Committee Secretary Inquiry into Better Support for Carers Submission No. 127 House of Representatives Standing Committee on Family, Community, Housing and YouthANDING COMMITTEE (Inq into better support for carers) PO Box 6021 A.O.C. 25/6/08 Parliament House 1 7 JUN 2008 **CANBERRA ACT 2600** FAMILY, COMMUNITY Dear Secretary **HOUSING & YOUTH** I wish to make a submission to the House of Representatives Standing Committee on Family, Community, Housing and Youth's Inquiry into Better Support for Carers. I am submitting to the Inquiry because... ! am a parent of a son aged 45 who suffers from chronic paranoid schizophrenia, (for 24 years) borderline intellectual disability and Diabetes 2 I am 73 yo and my husband is 77. Our son had long periods in psychiatric institutions during a period of 15 years. (Wills mere, Mont Park. Plenty, Larundel) he was an involuntary patient & we continually tried to have him discharged from situations where his intellectual disability was not understood. And he suffered a great deal of emotional and even physical cruelty. As the process of deinstitutionalization was carried out he was discharged; he was in a transitional facility for 2 years in Camberwell - a very well supported pleasant "home" with 24

for him at our own expense.

We have worked very hard to give him some quality of life but we are ageing and have great fears for the future. We would like to feel that he will be secure and cared for after we are no longer able to care for him.

hour support. As it was transitional we tried hard to find appropriate accommodation where his needs could be met and where he would have some independence and some quality of life. He fell between the cracks of services so we shifted to a larger block and set up a unit

☐ More information is attached on a separate sheet

1. The role and contribution of carers in society

As a carer, I feel that my role is...very demanding. I do not think that anyone makes a career choice to be a full time carer of a person with mental illness. Carers save governments a great deal and it is time for much more assistance.

Mental illness is a disability, an illness, which is often overlooked. There is still much stigma in the community and there is still much confusion between what is perceived as illness and what is perceived as bad, sometimes, criminal behavior. There needs to be much more recognition of the illness, much more support and much more done to alleviate the feelings of guilt suffered by family members.

☐ More information is attached on a separate	More	information	is	attached	on a	senarate	sheet
----------------------------------------------	------	-------------	----	----------	------	----------	-------

2. The barriers to social and economic participation for carers

As a carer, I face the following problems

- 1. Support for the people suffering from mental illness. Respite services are great but need to be more flexible. Carers must have much more opportunity to have their voices heard- to choose the respite services they need; to have better services for their loved ones so carers can still have the opportunity to pursue a career without feeling guilty that they are neglecting their young, adult or aged loved ones suffering from a mental illness....
- 2. The carer allowance is insufficient to provide quality of life for a family. Choices have to be made. It would be sufficient if services and support were improved for \the sufferers. Everyone could "get along with' his/her' life' and with less stress there could be improvement in the emotional, physical and mental health of the whole family.
- 3. There need to be more specialized services, more psychologists, psychiatrists, more therapists. I recognize this is a challenge for the whole community.

☐ More information is attached on a separate sheet

3. The practical measures required to better support carers

As a carer, I need help with ...

- 1. Better services for people with a mental illness a range of quality accommodation options. Accommodation ranging from fully supported accommodation to independent affordable quality housing with degrees of support according to needs
- 2. Carers need to be heard. The Confidentiality Act needs to be reviewed and understood. Too frequently a seriously ill, often deluded family member will be placed in hospital, and will be asked, in that state, if he, she wishes to have carers informed of treatment plans etc. If the consumer does not want the carer involved, the carer is out of the picture.
- 3. There needs to be a serious investigation of homelessness

- people with mental illness in remand and

prison situation.

4. The carer allowance /payment needs to be reviewed and increased. (but quality accommodation arrangements for the mentally ill will make this unnecessary)

4. Strategies to assist carers to access opportunities and choices

I think the Government can better help carers by ...

- 1. Placing Mental Illness high on the priority list. Perhaps there should be a Minister for Mental Health. Mental illness slips between Disability and Community Services and big issues slide down the priority list.
- 2. Recognizing the importance of quality accommodation, The project to be adopted in Victoria soon (hopefully) modeled on the New York housing project should be duplicated in many areas with quality accommodation, affordable and close to services. It is important that the mentally ill should not be sidelined but their needs must be specifically addressed.

the voices heard are the voices of the professional services that are mos wordsmiths and present glossy submissions. It is important that there accountability for government funds which are allocated specifically to me carers.	t able to employ is strong, firm
☐ More information is attached o	n a separate sheet
Thank you for taking my views into consideration as part of the Committee forward to reviewing any recommendations you make to improve life for care	
Yours sincerely	
Dried vous a super Aline	
Print your name Aline	
Date	