

STATE BUDGET 2016–17 — MENTAL HEALTH

310. Dr A.D. BUTI to the Minister for Mental Health:

I refer to the \$18 million cut from the Mental Health budget last week, specifically the \$4.3 million for prevention, promotion and anti-stigma programs and grants.

- (1) Can the minister outline to the house which mental health issues the government is least interested in preventing?
- (2) Can she explain what mental health topics the government no longer wishes to promote and why?
- (3) Can she tell the house which stigmas her government is comfortable for Western Australians to live with?
- (4) Why is she cutting funding to mental health services when there is record demand for those services?

Ms A.R. MITCHELL replied:

I am always delighted to speak about what this government is doing in the area of mental health because we have made a massive investment in mental health and we will continue to make massive improvements in the way people with mental health problems are treated and worked with. I find the question interesting.

Point of Order

Dr A.D. BUTI: I asked four parts of the question and I would like them to be answered.

The SPEAKER: Points of order should be taken in silence; that is number one. Number two, I am prepared to give the minister some leeway to lead into the question and then can she please address the four points of the question. But I must stress again that a question with four parts to it is very difficult for a person to answer. It would be better to ask shorter questions and perhaps we will get shorter answers.

Questions without Notice Resumed

Ms A.R. MITCHELL: I am very pleased to respond to the member for Armadale. I acknowledge his interest in the area but I can assure him that this government is well ahead of his party and we will make a huge difference again, particularly after this budget announcement. We have talked about what we are doing. He said that we have cut the budget. No; we are making sure the money we spend is much better used. There is duplication in places. Some programs are not relevant to the mental health drugs and alcohol plan. We are making sure we more effectively use the money we have allocated to get the best results.

Point of Order

Dr A.D. BUTI: I have given some leeway, as you asked.

Several members interjected.

The SPEAKER: Let us hear this in silence!

Dr A.D. BUTI: The minister has not addressed specifically any part of the four-part question.

The SPEAKER: As long as it is germane to the question, the minister can answer it in the way she deems fit. She has answered it and has sat down. Would you like to ask a supplementary?

Questions without Notice Resumed

Dr A.D. Buti: Has she finished? I do not think the minister has finished.

The SPEAKER: Have you finished?

Ms A.R. MITCHELL: No.

The SPEAKER: Sorry, minister, I thought you were finished. Sorry; I was wrong there.

Ms A.R. MITCHELL: I was just showing that I know how to behave in the chamber by sitting down when you were standing.

Mr P.C. Tinley interjected.

The SPEAKER: Member for Willagee, thank you. I call you to order for the first time.

Ms A.R. MITCHELL: Thank you, Mr Speaker. I am very pleased to talk about mental health. The question the member asked is about a reduction in some programs and some services. As I said, we are making sure the money we spend is used effectively and at the level and with the requirements necessary. What might have occurred three years ago may not be relevant today and may not be needed. The Mental Health Commission is going through that process now to make sure that grants and services are the most effective to get the best

results. We have had to increase the meth strategy and do other things because we know that at this point in time those areas need extra assistance. That is what we are doing and will continue to do as we have put extra money into the mental health court diversion programs because it works. That is where we have put the money. We will put extra money into the mental health strategy and we will make a difference.