Your contribution

Should you wish to make a formal submission, please consider the questions below, noting that you do not have to respond to all of the questions, instead you may choose to respond to only some of them.

- 1. What are your suggestions to improve the Victorian community's understanding of mental illness and reduce stigma and discrimination?
 - Active community engagement (sworeness work from grassroots and government levels, and all tetween or discrimination in work & schools; safe reporting when such eligs arise. A focus on lived experience from individuals of carers that demonstrates of gives a voice to recovery and the person as a whole rather that an illness or diagnosis.
- 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?
 - · Increased funding of staffing of early intervention services

 · Greater GP, School wellbeing coordinator, etc. swareness

 and screening capacity, a thousangh referral pathways.

 · Universal, and t indicated, and targeted approaches

 to increasing knowledge of avoilable healthcare services and

 how to wadigate methal health system.

 · Increase 10 medicare session to higher number, 6/or decrease gap.
- 3. What is already working well and what can be done better to prevent suicide?
 - Increased engagement & follow-up is suicide survivors, and individuals experiencing acute and/or chronic suicidal ideation & behaviour

 Safe & available supports, on phone & in person.

 Address & change language around suicide. "Completed suicide / suicided talter or "died by suicide/ due to mental health" rather than "committed suicide".

4. 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.		
Sociocultural pressures, culture of hard work driving people toward physical, emotional, psychological buryour. * Pisconnect between self, other, world, vole. * Must normalise that mental health fluctuation is Common. * Stigma utin health profession field, and workplaces individual exist in making accession of support difficult. * Thresholds of being "sich enough vs "not sick enough " should be erased. 5. What are the drivers behind some communities in Victoria experiencing poorer mental health outcomes and what needs to be done to address this?		
Lack of access, financially & in terms of geography, tenowledge of services, difficulty navigating some. Socioeconomic divide Cultural and linguistic forriers and easy to access Emporthetic, patient, non-judgemental services should be the rule, not the exception. 6. What are the needs of family members and carers and what can be done better to support them?		
6. What are the needs of family members and carers and what can be done better to support them?		
· Access to sound information, hope, and support. · MHCPs, carers' days of leave. · Messages of hope from professionals & others at lived experience (peer work).		

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

· Good, sound, empowering support models in in work place
· Encourage of belonce and recognition of reeds spanning
work, physical, social, emotional, and psychological
alomains.
· Positive work culture free from stigma/discrimination.

8. 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?

Peer mentoring improves both social & econo economic as it increoses accues to adjunct of vital services that save lives and enhance wellpeing across all domains of life, including returning to work/study and connecting.

- 9. 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?
 - · Comprehensive care provided/available/accessible to all persons, irrespective of SES, background, demographic, mental ill health type/severity.

 · Do not streamline incongruent services etc. solely to sove re: budget/money.

10. What can be done now to prepare for changes to Victoria's mental health system and support improvements to last?			
11. Is there anything else you would like to share with the Royal Commission? It is absolutely vital elect mental health remains a key priority. People are dying everyday, and countless more consumers and carers are living with the incredibly spanning and harmful effects of mental health challenges. Everyone deserves a right to a opportunity for relief from mental ill health, and the role of psychologists, GPs, nurses, psychiatrists, teachers, peer workers, counsellors, work place, and all individuals in fastering this is irreplacable, invaluable, and underrable.			
Privacy acknowledgement	I understand that the Royal Commission works with the assistance of its advisers and service providers. I agree that personal information about me and provided by me will be handled as described on the Privacy Page. ☐ Yes ☐ No		