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

Submission, 0002,0032,0071

Name

Anonymous

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

"I know of a young girl applying for the army and the police force . She was knocked back because she said she had previously had some mental health issues when she was a teenager. The issues related to an eating disorder. Its not good enough that people admit to an issue and then are punished, sacked or denied access to work or career opportunities. Discrimination on the grounds of health . "

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 don't think many things are working well . We need more help at medical centres . Mental health nurses . Mental health kiosks in medical centres and hospitals . We need Mental health hospitals and retreats. Cognitive Therapy research. Affordable Retreats for people needing help. Cancer patients have amazing help, during treatment and after treatment. Mental health should be exactly the same. "

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

Not much is working- look at the figures. Run mental health hospitals like Peter Mac in Melbourne. Individual care nurses that the patient can contact. Regular checkups. Encouraging family or friends to accompany patients to appointments. Free Counselling services. Regular surveys. Free information and library. Chapel and quiet rooms for reflection during treatment. So much more could be offered.

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.

"More of everything, there is not enough facilities or doctors or qualified people to help families and sufferers. No follow up after patients given medication, often no mental health package handed out. (due to time constraints) Patients are not being made aware of possible side effects of medications. Quick fix .. not enough encouragement for families to be involved in the treatment of the patients "

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

"No help, no facilities, no hospitals, no emergency care in many communities. for mental health issues ."

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

"So much more is needed, encouragement for family meetings with doctors or counseling. More emergency accommodation with no stigma. Retreats rather than hospitals. Cognitive therapy rather than meditation. If carers had more help in the form of respite and information they would be able to manage better. "

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

"More money, better facilities. More resources. Better hospitals, better emergency accommodation for mental health patients."

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?

Take away the stigma. A mental health diagnosis is the same as a cancer diagnosis. It should be treated with the same respect.

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? "Prioritise: Medication, research, problems associated with, addiction to SSRI'S, problems with aggressive behaviour and antidepressants. Suicidal behaviour due to Antidepressants. Medication not being taken correctly, no warnings about possible side effects. I.e low libido, suicidal thoughts. Etc. No help with how to take medication. Ie no drinking alcohol, no drugs while taking medication. "

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

"Change so many things . The Local doctors don't have time to spend with someone who has mental health issues. 2 min, 8 mins , 15 mins in a surgery is not enough time . They are not handing out mental health packages in many instances as it takes to long. They are just handing out medication. (with no warnings or help). "

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

"I have known 20 people that have committed suicide since 1999. My husband lives with Depression, my best friend hung himself, my school friend shot herself, my children's friends and good friends children' over a three year period killed themselves all in a small town where was handed out to anyone mildly depressed .. I started to have suspicions about Antidepressants twenty years ago when I met a women who said she had had the worst week of her life, she had taken and struggled all week with the urge to kill her self, never had she felt suicidal, depressed yes but not suicidal. Since then I have spoken to many people and often I hear the same story. We need an urgent Enquiry into the over prescription or overuse of Antidepressants in Australia and a possible connection with our massive suicide rate. Everyone should think about this and encourage more research. Was your friend or family member on Antidepressants when they died? Was it strange that they had never been suicidal before? Did they get worse? We need to look at a possible correlation between and other similar and suicide. Look at side effects: suicidal thoughts, low libidos and addiction and aggression. Our children, soldiers, young men and women, our indigenous families should not be suicide statistics. Movie stars, so many being forced to stay on antidepressants. Amy Winehouse was 14

and on Antidepressants. I'm sure that these drugs work for some people but I feel that not enough specialist assistance and ongoing help is being offered to patients on these drugs. Since the introduction in 1999 of SSRI 's by GP's for mainstream depression and anxiety, Research has shown some links with Suicide. The exact figures are on how much the suicide rate has increased. Before 1999 I had never known anyone who had committed suicide, then within three years I knew of 20 people. The Pharmaceutical company's are pushing this. New and old research has found some links, especially for children, and young men and boys. Doctors need to provide a better service when prescribing antidepressants, families or relatives need to be notified. They really should have a nurse administer drugs if absolutely necessary and monitor the patient.. especially if they are having side effects! Are they taking other drugs or alcohol? Do they have a support team at home? Have they been given a mental health package? Do they know about the side effects, they could experience? Is it addictive. If they had been diagnosed with Cancer instead of depression / a mental illness ..they would have a massive support network and ongoing supervised help and treatment. Beyond blue, RUOK, The Black Dog Institute and all associated groups need to look closely at SSRI's and the suicide rate. They need to look at Cognitive Therapy. Some of the Mental health funding could help provide a kiosk with nurses in all doctors surgeries and hospitals to give out drugs and information. The 8 minutes that you get with your doctor at the clinic is not enough time to give a depressed person the time they need to get help. Businesses or corporations Taking over medical centres are setting a new trend by lowering the consultation time for patients with doctors to aprox 2mins according to a GP who recently attended a conference in Sydney. We need to do more. I have been to suicide conferences and read so many studies. We need to do things differently! I have so much information and Lived experience through close family and friends, with suicide and depression. - [] Do SSRIs and other antidepressants cause aggression and suicidal -[] thought..?? Yes they do! -[] How do we make this a subject? How can we stop the overprescribing of Antidepressants! - [] Anecdotal evidence is needed! - [] Why isn't it a subject ?(without Pill Shaming) - [] How do we pass the current information on to the general public ? - [] Does the medical profession have suspicions ? -[] Robyn Williams, Kate spade, Amy Winehouse, L'Wren Scott, Michael Hutchence. So many others. - [] - [] "