I am writing to you as a person who has lived experience of bipolar and I am autistic.

Poverty is one of the biggest contributors to people’s mental ill health. More the 40% of people living on Newstart have a disability and an unknown amount of young people on Youth Allowance. The exact number of people with lived experience of mental ill health/distress will never be known, because of the stigma and shame associated with Centrelink benefits and the stigma and shame associated with living with mental illness/mental distress.

I was on Newstart for eleven years before I was able to get Disability Support Pension.

The attacks on Social Security are attacks on our community of people living with mental illness/distress, trauma survivors and people with other disabilities.

Newstart and Youth Allowance have not been substantially raised in 25 years.

The low rates of Newstart and Youth Allowance is a major factor in homelessness, and suffering.

 I know people who were never diagnosed with mental illnesses who after dealing with Centrelink now have depression and/or anxiety.

We also have not enough Public Housing, so people on Social Security are can’t afford private rentals and can not access Public Housing even though they are entitled to it under the law.

I am 38 yrs old and I have to live with my parents, because on Disability Support Pension I can’t rent, the housing wait list is over ten years now. I am privileged that I can live with my parents, many people with mental illness/mental distress come from abusive environments where that is not the case. Although I have loving relationships with my parents, it does strain our relationships at times because we live in a small house.

Robodebt is an ever present threat to many people on Centrelink and over 2000 people suicided after receiving a Robodebt notice. It also acts as a deterrent for people with mental illnesses/mental distress from doing part time work which may decrease their social isolation.

I, myself am scared of being placed on the Indue card/Cashless Welfare Card. I have spoken to many people in my communities who feel the same way as me. A few even say they will Suicide if placed on the card. There are a number of businesses I will no longer be able to use if I am placed on the card like my local news agency, Aldi, EBay and even flying to Melbourne to see loved ones because all airlines sell alcohol.

My experiences of Disability Employment Services is very disappointing. I have used seven over the last twenty years. The staff are inadequately trained in Disabilities, and Community Services. Compliance is more important then my mental health before I became a volunteer participant. Sometimes consultants have high caseloads. I had one consultant who had over 100 clients to see fortnightly. I don’t want to be with a disability employment service anymore, but there is no alternative. I need work if I am ever going to live independently. I work as a volunteer running a support group, and helping people in my local community. As a volunteer I feel the government and larger community devalue my contribution and my worth.

I am also scared of the drug testing of people on Social Security. I’ve never done drugs but I know tests do give false positive readings on occasion. I think peeing in front of a stranger will be upsetting to me, but worse for adult survivors of child abuse and victims of sexual violence exasibating already existing PTSD. Not to mention the amount of people with mental health issues who are self-medicating with drugs or alcohol. There are not enough detox and drug treatment rehabilitation centres already. Because of my experience with other people who have dual diagnosis I believe in Harm Minimisation models of care. All of these policies take away Choice and Control from people living on Social Security because of Psychosocial Disability. My right to self-determination is very important to me.

I also fear becoming homeless if my parents need to sell the house to go into Aged Care. This fear has made me consider suicide.

I was diagnosed with bipolar in 2003, with a psychiatric admission to Blacktown Hospital where I stayed for seven weeks at the age of 22 years old. I was subject to a high number of blood tests, because they didn’t believe I hadn’t used drugs no matter how many times me or my parents told them. They told my present who l lived with they would not know if I used drugs. I believe I was tested more then ten times now seven weeks. Every single one came back negative.

My whole admission was very traumatic, and nothing about being hospitalised helped me. Follow up Care was inappropriate and inadequate. Symptoms were viewed as misbehaviour and punished. A nurse tried to change my religion, and ‘save my soul’. I was assulted by seven nurses and drugged, because I was psychotic (not dangerous) and the war was being played on the TV, so I attempted to break the TV. I weighed on 69kgs at the time and seven nurses was an excessive use of force.

In all my contact with mental health services both community and public over a period of fourteen years no one was appropriately trained to even suspect I was autistic. Autistic people have nearly double the rate of suicide then the general public, yet our mental health staff are not trained in autism. Our mental health treatment spaces like hospitals are not made safe and suitable for autistic people. This puts our lives in great danger.

I was bullied at school for eleven years of the thirteen years I attended. I now know this is because I am autistic and other kids through I was weird. The school did not determine my autism even when I was assessed by specialists. I was weird but I still deserved to be safe at school, not experience ongoing harrassment, and bullying. At school I frequently throughly about taking my life. Teachers failed in their duty of care towards me when I was vulnerable. My last two years of High School were positive as the Jesuit ethos was upheld and did not tolerate violence. Bullying is violence.

I believe this can be fixed by having a round table discussion with teachers, and members of the various groups such as representatives from LGBTQI, Muslim, Jewish, disabled, autistic and other at risk groups to develop an Anti-bullying policy that is compulsory and linked to the funding of every school in the country. Then we need to have a policy implemented in every workplace. I know many adults who had to quit kind and became mentally unwell sometimes even disabled due to bullying at work. I can’t overestimate the impact bullying had on my fragile self-esteem.

In 2018 I was rejected for NDIS. They rang to tell me ‘they believed I was autistic and I have bipolar but it doesn’t effect my daily life’. I had applied more then a year before I got a response, and I tried to follow up three times. I was lied to over the phone about them calling me back. Eventually my support worker and I went to there office where they told me there had been a computer ‘glitch’. They contacted me that week with the denial. I was unable to appeal, because I was too upset. I am now putting my second application in with the help of Flourish Australia. It has required two appointments with my private psychiatrist (for which I pay for), two appointments with my private psychologist (my last appointment was September, my next one is December), two GP appointments, and I am now waiting an appointment with an

occupational therapist to ensure I don’t get rejected again. The process is one of systemic violence. Many mental health services have been closed due to NDIS, and yet many people I know with lived experience of mental illness have been rejected. I lost my support worker. At least I have a private psychiatrist, good GP and the support of family and friends. I do not get to see my psychologist enough because I get a limited amount of visits. I can’t find a specialist in Autism. Some people have no support. The consumer movement and my family and friends have saved my life. I co-facilitate a bipolar support group in the Blue Mountains. I believe in peer support, trauma informed care, and emotional CPR.

Another issue that concerns me is the lack of public mother and baby inpatient units. Many women suffer from peri-natal mental Health issues and need support during that time. Helping them in the first six months of their child’s life creates better outcomes for both the mother and their children throughout their lives. As well as helping empower them to be the best mothers they can be this would also lower the costs to the society throughout both the woman and her offspring’s lives.