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**Australian Government response to ADHD Inquiry lukewarm at best**

**Friday 13 December 2024**

The Australian Government’s response to the Attention Deficit Hyperactivity Disorder (ADHD) Senate Inquiry is lukewarm at best and while acknowledging more needs to be done to better support Australians living with ADHD, only offers minor improvements.

Of the 15 recommendations the *Assessment and support services for people with ADHD Senate Committee Report* made, the Government has accepted one, supported-in-principle a further nine and noted the remaining five.

ADHD is a neurodevelopmental condition characterised by differences in brain and cognitive development. People with ADHD can find it difficult to manage their time, plan, prioritise and organise tasks, and regulate emotions.

“The Senate Committee’s Final Report really highlighted the need to include people living with ADHD in the design and implementation of solutions for current problems and in creating a longer-term vision and plan to better support Australians living with the condition.

“What we have seen from the Government is a lukewarm response to those recommendations. What we want to see from the Government in this space is action so that the ADHD community can have a say and influence the health, social services, disability and education systems which support them to have a better future,” said CHF CEO Dr Elizabeth Deveny.

CHF is pleased by the Government’s support of recommendation five which asks for the Commonwealth to expedite the development of uniform prescribing rules to ensure consistency between the states and territories. While legislation governing this is a state responsibility, the Commonwealth will use the national Health Ministers’ Meeting to progress the issue.

The Senate Committee’s Final Report and the Government response acknowledges that for many people receiving an ADHD diagnosis is too difficult. CHF encourages the Government to do more to streamline this process.

“CHF put in a submission to this Inquiry, hearing directly from consumers living with ADHD. What consumers told us in these consultations was that it is extremely expensive and time consuming under the current arrangements to get a diagnosis. Consumers described the experience of accessing a diagnosis as slow, expensive, confusing and exhausting. Consumers felt like they had to fight to get a diagnosis, particularly women and those who already had another health condition,” said Dr Deveny.

Consumers provided their feedback and lived-experience to CHF through group consultations, individual interviews and emails, depending on the consumer’s preferred format.

Another key issue in the Senate Committee’s Report was adequately funding ADHD advocacy and consumer organisations to support people living with ADHD. The Government has noted this recommendation.

“Funding of ADHD consumer advocacy organisations is essential. People living with ADHD need to be supported to have their voice heard and participate in any future co-design consultations which create ADHD policy or programs. Consumer organisations must be adequately funded to offer that support,” said Dr Deveny.

CHF reiterates the recommendations made in its submission, including:

* Diagnosis and prescribing become streamlined and include GPs.
* Expand funding available to people seeking a diagnosis or managing ADHD through Medicare items, telehealth incentives, the Better Access Initiative, the PBS and the NDIS.
* Increasing public awareness of ADHD.
* Equip medical practitioners, parents, carers, teachers and employers with the knowledge and skills to identify, understand and support people with ADHD.

CHF recognises the participation of lived-experience submissions as part of the Senate Inquiry and the power of consumers telling their story to parliamentarians.

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