



WITNESS STATEMENT OF CHRISTINE THOMAS

I, Christine Thomas, say as follows:

- 1 I make this statement on the basis of my own knowledge, save where otherwise stated. Where I make statements based on information provided by others, I believe such information to be true.

Trevor's experiences with mental health issues

- 2 I live in the country with my husband, Trevor. Trevor and I have been together since 1991.
- 3 The whole time I have known him, Trevor has had periods where he has really struggled. He has now been diagnosed with severe depression, but for a long time I didn't realise Trevor had mental health issues. Before I married Trevor, his uncle and father had died by suicide. Trevor sometimes spoke to me about how much he struggled with his uncle's death, but Trevor and I always had so much going on day to day – like raising seven children, financial pressures, and a business that went wrong – that I just saw Trevor's behaviour as him dealing with what was going on in life.
- 4 In August 1991, Trevor's dad died from suicide. Trevor was devastated and talked about wanting to end his own life. The GP told me to get Trevor out of town so we went to Canberra for four days. Trevor was really down the entire time we were there. I have watched Trevor closely ever since because I am concerned about what he might do.
- 5 In about 1994, another one of Trevor's uncles died by suicide. That was the third death by suicide in Trevor's family and it really knocked Trevor.

Experience with the mental health system

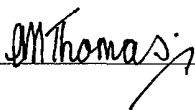
- 6 Things came to a head in around late 2013.
- 7 At the time, a family support worker was supporting me through some difficulties I was experiencing. Trevor worked shift work and would often be home during the day when the support worker was at our house. Trevor would not do much when he was at home. He would usually sit in his chair in the lounge room and watch TV. One day the support worker said that she thought Trevor had depression and that he should go and see his GP for help.

- 8 The support worker would often talk to me about how to help Trevor. She told me that I would have to watch Trevor and wait until he asked for help. She told me that, if need be, I should ring the CAT team if there was a crisis, and that I should take him to the emergency department at the hospital and get him admitted to a psychiatric ward if he was suicidal.
- 9 In about September 2014 I really started to worry about Trevor. I had watched him deteriorate for the past 12 months. I could tell when Trevor was depressed. He'd sit in his lounge chair and he would spend his time going to the toilet, watching TV and playing on his iPad. I couldn't get him to go down the street or mow the lawn – he just did nothing.
- 10 This started getting progressively worse, and I got really worried. I started keeping Trevor's car keys in my pocket because I didn't feel like he was safe to drive and I was worried what he might do behind the wheel. I took all the rope out of the house. If he got up during the night I would get up checking that he was not going to take his life. One night, Trevor was watching TV and he said to me something which made it clear he had a plan to self-harm.
- 11 It was around this time that I told Trevor that I just couldn't keep him safe anymore. One night, I put him in the car, and I drove him to the local hospital.
- 12 I had had a conversation with the support worker about what I should do if I ever had to take Trevor to hospital. She told me that if I had to take Trevor to the emergency department, I should tell the hospital staff that he was suicidal and that he needed to be admitted to the psychiatric ward. She told me that no matter what the hospital staff told me, that I was not to take Trevor home. She told me that we may have to wait for hours, and the hospital would agree that he needs to be admitted but would then tell me they do not have a bed and bring him back the next day. She told me, though, that at this point the hospital was admitting a duty of care and to inform the staff member of this fact, refuse to take him out of the hospital and then leave. But she told me not to leave the entrance in case they sent him home in a taxi. I did not tell Trevor what the support worker had told me.
- 13 So when we got to the hospital, and after Trevor was checked, we sat down in the ED and waited. Eventually a worker spoke to us. The worker said that Trevor was suicidal but told us that they didn't have a bed for him, and that we should go home. I decided to take the support worker's advice. I told the worker that because they had admitted Trevor was suicidal they had admitted duty of care to him, and that they had to admit him to the hospital. Then I left. It was the worst thing I have ever had to do. I just walked out of the hospital, and left Trevor.

- 14 I hid in the bushes out of the front of the hospital and waited. Within about 15 to 20 minutes I got a phone call from the hospital and was told that they'd found a bed for Trevor. I returned some time later with his clothes, and Trevor was admitted into the psychiatric ward.
- 15 Trevor stayed in the hospital for a few days. I had to jump up and down to get Trevor seen by a psychiatrist.
- 16 It was around that Trevor was sent to PARC. Trevor spent three weeks there, and then I got told that they wanted to send him home. I refused to allow him to come home. Because I had learned they cannot release him if he is homeless, imagine how heartbreaking this was not only for me but for Trevor. Nobody should have to inflict or receive this hurt to get mental health treatment. He stayed another 3 weeks and then he came home, just prior to Christmas 2014. Shortly after Christmas he was struggling again and went back to the PARC for another 3 weeks.
- 17 I visited Trevor nearly every day at the PARC. Trevor had his own unit and there was a hub, including a community kitchen and amenities centre, in the middle of it.
- 18 The staff at the PARC were support workers, not clinical workers. I thought he was meant to see a psychiatric nurse every day. By day 3 he had not been seen by a clinical worker and once again I had to jump up and down to have him seen by a psychiatric nurse, the excuse was they did not have not enough staff and they were too busy.
- 19 I thought that Trevor would be safe whilst at PARC, but I was horrified when I found out that he could walk in and out of the place. I didn't understand it. Trevor was still wanting to die when he was admitted into PARC, and yet he was able to walk out when he wanted to. He was 2km from a river, and not far from freeways and a multitude of trees. There seemed to be no supervision. I was not happy – I didn't know what was going to happen. I was constantly asking to speak with doctors but nobody was ever available, they tried to shut me out of meetings and in general I was given the run around. In the end it took the promises of bringing media attention and legal representation to Trevor's situation to get help. I think once it was realised that I was very serious, doors opened a bit.
- 20 By the time Trevor got out, I felt disillusioned with the mental health system. Although he was still suicidal, I figured I was able to keep him safer at home where I could constantly watch him.
- 21 It was around this time that Trevor started to see a local private psychologist. I found him privately, and Trevor seemed to click with him. He also had a support worker who would visit him at home.

- 22 In about October 2015, Trevor seemed to be going downhill. I told Trevor's GP that he needed an assessment by a psychiatrist. Trevor got put on some medication which wasn't good for him physically.
- 23 I have found it difficult to get Trevor the support he needs. I seem to need to have inside knowledge of the system and the overhanging promise of media attention to get Trevor support. Even paperwork seems difficult – such as the paperwork for insurance. It's onerous. The paperwork for going back to work was also difficult – it was all about physical injuries, not mental health.
- 24 In October 2018, things starting getting bad for Trevor again. By January 2019, Trevor seemed like he was not able to cope at work. In April this year, Trevor sought help from a psychiatrist. I demanded that he see one even though it was 3 month wait. I know that Trevor is now seeing a psychiatrist in Sydney through Telehealth. Since January 2019 we have not sought help through the hospital or the associated mental health system because I simply do not have the strength to fight or believe that this broken system can help him. I am relying on his GP and a 2 monthly psychiatrist visit to help. As for healing Trevor, only God knows.
- 25 I've found it so hard to deal with the mental health system. I think that:
- (a) everyone in the mental health system needs to listen to carers. Carers are the ones who know the person and know when they are not ok. When a carer says that a person needs to be admitted to keep them safe this should be listened to and acted on;
 - (b) admissions should be for a minimum of 3 weeks;
 - (c) we need more trained psychiatric nurses and doctors;
 - (d) paperwork needs to be streamlined and more suitable for people with mental health issues.

sign here ▶

print name Christine Thomas

date

2nd July 2019