

Submission to Australian Government Productivity Commission Inquiry: Mental Health

This is my own personal submission. The below is my own personal input and opinion. I am submitting this due to my very strong interest in the field of mental health and in the interest of the mental health of every single member of this county (and in fact this world). I am not submitting this on behalf of any organisation I am currently or have ever been connected with even though some of my opinions and views may be indeed also held by them. I do not speak on their behalf at all. They have to make their own submissions. But I feel obliged to have my say and to help if I may.

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Unfortunately I only became aware of this Inquiry on Wednesday and submissions close on Friday (and I am already occupied for most of the upcoming week), however I would very much like to make a submission to this Inquiry and to contribute to subsequent actions where possible. I therefore submit this short submission now to register my interest and participation and would like to either make a fuller submission in due time (if allowed) or otherwise contribute to this enquiry.

Field of interest: My interest in Metal Health lies within the area of community and workplace mental health ... while I am concerned about aspects of the clinical mental health field and the care and handling of several mentally ill, my main focus by far is in the field of the general populace and the effect of mental health on the stability and success of the individual, the community, and organisations and business.

Area of concern: My concern is with any mis-diagnosis of any mental health issue and/or ineffective, or even harmful solutions. A neighbourhood, a community, the whole society, basically run on the collective mental health of its members/citizens. Therefore any diagnosis that fails to detect the actual mental state of an individual, that either misses a mental health problem or finds one that is not there, and/or which fails to provide the remedy/treatment/solution that is needed or provides a wrong or unneeded solution ... is inefficient, counter-productive, and – seeing as we are dealing with something as valuable (and at times fragile) as mental health – possibly harmful. Getting this RIGHT directly impacts on the social and economic aspects of our society and individuals.

The Productivity Commission Issues Paper details many aspects of mental health (as it well should in a Inquiry of such nature), which, due to the very short time frame I now have to write and submit this submission, I am only able to glance over and briefly comment on a few points. I would like to go through it in detail and submit or many of the points in further and fuller detail but cannot do that at this time. If a later submission is of value I can look into doing that.

I would like to however outline a few draft areas:

- **What is mental health/ who is responsible for mental health:** Mental health is not (or should not be) – in my opinion at least – in the domain of the government, the psychologists and psychiatrists, the medial doctors, the pharmaceutical industry, the welfare state etc. Perhaps they can ASSIST where applicable, but responsibility ultimately should (and I believe MUST) lie at the individual, the family, and the community. I raise this as one of the aspects for the Inquiry to look at may indeed be WHAT is mental health, WHOSE responsibility is it, WHERE does the state step in or not? etc. etc.

I am concerned that mental health seems to be addressed extensively (and excessively) to a medical mental health and a medial mental health solution. But mental health does not lie in that field – at least not until you get into severe mental incapacity, injury etc. which as I mention above while it is a concern is not my key focus or worry (in a strong society with strong mental health of the majority of its members, sufficient funds, resource and care is then readily available for those in need).

Mental health at the main level of society and that of which I most interested and concerned is related to peoples abilities and strength and stability and ruggedness under the duresses of life. These are not issue of chemical imbalance or issues needing chemical suppression of negative issues but areas of personal fortitude, understanding, ability, life choices, responsibilities, attitudes, social pressures, relationships, etc. etc. etc. Life can be HARD and it can have negative impact on a person and drive them down. It can definitely put the mind into states of depression and anxiety. But this does mean one has a mental health problem. Yes, it means your mental health is not great at that point – you are depressed, you are stressed, you can't cope - these are real and valid experiences – your mental health is low, yes. But it is not an illness. It is life. Remove those factors from a persons life that is making it so hard for them and their mental health can drastically improve. If it doesn't it is still not an illness, it is sign of mental fatigue. Just like after someone has been in a physical situation (severe accident/injury etc) for a while, even though the injury is repaired, the illness gone they still have to recover from the impact it has had on them – they do physio and other things to build up strength. You DON'T just say they are now permanently ill and give them drugs every day. You gradually give them exercise and build back their strength. Same with the mind – if it's taken a smash by life it might need some work to bring it back to strength again. To diagnose it as ill would be a misdiagnosis – and then any solution you give would be wrong because the diagnosis is wrong.

- **The nanny state/ big brother/ whatever:** The current emphasis on a medical/drug solution to mental health problems takes away the persons own responsibility for their life and condition – blaming it all on a medial condition beyond their own control or fault (if it IS a medical condition then fine – that is not your fault ... but that would be the last solution not the first and only one [and if you think we are already at the last solution then you are missing MANY other things that can be done to improve a person's mental health and life - those solutions need to be found and utilised first). When this is done by the state it also verges into a nanny state or even a big brother scenario. Lets forget big brother for now (I am not a conspiracy activist!) but let's just look at implications of the nanny state – when you take away a person's responsibility for their own life, even with the best of intentions, when you agree with the disabilities and difficulties the person has and agree that they cannot overcome them, that they have to rely on others and the state, you are potentially doing more to harm their mental health than perhaps any other action. Peoples strength comes from their abilities to tackle life (and kick its butt), to set goals and achieve them, to overcome barriers in life, to forge ahead under their own steam (individually or as and part of a team/ community/ society). When you wet nurse them and nanny them, though it seems to be to help them and though that's what they seem to want ... it isn't in their best interest. If you want to help a man, teach him how to fish – do not just give him fish!

- **Economic benefits of mental health:** This is perhaps backwards. It is not necessarily that improving mental health will lead to economic benefits. It is actually that increasing production so you have competent, effective, efficient, productive workers – who KNOW it – will increase mental health. One of the best known cures for mental health issues (of the severity I am talking about here – not actual medical conditions) is to get busy ... get to work ... do something (and it has to be something of value to others or the society .. that way YOU feel you are valuable because you produce value). Mental health issues in the workplace are again primarily not mental health issues but skill, competence, relationships , AND having to deal with the incompetence, stupidity, and lack of value of others around you (if your workplace is like that). There are ways to handle all of that. NONE of them involve mental health. They all instead result in better mental health WHEN RESOLVED.
- **Children:** Lay off the children as mental patients! They are children. EDUCATE them – that is how you address most childhood “issues”. Educate, love, lead by example, let them bloody grow up without being inspected every step of the way, let them encounter the rough and tumble of life and let them become strong and well and confident and able and valuable members of our society. Drugs inhibit education. They should be a last last resort and are basically an indication that your educators have failed - pay more money for teachers and get better teachers! Children are not a mental health issue and they should not be a cash cow.
- **Results:** If the mental health experts of the world today truly were experts then we would be conquering depression, suicide, poor worker performance, etc – NOT having it stay the same year after year or getting worse. I submit that all mental health actions across all levels need to be reviewed for results (and what results are wanted needs to be determined first) so we can adjudicate the successful and unsuccessful programs – where the money is spent with value and good results in return and where it is money down the drain.
- **Money.** Speaking of money. There is an old saying: **Follow the money.** There is a LOT of money invested in mental health by our country. WHERE does it end up? The reason this is a concern is that if it is ending up (even if on a circuitous route) in the SAME hands eventually – then that really is a monopoly --- and we know monopolies don’t work, are less than helpful in the long run. Furthermore as money is power, is this putting power into the hands of a few? Or even into the hands of a few the we don’t even know we were putting into this power? Or what about those whom are only for the money and chase the money – are they using this as a cash cow for their own purposes and not really for the social and economic benefits of the country as a whole. And if that sounds like conspiracy well look at history – it has happened so many times in this world I think it is pretty apparent – big money can attract some big nasties. I’m not saying it has here BUT is the system TRANSPARENT – can we trace the money all the way through? Does it distribute around the society evenly (more or less) or is ending up in the hands of one or two pharmaceutical companies (for example) – or even just going overseas in the end ... or what? Where does the money go, whom is it attracting, and why. I have no problem with lots of money being spent, nor lots of companies making lots of profit from it – as long as we as a country get value (results), we have transparency, we don’t have monopolies, and we are not cash cows being sucked dry.

That is my summary for now. I think MUCH more effective work can be done in the areas of suicide prevention (it is a failure to handle life and responsibility NOT a chemical imbalance – there is much that can be done to help those in danger of suicide and it does not involve drugging or anything else – it involves education, love, and giving them strength, understanding, and help), children and young persons mental health (see my note above – leave the little buggers alone ... that'll probably do better than the meddling that is being done currently!), Aboriginal mental welfare – they need education (real education), jobs (real jobs!), life skills INCLUDING how to live in both the Aboriginal and the Western worlds (not something us Western folk have to deal with or probably can comprehend), and how to avoid the trapfalls including how to avoid the trap of the welfare/nanny state (I'm not saying it will be easy ... someone has bugged that up real well and it might take a lot of work to repair it and give them back (those that are suffering) the mental health they deserve) but it is needed). And probably everything else on the Issue Paper!

But this is all I have time for now. I hope the above indicates that I have some understanding of the issues, some knowledge of the areas, some ideas and observations that may not be orthodox and yet which may be VERY pertinent to this Inquiry ... I would be happy to assist in any way towards the findings of this enquiry (presuming that this is indeed genuine, and not influence but those drinking too deeply of the money tree here, not a kangaroo court, etc etc (just saying!)).

Best regards,

Glenn Morrow

Resident of Australia (OK I'm a Kiwi – don't hold that against me! I've been here for 20 years so I think my input is pretty valid)

* There was a mention of "*Where possible, you should provide evidence, such as relevant data and documentation, to support your views.*" But due to the time constraints and the high level generalness of my submission at this time I cannot do that. But I would certainly work towards such if/where asked to.