



Speech By  
**Amy MacMahon**


**MEMBER FOR SOUTH BRISBANE**

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Record of Proceedings, 14 October 2022

## **MENTAL HEALTH SELECT COMMITTEE**

### **Report, Motion to Take Note**

 **Dr MacMAHON** (South Brisbane—Grn) (3.46 pm): I start by reiterating what other committee members have said and offer my sincere thanks to the submitters, the witnesses, the secretariat and committee members. The six-month government-led inquiry was not quite what the sector had been calling for. I think there are many more communities, organisations and individuals that we could have heard from. Nonetheless, the inquiry covered incredibly important ground and heard some vital evidence.

We heard ample evidence about Queensland's underfunded mental health sector. As the report sets out, health expenditure increases have not led to increases in mental health expenditure over recent years in Queensland. Over the past decade mental health expenditure has been below the national average. In 2019-20 Queensland had the lowest per capita expenditure on mental health services in Australia.

Submitters like Professor John Allan, the Royal Australian and New Zealand College of Psychiatrists and the AMAQ were calling for funding increases of \$900 million, \$750 million and \$650 million to \$700 million per year respectively. The result in the 2022 budget was that the government announced an increase of \$350 million a year. Essentially, the government took the lowest estimate of what it would take to fix our mental health sector and halved it. In a wealthy state like Queensland where we have a budget surplus of nearly \$2 billion and based on the evidence that we heard from people across the state, this is quite disappointing. Our mental health system remains underfunded.

The committee heard evidence about the social determinants of health, including poverty and housing stress. There is acknowledgement in the report of the links between access to safe, secure and affordable housing and health outcomes, but the recommendations do not go far enough. Household debt and housing stress are among major triggers for anxiety, stress, depression and suicide. With the cost of housing and living only getting worse, I fear for the future of tens of thousands of Queenslanders.

Housing needs to form a central focus of the recommended Mental Health and Wellbeing Strategy that is set out in the report. If the government is serious about supporting Queenslanders' mental health, universal housing is essential.

Our primary healthcare system is in crisis. We heard evidence on how vital GPs are in the mental health system. The ACA said that 60 per cent of GP presentations between 2017 and 2019 were related to mental health but warned that urban and regional areas will become progressively undersupplied by GPs to the years to 2030. We heard evidence on GP shortages. I have heard countless stories about GPs who are no longer offering bulk-billing, and many people are now struggling to afford a visit to the doctor.

Without good primary health care, our hospital services also become overburdened with people who eventually require more acute care. Then couple this with the extreme cost of accessing psychologists and psychiatrists, even for basic diagnoses. We need to not only expand general practitioner mental health, alcohol and other drug services, as noted in the report, but also lift the Medicare rebate cap and boost funding for primary health care.

I would like to briefly acknowledge some of the organisations in South Brisbane that are working hard to support people's mental health, connection and community—some of whom contributed to the inquiry. Brisbane Seniors Online, based in the Gabba, do vital work connecting hundreds of seniors with access to technology, with training on using computers, tablets and smartphones. They aim to bridge the generational technology gap, expand social opportunities for seniors and help people get online. Providing seniors with this kind of support and training is crucial to combating isolation, building community and ensuring people have access to crucial services.

Eating Disorders Queensland do vital work supporting people who are living with an eating disorder, their carers, loved ones and key support people, with individual and group therapy, peer mentoring and community building. EDQ's evidence to the inquiry pushed for a greater focus on prevention including the need for systemic change to diet and weight loss culture to address eating disorders.

Women's Health & Equality Queensland, just outside of South Brisbane, are leaders in women's health, gender equality and preventing violence, providing health services and counselling for women with experience of violence, and pushing for structural reform. They too stress the need for preventive work, advocating for school-based programs to support young women's self-esteem and self-image and mental wellbeing as part of the Queensland Women's Strategy.