SA CHILDREN CAN BE RESTRAINED, SECLUDED & ELECTROSHOCKED

The SA Mental Health Act is under review and now is the time to change this.

In June 2021, The World Health Organization (WHO) released guidelines that lashed out against coercive psychiatric practices such as restraint, seclusion, forced electroshock and forced detainment and treatment, that it says "are pervasive and are increasingly used in services in countries around the world, despite the lack of evidence that they offer any benefits, and the significant evidence that they lead to physical and psychological harm and even death." It points to the United Nations Convention on the Rights of Persons with Disabilities (CRPD) which in essence, calls for a ban on "forced hospitalization and forced treatment."

The WHO report highlights the fact that coercive practices such as restraint, seclusion, involuntary commitment and treatment occur because "they are mandated in the national [or state] laws of countries." Coercive psychiatric practices continue to be rife in SA because they are not banned.

Despite the challenges to changing laws and treatment paradigms, WHO says "it is important for countries...to eliminate practices that restrict the right to legal capacity, such as involuntary admission and treatment."

ELECTROSHOCK OF CHILDREN (ECT): ECT is the application of hundreds of volts of electricity to the head to create a seizure (convulsion). It can cause brain damage, permanent memory loss, heart problems, stroke and death. Not only is it legal for use on all ages in SA, including on children, pregnant women and the elderly, but it can be given up to four times in one session to establish how much electricity is needed for a convulsion. This could be done more than once in a course of electroshock (12 shocks, multiple courses can be given).

Despite all of this the *SA Mental Health Act*, allows for both children and adults to be forcibly given electroshock, no consent is needed by the patient or the parents. If that were not bad enough, the current law allows for the use of "emergency electroshock," where not even a Tribunal Hearing is held before the electroshock is given. ◆ In 2020/21 there were 6,182 electroshocks given in SA. *Recommendation:* Electroshock is torture and must be banned for all ages with severe criminal fines and prison terms for violation of the ban. [*South Australian Mental Health Act 2009* (SA MHA) s42(1), s42(2)(3), s42(c)ii, s42 (c)ii A & B, s42iii, s42(6).]

RESTRAINT AND SECLUSION OF CHILDREN: Psychiatric restraint can and does cause death. It is well-known within psychiatric circles to have zero therapeutic benefits and instead can greatly increase trauma. Psychiatric restraint includes chemical restraint ◆ the use of psychiatric drugs to subdue



and control behaviour. The SA chief psychiatrist states the use of chemical restraint has the following risks: "over-sedation, respiratory depression, collapse, head injuries and death." ♦ In 2019, it was reported that SA children were being tied down with nets, taken to psychiatric wards and being locked in seclusion at a rate that was far above the national average. ♦ In 2020/21 there were 439 physical restraint events (bodily force) a 16% increase on the previous year. ◆ There were a further 42 mechanical restraint instances (e.g., being cuffed to a bed). ♦ 1,291 seclusions occurred in the same year. The SA chief psychiatrist has called for reducing/eliminating where possible the use of restraint. You do not "minimise or reduce" harming people, you immediately stop it and ban it. Recommendation: Psychiatric restraint is criminal, must be banned and made a criminal offence. [SA MHA, pages 6, 8, 9 (definition of a child, restraint and seclusion), s90 (2)(3),1

INVOLUNTARY DETAINMENT & TREATMENT: A child or adult can be locked up in a psychiatric facility and forcibly treated including with psychiatric drugs, restraint, seclusion and electroshock. In SA psychiatry has the power to stop a parent from visiting or communicating to their child. The law also does not prevent a child from being placed in an adult ward. ♦ In 2020/21 there were 10,005 involuntary treatment orders (involuntary admissions for forced treatment at a psychiatric facility/ward) including 39 children aged 15 or under. ♦ There were an additional 2,471 community treatment orders where the person was forced to have treatment at home. ♦ This a 19% increase of forced treatment orders since 2015/16. *Recommendation:* Involuntary detainment and treatment must be eliminated with criminal penalties for violations. [SA MHA, s4, s42(1)(C)iii, s48(2)(a)(b)]

PSYCHOSURGERY: Correctly banned in NSW and the NT, psychosurgery can involve cutting or burning the brain or inserting electrodes deep in the brain sending an electrical current through it, as is the case with deep brain stimulation (DBS). DBS can cause memory loss, irreversible brain damage, bleeding in the brain and post-operative death. Psychosurgery is only banned in SA for under 16-year-olds. Incredibly the SA law allows for psychosurgery to be given without the consent of the person if a Tribunal approves. SA has also renamed psychosurgery to "neurosurgery." This is an attempt

by psychiatry to hide the true nature of this barbaric practice. *Recommendation:* All forms of psychosurgery must be banned with very high criminal fines and prison terms for violation of the ban. [SA MHA, p. 8 definition of neurosurgery, s43]

CHILDREN IN ADULT WARDS & SEXUAL CONTACT: Despite the Guiding Principles of the Act stating that, "Children and young persons should be cared for and treated separately from other patients as necessary...," there are no legal provisions in the Act which rule out children being placed in adult wards or that prevent women from being placed in wards with men, placing both women and children at risk. To even consider exposing children to such an environment shows pitiful respect for them and leaves them open to physical and sexual abuse in an environment where there is insufficient supervision. Paul Mason, former Tasmanian Commissioner for Children and barrister, said that putting children in adult wards should be illegal. Recommendation: Children should never be placed in wards with adults, women should not be put into wards with men and there should be criminal fines and prison terms implemented for any violations. [SA MHA s7 (1)(e).]

DEATHS, COMPLAINTS AND LACK OF ACCOUNTABILITY:

Spending on mental health increased 20% between 2013/14 and 2019/20. What are the results of this spending? In 2020/21 there were 73 deaths reported to the SA chief psychiatrist, 40 of these deaths were reported by adult community health teams. Between 2014/15 and 2020/21, there were 559 deaths reported. ◆ The SA Health and Community Services Complaints

Commission received over 320 complaints made by mental health consumers in 2020/21, a 228% increase since 2010/11.

- ♦ A Productivity Commission 2022 report reveals that 56.2% of 0-17-year-olds discharged from community-based care did not significantly improve. ♦ 63.9% of children aged 0-17, over 76% of 18-64-year-olds and 69% of 65+ year olds in ongoing outpatient community-based care did not significantly improve.
- ♦ 33.1% of people discharged from public psychiatric facilities/ wards either did not significantly improve or had significant deterioration.

ALTERNATIVES: There is no doubt that some children who are troubled require special care. But they should be given holistic, humane care that improves their condition. Institutions should be safe havens where children and adults voluntarily seek help for themselves or their child without fear of indefinite incarceration or harmful and terrifying treatment. They need a quiet and safe environment, good nutrition, rest, exercise and help with life's problems. Extensive medical evidence proves that underlying and undiagnosed physical illnesses can manifest as "psychiatric symptoms" and therefore should be addressed with the correct medical treatment, not psychiatric techniques. Studies show that once the physical condition is addressed, the mental symptoms can disappear. With proper medical treatment and real help, people can lead healthier, happier lives. Recommendation: Existing money spent needs to be re-directed into proven workable solutions that provide real help.

For references and more information go to: cchr.org.au/sa-mental-health-act

TAKE ACTION

PHONE, EMAIL, WRITE OR VISIT THE BELOW ASKING FOR CHANGES TO BE MADE

- 1. Request that the revised *SA Mental Health Act* bans restraint, seclusion, electroshock and psychosurgery for all ages and that the World Health Organisation's instructions to cease involuntary admission and treatment are implemented
- 2. Ask that it is made illegal to put children into psychiatric wards with adults and women into wards with men with criminal penalties added for violations.

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Please also contact your local Member of Parliament: https://www.parliament.sa.gov.au/en/Members/Member-Details Write a "Letter to the Editor" to your state and local newspapers.

To read the current *SA Mental Health Act*: https://www.sa.gov.au/lz?path=%2FC%2FA%2FMental%20Health%20Act%202009 To read what the SA Law Reform Institute says: https://yoursay.sa.gov.au/mental-health-act-review

Warning: No one should stop taking any psychiatric drug without the advice and assistance of a competent medical doctor.



Contact the Citizens Commission on Human Rights

Email: national@cchr.org.au ◆ Phone: 02 9964 9844 ◆ Website: cchr.org.au

CCHR was established by the Church of Scientology and Professor of Psychiatry, the late Dr Thomas Szasz in 1969 to investigate and expose psychiatric violations of human rights.