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

Organisation Name

#### Name

Miss Caitlin B

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

"I think we need to continue to improve our community knowledge of mental illness, teaching people what it is, what the risk factors are, how we can prevent and we must to educate people about the things they can do if they do not feel mentally healthy. I believe that people are not aware of what support they can access if they are at risk of developing mental illness. There is a growing movement that is recognising what mental health is, workplaces recognising well being, communities discouraging bullying and other things that may impact individuals mental health but I think what is lacking is the connection between these things and mental 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?

"From my experience I feel that how we target individuals at high risk of developing metal illness is poor, our early intervention strategies though growing are still limited headspace is going a long way in reaching out to our younger community though has obvious capacity issues due to funding etc. Targeting the adult and aged population is something I do not think is done well from my experience working in healthcare I would say that majority of this population would not be aware that there are pre "

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

"I think there have been some good interventions put in place to support individuals at risk of suicide though specialised hospital programs and phone services. I think some of the challenges we face is identifying people at risk of suicide, do we provide support to people who have presented to emergency departments post a possible suicide attempt? We don't do enough to identify risk factors for people suffering mental illness. do we provide enough psychosocial treatment to individuals at risk? I strongly believe that there needs to be work done around individuals using amphetamines and their risk of suicide. There is a considerable amount of research that suggest amphetamine use can increase a individuals risk of suicide, we do not educate and support high risk groups about this risk!

# 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.

"There is a number of things that are barriers to experiencing good mental health. I believe we lack the understanding of what good mental health is. Access and cost to service and practitioners is a huge issue. Majority of the community may experience barriers when trying to access mental health services most of these services require referrals they may experience stigma from GP's who believe they do not need a referral or they may be treated by GP's for mental health issues without being offered a referral to psychiatrists or psychologists etc).

Individuals may not feel empowered to seek another clinician or treatment if they feel they are not being treated effectively, consumers may be given a referral to a specific practitioner and feel that they have to see them they may be completely oblivious to all available treatments and supports. We need to better integrate mental health into primary care and provide communities with the knowledge of what mental health is and what support is available. "

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

"I think our current system is a one size fits all approach, we need to improve our prevention and education for individuals and also start looking at better tailoring care to individuals. I have spoken to consumers who experience stigma from clinicians, I use drug and alcohol as an example consumers may have drug and alcohol issues dismissed by treating clinicians which has obvious impacts on individuals recovery this highlights the need to ensure we have not only a well educated workforce but also a system that is well linked to other systems. "

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

"The use of carer workforce has been a great way to illuminate the needs of carers and family, it can be challenging to support the families when consumers do not allow family involvement. Ensuring we have clear expectations of what information should be provided to families and also having clear pathways and safety plans for those who refuse family involvement. family support is vital I believe families should be screened and supported to access mental health care if needed as the burden carried by families is enormous "

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

"I believe the entire mental health workforce are at risk of burnout, I believe that their should be greater access to supervision and support for workers. Education and training is vital in keeping a well skilled workforce, also engaging the workforce in professional development and fostering opportunities throughout the mental health sector getting them involved in quality and improvement projects is a great way to encourage the workforce and promote innovation ( this may be somewhat hindered by funding or an organisations willingness to support these projects). Seeing more entry level positions in community areas such as the ""community mental health nurse - transition to specialty practice"" positions would be great! I see acute in-patient units as areas of high risk and low retention these are areas where people wishing to work in mental health are expected to start their careers therefore a huge burden is placed on a sometimes very junior workforce to train the emerging mental health work force."

# 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?

"Limited! I think our mental health system stops caring for individuals once their acute symptoms have subsided, I don't think our system currently has the capacity to assist individuals in finding meaning and purpose in their lives. We do not do enough to support individuals engaging in meaningful interaction including social/peer support employment etc. Peer support groups or information on community groups that is available for all would be a great start. Vocational

training for individuals even community projects to involve individuals in."

#### 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?

"Strengthen community support and social interaction for individuals (and their families/carers) suffering mental illness, assisting individuals to find purpose and meaning in life again is invaluable! We need to diversify treatment options or make an attempt to provide equal access to treatments. Strengthen access to services make the system easier to navigate empower individuals using the system to ask questions and challenge clinicians when they feel treatment is not effective. "

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

Consultation! Consultation! Consultation!

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

"I think at least one person should share the impact smoking ban's in hospitals has had on individuals receiving involuntary treatment in Victorian hospitals. (its one of the most common complains and triggers for aggression I have noted) One of the things is spend a lot of time thinking about is staff burnout on acute in-patient units, -I believe that the environment and access resources definitely impacts on consumer and staff well being -I think a lot about the aggression individuals can be exposed to whilst admitted to inpatient units and cannot fathom the damage this does to staff and consumers alike. -I speak with people in the workforce who tell me that their job satisfaction is affected by the quality of work they believe they can provide they say this is directly impacted by the environment they work in. -Staff attempt to practice in a least restrictive manner though speak a lot about the ethical dilemmas they face on a daily basis which challenge their core values. -There is such variance in the treatment people receive this is dependant on organisations and medical staff this can cause great distress for consumers and staff alike and consumers have little ability to change doctors when in the public system. "