

ROYAL COMMISSION INTO MENTAL HEALTH VICTORIA OCTOBER 2020

TESTIMONIAL: [REDACTED]

30 SEPTEMBER 2020

A. *The links between the traumatic events I experienced and the distressing impact on my life, mental health, and well-being.*

*suicidality

*workaholic, to avoid confronting reality of Forced Adoption trauma

*weight-gain; poor health; invisibility

*catastrophic personal losses: loss of friends; family; community; home; judged and exiled from country; vulnerable to institutional and workplace bullying; subsequent loss of income, loss of career leading to financial instability, loss of opportunity to provide for an independent future for myself and my son; bullied out of my career (tall poppy); robbed of ten years of financial growth for my retirement; re-traumatized and forced into early retirement. I am now living below the poverty line. Still requiring life-long support.

*catastrophic family losses: loss of care for my son; unable to reach his full potential without proper financial and family support; loss of capacity to provide for my son's future, due to his Forced Adoption trauma; inter-generational losses and impacts on my grand-children

B. *Ways that I sought help and it was not forthcoming.*

*None of the Victorian Forced Adoption services recommended Arts Therapies or understood their immense value - token only (1 day workshop); and not available regionally, so inaccessible to me. Group only, not individualized.

*NDIS require re-traumatizing re-assessment annually; and do not recognize Art Therapy as a valid treatment, and so funding for appropriate and effective healing and support is difficult (almost impossible) to access.

* My current Social and Community Participation Worker is highly-qualified and experienced, with MCAT, AThR. Minimal NDIS funding does not recognize professional qualifications of Professional Arts Therapist, or frequency of Arts Therapy sessions required for safe, on-going trauma healing, support, and growth. NDIS therefore, is not allocating appropriate funding for me as a Client.

C. *My engagement with Victorian Mental Health services over time, and the limitations of psychology.*

"You can only sit and talk about it for so long".

Six years of Mental Health Plan with Psychologist was not trauma-informed, strengths-based, growth-empowering, or long-term healing-focused. I have recently experienced more in-depth awareness and progressive healing with Arts Therapy treatment in months, rather than years.

D. How I first accessed Art Therapy, and my experience of it.

'In my first Art Therapy session, I produced something huge, immediately'.

I first heard and about Art Therapy through a peer. My NDIS Support Coordinator investigated it and then funded it from my NDIS plan through line items: Social and Community Participation, and Core Support.

My emotional response to this Art Therapy session was enlightening; and I felt I was going to be held in a very safe space while I dealt with my trauma. The session gave me confidence in the healing process that appeared possible through Art Therapy: something tangible. Gave me the courage and commitment to progress, and be companioned appropriately and professionally, on this life-long healing journey, with safety and trust.

E. How Art Therapy has helped me over time.

"The tools I have in my toolkit are just life-changing".

confidence; safety; connection to creativity (e.g. 'mindlessmindfulness collage/mandala/drawing/poetry/photography/being outside nature' as therapeutic arts practice at home, between sessions and in preparation for sessions); speaking truth to power; fighting for justice and compensation for myself and my son; has given me personal and social purpose; provided me with boundaries but with emotional intelligence with personal and emotional connection with family, community, and institutions; made me visible; control; choice; practising self-compassion, self-care, and instilling hope for a brighter future

OUTCOMES OF MY USE OF ARTS THERAPY IN MY CURRENT NDIS PLAN

*Fail rate of reunion in adoption is 95%. I never would have been able to stay with my son in his home for the first time (AUGUST 2020) without the Arts Therapy process and tools.

I felt enabled by safety and boundaries to be able to visit son's family; the family is also challenged by intergenerational trauma, including and primarily due to Forced Adoption.

*I felt empowerment through safety and boundaries enabled working with 96 year old father during a major illness and hospitalization PLUS simultaneously managing the fears of a large, dysfunctional adult family under immense stress.

*Dealing with Forced Adoption has now enabled inner child to feel safe enough with commitment and courage to go deeper. I have an on-going need for Arts Therapy for trauma healing: I feel this is just the beginning!

*I experienced wholistic support for overcoming stress eating and sugar addiction. With Arts Therapy as my support, I was healthily enabled to achieve 10kg in weight-reduction since May.

*Transformation of social phobia: out of isolation into connection after ten and a half years (the time since my son first contacted me for connection). Family connection has only been possible since April this year

***I am able to articulate with awareness some important benefits and outcomes of the trauma-informed Arts Therapy processes.**

***Involvement in arts therapy processes supported my journey from refugee (Canada) corporate zombie and gym junkie in order to survive in a patriarchal society that had and stolen my child and my identity, and traumatized me for life, to safety in community (on-going), worthiness, authenticity, and connection.**

F. How Art Therapy supported me in writing my submission and "speaking truth to power".

Without Arts Therapy, trauma-informed companioning, support and education and understanding trauma, I would not have been able to follow the writing process through for the Legislative Assembly Committee Inquiry Submission and Survivor Statement. I believe the Submission document would not have been so 'powerfully-written', as reported by a lawyer, and my Survivor Impact Statement would not have been done at all. I would not have been equipped to face this process unsupported without Arts Therapy.

The risk in the LA Committee writing project involved the possibility of uncovering deep feelings I was unaware of, that could have been re-traumatizing (triggering possible suicidality).

I was empowered to submit my document through being held and supported through slow-paced, Trauma-informed Professional Arts Therapy approaches and tools.

I am now seeing trauma as an ally towards deeper healing rather than something to be feared, and then risking possible emotional shut down, or worse.

I am learning to understand that Art Therapy approaches and tools help me, and although trauma will always be there, I know this trauma can be managed and supported through Art Therapy.

G. Problems I have had in maintaining access to Art Therapy through NDIS.

***Role and qualifications of current Social and Community Assistance Worker with Master's degree in Arts Therapy and Professional Registration (MCAT, AThR) are not recognized or properly remunerated by NDIS. There is minimal NDIS funding available for Arts Therapy, which does not recognize professional qualifications of Arts Therapists, or the frequency of Arts Therapy sessions required for safe, on-going healing, and support. The NDIS therefore, is not allocating appropriate funding for me as a Client.**

***The excessive requirement for frequent NDIS review and reiteration of my trauma story is re-traumatizing.**

***I also have to pay out of my NDIS funding to fight for funding (e.g. I have to pay for a Mental Health OT Report out of my NDIS funding; plus a Psychology report; and several others, over past three years), which reduces my funding for Mental Health support overall, and in particular, my access to Art Therapy on-going.**

H. My recommendation to the Royal Commission

Increase access to Art Therapy through the mainstream service system in Victoria via legislation and funding: an absolute must for healing support availability in the Mental Health Sector.

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