

Submission to Productivity Commission on Mental Health

Issue 1

One of my sons suffers from a mental health condition. He is in a much better position than he has been in dealing with his anxiety but he still has an internet gaming issue. It has been a journey.

I offer the following observation about the Mental Health System in Victoria.

It seems to me from my experience that in Victoria at least the Mental Health system appears to be operating an informal system of 'Reverse Triage'. I am familiar with such a concept from my military service where in the event of mass casualties and a paucity of medical staff high need casualties are ignored with the limited medical staff concentrating on low need casualties where they are likely to get more and more immediate results.

It has been put to me by more than one clinician that anyone in the system who is diagnosed with say for example BPD (Borderline Personality Disorder) are seen as very needy and are avoided as they are seen as too difficult to deal with given the limited resources available to treat clients. In other words clinicians believed they would be unable to 'make a difference' even though the evidence is that effective treatments for BPD exist and stack up economically. My observation is that Clinicians are often blocked from providing multi-dimensional comprehensive care and CAT teams will only attend and provide assistance if an issue becomes life threatening. The stitch in the old saying 'a stitch in time saves nine' is not provided and sufferers go on to clog up casualty wards or 10% of cases of people diagnosed with BPD succeed in killing themselves.

The sufferer and their careers are left unsupported to pick up the pieces (If that is possible).

Indeed it was put to me that a person who wore a BPD diagnosis would not be admitted into a SIL (Supported Independent Living) facility run by his agency.

Issue 2

I am a TAFE teacher.

I am encountering more and more students with in particular anxiety issues and we know the mental health of twenty somethings is getting worse.

I believe part of the reason for this could be changes in the TAFE sector over the last ten years and in particular 'shaving'. Shaving is the process by which the designated face to face class time hours to complete a unit is reduced and replaced by home study (homework) completed in the students time. For example a unit that has designated sixty learning hours will now have some thirty hours class time with thirty hours home exercises where it would previously have sixty hours class time and limited home work. This is driven by the need to make cost savings.

The main issue I have with this is that the 'class time' designated to be a full-time student has not changed. It is still twenty hours. As a result time tables are still designed for twenty hours class time and the volume of learning covered has in effect doubled (the marking has tripled as marked homework replaces class exercises). The effect of this is that stepped learning and reinforcement rarely takes place and we teach topics in first year TAFE that are not covered till second year university. Cert IVs which once took a year now take six months. Diplomas and Advanced Diplomas

which once took two years now take a year or eighteen months. We now do some things more efficiently but most of the improvement has been simply by working very much harder.

This puts significant pressure on both teachers and students who are in effect doing more than twice the teaching and/or learning work as they were as little as ten years ago. At the same time the TAFE sector is required to accommodate students who have more and more stressed and who often have other demanding mental health issues