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

Organisation Name
N/A

Name
Mr LEONARD mAINARD

What are your suggestions to improve the Victorian communitys understanding of mental illness and reduce stigma and discrimination?
"No real suggestion as community reaction to mental illness seems to be a cultural thing and hard to overcome. People seemed to be ""hard wired"" to recognise mental illness and have a strong tendency to exclude & or isolate people. Having a job is often critical to the well being of a person but the mentally ill are often rejected by the personal functions who are anxious to maintain good employee relations and organisation culture etc. The job market is highly competitive even for casual/temporary work. Not even labour hire businesses are prepared to take a risk with someone they know or suspect is mentally ill. This reluctance would be extraordinarily hard to overcome "

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?
"Hard to know what is working well. Sometimes mental illness seems to be genetic or related to treatment/upbringing in early childhood. It seems to be very hard for people to get early treatment. Perhaps there is a skill shortage. It should be easier for close relatives, associates, friends etc to get help for a person who is reluctant to seek treatment. It seems a lot of people reject the advice they are not well which has serious implications for the people looking after them. There is a strong stigma to being diagnosed as mentally ill. I would like to see GP medical practitioners refer mentally ill patients early to specialists. GP's 10 - 15 minute consultation is not long enough to assess complex problems and they often do not have the skills. Often get different diagnosis and treatment from different GP's which creates doubt or confusion. Sometimes the patient is deliberately uncooperative which needs experienced psychiatrists/psychologists to diagnose the illness.I think GP's should not be the gate-keepers and it should be possible to go straight to a psych. clinic."

What is already working well and what can be done better to prevent suicide?
"Often a sign that the mental health system has failed a mentally ill person, ie they have become isolated, unemployed. Sometimes they have become alcoholics or drug takers and their illness makes it very hard for relatives and friends to safely help them."

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 are a lot of factors contributing to good mental health. I think the most important thing is when a person is diagnosed they stay in the mental health system with regular follow up and support for as long as it is needed. This includes ensuring their carers also get the training and support they need including respite if required. There has to be good access to mental health professionals particularly when it is urgently required. While mental illness is a health issue I am not sure treatment in a hospital setting is the best solution. Hospitals are usually overcrowded and

work on the principle of fast treatment and discharge. Hear too many stories of mentally ill patients being rapidly discharged leading to tragedies.

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?
"It seems a large percentage of the mentally ill rely on their families and friends for support. They often do not present for treatment, stop their medication and can become alcoholics or worse. They can become very hard to manage, particularly if they are prone to violent outbursts or uncooperative behavior. The job of caring often falls to ageing parents, particularly mothers, who do not have the skills and resources to cope. This can result in a very poor quality of life for the carer. Carers/family need backup and support. There has to be access to a mental health clinic when needed. There has to be somewhere the mentally ill person can go for treatment or to give carers some respite. There has to be more fast response mental health teams. Police recruitment and training is for a very different role and even with ""add on"" training they should not be first responders unless it is a serious emergency. There is a fear it could lead to tragedy. Mentally ill people need a social network and it is best if they are not all similarly affected persons."

What can be done to attract, retain and better support the mental health workforce, including peer support workers?
When the asylums and mental health hospitals were closed a lot of mental health nurses and associated expertise caring for the mentally ill were lost. I am not sure the system ever fully recovered. I do not think mental health careers are very attractive. Sometimes this is about having a safe working environment. Reports of assaults in psychiatric wards seem to be a regular event. I think it is a difficult area to work in.

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 think the mentally ill have to be ""well"" to be able to improve their social and economic participation. This means the mental health system must be treating and supporting them. It is hard for a bureaucracy to help them achieve these objectives so they have to be able to function well. The problem can be they often form social networks which are not good for them and can lose their job through one silly action."

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?
More mental health clinics that can be easily accessed. Better access to specialists. Easier access to facilities for longer term treatment whether it be live in or day care. More support for carers. Mental health triage need more resources. Mental health teams and not police as first responders.

What can be done now to prepare for changes to Victorias mental health system and support improvements to last?
"I think treating mentally ill in the community was a major advance. However, I note that Oliver Sacks

said we lost and sacrificed a lot when we decided as a society to save money on mental illness by ceasing to house the afflicted. It is now time to spend some money. Unfortunately a large percentage of the mentally ill end up homeless, sleeping rough with shortened life expectancy. Worse a lot of these people end up in the criminal justice system. Some say 50% of the people in our jails have a mental illness. Politicians often describe them as serious criminal to avoid admitting the mental health system is underfunded but the real facts are often very clear. - A panel of psychiatrists should determine if a person is mentally ill and fit to plead instead of the current adversarial system. -Future generations are likely to look back at our incarceration of the mentally ill like we regard Bedlam. Prisons are likely to worsen mental illness so when a prisoner is released he is a worse danger to the community. We probably need specialist prisons/facilities where proper treatment can be delivered in an environment conducive to improved health so these people do not re-offend when released back into the community. A reduction in the offending of mentally ill people would also help to relieve community concern about the dangers mentally ill pose and perhaps improve their understanding of mental illness."

Is there anything else you would like to share with the Royal Commission?
I know people who have been diagnosed with various mental illnesses. Some have been able to get good treatment and manage well. Others have not been able to get the treatment and support they need which not only takes a toll on them but their carers. My submission relates to these people for whom I have real concerns.