

18 May 2005

ATTENTION: COMMITTEE SECRETARY

Senate Select Committee on Mental Health Department of the Senate Parliament House CANBERRA ACT 2600



Dear Sirs

We wish to comment on matters relating to privacy and confidentiality and its effect on those suffering from mental illness.

Our son Paul died in 1998 as a result of suicide after approximately ten years of mental illness, principally schizophrenia and other psychotic instances. In the ten years he was looked after by a number of health professionals, principally psychiatrists in private practice and in one instance in the hospital system. Our son was twenty eight when he died and about nineteen years old when he first became ill. During the ten years of his illness he was supported strongly by his two brothers, one sister and parents. We consider ourselves to be a 'normal' family with all family members educated to tertiary level and aware of issues relating to care and good health.

In the course of Paul's treatment we were subject to various degrees of inclusion. However in the main and certainly in the latter stages of treatment we were excluded from information relating to Paul's illness. In fact on the day he died we subsequently found out he was undergoing a change of medication and this was having an untoward effect on him and we believe may have contributed to his suicide. We were not advised of his change in medication nor when my wife phoned the psychiatrist informing him of Paul's changed behaviour and general health was any advice given to us regarding our son's condition.

In these circumstances we were advised it was not possible to tell us, his parents, of matters relating to Paul because of patient confidentiality.

We appreciate this can be a vexed question because there can be instances where parents / carers could contribute to the poor mental health of some people. However we believe and I am strongly of the view my wife, Paul's mother, knew more about his state of mental health than was seen by the psychiatrist with his monthly check. To be excluded or not asked in this situation seems to be foolhardy and not in the best interests of those suffering with mental illness.

We recommend the Senate Inquiry take particular notice of questions of confidentiality with a view to providing greater flexibility to medical staff to share appropriate medical information in a way to benefit the patient even if the patient themselves has requested them not to.

We are happy to make further representations if so required.

