Introduction

I am the mother (sole parent) of 5 young adults, one of whom experienced his first psychotic episode at the age of nineteen. I also work part-time in pastoral care, in the Dept of Psychiatry in a large public hospital

My son. Peter, is now 28 and seeking to find employment after completing an Arts degree with honours, in between hospital admissions. He has never been diagnosed as schizophrenic but is currently being treated as though he were — on medication that is known to gradually destroy brain cells over a number of years.

1. Accomodation

After each of six hospital admissions (the last at the end of 2003) there has never been public housing available. For 12 months, he lived in a shared, private rental apartment with no case management, where he accrued a \$13,000 debt through taking out bank leans and not being able to meet the repayments.

He then lived in supported accommodation with 10 other mentally ill young people. Again, no case management, no staff present overnight, each resident expected to take turns at shopping, cooking etc. If someone didn't feel like preparing a meal, everyone went without dinner! He lived there for 9 months before his third hospital admission.

Because I live in a small apartment and am still supporting his younger brother, he has only been able to stay with me for a month at a time whilst we have searched for suitable accommodation. He tried living with his father for 12 months but this didn't work out. After the next hospital admission, he moved in with his grandmother (my mother) who had recently been widowed. This lasted another 12 months before he was back in hospital again.

After his last admission, the family paid rental for him for 12 months so that he could live in peace on his own. My son says that "when you are mentally ill, you need to live with healthy people in order to stay well and get your life back on track". I believe there is some truth in this. After this last admission, my son was finally allocated a case manager who used to see him 15 minutes once per month!

2. Lack of affordable psycho-therapy

Along with medication, I believe pscho-therapy is extremely beneficial in treating mental illness. However, the costs involved are well beyond the reach of mentally-ill young people who are on disability pensions. Even group recovery programs are few and far between.

I would like to see affordable, individual accommodation available in communities with one of the apartments housing a carer/ supervisor. If such a place existed, I, along with other suitably trained parents, would be prepared to volunteer one night per week in order to cut down the after-hours running costs.

Employment Opportunities

Some form of suitable employment gives meaning to everyone's life's purpose. There are very few employers willing to take on a person with a psychiatric disability!