

Your information	
Title	MS
First name	OLIVIA
Surname	BLACK
Email Address	[REDACTED]
Preferred Contact Number	
Postcode	
Preferred method of contact	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Telephone
Gender	<input checked="" type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Self-described: <input type="checkbox"/> Prefer not to say
Age	<input type="checkbox"/> Under 15 <input type="checkbox"/> 15 – 17 <input checked="" type="checkbox"/> 18 – 24 <input checked="" type="checkbox"/> 25 – 44 <input type="checkbox"/> 45 – 64 <input type="checkbox"/> 65 – 84 <input type="checkbox"/> 85+ <input type="checkbox"/> Prefer not to say
Do you identify as a member of any of the following groups? Please select all that apply	<input type="checkbox"/> People of Aboriginal and Torres Strait Islander origins <input type="checkbox"/> People of non-English speaking (culturally and linguistically diverse) backgrounds <input type="checkbox"/> People from the Lesbian, Gay, Bisexual, Transgender, Intersex, Asexual and Queer community <input checked="" type="checkbox"/> People who are experiencing or have experienced family violence or homelessness <input checked="" type="checkbox"/> People with disability <input checked="" type="checkbox"/> People living in rural or regional communities <input type="checkbox"/> People who are engaged in preventing, responding to and treating mental illness <input type="checkbox"/> Prefer not to say
Type of submission	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Organisation Please state which organisation: Please state your position at the organisation: Please state whether you have authority from that organisation to make this submission on its behalf: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Group How many people does your submission represent?

Personal information about others	Does your submission include information which would allow another individual who has experienced mental illness to be identified? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	If yes, are you authorised to provide that information on their behalf, on the basis set out in the document <input type="checkbox"/> Yes <input type="checkbox"/> No
	Prior to publication, does the submission require redaction to deidentify individuals, apart from the author, to which the submission refers <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Please indicate which of the following best represents you or the organisation/body you represent. Please select all that apply	<input checked="" type="checkbox"/> Person living with mental illness <input checked="" type="checkbox"/> Engagement with mental health services in the past five years <input checked="" type="checkbox"/> Carer / family member / friend of someone living with mental illness <input type="checkbox"/> Support worker <input type="checkbox"/> Individual service provider <input checked="" type="checkbox"/> Individual advocate <input type="checkbox"/> Service provider organisation; Please specify type of provider: _____ <input type="checkbox"/> Peak body or advocacy group <input type="checkbox"/> Researcher, academic, commentator <input type="checkbox"/> Government agency <input checked="" type="checkbox"/> Interested member of the public <input type="checkbox"/> Other; Please specify:
Please select the main Terms of Reference topics that are covered in your brief comments. Please select all that apply	<input type="checkbox"/> Access to Victoria's mental health services <input type="checkbox"/> Navigation of Victoria's mental health services <input checked="" type="checkbox"/> Best practice treatment and care models that are safe and person-centred <input checked="" type="checkbox"/> Family and carer support needs <input checked="" type="checkbox"/> Suicide prevention <input type="checkbox"/> Mental illness prevention <input checked="" type="checkbox"/> Mental health workforce <input type="checkbox"/> Pathways and interfaces between Victoria's mental health services and other services <input type="checkbox"/> Infrastructure, governance, accountability, funding, commissioning and information-sharing arrangements <input type="checkbox"/> Data collection and research strategies to advance and monitor reforms <input type="checkbox"/> Aboriginal and Torres Islander communities <input type="checkbox"/> People living with mental illness and other co-occurring illnesses, disabilities, multiple or dual disabilities <input checked="" type="checkbox"/> Rural and regional communities <input checked="" type="checkbox"/> People in contact, or at greater risk of contact, with the forensic mental health system and the justice system <input type="checkbox"/> People living with both mental illness and problematic drug and alcohol use

For individuals only

Please identify whether this submission is to be treated as public, anonymous or restricted

While you can request anonymity or confidentiality below, we strongly encourage your formal submission to be public - this will help to ensure the Commission's work is transparent and the community is fully informed

Please tick one box	
<input checked="" type="checkbox"/> Public	My submission may be published or referred to in any public document prepared by the Royal Commission. There is no need to anonymise this submission.
<input type="checkbox"/> Anonymous	My submission may only be published or referred to in any public document prepared by the Royal Commission if it is anonymised (i.e. all information identifying or which could reasonably be expected to identify the author is redacted). If you do not specify the information which you would like to be removed, reasonable efforts will be made to remove all personal information (such as your name, address and other contact details) and other information which could reasonably be expected to identify you.
<input type="checkbox"/> Restricted	My submission is confidential. My submission and its contents must not be published or referred to in any public document prepared by the Royal Commission. Please include a short explanation as to why you would like your submission restricted.

Please note:

- This cover sheet is required for all formal submissions, whether in writing or by audio or video file. Written submissions made online or by post, may be published on the Commission's website (at the discretion of the Commission) subject to your nominated preferences.
- Audio and video submissions will not be published on the Commission's website. However, they may be referred to in the Commission's reports subject to any preferences nominated.
- While the Commission will take into account your preference, the Commission may redact any part of any submission for privacy, legal or other reasons.

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.

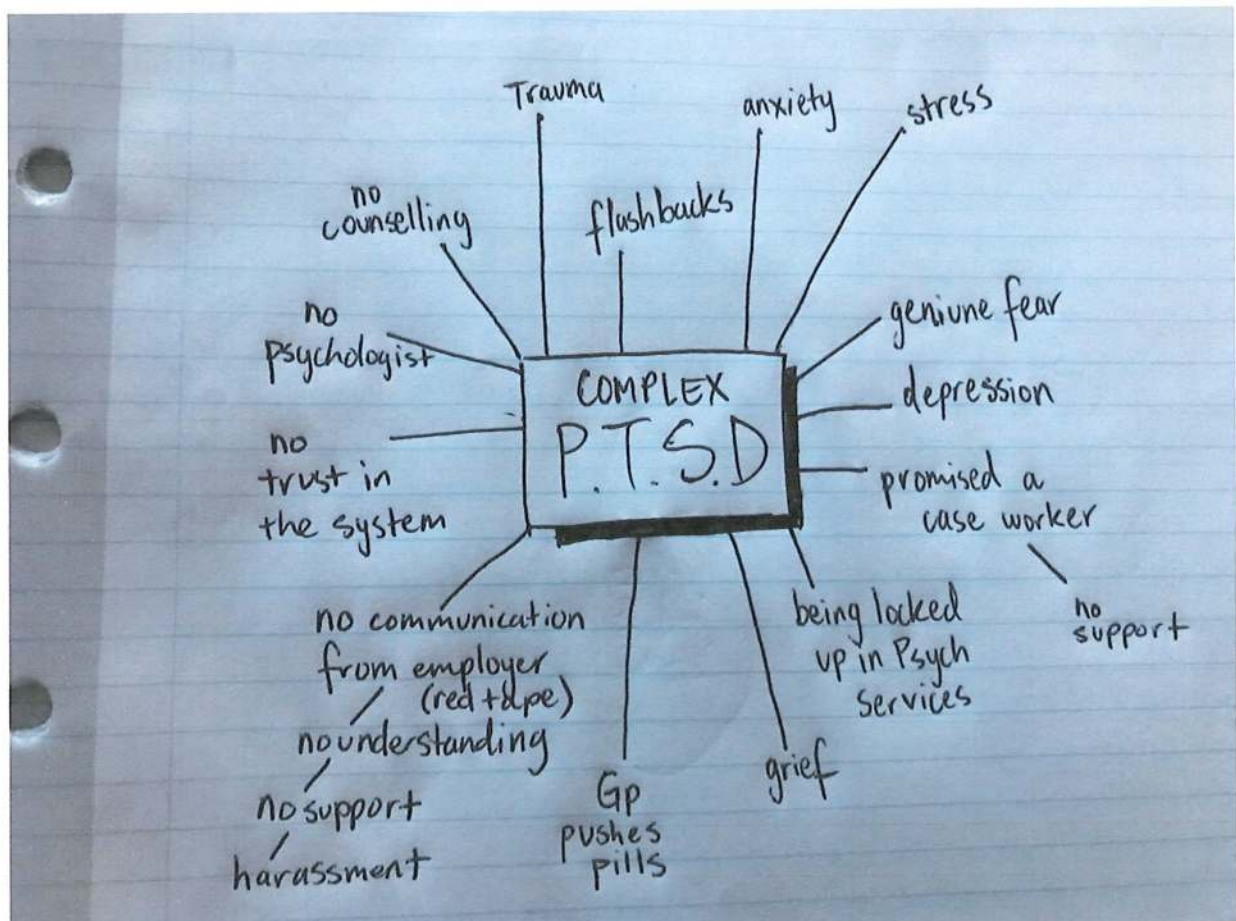
1. What are your suggestions to improve the Victorian community's understanding of mental illness and reduce stigma and discrimination?

Mental Health is a major concern coming from my personal experiences. Mental illness has a horrible stigma blanket attached. It has many branches. The branch I will be highlighting is Post Traumatic Stress Disorder (PTSD). It's misunderstood and people are undervalued and ignored.

Mental Health is an overused word, ignored and red taped.

There needs to be more education within hospitals and Employers of all fields.

- More staff in Emergency Care, Medical Staff.
- Working systems.
- Follow up and support.
- Communication.
- Get back to 'work care plans' with Employers.
- Misdiagnosis and the affect it can have on an individual and employment.
- Organisations' accountability.



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?

Nothing is working well. The answers from the Royal Commission are all I can depend upon.

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

Nothing is working well. There is no trust in the system.

Support can be done better. There needs to be more tools.

Case management has been overlooked in a lot of circumstances.

Accountability from Employers.

Educate families with affected family members with mental health.

If you call a support service who is overworked and or over his/her job- this can affect the individual tremendously looking for help again. Feeling doomed.

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.

Support and linking services has to be done by the individual. If you are unwell this is tremendously hard to do.

Calling someone is the first step or seeing a GP. A good mental health GP is a rarity. A simple paperwork mistake can change everything in the help that you need. Cycling from Community Psych Services to the GP. The small mistakes cause a cascading effect for the support that you need.

The individual is doing everything. The responsibility to get healthy and find support lies on the individual. Support is promised with no delivery, even though the individual is pro active in getting help with longer waiting periods and again trust in the system diminishes and you're alone again.

Promised a case worker then not given one. Dismissed from the services but given lots of medication.

Common mistakes in paperwork and misdiagnosis not being addressed and fixed.

Repeating your story to every organisation with no results.

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

Education.

Government to employ people that have experienced mental Health first hand to be working in the field of support.

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

To listen. To fight for what they believe in the individual. So much is not working in the system they don't know where to start. Mental Health is such a taboo. It shouldn't be.

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

Employ people that have suffered and equip them to help others.

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?

I am unaware of the opportunities. There are opportunities for other age groups and ethnic backgrounds. Not much going for females that are 30years+, have a Italian background and served in the community as a police officer.

A platform needs to be made where the GP or Medical health professional refers you to the platform for you to link you up to the appropriate support groups.

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?	
Recognise and implement that Mental Health is an overused word. There are many branches the same strategies won't help someone suffering from PTSD to illicit drugs.	
10. What can be done now to prepare for changes to Victoria's mental health system and support improvements to last?	
Employ people that have knowledge and background/ history of mental health. Make them feel needed, employ change, give them a voice.	
11. Is there anything else you would like to share with the Royal Commission?	
Misdiagnosis shouldn't happen and the handling of personal information state to state across Australia needs immediate change.	
When police are involved with a suicidal person, they should not be locked up into a Police Divisional Van in isolation. Then transported to a hospital in isolation. This is the worst thing for someone who fears police and medical staff, who keep contributing to the trauma the individual already faces.	
Wrong information has been stored on the individual to keep getting treated in the same manner; nothing will change if the system doesn't change.	
Privacy acknowledgement	