

## Submission to the Productivity Commission on Mental Health

Dear Sir/ Madame,

In reading the recommendations of the Interim report,

“The existing physical development checks of Australia’s 1.25 million 0 to 3 year olds in community health services can be expanded to incorporate social and emotional wellbeing aspects of development, so that any necessary assistance can be provided to both the child and parents/carers.” Page 11 Overview draft report

I strenuously disagree with this recommendation as if this were to occur, we would see an increase in parents being told their young children are mentally ill or have “emerging” mental illness. In my opinion “social and emotional wellbeing” is just another way of saying mental illness.

I am sure the intention is not to further increase the large number of children who are on psychiatric drugs, however from my past experience and studies of statistics on the increase of the psychotropic drugging in Australia and around the world, this will most likely happen.

Already there are far too many Australian children on mind altering psychotropic medications, and despite the TGA’s 67 warnings of these drugs, the number continues to increase. Antidepressants are not even approved for children under 16, yet many thousands of kids are given these.

We go to our doctors for advice and help. Unfortunately too many people with undiagnosed medical conditions are put on psychiatric drugs without first getting full medical checks. A friend of my mother had a brother who was diagnosed with schizophrenia and it wasn’t until many years later it was found out he had a brain tumour. I am sure you have heard many such stories and with the recent Royal Commission into Mental health in Victoria, many more have shared their stories of this as well.

Unfortunately, GPs do not have the time or the resources to use all the diagnostic medical tests available. With the incredible advances in technology in the last 20 + years I cannot help but consider this to be a real solution to the problem of mental illness. Why not put money towards training doctors in these procedures so they can help people with any underlying physical problems which most often contribute to poor mental health?

There is much documentation on the effects of vitamin and mineral deficiency and how this affects our bodies and mind. For example, there is an organization in

## **Submission to the Productivity Commission on Mental Health**

Canada called Truehope which has helped over 200,000 withdraw safely from psychiatric drugs using vitamins.

I would like to suggest that the Productivity Commission look at real solutions to the problem and I believe this would be a good start.

The more labels that are put on people the more there is an increase in the prescribing of mind-altering psychotropic drugs.

In Australia the Diagnostic Statistical Manual is used to determine which mental illness a person has. There is no science behind this and in fact there are no scientific texts, x rays, MRIs, blood tests and the like that definitively define someone as having a mental illness.

I understand there is another Manual that is used in Australia, DOC 0-3. When I read the checklist for children who are diagnosed with ADHD I realized that most, if not all, of the children I know would fall into those categories. It is nothing but a checklist of normal childhood behaviours.

There have been 67 warnings issued by the TGA against the side effects of psychiatric drugs. No antidepressant has ever been approved for children under 18 years of age, yet despite this in Victoria alone there were nearly 11,000 children under 16 on these drugs, 385 were children between 2 and 6. These drugs are linked to suicide and suicidal thoughts.

I am disappointed that the Productivity Commission has not considered the link between the drugs and suicide. I believe that we have a unique chance with this Commission in progress to really make some radical changes and do this.

That anyone would put a child on such a drug is nothing less than criminal and should be regarded as such. If I harmed a child I would be charged and put in gaol for my actions, yet thousands of Australians are being irreversibly damaged by the side effects of these highly addictive drugs and no one is accountable for this.

The concept of “emerging disorders” is confusing. Does this mean that even though the child doesn’t have anything wrong yet, they could in the future? Then based on psychiatry’s “predictions” they should be watched, tracked and treated?

As I write this I think of the absurdity of it, however this is what is proposed. Let’s look at it logically and we can see straight away that it is just not possible to predict future mental illness from an arbitrary list of questions on a checklist.

## **Submission to the Productivity Commission on Mental Health**

Some of the symptoms being used to identify so called psychiatric disorders for 0 to 3 year olds include: irregular feeding, difficulty sleeping, whining, crying, temper tantrums, shyness, sleeping with the light on and hyperactivity. This alone could just about be teething symptoms!

These are all experienced by a growing and developing child and if anything can only be labelled as “symptoms” of normal childhood behaviour. I wonder if any of the Commissioners and their advisors and team have children. A quick survey would disclose that all the children they have ever been in contact with would have experienced most, if not all of these. Does this make the baby or toddler someone who will possibly develop a mental illness? How can this be foretold? No more scientifically than with a crystal ball!

If we look to symptoms of mental illness or “emerging disorder” indicators of mental illness we are doing our future generation a great disservice. It is our responsibility as adults to care for our children and instil in them the qualities they need so they in turn can take responsibility for the caring of their children to ensure the future. If we screen, label and drug our children we are creating a huge burden on ourselves and the future generation. Many of the children who will be labelled with a mental illness as a result of being screened will carry with them the lifetime label of mental illness.

Why don't we put the money towards creating healthier kids? There is much research that shows the positive health results of children playing outdoors more, of doing sports and exercise and eating healthy nutritious food. Children enjoy the challenges of being able to explore their environment and learn new things. A baby with a developing brain needs good nutrition and a caring safe environment. This is what we should be providing for our kids not more labels and threats of “emerging disorders” which will create more kids on psychiatric drugs.

One wonders who is promoting this insane program and ultimately who will benefit? Not the children who are our future that is for sure.

So I ask you this simple question, do you remember being a child? Would you really want child-you to be treated in this horrific way?

And more importantly, is this how we want to raise our own children? Children are our future so let's instead work on creating a safe and happy environment for them.