15 January 2020

Members of the Productivity Commission,

I am writing to you in response to the Mental Health Inquiry Draft Report.

Firstly, I am not only ashamed at the fact that we are having to write submissions in the hope that it stops this inquiry going ahead, but I am scared. Scared that the proposal is to screen 1.25 million zero to three-year-old children for mental illness, which leads to putting them on psychiatric drugs. This is completely outrageous.

The ‘symptoms’ you’re saying are Psychiatric Disorders from zero to three year olds include: Irregular feeding patterns, difficulty sleeping, whining, crying, calling for absent parent, separation or stranger anxiety, temper tantrums, shyness, sleeping with the light on and hyperactivity. Are you serious? Can you honestly tell me that these aren’t just normal toddler behaviour? Whining? Crying for an absent parent? It is utterly stupid and completely monstrous.

Not to mention the effects that these screenings and psychiatric drugs will do to a developing child of that age. Since 2008/09 suicides in young people have increased by almost 40%, concurrent with the use of antidepressants increasing approximately 60% in young people[[1]](#footnote-1). Australia’s drug regulatory agency has issued 67 psychiatric warnings with 7 of these to warn of the risk of suicidal behaviour with antidepressants[[2]](#footnote-2) and as previously mentioned they are not approved for use in children under 18 for depression[[3]](#footnote-3)

Not to mention that children of that age will not have a say in this. They will be forced to undergo these screenings without their consent and most likely end up on Psychiatric drugs which will destroy their lives before they have even had a chance to live them, like a happy being, including missing their parents when they’re gone, and not being able to sleep without a light on and crying when that’s the only way a baby of less than 12 months old knows how to communicate.

As an Australian Citizen, I ask that the Productivity Commission please stop this inquiry into screening our most vulnerable population, the future of our country.

Regards,

Alicia

1. 1. Sue Dunlevy, “Happy drugs in link with Suicide,” Courier Mail, 2 June 2019, p. 5; Dr MarCn Whitely, Dr Melissa Raven, “More young Australians suicide/self-harm and use antidepressants while experts dismiss FDA warning,” PsychWatch Australia, 1 June 2019, <https://www.psychwatchaustralia.com/post/more-young-australians-suicide-self-harm-and-use-antidepressants-while-experts-dismiss-fda-warning> [↑](#footnote-ref-1)
2. 1. Department of Health and Ageing Therapeutic Goods Administration, Medicines Safety Update, “Medicines associated with a risk of neuropsychiatric adverse events,” Volume 9, Number 2, June 2018; Department of Health and Ageing Therapeutic Goods Administration, Medicines Safety Update, “Antidepressants – Communicating risks and benefits to patients,” Volume 7, Number 5, October-December 2016; Department of Health and Ageing Therapeutic Goods Administration, Medicines Safety Update, “Atomoxetine and suicidality in children and adolescents,” Volume 4, Number 5, October 2013; “Australian ADHD drug warnings are already in place: TGA,” AAP Newswire 22 February, 2007; “Suicidality with SSRIs: adults and children,” The Australian Therapeutic Goods Administration, Adverse Drug Reactions Bulletin, Vol. 24, No. 4, August 2005; “Use of SSRI antidepressants in children and adolescents” The Australian Therapeutic Goods Administration, Adverse Drug Reactions Bulletin, Vol. 23, No. 6, August 2004; “Warnings for high dose tricyclics antidepressants,” The Australian Therapeutic Goods Administration, Adverse Drug Reactions Bulletin, Vol. 23, No. 5, October 2004. [↑](#footnote-ref-2)
3. 1. Suicidality with SSRIs: adults and children,” The Australian Therapeutic Goods Administration, Adverse Drug Reactions Bulletin, Vol. 24, No. 4, August 2005 [↑](#footnote-ref-3)