

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

Organisation Name

N/A

Name

Mr David Porter

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

"The primary reason stigma attaches to mental illness is that people fail to understand that it is an illness, not weirdness. People with mental illnesses behave in unusual and sometimes frightening ways. That can be very confronting for observers. I suffer from anxiety and depressive disorders, and have done so for many years. They are mood disorders--they affect how my feelings operate. Feelings are the result of complex and presently poorly understood biochemistry. Looked at in that light--feelings are biochemistry--there is no reason why your feelings biochemistry has to function properly in the same way that there is no reason your liver biochemistry has to function properly. In my opinion, if the wider community could understand that mental illness is the mind's equivalent of liver dysfunction, stigma would be greatly reduced. "

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?

"For me the hardest part was getting started with treatment. Before I got treatment, I had known for about 18 months that there was something very wrong with the way I felt all the time. But being a hard core bloke, I would not admit it and did nothing about. Starting the treatment process is actually very easy: make an appointment to see your GP. That's it. When I was really crazy I was often incapable of acting in my own interests. I was lucky enough to have a wife and a GP who navigated the medical system to get me the treatment I needed. I know it's actually not that hard to navigate the medical system, except when you are crazy. The navigator point is important. Medical treatment is great, but when you are crazy you also really need a navigator. That navigator might be a medical professional or a loved one but someone the patient trusts needs to be in the background keeping a close eye on things, giving a nudge when necessary and sometimes stepping in to take control. "

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

"Suicidal ideations are a symptom of an illness, and the illness is treatable. That understanding makes all the difference in the world because it provides alternatives to suicide--you can get treatment!"

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.

"I have no suggestions about preventing mental illness--as far as I can tell everybody who finds themselves with a mental illness arrives at that point in their own unique way. But once the mental illness box has been ticked, understanding that medical treatment is available and it works is of great benefit. Looking back, I wish I had made an appointment to see my GP 18 months before I did. Getting across that point--make an appointment to see your GP!--is the best advice I could

give anyone with a mental illness."

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

I have no answer to this question.

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

"From my perspective I doubt that government can do anything on this front. Having a loving family is great, but it's a family thing, not a government thing."

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

I have no answer to this question.

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?

"Promote income protection insurance. Income protection insurance is the thing that most eased the practical difficulties mental illness imposed on me. It was the difference between complete disaster and a life that, objectively, is pretty good even if I still have a mental illness. The thing about income protection insurance is that you have to get it before you are sick. "

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?

"All up, I am pretty pleased with how the Victorian health system dealt with my mental illness. All necessary services are available. "

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

I have no answer to this question.

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

N/A