

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?

- TV ads about bipolar & schizophrenia
- organise protests by consumers re the main issues for reforms
- TV shows interviewing people with MI
- Documentaries about MI
- funding grants for mentally ill individuals to write books, publications, make movies

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?

- don't lock people up in psych wards without giving people an explanation of why they are there - that they may have a diagnosable MI and what their symptoms are that suggest this i.e. diagnose people at onset or give possible diagnoses, don't wait years for them to have another episode e.g. I presented with clear symptoms at age 15 but was only diagnosed age 20

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

- don't release people from hospital if they are depressed and especially not if they are experiencing suicidal ideation & plans
- suggest webster packing of medication instead of giving whole packets of medication

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.

- physical restraint, mechanical restraint, chemical restraints and seclusion do not engender good mental health outcomes ~~and~~ especially with no debriefing.
- reduce the use of restrictive interventions - these are currently often used when there is no imminent risk of harm to self or others
- make proper substantial debriefing a legal requirement after all restrictive interventions

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~~ - probably a lack of funding or a lack of private psychiatrist that bulk bill
- probably a basic lack of services in certain areas
- services more in CBD & Melbourne - hard to access if regional

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

- carers should be granted a carer allowance if they are providing ~~and~~ care that impacts their daily living regardless of exactly how disabled the person they care for is or how much assets they have
- e.g. I was semi-catatonic with severe suicidal (the carer) thoughts and needed 24hr care but my income was not eligible for carer allowance
- get employers to have more carer leave for their employees
- encourage consumers to have a nominated person & also ~~and~~ enduring power of attorneys for financial, & personal matters

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

- higher rates of pay for PSW & consumer consultants
- more availability of a range of full-time and part-time jobs for Peer Workers
- more counsellors and psychologists employed in services
- additional titles like 'peer support counsellor' or 'peer support social worker' for peer workers with those qualifications.

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?

- have gallery spaces specifically for artwork by people with MI to either display their work and/or sell their work

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?

- make it illegal to not debrief someone thoroughly after a restraint or seclusion
- give consumers the notes & documents on file about their restraints and seclusions after they occur and at ~~least~~ least by the end of their stay in hospital
i.e. give consumers hard copies or soft-copies of all notes/docs written about the restrictive interventions they have gone through without needing to go through FOI

10. What can be done now to prepare for changes to Victoria's mental health system and support improvements to last?

- make more people with a MI eligible for NDIS

- stop cutting funding to MH services

- need MH programs that ~~will~~ have secured funding for many years (e.g. a decade) other than just yearly funding

- once a service is established and consumers are using that service, do everything possible to keep it going: consumers need continuity of care as a priority

- the hardest thing is getting consumers engaged initially

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

- psychiatrists need to give people the list of side effects of their medication when they are first given that medication or when they are well enough to read/understand that document

once that is engaged & trust is developed the particular service should run for many years

- people in psych wards should be debriefed about even the main fact of being locked away from society because even this is a breach of certain human rights and people need to be able to talk to someone about the impact of this

- it has been proven that what helps MI is medication & therapy but consumers are not being funded to have long-term frequent therapy (only 10 sessions with the MH Care Plan) - consumers should get 20 free sessions per year

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Yes No