

Final Submission to the Australian Productivity Commission

I hold grave concerns for the direction that the treatment of mental health is going in Australia. Over recent years the amount of money and attention on mental health, as identified by the psychiatric and pharmaceutical industries, has multiplied many times over. If this is valuable in the acknowledging and treating of suffering in this area then one could expect the numbers of people suffering from serious mental health problems to go down as their suffering is identified and treated. One could definitely expect suicide, attempted and succeeded, to decrease as “help” is given as people across the country access the accepted mental health care as it currently stands. In fact this is not the case. Every year the recorded figures for suicide ideation increase, corresponding to the increase in antidepressant and antipsychotic drugs prescribed to Australians. This might be seen as logical, of course people who are prescribed such drugs have a high level of suicide ideation, which is why they were prescribed in the first place. However the ideation comes *after* they start taking the drugs, not before. And now it is proposed that this very same industry start focussing on children from birth.

In the formation of policy in mental health the government has relied on the information provided by the very industries that gain. This is a clear conflict of interest. While it is correct to seek the input of professionals, those who know and understand the issues in any given area, it is also vital that the information given be verified by independent means. This is particularly difficult in this area. It is possible with investigation to discover that the “experts” in our country are financially tied to the groups and companies that benefit from the increases in funding that these experts strongly urge the government to undertake. Studies done on the efficacy of the drugs are funded by the very industry that sells them. Clearly this impacts on the reliability of these studies and subsequent reports.

Now we have programs to give children “social and emotional welfare checks”, which use very subjective testing to look out for potential mental health issues, with the possibility of medicating before any signs or symptoms arise. Children as young as three are already being put on these drugs. Drugs that effects include heart palpitations and tachycardia, gastric issue such as constipation and haemorrhaging, liver damage, nervous system disorders, as well as fever, fatigue, insomnia, malaise and anxiety, and suicide ideation. This is not care, this is active endangerment. To allow, as is now proposed, access to children from birth, assessed by a purely subjective test that any child could “fail” on, is indeed dangerous. Once these children have been identified as being prospective risks for potential mental health issues in the future, they become a part of this system. A system that anyone who is a part of it will tell you is very difficult to get out of. Drugs that are damaging to adults can be prescribed to children. The long term effects of these drugs, especially for young children, has not been thoroughly assessed. The potential long term effects include many physical and emotional symptoms.

Where are the independent studies? Not ones funded by the pharmaceutical or psychiatric industries, but funded by truly independent researchers with no familial or financial ties to either aforementioned industry. If we are to risk our most vulnerable, surely the most rigorous of standards must be upheld, not a subjective test.

It has been found in the Royal Commission into Aged Care that the use and overuse of psychotropic drugs was detrimental to the health of our older citizens. These are the same drugs that are being used on the rest of our population, including our most vulnerable.

On top of this the current focus in our society to look immediately to “mental health” problems, leaves many patients with legitimate physical ailments being diagnosed by GPs as mental health problems, completely missing very real physical problems. Pain caused by tumours, endometriosis, and other very real conditions has been seen as a mental health problem and masked with psychiatric drugs, prescribed by GPs in increasing numbers, increasing the patient’s problems and leaving the correct diagnosis and subsequent treatment to be deferred indefinitely.

An unbiased, clear look at the direction our country is headed in regards to health, and specifically the mental health industry, is long overdue and very welcome. The industry that benefits the most from the direction it has been consistently pushing our entire society in must be thoroughly investigated. The decisions that this industry has directed our laws, our health system and our education policies need to be looked at clearly and carefully to ensure that we are working toward the health of our whole nation, not just the pharmaceutical and psychiatric industries.

Thank you for your consideration in this incredibly important issue.

Yours sincerely,

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