

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

Organisation Name

N/A

Name

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

"Mental illness requires support and care that is commensurate with cancer treatment. They both pose a risk of death or survival, and the longevity of both is a significant amount of time that the sufferer requires to become well. I have spent the last six years with depression and in October 2018 I decided to end my life however I was interrupted. I had planned to try again. January 13 this year my best mate ended his life and then on the 7 May I was diagnosed with breast cancer. I was suicidal up to that point, then I decided to fight the cancer and the experience has changed my perspective on depression. When you tell someone you have cancer the response is sympathetic and supportive. It's not often that we reveal we are suffering depression to anyone, because it feels weak and vulnerable. If we view depression as the new cancer and make it a tangible fight to win, we're halfway there. "

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?

"Preventing mental illness starts in the home where each child is nurtured in a cosy and safe place. These are the fundamental memories and experiences that give us the underlying ability to cope through hard times as adults. I have a saying that maybe human extinction will occur because we have shifted from an altruistic world where it takes a village to bring up a child, to a narcissistic world where parents and people shout that the system failed the child. Implying people fail to prioritise their own offspring. Early treatment is love and nurturing in the home. "

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

"I'm afraid I can't see anything working well. I get particularly frustrated with crisis centre phone numbers advertised on tv screens or other media, telling us to call if we experience any impacts as a result of a news story. As I mentioned previously I had decided to end my life last October, and as a last effort to reach out, I rang lifeline. In fact I have rung lifeline on two separate occasions and I have never spoken to a call taker. My point being, don't advertise phone numbers that are not resourced to meet demand because it's just another kick in the guts when you're already down "

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.

"Unfortunately there is a treatment void when suffering depression. Firstly the person needs to tell a doctor how they are feeling and be diagnosed. Then the person is responsible for getting the medication and administering as prescribed. If they are willing to talk to a counsellor they are also responsible for organising and paying for the experience. Finally it's all up to the individual to get over it' which can take a year or a lifetime. I now can provide insight into a more proactive

approach to viewing depression. Think about breast cancer. The organ is the breast and the symptom is a sore lump. Treatment is chemo and the practitioner is a whole host of doctors, surgeons, radiographers etc. they have done the thinking for us and we have made an informed choice about treatment. If you now think of mental illness where the organ is the brain and the symptom is sad emotions in my mind, treatment is medication and counselling however the practitioner is the sufferer. No one knows the what in the treatment void so it's just guess work. Treatment will work if the practitioner is completely invested in a positive outcome. "

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

"I think the socioeconomic divide can also be used as an indicator for emotional intelligence, which is required when treating depression. "

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

"My partner tried to find assistance for caregivers of depression and she found nothing of any significance to help her. We do however, have many resources at our fingertips because I have breast cancer. It's definitely a good model to work from. "

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

Funding needs to go to appropriate resources and services. More research is required in the treatment void and more resources for support such as the breast cancer model.

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?

"Discussion groups that are invested in sharing experiences in a safe environment. Face to face buddy who can help another, could be a health worker who has a portfolio of buddies. The bottom line is that stigma has to reduce for people to talk, and research needs to reveal what's required in the treatment void to understand the needs. "

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?

Research the treatment void.

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

"Depression is the new cancer, start lobbying the government for mental illness to be a priority and reflect this through funding research "

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

N/A