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

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N/A

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What are your suggestions to improve the Victorian communitys understanding of mental illness and reduce stigma and discrimination?
"Furthering a protected and supported peer workforce in healthcare and mental health. There are legal protections in place for disclosure of mental health conditions but in practice, and in my experience, in mental health fields, these are not in action or followed. Fighting stigma and discrimination means more understanding in workplaces and the general population. To do this we need education and we could start this for a dual benefit, in schools, now. Similarly to respectful relationships, mental health education through: self-care, education and fighting stigma and discrimination could be a core essential in each year at school. The benefit of this would be two fold, with a longitudinal improvement in reducing stigma and discrimination and putting in protective health promotion for their own mental health challenges. "

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?
"People who are speaking out publicly are already being effective tools of improving accessibility, sharing information and supportive messages. I know the previous services that have been since defunded were working well also to support people with mental health. Services such as PHAMS, MHCSS, PIR, Mental health nurses in GP's, other outreach services...these all were working well. Now unfunded, the reinstatement of outreach mental health services, accessible and all over Victoria would dramatically improve support and prevention, treatment and support."

What is already working well and what can be done better to prevent suicide?
"More places for people to stay when they have attempted suicide without the push of: 'Are you still planning on doing it?' and if the answer is a brief no, pushing them to wherever else a person/family member can watch them for a few days. This is not congruent with the deep darkness people feel when they suicide. I have personal experience of this and caring so little about the world and life that, sure, I'd go wherever you tell me too, even when actually, I need to be in a holistic, or even clinically supported place to actually deal with these feelings rather than go back to the illusion of normalcy.   Helplines, I honestly think have been a lifesaver and are working. I know many do not feel this way but I do. CAT teams unable to attend until you are in psychosis or topping yourself are also not working. They are important and need to be more supported, more staffed and more transparent in referrals. The sad thing is, CAT is who you are meant to call when you are really on the edge, but I've been on the edge, and as soon as you are stepping off that ledge, and that's the only point they can do anything, its too far for them, and you have to call an ambulance. "

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.

"The inflexible expectations of society through work, culture and our mental health system make it hard to do the aforementioned question. Services working in silos, because they are overworked most likely. Access to treatment when you need it, with excessive wait-lists and inconsistent referral mechanisms. Getting into appropriate services at a timely manner is a massive one. I've had so many instances of possible or actual hospitalization, helpline use and danger waiting to see a doctor that can be a long term appropriate psychological support after going to so many different random doctors and never having anyone really know what was going on, or what they were prescribing me what for.. "

What are the drivers behind some communities in Victoria experiencing poorer mental health outcomes and what needs to be done to address this?
"Disadvantage through a range of variables that are poorly controlled for, and do not have not enough specific, accessible, yet protected services in place.   One example the mental health industry seem to struggle with is intersectionality. Can I go to a LGBTIQA supportive service and still get sex-worker positive, sex positive, domestic violence support and complex mental health support, while also having a very low income and limited hours, because I have to work? No What needs to be done is training and education around marginalized communities, what we need, what you shouldn't say, workers who are peers and managers who are peers. We need these structures, models and assessments reviewed and discussed with us, and not with solely CIS white middle class men."

What are the needs of family members and carers and what can be done better to support them?
"Families and carers need to be given their own psychological support, one on one and in groups, in an accessible manner when a loved one is unwell or suicidal. "

What can be done to attract, retain and better support the mental health workforce, including peer support workers?
"Protected titles and supports in place for all roles in the mental health field, not just APHRA accredited. Instilled expectations by the sector of best practice and supporting workers. Actually making it the norm for people to have supervision given by a suitable peer or supervisor. For peer workers to be supported and protected with a framework and peer workers to always be given the option of supervision with a peer. Further protections for peer roles are essentials and external advocacy bodies who's role is particularly, dealing with inequities and unprofessional conduct in the mental health field alone.   Flexible working arrangements and an organisation that is funded to support peer workers solely."

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?
"There are some community events, drop in centres and supportive initiatives but more of these should be supported with ongoing funding and or grants. These need to be across the state, accessible and without a pay wall. This is the main challenge to engaging in social participation. The dsp and newstart are barely enough to live let alone, take yourself to yoga. "

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?

"Reinstate community mental health outreach services. This is essential for prevention of suicide and severe mental health relapses. This is essential for recovery. Further push for peer support and person-centred choice and respect as they engage in all mental health services. From the frontline to secure units, people should be respected, given choice and treated as people rather than numbers or patients. "

What can be done now to prepare for changes to Victorias mental health system and support improvements to last?
"Educations for future generations around mental health in all schools, throughout schooling. Invest in longstanding programs that work, continued professional development, and protections in place for mental health industry workers. "

Is there anything else you would like to share with the Royal Commission?
"I am scared at the current state of the mental health system. I have been in it from a emergency department bed, as a person on either end of a suicide call, as a desperate loved one and as a professional deciding treatment plans with and sometimes without clients present. I am scared at the lack of services to fill the ever growing gaps of people that don't fit in the severe box, or don't fit in any box. I have been lucky enough to see some people benefit from good workers, in good programs, and keep their heads above water through recovery, but I've also been to too many funerals....and wondering if I was going to make it to 30. I honestly believe these experiences are preventable. I want to see this fixed before more people die. "