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

Organisation Name

N/A

Name

Ms Melissa Asta

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

"More peer workers & consumer advocates working & educating. Use more of us to speak to students before they decide to enter the mental health workforce. Use us to educate clinicians who have all their knowledge from books, still choose to work in mental health to 'help' but are among the worst to stigmatise & discriminate. These are the people who speak to the community about us & because they are 'authorities' on the subject, people with no personal experience believe what they are told. And the cycle is perpetuated. Hear the truth from the people who ACTUALLY KNOW. Demystify the fear & ignorance."

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?

Already working well- PARC facilities. Peer workers. Consumer advocates. What can be done better- EARLY EDUCATION. From primary school. More staff across the board so people asking for help aren't repeatedly turned away or treated adequately early enough. Support the peer workforce to grow. Better supervision for current staff to prevent burnout & to prevent older staff with old-fashioned stigmatised attitudes passing on their opinions to students & new staff. Separate waiting rooms in emergency departments. More emergency beds. Do more to combat homelessness. Allow more than ten 'free' counselling sessions per year. People with mental illness need counselling more than most but are less likely to be able to afford it.

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

"What is already working is people who are brave enough to do so speaking out about their own experiences to help others feel like they are not alone in feeling low enough to consider taking their own lives & sharing what has been helpful for them. Taking the shame out of it. Make it easier to access services. Educate people on how to do so. Staff them more adequately, and with peer workers. One of the hardest things you can do is to acknowledge to yourself you need help with your mental health & then to ask for that help. To be continually turned away by the people who are supposed to help you for any number of discriminatory reasons is going to end badly. People should be supported & acknowledged & validated for trying to help themselves. There are only so many times that you can hear 'no' before you feel you have no choice but to end your suffering any way you can. Allow more than just ten 'free' counselling sessions per year. That is never even close to adequate."

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.

"Stigma & ignorance. There just aren't enough services, enough staff, enough beds. Enough education & understanding. Homelessness is a huge contributor to mental illness. Trauma. What

can be done to prevent childhood trauma? Repeal the NDIS & bring back public services. Or make it easier for people who are trying to access the NDIS for mental illness to be accepted. The public services need to be brought back either way. Too many people are falling through the gaps the closed public services have left."

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?

Many people don't even know a peer workforce exists but peer workers are often the ones who make the most difference in someone's recovery. Fund more places in the Peer Work Cert IV. Have peer workers become part of education services too. I speak with occupational therapy students during their mental health module to give them a better idea of mental illness & some of their opinions of mental illness & the people who battle them before I meet with them are appalling. Pay them better. If there are more services then there will be more staff & less burnout because the workload will be better distributed.

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?

We are all potential peer workers. Bring back public services & psycho-social education & groups.

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? "Supporting & strengthening the peer workforce. Educating & re-educating staff & students to combat stigma & discrimination. Provide more than ten counselling sessions per year. Make people more aware of how to access services. Encourage people to be preventative, take away the shame through education & utilising the peer workforce. More ED beds. Staff EDs with peer workers. More female only services & enforce female only areas in acute units."

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

"Maybe the money going into the Royal Commission could have gone straight into the public mental health system. Going into those services to ask those involved, be it consumers, families or workers, their opinions face to face. Many, many people in the public mental health system have no idea about the RC or if they do can't access the internet or need support to do so. Don't wait for the findings to start making changes."

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

"In my personal experience, and from what I have observed as a worker in mental health, childhood trauma is a leading contributor to mental illness. Ideally, something would be done to

prevent this but I have no idea what that would be. There are those families that are known by DHHS or other family services that may be helped but in 'families' like mine, that are 'respectable' and have a great public face, we will never be noticed until it is far too late. The damage... Maybe, when victims of family perpetrated childhood trauma are counselled and treated, ensure they are also educated & supported to discuss their own feelings about whether they feel they will become offenders themselves without fear of judgement or punishment to prevent the cycle perpetuating. Make these services available for anyone who feels they might offend against children."