Dear members of the committee,

RE: TOR j. the overrepresentation of people with a mental illness in the criminal justice system and in custody, the extent to which these environments give rise to mental illness, the adequacy of legislation and processes in protecting their human rights and the use of diversion programs for such people;

In response to TOR: J:

The apparent lack of Police understanding, options and research and training of how best to handle people with a mental health issue who may be "out of control" and breaking the law through being threatening needs review. I recently was with a member of the Victorian police force with a colleague from a Mental Health Service. To our chagrin the police officer (a Sergeant) described her client group as "working with the crazies!" Whilst this comment was minuet in its effect, it unfortunately likely characterizes the perceptions within the police force of those people with mental health issues. This perception needs to change. A paradigm shift needs to occur throughout the Police Force.

The number of deaths throughout Australia attributed to our law enforcement services requires deconstruction to assess how many of those who are dead have a mental illness and how that has "played" in their death due to police. The committee could serve the community and our Government well by spending some time of their review developing clear recommendations for police. I realize that they are State run bodies but clear recommendations could allow consistency and a strong reference point across the States. Police have clear current policy and procedures re dealing with those with mental health issues but it appears to me they seem to be failing as deaths continue.

I am concerned that I have personally heard reasoning amongst police that people with a mental illness act out to enable a "suicide by police shooting." To counter this unfounded idea amongst police can be difficult as organizational culture is difficult to change. But police must be made aware that people are not thinking often rationally enough to form the complex plans to end their life required through police involvement. They are much more likely to be acting on irrational thoughts or delusions. Those delusions can include police in them as part of paranoia or muddled thinking. The idea that people with mental health issues form plans to suicide by attacking police is worthwhile addressing amongst our law enforcers as a starting point.

Recommendations would be well served to include a strong reference for the pursuit of safe practices in the apprehension of people with mental health issues-

Recommendations could include: training for all levels of police in mental health issues and the "real" risks posed by those who have who have mental health issues transgressing the law and why they are doing it. This should become part of the police training curriculum; Police, during training or through utilizing their community policing capacity, visit services who assist those with mental health issues and spend time meeting and interacting (not to deliver information or education but to receive it) with those who have mental health issues. For success these recommendations need to be sustained and strongly supported by the Chief Commissioners and high level police management. More thorough development of procedure in responding to those with mental health issues who may be posing a threat to safety of others or themselves would be a priority.

These points are not meant to be comprehensive but merely to raise issues that concern me.

Regards, Mr Mike Williams