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

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

"When observing a friend who has been diagnosed with a mental illness, I have noticed that she only has episodes when she is not receiving the particular support she requires. Otherwise, if she is well loved and cared for, is well resourced and supported, she is quite normal'. Perhaps one might conclude that therefore there are two types of mental illness: one which exhibits itself upon the withdrawal of support and resources to an individual; and another which even with all the resources available, still exhibits itself, although in a more manageable manifestation. If mental illness were recognised as something that could happen to anyone, given certain unfavourable conditions, then maybe there would be less of a stigma in society?"

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? N/A

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

"Helplines, if you can get through seem to work well. Suicide essentially has to do with society's relationship with a) the after-life (the belief that suicide will end the pain) b) pain itself (that it is something that must be eliminated) c) society's obsession with independence which manifests itself in people not wanting to be a burden on others or society. If each human being were valued in themselves without needing to prove themselves as worthy due to their independence, this might be a good starting point for providing care for any person who has any illness. Euthanasia from a certain perspective is just the cheapest option for a society that doesn't want to be burdened with caring for others. I suspect some people who have a mental illness and don't want to be a burden on society might choose to paint a picture that fits into the euthanasia requirements, when really, they just have too much pride and don't want to be a burden on others. Euthanasia should be repealed and if people truly want to die, they should be given the option of not taking food. "

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.

"Lack of support and resources makes it hard for some people to experience good mental health. Mental illness can be prevented in some people by increasing Newstart, Ausstudy and Youth Allowance to a living wage and not requiring people to look for work at all unless they are 100% healthy. When people are healthy, they will naturally want to get a job. When they are unwell but deemed well enough to work, this burdens them to the point of compromising their healing and extending their unwellness. Housing needs to be a priority. " 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?

N/A

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

Give them far fewer cases to work on. They should have one or two cases per day. Spending quantity time with their client will help them address more of the issues of that client faster. Often they come back two or four weeks later to see the same issues because the client needed them to walk them through the process rather than telling them what to do which they might already know but actually need someone to do it with them.

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?

"To improve economic participation, people need health as their number one priority. If they have 50% health, they should not be regarded as being 50% fit to look for work. The aim should be 100% health as the foundation for being able to then begin to build their life unless it's reasonable to assume that they will never achieve 100% health."

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?

"Advocate for the Federal Government to increase Newstart, Youth Allowance and Ausstudy so that people are empowered to help themselves. See last question regarding doctors misdiagnoses, please, including factors which make it easy for a doctor to diagnose something as a mental illness when it's not rather than being able to say that he/she doesn't actually know what the problem is - in other words, the stigma of a doctor not knowing what the problem is also needs to be addressed. "

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?

"I was misdiagnosed with a mental illness. I am concerned there is no instrument to correct the misdiagnosis. I am also concerned that mental illness is the default diagnosis when the real illness is difficult to detect. I am concerned that doctors are not scared to say that someone has a mental illness but are scared to say that someone has an illness that may not be healed. This might have something to do with rorting of the disability support pension. Centrelink do not allow people to provide a medical certificate if it's the same problem even if the problem has not gone away! They assume that a doctor can diagnose everything correctly and also cure them if they know what the problem is. There should be room for a problem the doctor cannot diagnose or a problem the doctor cannot fix! After years of essentially living in bed with chronic pain, complete

lack of energy and chronic illness, yet still being required to look for work because I might get better, and trying to get by on a payment which was less than my expenses (needing to go to soup kitchens to eat because I only had enough for rent and a few other bills!), I was completely demoralised and felt it was pointless going to the doctor as he would just tell me to get a job rather than help me get better. But at a certain point in time, I decided I would pester my doctor continuously until he had run all the tests to see if the problem really was in my head which I did not think it was I experienced it in my body. Eventually, I was diagnosed with anomalous right coronary artery (I had chest pains), and vitamin D deficiency. My doctor was flabbergasted that he was wrong, but I doubt that he recorded anywhere that he had misdiagnosed me for years. Now I no longer suffer the extreme lack of energy because I have vitamin D supplements and I can manage my chest pains by not pushing myself to extremes and managing stress levels. How many others have been misdiagnosed and left to suffer in silence?"