Peter Mizzi

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?

I think there is limited industanding of mental illness and also discrimination and a strong stigna attached to that from public & prinate sectors if my story was listened to more when I was younger, when I found that my story was not listened to - I was just certified due to juvinitie activity whereas my story was mainly too wholly based on alcohol & drug addretion. which was not heird - Just discriminated

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? (see cont. on appendix 2. attached)

Being gives the opportunity to have a say in your own medication, to look at the first paints & your recovery when I first so called become unwill I needed indestanding not fear tactics My medications was severly uncurilised, traunatic, uneccessary and abilisive if I had have been listened to, which I believe I wasn't, I believed I was certified after an organist with my mother -

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

intoxicated, inforgreable question is N/A as I have never been suicidal - Just a sarrivor P.S. through very difficult arangtarices

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. (See cont-- on appendix 3 attached)

if the treatment when I was yoing-would have been preferable non-medicil or chinical, more humaine because I found conductions withe 80s of services I was certified to - interesting withe 80s of services I was innhabitable informan places - they just placed me full of fear e.g. being dragged out of bed by my hair, never instead to, fetus refected high security cells & so much nore 1

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

A royal consission having these institutions even allowed to exist how they found there chertelle - under what ap. grounds? Who and what bodies of govt allowed these institutions disgnstring? P.S. civil medications & proper research, not to what I experienced.

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

I don't thurk in those daigs it was applicable as I found out after my first injection after before the injection being coherent/Ineid, being turned into a mute because of the medication The injection just made me highly dysfunctional - not being able to commente with my family and tell them what was really going on

7. What can be done to attract, retain and better support the mental health workforce, including peer support workers? - prwacy ACT - more understanding of your rights -peer support to have not ngits in your treatment and the conversation - they are good hoterers but they can't ductate anything you say in tribund hearings etc. coutoe They are, so I believe, neutral. 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? - understanding, compassion - less medications - more one-on-ones - Finding the real reasons & treating fairty & accordingly with consent - being helped into support/services available 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? - fair and good conditions -being listened to in a fair & conservative manner, especially when in hospitals and working on hilbstic approaches rather than always clinical -basically to be humane

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10. What can be done now to prepare for changes to Victoria's mental health system and support improvements to last? -learn from past history - learning from past & present chartelle + conductions, support etc - more staff with nore understanding - a more holistic approach - having more say in medication - having appropriate titles attached etc 11. Is there anything else you would like to share with the Royal Commission? some form of compensation for such disgusting conditions and treatment, which I believe to be nothing but inhumane. Also an apology and for my story to be listered to tand to help somebody/ people in the fiture Jans Surverty Rh Join Mai Also see Appendix 1 attached (3 typed pages) I understand that the Royal Commission works with the assistance of its advisers and service providers. I agree that personal information about me Privacy and provided by me will be handled as described on the Privacy Page. acknowledgement 🗹 Yes 🗆 No

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PENGE SOUNDIZEN) (06.02.60) APPENDIX 1

- Dear Quality and Governance meeting and all present.
- My story starts with a horrifically difficult and abusive childhood. Due to drugs and alcohol, and other factors. Namely physical abuse, not through family, but not being able to adjust to family life when I was young and running away from home.
- This got me into all sorts of strife. I started doing drugs at a very young age
- Which I suggest, was the fore ground of my so called apparent mental illness. Which I
 think if I had been put into drug and alcohol rehabilitation at a young age. I don't think
 my history would be as it is today.
- If it wasn't for the combination of anti-psychotics, which I think as you well know where horrible drugs back in the 80s.
- Which gave me chronic, severe, and a feeling I can't explain, except I felt like I was in hell. The first time I was ever injected with anti-psychotics.
- Hence forth, remembering back in the early days, _______ I was abused by staff and treated not as a human being, but an animal. For instance being dragged down stairs because I wouldn't get out of bed
- Sometimes I was confined for speaking my mind, and put in faeces infected high security cells.
- Whereas, I was never a trouble maker and was just scared of what was happening to me, which was never listened to, by family or staff.
- Hence which started through drug addiction, the reason I ended up in these institutions.
- So I say, even though the system is more humane now days, I don't think I deserve 99% of the treatment I got.
- I think my history could have been different, not being in mental health, but being treated for my addictions, which I think would have given me a better chance for solving these issues.
- Which were heavy drugs of addiction and alcohol and sexual abuse at a young age.
 Specifically LSD, magic mushrooms, cannabis, heroin, speed and methamphetamine.
- But hence forth, I can't say it would have been different, because I was certified to mental health services at a young age.
- Then found recovery nearly impossible, because of the combination of my drug addictions and antipsychotics.

- Which had a major and very difficult effect on my childhood. I'm not trying to lay the blame. But I must say my treatment was very inhumane.
- But now as years have gone by, I have had several admissions to hospital, and have tried very hard in the last 20-30 years to curb my drug and alcohol habits.
- Which I have achieved on many occasions. I am currently drug, alcohol and cigarette free, and receiving 350 Zuclo per fortnight.
- And also, I have made steps in my recovery, through counselling and now in a later age being able to talk about these issues
- I am at a point now where I feel confident in my recovery from drugs and alcohol, that it is no longer co existent with my present life
- I would like to be given the chance to go on a less extreme medication regime, and an antipsychotic that doesn't have as many side effects. Even thought there was relapse with the last attempt.
- But I must say, this has occurred in recent times not long ago; I had a changeover of medication in September last year. And that time I was still drinking and got major chronic side effects. Mainly psychosis & hearing voices.
- That time I was so close to getting off the CTO, but unfortunately mucked that chance up very big. I take full responsibility, but I was drinking and using cannabis at the time.
- Which made me very unwell again
- I don't know how to really say this, but it is quite shattering, from whence I was so close to getting off the CTO, but had a major relapse.
- Which I strongly believe was a combination of alcohol and the anti-psychotics I was on. Which was labelled that you can't drink alcohol on this medication. Which I did, which ended up putting me back on a longer CTO, and an increase of medication.
- Which now I must say after all is said and done (P.S). Also at the time my brother had just passed away. Also (P.S) my sister was murdered 30 years ago. Which has had a major impact on my recovery. Due to using more drugs and alcohol to deal with this
- Though now, I have found a medium of understanding, and talking about these difficult issues.
- For now I am working with counsellors, psychologists, my case worker, and my peer worker. Which has resulted in getting a better understanding of my emotions & feelings
- And has resulted in me being clean for approximately 2-3 weeks now.

- I am active in social activities, such as my spiritual aspect, which is the Catholic Church, which I attend at least 2-3 times a week.
- Also, counselling, art therapy, physio, Wild at Heart music therapy, which I enjoy very much as I am a song writer and musician. In the last two years I have recorded two CD's.
- I have also become more open to listening and taking others advice.
- Without causing the blame, it will never be known whether things could have been different, but I believe in the here and now.
- I must say, I have never felt better.
- The problems I have with the medication I receive, which are my only real issues, is sexual dysfunction, weight gain, involuntary movement, and feeling sometimes to energetic
- I accept the fact that I made a big mistake drinking on the medication that I was titrated to, and would again like to be treated with a less invasive medication, for mainly the sexual dysfunction. Which I don't think any man deserves
- I have committed no crime, I was just a child with a difficult childhood. Which has
 resulted in me telling my story to you today.
- P.S I must say thankyou in some areas. For when I have been very unwell, I have found recovery through mainly sobriety, but also maybe the medication as well.
- I would like my story to help you understand someone who may have similar circumstances to myself, to be heard, and understood.
- An in all this, I must say, thankyou for listening to my story, there is a lot more to talk about we only have 10 minutes, so I shall leave it at that, and a sincere thankyou for listening to my story, and your help that has become a lot more humane.
- God bless lots of peace and love, yours sincerely, Peter John Paul Mizzi

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* APPENDIX, 2 2. cont. The tratment | recieved was in hurare. After coming home intoxicated and also truanting at a voy yange age. My notles was suffering depression and stress - we at the age of 14 a is when this began, I was the forth of 7 children concieved at my influs age at 21 she had her first child at 14 I have nothing bad to say about my nother but I had a difficient childhood which I don't believe was mental or dys furctional, just depression I had a very difficult child bood at school & before, this all stated at a very yourg age, I was always assaulted at school, started drinking alcohol at the age of 14 because of not being able to deal with child bood trauma. etc etc I believe it was not a mental Mines, just a difficult carly childrood (difficul & tranatic) for reasons of physical abuse, mental abuse, all storting at a vez young age. I was scored. not mertally inwell.

* APPENDIX 3. 4. cont God neutral health means to me good codutions, being treated accordingly to the problem not dictated to by some body into makes an assessment which I find is wholly untrue if I am correcting the notes that I have read P.S. very inforded.