

United In Compassion Limited
 a not for profit organization
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for the dignified alleviation of suffering with compassion & empathy

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About us

United in Compassion (UIC) is Australia's Peak Medicinal Cannabis advocacy body which helped bring about the 2016 legislative changes this Review is tasked with exploring. Founded in 2014 by Lucy Haslam and her late son Daniel, UIC's main functions since then have been to promote education and knowledge around clinical uses of cannabis as well as campaigning for improved patient access to what, for many, can be a life-saving medicine. We welcome the opportunity to provide a submission to the Royal Commission into Victoria's Mental Health System.

Our mission

Our primary mission is advocating for patient access to Full Spectrum herbal medicinal Cannabis extracts and dried herb Cannabis in a manner which is safe, effective, affordable, equitable and favourable for patients, for the dignified relief of suffering.

Our submission

At UIC we encounter many patients suffering from a range of different chronic illnesses which traditional medicines have proven unable to treat. In such instances the current healthcare system is quite clearly failing these patients, many of whom are left feeling helpless and alone at one of their most vulnerable times in their lives. These circumstances usually cause huge amount of stress on both them and their families or carers.

Causes of mental illness are still not clearly understood, though a variety of biological, psychological, and environmental factors are known to contribute to its development and/or progression. In the world of health, Government, regulators and healthcare professionals are usually reliant on research findings to identify solutions to conditions and indications, however in an area often lacking in clarity, 'gaps in the system' occur. This of course has impacts both at societal level and on patients, many of whom feel its current state the healthcare system is letting them down.

While UIC recognises that research and strong evidence-based solutions are crucial for patient care we also believe strongly in the need for compassion - something we feel the process often lacks. Addressing what is a misunderstood, stigmatised and personal health concerns such as mental illness is a perfect example of this.

Below we outline a number of recommendations which are in line with UIC's Mission and which we believe will assist in alleviating the suffering of patients with mental health issues in Australia.

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

Medicinal cannabis use and mental illness in fact share common ground: they are both healthcare issues and both involve a great deal of stigma, are worsened by a lack of education and public awareness which prevents meaningful action and dialogue.

Evidence-based education and public awareness activities should be undertaken with Governments and business providing incentives for grass root communities and advocacy groups to educate and inform people on mental illness that is relatable to the intended audience.

2. 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?

Destigmatising and normalising is an important part of encouraging dialogue and understanding in the community. But while the causes of mental illness remain unclear, a one-size-fits-all approach to treatment is inappropriate.

N=1 trials are becoming very topical in research circles in part because of the complexity of certain conditions and the need for personalised medicine. How pain - physical or mental or both, is processed varies greatly between individuals who thus require different types of support. We should not therefore be looking merely at hard science and data but embrace the complexities that make us human and approach treatment options in such a manner.

N=1 could also be an answer to how we can provide access to patients immediately, while still gathering the data that could go towards larger studies.¹

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

As a family member or carer the feeling of being unable to help a loved one can leave people feeling helpless and desperate and affect them in a multitude of often negative ways or by driving them to previously unthinkable courses of action in order to help their loved one. Such individuals are the ones that sufferers rely on the most for their help thus assistance to these family members or carers crucial - and best offered by Governments, organisations and doctors having the right tools to offer. Education and continuous investment in research is required - which would illustrate the commitment of

¹ <http://medicalrepublic.com.au/n1-trials-break-medical-cannabis-deadlock/12224>

the healthcare system and reassurance it has not given up along with a legitimisation of this as a health concern demanding an holistic approach.

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

Continuously investing in new solutions is important in supporting the mental health workforce. The Victoria State Government's 'Better Health' website asserts '*most people benefit from counselling, medication or both*' yet there are few options available to patients if medication is required to assist them. The University of Sydney - Lambert Initiative for Cannabinoid Therapeutics is undertaking research on the use of medical cannabis as an alternative therapy for various range of mental health issues, including; Addiction², Anxiety³ and Post Traumatic Stress Disorder⁴. However most of these initiatives are instigated by research institutions or private companies whilst, in Canada⁵ and the United States⁶ Governments are investing in some of these important research areas. In Australia however there is little or no investments by Governments within Australia even as cannabis – used under the care of an experienced healthcare professional – is showing enormous promise in the area of some mental illnesses.

While we believe firmly that medicinal cannabis is *not* one-size-fits-all solution we do feel that the currently available treatments simply are not working for many. We therefore encourage Governments to think 'outside the box' call on them to demonstrate their commitment to this field by making an investment in alternative options for treatment - including medicinal cannabis.

5. Thinking about what Victoria's mental health system should ideally look like, tell us what areas and reform ideas you would like the Royal Commission to prioritise for change?

Recommendation 1: Invest in advocacy groups within relevant communities to undertake grassroots public awareness and evidence-based education programs that speak to a range of different audiences.

Recommendation 2: Invest in innovative research that addresses the unmet need of medical options available to patients - *not* a one-size-fits all approach.

Recommendation 3: Make these medical options accessible to patients in need.

Recommendation 4: Governments should be taking a lead on such initiatives. Stigma and misinformation can only be addressed at the highest level and a demonstration from

² <https://sydney.edu.au/lambert/our-research/addiction.html>

³ <https://sydney.edu.au/lambert/our-research/anxiety.html>

⁴ <https://sydney.edu.au/lambert/our-research/ptsd.html>

⁵ <https://news.gov.bc.ca/releases/2018MMHA0063-002265>

⁶ [https://maps.org/news/media/5445-press-release-maps-receives-\\$2-million-grant-from-colorado-for-study-of-medical-marijuana-for-ptsd](https://maps.org/news/media/5445-press-release-maps-receives-$2-million-grant-from-colorado-for-study-of-medical-marijuana-for-ptsd)

Government through investment and commitment to addressing this issue is crucial to breaking down barriers and encouraging change in the community.