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## **Editorial: No one is listening**

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This special issue for September (Volume 8, issue 3) has been released early with one article, but will be updated with feedback over the coming month. Readers are invited to share their particular experience as feedback to the next article in the form of a short article (up to 1500 words), or an opinion/commentary, or a letter to editor.

Mike King is a prominent mental health advocate for young people. Through his charity, Key to Life, he established a number of initiatives to help struggling adolescents have immediate access to mental health services. In effect through fundraising Mike pays for those in dire need of professional intervention by funding private counselling and care. The administration costs are picked up by Mike's charity thus ensuring that every dollar that is raised goes to the adolescents who need it. In 2019, he was named New Zealander of the year, and awarded New Zealand Order of Merit.

The reason for an early release is because on 16<sup>th</sup> June 2021 Mike King returned his New Zealand Order of Merit which was awarded for his mental health advocacy work, in order to generate public awareness and force the government into action to improve access to mental health services. Although, this generated some media interest it was short lived and instead focussed on a teary and highly distressed Mike. During this media coverage, youth suicide was occasionally mentioned but as a function of depression and mental illness, and thus a "dysfunctional" mental health system was blamed for it.

The mainstream media refuses to engage in a discussion of the main problem which is depression and mental illness is the wrong approach to suicide prevention. Given that suicide and mental illness have been highly topical in the media, unsurprisingly, of those media outlet contacted, none showed interest in a discussion of suicide outside of the mental illness framing. Editorial explanation by those who responded were very similar quoting deadlines and workload: "we are busy with other editorial deadlines...", and "we have a long list of unpublished submissions at the moment, and most of them are unlikely to see the light of day..." Such responses appear more as excuses to avoid the subject than a logistic explanation. It is Déjà vu all over again!

As expected, another golden opportunity to holistically discuss youth suicide has been lost

In his letters to Jacinda Ardern, the New Zealand Prime Minister, Mike offered his initiatives to the government, and pleaded for government action to stop the epidemic that is youth mental illness (depression) that is overwhelming the health system. His letters included moving and heart-rending accounts from suicide survivors (parents, siblings) who had lost a loved one to suicide and describing how the health system let them down.

Such harrowing stories are an artefact of decades of suicide prevention policy based on depression and mental illness causing suicide, e.g. see Shahtahmasebi & Smith (2013), Shahtahmasebi (2014), and Shahtahmasebi & Cassidy (2014). Ironically, it is not the health

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system per se but the preventional approach, which is Health Department rather than community based, that has let the public down.

As expected, there was no substantive reaction by the government to Mike's pleas other than issuing a call for another review to review the reviews set up when the current Labour government came to power in 2016! The government, through its Ministry of Health has refused to help support Mike's initiatives to ensure that every teenager would have immediate access to a counselling when needed.

The intense media interest in mental health system faded very quickly with Mike returning his medal, and his cause seems to have been confined to Mike and his social media accounts.

During 2010 to 2016, along with a colleague from USA, we delivered a grassroots approach to youth suicide prevention in New Zealand. We ran workshops and public lectures. At these events, suicide survivors (parents and relatives) commented that *had they known this information their loved ones would probably be alive today*. This feedback is unsettling as it suggests the needless loss of lives that could have been saved had the government and its "expert" advisors been more open to a century of evidence.

So, the issue goes much deeper than just resources for mental health services. After all, <u>Mike was on the podium with the ministers</u> when the government announced \$1.9 billion to <u>support mental health services</u>. It involves negative impacts of decades of a <u>strategy which is void of substance and concept</u> and has led to:

- the devaluation of the compassion and care which members of the community feel and wish to provide,
- an inability to listen and an inability to talk about suicide,
- unjustified policies and decisions,
- no accountability,
- incompetence at all levels, and
- basically, playing politics with adolescents' lives.

And so, we are back to square one: no one is listening; and no one cares (Mike King).

## References

Shahtahmasebi, S. and Smith, Lindie (2013). "Has the time come for mental health services to give up control?" J Altern Med Res **6**(1): 9:17.

Shahtahmasebi, S. (2014). "Indigenous populations and suicide prevention." <u>Int Public Health</u> J **6**(1): 33-37.

Shahtahmasebi, S. and Cassidy, B. (2014). "Indigenous populations, mental illness, and suicide prevention." Open Journal of Social Science: 2(8):87-94. DOI: 10.4236/jss.2014.28014;

 $\underline{http://www.scirp.org/journal/PaperInformation.aspx?PaperID=49219\#.VE7FpPmSxA}$ 

http://journalofhealth.co.nz/?page id=2580

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