As a professional teacher and lecturer in the private and government sectors for over 35 years at all levels (primary, secondary, and tertiary), I have seen and experienced the outcomes of many approaches to student care and well-being, especially the trend in recent decades of prescribing more and more drugs to address personal problems – and it is the Draft Report proposals addressing infants and very young children that particularly concern to me. Society can only function well and to its true potential if the next generations are going to be well educated, handled with sincere care when needed, and not be messed up along the way by ‘systems’ which may encroach upon, and reduce, individual freedoms – the natural resilience of human beings to survive through the experience of life is being interfered with, and this is not the domain of governments to solve.

Although it does not look like it on paper, I still hold some hope that the Productivity Commission will do its job of assessing with integrity the cost of current mental health strategies because it has become a bottomless pit of money which has produced very poor results for the dollars spent. This is because the mental health practices have no methodology and are founded upon false assertions. Primarily, this is the insistence by the industry that what cannot be diagnosed, still be treated.

1. The concept of ‘intervention’ is totally flawed; one cannot intervene between two unknown points. This is based upon the idea that although a person may not clearly have a mental health issue, they might be predisposed to something in the future – so the MH system can therefore ‘intervene’ and administer a drug (the general treatment) just in case they do suffer something later on – this is NOT a method or approach based on any factual diagnosis of anything. **If it can’t be diagnosed, leave it alone.**
2. The uncertainty of methodology is further demonstrated regarding the definition of infant mental health; Vol 2 page 652 of the Report states it “***is still a matter of debate among experts, although more formalised approaches to diagnosis and treatment are being developed and implemented.”*** Why should millions of dollars be spent on this state of affairs?
3. The overall vacillation about the psychiatric disorders in children is blatantly reflected in the diagnostic manual which arbitrarily itemises things like **difficulty sleeping, crying, tantrums, losing track of a favourite stuffed animal, and hyperactivity, as being symptoms of a mental health issue. These are NORMAL behaviours by infants and young children!! They do NOT need or require the intervention of a psychiatrist based on a checklist of supposed indicators! This is again the ‘intervention’ or screening methodology that purports to detect what might be an “emerging mental Illness” in very young children – one cannot predict a future mental illness.**
4. The Draft Report also does not state what treatment is being proposed for the mental health of very young children that may undergo screening. Obviously, meaningful therapy cannot be delivered to a 12 month old toddler or indeed a 2 year child, simply because of the communication barrier. Are there any guarantees that such will not be dispensed any drugs? This MUST be disputed and clarified because a dangerous precedent has already been set with hundreds of children under the age of three (including babies under one year old) being given courses of antidepressants and antipsychotics (Dept of Health 2008). **The drugging of children so young has to stop; it is absolutely criminal that it has happened at all.**  Such invasive interference with children (without their knowledge, consent, or understanding) by the MH industry is undoubtedly backed by the pharmaceutical companies who want to sell drugs, which demonstrates that this combined group of people does NOT really care about the well-being of children – otherwise it would not occur as an ‘apparent solution’ and the false diagnosis system that it really is.

For the above reasons I cannot support large areas of the Draft Report’s proposals, and as a taxpayer I object vehemently to the way MH is sucking up my public money, and still demanding more despite its own failures. But more importantly, the welfare of very young children will NOT be in good hands if such a system spreads over society.