We must stop treating people with mental illness like criminals

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The National Mental Health Commission is acutely concerned that all adult acute mental health in-patient units in Queensland will be locked by December 15, and that dozens of electronic bracelets to monitor patients are on order to reduce the number of patients "absconding".

Professor Allan Fels, Chair of the National Mental Health Commission says: "Nationally, about two-thirds of people treated in public acute mental health wards are voluntary patients. Even if someone is in hospital on an Involuntary Treatment Order (where a person is being treated without their consent) every one of them is there because they are acutely unwell.

"The idea that we will potentially put tracking devices indiscriminately on people who have done nothing wrong is shocking. It is at odds with the basic principle that a mental health service for the most unwell should be a caring and therapeutic one" Professor Fels said.

"It also potentially breaches commitments under the UN Convention of Human Rights, UN Principles for the Protection of Persons with Mental Illness and for the Improvement of Mental Health Care, and the UN Convention on the Rights of People with Disabilities. Our very own national mental health and disability strategies, national mental health Standards and Statement of Rights and Responsibilities reflect contemporary mental health care and human rights legislation. They promote social justice, equity, access and a compassionate society with mental health as its primary goal.

We know that sixty-five per cent of the estimated 3.2 million Australians who have experienced a mental health problem in the past 12 months have not sought help for that problem. We do not need any further deterrents.

"The Commission is also very concerned by the way people with mental illness are being referred to in some media coverage, despite long-established Mindframe media guidelines on responsible reporting of mental illness. Generally describing the people in these facilities as 'killers and rapists', as one article has, is appalling.

"It continues to perpetuate the myth that people with mental health problems are 'mad, bad and dangerous' – which is incorrect, unproductive and reckless", Professor Fels added.

Research shows that people living with a mental illness, who are managing their illness with treatments, are "no more violent or dangerous than the general population".[i] People with mental health problems are actually far more likely to be the victims of violence than be violent themselves.

Addressing misconceptions, stigma and discrimination related to mental illness is very important because almost one in two Australian adults will experience a mental illness at some point in their lifetime.

"What does this say to people with a mental health difficulty who need help, about how they will be treated when they seek it, when national and international best practice all point to least restrictive practices in supporting people with mental illness to recover?

There are better ways to monitor people and keep them safe and in treatment. It takes leadership, adequate physical and human resources, and support and development of staff, and the involvement of peer workers and families. Even better, properly funded and cost effective mental health support in the community keeps people well and avoids the escalation of their illness and the need for expensive hospitalisation or community-based alternatives. For example, Queensland has its own positive example of a peer run community service in the Brook Red Centre, which the Commission has seen firsthand.

"With the right treatment and support people with very severe illness have the capacity to manage their illness, live successfully in the community and be contributing citizens", Professor Fels said.