

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 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