# 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?**

"At the moment, I feel that mental health is not taken seriously enough by our government, and others in power. It seems to be looked at as a personal failing rather than as an illness which deserves care and treatment. Making mental health support more accessible is of the utmost importance in ensuring that vulnerable people do not fall through the cracks. Additional attention should be paid to intergenerational mental health and wellbeing. With the family violence epidemic in Australia, it is almost impossible for some young people to break the cycle, and to seek help. Education can be our strongest tool. I was taught very little about mental health conditions in school, and instead had to facilitate my own education. The media should also take care not to type cast offenders by making public statements that suggest a person's crime was directly lined to their condition. Indeed, their crime is likely to have been intrinsically linked to their mental state, however, the fault does not belong to "autism" or "adhd", the fault belongs to the lack of support that exists for people with these conditions, the difficulty they face fitting in to a society that stigmatises them, and the difficulty they have finding and maintaining employment. The lens is looking in the wrong direction. Neurodivergent brains are not inherently bad - instead, these people are more vulnerable to countless life set backs, isolation, and internal struggle that can lead to negative outcomes when not addressed by our health system. We must change our focus, our language, and teach our community the truth about varying minds. "

**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?**

"There are some wonderful organisations working to educate about and advocate for a variety of mental health conditions. Continued funding and support for these platforms are important. People will ony seek early intervention if they understand the signs, which many people do not. this comes down to a shocking lack of education and understanding. instead, most people get their information about mental health from movies, tabloid news sources, and ill informed columnists or social commentators. The governments should expand its focus education and resources, and look to penalise institutions, commentators, media outlets etc, who spread miss information about mental health conditions. We must lean heavily on science when dealing with matters of medicine and health, not here-say and outdated/uninformed opinions. Further to this, psycho therapy is essentially unaffordable for anyone earning less than 70k a year. This is one of our countries greatest faults; mental health treatment belongs only to the privileged. Anyone on middle/low income (aka most Australians) cannot afford the $150 per psychologist session, or the $300 per psychiatrist session. Even with the mental health care you are still out of pocket between $70-150 per visit, and many people need substantially more visits that the ten subsidised visits the mental health plan allows for. This further exacerbates the stigma that mentally ill people are those belonging to a lower SES class. Mental health does not discriminate - it affects rich and poor alike, but it is our most vulnerable citizens that do not get the help they need. The privileged can

overcome and live adjusted and well lives because they can afford the treatment and the medication. Middle/low income earners cannot. The system has abandoned them.   "

**What is already working well and what can be done better to prevent suicide?**
"Preventing suicide does not stop at enquiring about mental health services. There are deep and problematic social constructs that make some groups of people more vulnerable to suicide. Australia has an abhorrent gender problem that effects every single citizen of our country. Toxic ideals around masculinity, strength and weakness are some of the greatest contributors to the overrepresentation of men in suicide statistics. This particular demographic does not seek help from health services (and instead often treats the females in their life as their counsellors in place) because they believe that to be sick is to be weak, that their failings are their own and that they should not burden others with their health problems. We must address the gender inequality in Australia if we have any hope to close the suicide gap. Indigenous Australian Youth are shockingly overrepresented in suicide statistics. Across all areas, out indigenous population need more support, and above all else, the need to be heard. They do not want staunch government officials telling them what to do to achieve wellness - they want to be (and deserve to be) the architects of their own progress plans. More effort needs to be made to listen to the specific and unique problems these individuals face. And thirdly, there is an alarming rise of suicide in teenage females. This likely relates to the gender disparity that Australian women face daily, occupying many of society's submissive and secondary roles. It is likely also due to the overwhelming pressures young girls face to conform to feminine typecasts and aesthetics norms. We must look deeper in to this and work to slow this trend which is growing at an alarming rate.  "

**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.**
"So many variables make it hard for people to experience good mental health; The majority of Australian's are struggling financially and can no longer actualise their dreams. They feel stuck in limbo, for their entire life. The rise of populist politics has exacerbated social divide leaving vulnerable people and minorities feeling alienated and scared. Most Australian's don't know enough about mental health conditions to identify symptoms, and may no even know if they or a loved one is living with a condition. The world feels pretty depressing at the moment - the climate is cooking, the rich are getting richer, the divide between ideologies is widening, intergenerational privilege and poverty is almost set in concrete in Australia, funding is being cut from health services, public education is not receiving enough funding leading to publicly educated students being unable to achieve the same academic results as private school kids, putting them on the back foot before they even turn 18, which can lead to a life time of underachieving and feelings of worthlessness. Access to mental health services is unaffordable to anyone who is not a high income earner, and the PBS does not cover enough medications. Eg. If you were diagnosed with ADHD after the age of 18 (which was probably your parents fault, not yours) you are ineligible to receive a subsidy on that medication. So, to have the medication you need to function/maintain employment and not fall victim to co-morbid mental health conditions or substance dependancy, you need to pay; $40-80 per quarter to see the GP to have your blood pressure checked; $300 per quarter to see the psychiatrist to get your scripts filled, and $1.20 per day for your medication (this is what I have to pay because my parents/teachers didn't listen to me when I was a kid complaining about my mental health and brain function, so I was only diagnosed once I was an adult which discriminates me from receiving subsidised treatment) That's approximately $2000 a

year on mental health upkeep. I am privileged enough to pay that, however so so many Australian's are not. "

**What are the drivers behind some communities in Victoria experiencing poorer mental health outcomes and what needs to be done to address this?**
"The main drivers are rooted in genetic predisposition and inequality. Genetics play one of the largest roles in the development of any health condition, be it body or brain. We know that many mental health conditions are predisposed based on your heritage, genome and dna, however many youth are not appropriately screened for illnesses as their parents do not even know about their own mental health conditions. Race, gender, sexual orientation and wealth status also all contribute drastically to your vulnerability to developing a mental health condition. Scientific data and research tells us this."

**What are the needs of family members and carers and what can be done better to support them?**
"Family members and cares would benefit from; more support, less stigma/shame from the community."

**What can be done to attract, retain and better support the mental health workforce, including peer support workers?**
"Peer support workers are paid a pittance which further reinstates their place as lower class citizens. They are valuable and should be paid appropriately.  People need to feel safe and fulfilled in their roles. If the services are failing consumers (which they are) you will obviously have high staff turnaround as no one feels like their making a difference. More money, more education and more support = better outcomes and higher staff attraction/retention. Ensuring safety and appropriate mental health support for these workers is also of utmost importance. "

**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?**
"First and foremost they need access to their treatment. It needs to be affordable. They need to be abel to take appropriate mental health leave to visit their doctors and employers need to allowances for people living with special needs. Employers are usually focussed only on their profit margins so it is not in their best interest to support people living with a mental health condition. Giving employers incentives to hire and support vulnerable people may help this (but also, this comes down to greed and stigma so I can't see one single solution to this big problem)"

**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?**
"- UNLIMITED support for victims of child abuse and violent/sexual crime - Better employment schemes to ensure ongoing employment for vulnerable Australians (this will SAVE YOU MONEY that you would otherwise have had to spend on drug rehab, unemployment be"

**What can be done now to prepare for changes to Victorias mental health system and support improvements to last?**
"Education and advocacy, to rally the support of neurotypical Australians. "

**Is there anything else you would like to share with the Royal Commission?**

"I was sexually abused ███████████████ when I was a minor. It all went to court and received a verdict etc. I was then given what I was told at the time would be "ongoing victim of crimes compensation counselling." In reality "ongoing" was actually just a set number of sessions, so I had to stop seeing my therapist which led to a pretty substantial regression. If I want to see her now I have to pay $150 per session yet my abuser pays has no out of pocket expenses, even though my symptoms are due to his abuse. In cases of child sexual abuse counselling needs to be unlimited as the nature of that PTSD is unpredictable and life-long. You'd have discovered that in your royal commission into institutional child abuse recently. "