could tell me what had caused his stroke.

During this time, I was confused and scared what was to happen next, it would have been helpful for my mental state to have had someone come and explain what had happened and what lay ahead. Offering me emotional support from a psychologist while in the Acute ward may have been useful, it may have been too early but my mental health was and is important.

Unable to stand unassisted, with no use of my right arm or leg, and experiencing speech problems, I was transferred to an in-patient rehab facility for just over four weeks. This was a scary time for me, as it became apparent to me that my recovery was going to be a long, hard road, and I was worried about what the future would hold.

Before my stroke, I was a small business owner, installing and servicing electronic security systems in the commercial, government and industrial sectors. Following the stroke, I was forced to decline two contracts we had been awarded, valued at \$250,000. My confidence and self-worth took a big hit as a result, and I was now weighed down by thoughts of not finishing projects, letting down clients, money worries, and what the impact of this would have on my family.

It is at this point I felt I would have benefited from a consultation with a mental health professional. However, I had no contact with a mental health professional at any time during my hospital stays. I was never offered a mental health assessment. At this point having the help of a mental health professional with experience with stroke should be standard for all stroke patients.

The team of health professionals I had working with me were doing a great job, but they were focused on getting me back to walking and talking and not my mental recovery from this life changing stroke. Being in a dark place about everything had me thinking that life would be easier if I was not here.

When being discharged from hospital, there was no real discharge planning for what could be expected at home or future rehabilitation. At this point it would have again been beneficial to have had a consultation on how I was coping mentally with everything going on.

This should be a requirement for all patients being discharged to go home from the rehabilitation (sub-acute) ward. In line with stroke guidelines a discharge should be discussed with all concerned parties covering physical, emotional,

medical, social, recreational, financial and community support. Again, any thought about my emotional state was overlooked.

Being discharged to doing rehabilitation at home as it was close to Christmas and the rehabilitation centre would be closed, was very traumatic. Meeting new therapists was an emotional time, Christmas approaching fast and not wanting to go out in public were really putting me in a dark place feeling so helpless and not knowing where to turn for support. People (family & friends) saying, they were there to help whenever I needed, but reaching out and asking was too difficult and terrifying.

Once in community rehab, I was fortunate to work with a very supportive occupational therapist and physiotherapist, both of whom felt I would benefit from speaking with a psychologist. However, I was told that I could not access the services of a psychologist at the rehab centre, and would have to source one outside. Again, rehabilitation services were focused on the physical.

Asking for help was a difficult thing to do! With the support of my General Practitioner, he wrote a mental health care plan and helped me find a psychologist. With access to sessions limited, I was not able to get the help needed. The care plan sessions concluded and I was still struggling, feeling lost and in a dark place. With no income I could not continue to access the services I needed. Fortunately for me, I stumbled upon a free counselling service run by the local council.

I met with 4 different psychologists, but did not feel I had a connection with any of them. 1 psychologist tried telling me how I should be feeling, how she would know I have no idea. In talking with my GP about speaking with a counsellor, he said that if the counsellor made me feel comfortable it was worth a try. I found a counsellor who was very helpful, but building trust was hard for me. Explaining my inner most feelings about life, my relationship with my family, loss of my independence, letting people down, unfinished jobs and disappointed clients.

Having access to the right psychological services earlier may have impacted on my recovery and acceptance of what had happened to me.

During the first few months being in a dark place had consumed me, thinking about how life might be better for everyone else if I wasn't here anymore. The counsellor listened to me, offered support in dealing with my thoughts while trying to gain my trust that he had my best interests as his priority. Over the next few months we progressed and worked on accepting what had happened and there were positive things in my life. During this time my relationship with my wife was breaking down and life was again becoming difficult.

Today, I am continuing on my recovery journey. Currently I am looking for a psychologist who can help me deal with the feeling of being lost, and help look to the future and create new achievable goals. I am living independently in a

lifestyle community and am back driving. Unfortunately, I have been unable to regain the use of my right arm in a functional way and have been unable to return to work. However, remaining positive about the future and making plans for a new business.

*"During my recovery, my mental health seemed to be of less importance than my physical recovery to the health professionals that were treating me, but for me it was just as important to recover mentally so that I could cope with the physical demands of rehab,"*

Surely Mental Health is important and should be a priority to help with such a traumatic event. Early intervention in my journey through recovery, may well have been beneficial for me and my family.

These services should be available ongoing if they are deemed beneficial to the client, it should NOT be a financial burden to continue.

There should be additional funding for mental health services,  
**the system is in CRISIS.**

When someone suffers a Traumatic event, they should be offered support as a necessity, being assessed for any current or future problems.

The professionals need to be more informed on the client's specific medical condition. Then they can be better informed on what the client is going through. Whether as an inpatient or during the rehabilitation process, not having to stress and worry about finding these services themselves would be a positive impact for them.