Submission - Productivity Commission inquiry into Mental Health – 13 Jan. 20 20

Dear Commissioners

I am writing to express concern at the proposal to introduce screening for mental illness or emerging mental illness in 0-3 year olds.

Everything about this idea bothers me – it seems so unnecessary and so unproductive, it seems a poor use of taxpayer funds, it seems based on turning normal childhood characteristics into alleged symptoms of (mental) illness, it seems like an unwarranted intrusion into children’s lives.

I am a grandfather with children this age and am horrified at the idea of any child so young receiving treatment – likely to be psychiatric drugs – based on no objective clinical tests to validate the “illness”.

My specific concerns regarding screening 0-3 year olds are:

* We have a health system, there are doctors and baby health clinics already looking after babies, toddlers and children and very much aware of mental health. Such broad screening is unnecessary.
* Looking for a physical reason or condition should **always** precede looking for mental issues – after all children are generally responding to issues they have with their bodies and their environments.
* ANY assessment of a mental illness is NOT verified by any objective (medical) tests – hence screening will at best lead to a subjective estimate of why a child is demonstrating certain behaviours.
* The current proposed screening criteria are things like:
	+ Irregular feeding,
	+ difficulty sleeping,
	+ whining,
	+ crying,
	+ temper tantrums,
	+ shyness,
	+ sleeping with the light on and
	+ hyperactivity.
	THESE ARE QUITE SUSPECT INDICATORS OF MENTAL ILLNESS.
	As a parent I find these are all part of normal childhood experiences as children grapple with, their bodies (medical), their world and the struggle to become themselves – often with parents who continually overwhelm the child’s self determinism!
* Because screening questions are subjective**, any** child could be labelled as mentally ill and recommended for psychiatric drugs.
* Psychiatric drugs may mask symptoms (and have dangerous side effects) but I am not aware of any evidence that they cure a mentally ill person – for this reason behavioural therapies should always be considered as well.
* This is a failed idea - SCREENING OF 3 YEAR OLDS WAS SCRAPPED IN 2015 when it was found it was unpopular and of little usefulness.

More general concerns

* The draft report states, “Despite the rising expenditure on healthcare, there has been no clear indication that the mental health of the population has improved.”
* When I was young mental illness was almost unheard of – now we spend billions on it and we are continually told more money is needed – what is going on?
* The draft report seeks yet more funding and expanded programs – but if psychiatric treatments were working there should be a reduction in the problem - as happens in the field of medicine when workable therapies emerge!
* I would the like the Commission to consider why this is and to propose a path forward that does NOT spend more money on what appears to be a failing approach.
	+ Helping the mentally ill may involve finding ways to help them improve and cope with the situation they find themselves in.
* Where is Australia now? We have one of the highest rates of antidepressant use in the world with nearly 1 in 10 Australians taking them.
	+ I have taken antidepressants – they didn’t work!
	+ I only felt drugged and wooden
	+ Once I realised they didn’t work I couldn’t wait to get off them
	+ I found getting well required ME to change and help myself
	+ I did this by getting counselling and reframing my life
* Conflicts of interest between psychiatrists, mental health support groups and pharmaceutical companies have not been examined for the potential role in the soaring costs of psychiatric drugging and mental health.
* The Draft Report does not seem to have investigated:
	+ the side effects of psychiatric drugs and deaths linked to antidepressants and antipsychotics – 1707 in 2018/19
	+ the use of restraints or other invasive procedures,
* Use of electroshock – which can cause brain damage, permanent memory loss, cardiovascular complications, and death

Summary

I am very dissatisfied with the Draft Report because of:

* The proposed reintroduction of 0-3yo screening
* The lack of a critical examination as to why the current system is failing
* The apparent solution to lack of progress on mental health issues being
	+ More and expanded use of the same approach
	+ Much more cost
* If the Draft Report is implemented in current form then I fully expect that
	+ In 5-10 years we will have another review
	+ That review will find “Despite the rising expenditure on healthcare, there has been no clear indication that the mental health of the population has improved.”
	+ The review will propose:
		- More funding
		- An expanding of current programs
		- More intrusion into people’s lives and likely more impact on their human rights

Thank you for considering the issues I have raised and I hope they can be addressed in your current review in a manner that will make your enquiry of greater value to all Australians

Yours Sincerely,

Paul Raftery JP