Submission to the Productivity Commission

DRAFT REPORT – MENTAL HEALTH

23rd January 2020

From :

Ken Barnard

Dear Commissioners .

 I have been working on a document to assist me on comprehending the subject of Suicide Prevention as it applies in Government reports etc. The process of reading and re-reading the thousands of pages has taken me 15 months .

The reason for preparing such a document was that I was a unaware of the existence of so many statements of aspirations , and so many recommendation with so little accountability. I was only trying to understand the background in order to take up my involvement as a member of the Macarthur Suicide Prevention Network in February 2019. There was no easy reference document that laid out the various documents in an understandable order. Many reports etc. were Mental Health documents that had a significant Suicide Prevention content , so extracting that part assisted me in the overall context of Suicide Prevention .

The second part of the document is intended to be a platform for my involvement in advocacy in relation to Suicide Prevention . The work being carried out at the government level is most unsatisfactory , and disrespectful to the 8 people who take their lives every day.

And now to a terribly distressing event that happened today in our family’s tragic “involvement” with suicide.

I wish to advise that I received advice from my son Joshua on Thursday ( 23rd January 2020), about his co-worker of 3 years , who took his life this week ( on the 21st January 2020). I cannot begin to tell you how upset we are at the anguish that our son Josh is suffering now . I can only say that my son really liked him ( I do not think it’s appropriate for me to say his name at this time ) I do know he is married and has four(4) young children.

So , our lives consist of an almost annual trauma of dealing with the loss of a person well known to us by suicide. Those people are :

* Our son Aaron :19th July 2014, aged 32
* A long time golf friend of 20 years, April 2015, aged 60
* Our tenant for 8 years, a lovely person : 9th March 2016, aged 40 ( her brother took his life by suicide some years earlier, his mother wrote to me saying, she had now lost 3 of her children, and now has only one son left- unimaginable pain )
* Son of close friend of 10 years. We are/were members of the Macarthur Homeless Steering Committee :8th November 2018, aged 23
* Sam ( not his real name ): 21st January 2020 , aged in his 40 ( Sam leaves a wife and 4 young children )

It beggars belief that anyone should have so many possibly preventable deaths surrounding their lives in such a short space of time (5 years) as has happened to me , yet I am sure I’m not alone .

Commissioners, your Suicide Prevention content in your draft Mental Health Report is an excellent treatise, however , the tragedy surrounding our family has not been adequately addressed at the core of the subject – PRODUCTIVITY .

Please think about the 8 people a day taking theirs lives , their and their family’s needs . To have a report that actually creates real outcomes , addressing the awkward real problem areas of *control and power*. The problem is – the problem .

The draft is therefore , at this time , an articulate treatise not addressing the problem of *productivity*.

 Having just completed a rough draft in October 2019 of my report on Suicide Prevention and the government , your own Commissions draft report on Mental Health from the Productivity Commission (PC) was presented . I have read it a few times , and feel comfortable to make a comment on a few subjects .They are :

* Accountability of governments in relation to provision of Suicide prevention measures and commitments , as well as an observation of the missing subject in the PC’s draft of failure to acknowledge the overarching impact of POWER in regards PRODUCTIVITY .
* An observation of the oversupply of reports in relation to Suicide Prevention. That is , all that is understood of the problem , and the facts and figures are known , and recommendations are repeated endlessly . Therefore , the 37 pages commencing page 841 , on Suicide were , sadly redundant ( in the context that the productivity analysis is well known and comprehended). The “productivity” analysis failed to detail the process of the productivity losses within accountability of the governments ;as it applies to their power over sustainability and the decision making process.

 I do appreciate the Commissions depth of detail on Suicide Prevention . I do feel there are some deficiencies of fully understanding the disconnect between the state governments mental health and (physical health) emergency health facilities including the PECC units in NSW , and the Suicide Prevention services funded by PHN’s . There is a productivity loss that may be able to be calculated . There inevitably must be some loss of life as a result of this disconnect of services , there is a full report on the matter in my document if you are interested. The matter is before the NSW minister for Mental Health and the SWSMHS , and more discussion and a meeting is set for some time in February .

I ask if it is acceptable or the Commission to receive the 2 comments by way of this “Header document” , and to receive the attached report ( Which I have been working on for the past 15 months), titled :

SUICIDE : ITS TIMEWE TALKED – LOUDER! . I do not expect anyone to read the document , but , I’ve provided it to allow anyone at the Commission to see where my comments of the Productivity Commissions Draft Report is located , and the relevance to my comments on “Accountability- Power” , and “Too many reports”

I have copied and pasted my observations on the PC Inquiry DRAFT ,from the above mentioned document (attached) and advise as follows :

COMMENT ONE OF “THE PRODUCTIVITY COMMISSION INQUIRY into MENTAL HEALTH”

“The word “accountability” was only sparsely used . A shame , this document is weakened at every part where accountability is not explored . There is a complete absence of exploring ‘ *power’* , and it’s strangulation of the Mental Health sector over long term sustainability . Again, a shame , and further weakening of the capacity of this document to be a separate document from all of the other *aspirational* reports and inquiries .

A recommendation to the PC draft :

* There should be a more liberal use of the word “sustainably “ , for example - so as to read “activities are sustainably funded”
* A far more liberal use of the word “accountability “ as noted above
* There is one missing section . The heading should read “Power” , perhaps the PC could provide a critique on the failure of our system at the pointy end of delivering adequate resources . In addition , perhaps exploring accountability in this section , thereby powerfully addressing a sustained set of actions that have been identified and articulated in this draft , and in all those other documents provided earlier , over so many years .

Without that , politicians and the bureaucrats making the initial financial decisions are immune from pressure , and the result is the ever lamented description of failed aspirations .”

COMMENT TWO OF “THE PRODUCTIVITY COMMISSION INQUIRY into MENTAL HEALTH “

SIMILARITIES OF THE PLANS ETC. ( a copy and paste of the report page 9)

“It is worth noting that the 23 documents in this report have a remarkably similar pattern of contents . They seem to have a universal layout . I’m not referring to the standard formats of Foreword, Summary Conclusion etc , it’s about a similar content of the body .

They all seem to repeat the same themes and observations, and most seem to avoid the core component of what is NOT a priority in the hands of those in power . The often repeated contents are :

* Complexity :references to the “ complexity “ of Suicide , and definitions/explanations are located in virtually every report on Suicide .
* Recommendations :There are 759 recommendations in those reports alone , and perhaps as many as half again in priorities and strategies.
* Facts and Figures :Each and every report etc. regurgitates the”key” facts and figures , on Suicide .These are provided in a multitude of versions as though this particular set of figures will help change things in some way. Explanations of prevalence and consequences are most common
* Economic costs: Similarly , costs of Mental Health and Suicide with accompanying hundreds and hundreds of graphs of all descriptions embellish almost every page in this area .
* Aspirations :The main body of the reports etc. comprise aspirational intentions and grand statements such as “ this will be done” and “the #@€%¥ department or committee will…..”. The level of aspirational language of plans , reports and strategies reach, at times, as mentioned earlier a shrill level. Those aspirational statements are later brought back to the real world by Commissions , inquiries and institutions who , in turn, expose these aspirations to an endless list of failed processes , and inadequacies . well as Government Departments own critical observations . The proof – irrefutable.
* Reform : Is a catchcry postured and exalted with many statements that reiterate/repeat /endorse earlier reports etc.
* Our Mental Health System : Federal and State systems are described and critically observed. This is the provence of the word “*complex”.*
* Peoples experiences : There are a variety of contexts , and many are moving examples of what is not happening .there are also examples of what is happening that is working , however , these stories are rare .
* References to especially heavy impacted members of our community: There is a reference in virtually every document on our indigenous community. There are also many references to the LGBTQI +, CALD, Post Traumatic Stress of Military and First Responders . Residents of Rural And Remote communities

There is , however, silence in the matter of *power* in regards to the plans strategies etc. There are fortunately, references by the Productivity Commission , the Royal Commission in Victoria , and the National Mental Health Commission on the matter . “

RECOMMENDATION TO THE PRODUCTIVITY COMMISSION – ( copied and pasted from page 15)

1. “PLEASE STOP WRITING NEW PLANS STRATEGIES AND REPORTS “

“There is one small thing I wish to place as a recommendation , as a lay person, unqualified in Mental Health . In my journey , reading thousands of pages of these documents I soon noted a consistent theme . The content of most of the documents listed here follow a repeated formula of trotting out the same figures with pages of diagrams to explain the crisis, the same foreword, and the same summary (according to the subject either Mental Health or Suicide prevention) and tons and tons of recommendations or strategies. But what follows are virtually the same as preceding reports, just worded differently and presented differently. My personal opinion is that some of the most articulate and well-presented documents were actually written several years ago, and are as relevant today as when they were written. Sadly, there are also reports that fail the test of being relevant to the subject. Virtually every document was written *without any clear authority* to actually do something, to spend something, to hold existing services accountable.

The result? There exists , a plethora of well-meaning , yet sadly meaningless reports strategies , frameworks , and Inquiries . (this point was drafted on the 19th July 2019 )

Inserted :24th November 2019: and now we have time to digest the Productivity Commissions Mental Health Draft Report October 2019 , and the Royal Commission of Victoria Mental Health interim Report .

If ever there has been a more in depth, eloquent, concise explanation of Mental Health and the effects of suicide, I am unaware. The Inquiry provided us with the insight of additional information on costs to the economy say $50 billion and associated costs of say $150 billion .Yet the voluminous body of work is sadly , no more than a cut and paste of what has been reported, and reported, and reported.The Mental Health reform agenda almost a word perfect copy of past ideals . I sincerely apologise to the Productivity Commission for sounding dismissive of such an in depth inquiry. The problem is that the Inquiry has no power to hold decision makers accountable. The Inquiry cannot prosecute the base problem , the end result is , as noted above , more of the same.

 In relation to the Victorian Royal Commission into Mental Health , well, there are always exceptions . If a fully committed government , appoints a Commission with the powers to delve into the real state of affairs of the said Governments Mental Health service , then the outcome will be entirely different than the previously mentioned reports strategies etc. The outcome will be a valuable opportunity to *make* changes , rather than *report*  on the desire for change . “

REFERENCES ABOUT THE PRODUCTIVITY COMMISSION LOCATED IN THE DOCUMENT :

SUICIDE : ITS TIME WE TALKED - LOUDER!

My attached document outlines the overall reporting processes within the various governments and their agencies , focussing on the subject of Suicide Prevention . If the person reading my submission is not able to read the attached report in its entirety, there are references to the Productivity Commission in the following pages :

PAGES :9 and 11

In the overall recommendations pages 12-15. The PC’s references are

Item 2 Appropriate funding

Item 10 Please stop writing new plans strategies and reports .

Extracts of the PC’s report relevant to Suicide Prevention p73 -95

The Conclusion (in part page 231)

THE QUALITY OF THE PRESENTATION OF THE ATTACHED DOCUMENT

 Please excuse the poor quality of the draft document, it is in the process of being proof read and re-formatted as at January 2020

ABOUT THE AUTHOR

My name is Ken Barnard. I do not hold any Mental Health qualifications, nor have I worked in or studied Mental Health in any form.

I was approached in 2011 to act as Consortium Chairperson for Headspace Campbelltown following my involvement of working with other members of local Rotary Clubs. We had formed a group of likeminded people to provide local forums on mental health after meeting Professor Gordon Parker from the Black Dog Institute.

I have continued in my membership in Rotary and served as President of the Ingleburn club twice. I have a special interest in assisting in the building of cyclone proof school classrooms on a remote island (EMAE Island, Sheffa Provence), in Vanuatu.

In 2011, I joined Beautiful Minds, a Macarthur Area Community Mental health group. This group established places such as Harmony House in Campbelltown and has raised hundreds of thousands of dollars working on renovations to Waratah House, Burunji, Brown Street, and a myriad of resources to those places including Gna Ka Lun. I served as Vice President for 8 years and stepped down in 2019 to advocate in the area of Suicide Prevention reform.

I have had an interest in community service for some time serving as Board Member at Myrtle Cottage, Ingleburn Zone Director for the Salvation Army Red Shield Appeal, member of the Macarthur Homeless Steering Committee (9 years) and the Real Estate Engagement Project (REEP), for 9 years . I am an advisor to the newly formed “Home Help” Family and Community Services funded homelessness prevention initiative.

In 2014, we lost our son Aaron to suicide, a great shock as we were quite unaware there was any problem.

In 2016, I was asked to join the “Our Experience Matters” group at SWSPHN Mental Health department. At the same time, I have been able to speak at one forum and to advocate at the invitation of Lifeline Smeaton Grange for placement of information signs at bridges in the Southern Highlands, to address means reduction.

In 2018, after recovering sufficiently to be able to work on community projects, I retired from the board of Myrtle Cottage and Chairperson the local Salvation Army Red Shield Appeal . The Macarthur Real Estate Engagement Project had gone I to hibernation (happily, it has been resurrected and I have an ongoing advisory role) This has allowed me to have a greater role in Mental Health community service.

In 2019, I joined the Macarthur Suicide Prevention Network, and embarked on a learning process of researching the myriad of documents that relate to Suicide Prevention and Mental Health in Australia. This process has allowed me to extract the relevant material in this report.

I now feel emotionally strong enough to consider a role in advocacy in that area.