

24th July, 2011

Dear Minister,

I am writing to express my concern regarding changes to the Better Access Scheme as outlined in the 2011-2012 Federal Budget.

I am a patient currently receiving treatment from a professional clinical psychologist, for generalised anxiety and mild depression. The only reason that I have access to this level of mental health care and support is due to the fact that my General Practitioner, who has been my primary health provider and carer for twenty years, recognised that my anxiety had worsened and that it was beginning to affect my ability to rationalise and function on a normal, healthy level. This was impacting on my family, my work, my feelings of self-worth and my overall happiness. Under the Better Access Scheme, my doctor was able to formally assess my mental health and to write a Mental Health Plan, recommending that I have access to medicare-subsidised visits with a clinical psychologist.

As a part-time teacher, I simply would not have been financially able to organise and pay for this level of support myself and did not truly believe that I was 'severe' enough to warrant pursuing that level of care.

How wrong I was!

I cannot emphasise enough how my on-going treatment has improved and impacted on my mental health and my life in general.

I have read many articles and a lot of information regarding the changes to the Scheme, and whilst I fully support the need for increased funding for those patients requiring hospitalisation and on-going follow-up support, as well as early psychosis facilities to help treat patients with severe mental health issues, I am greatly concerned that funding cuts to the Better Access Scheme could see visits to a registered psychologist, by patients like myself, cut from 12-18 down to only 6-10.

One in five Australians suffer from common psychological problems such as anxiety and depression and I truly believe, from my own experience, that having access to affordable, professional, evidence-based mental health care, could be the best preventative measure this country has of avoiding the future need for as much care, at a higher level, for those suffering from more severe mental illness.

I wonder how many Australians presenting with severe mental health issues now, have had little or no previous access to wonderful, trained, caring professionals equipped with the knowledge and skills to help them earlier on, before their illness worsened? I imagine that it would be the majority and that a predominant reason for lack of treatment would have been financial.

I have been fortunate enough to have had eight visits so far and during each session, my clinical psychologist provides me with insight into my patterns of thinking, strategies for how to change my way of thinking, homework to enable me to work on and use my strategies as tools for coping and most importantly, a sense of hope, that I am on my way to a brighter, happier, calmer, healthier future. This was not something I felt at the beginning of my sessions and is not something that can be achieved quickly. I still have more work to do, but I am confident that with each session, we are changing the path I was on, to one that I will be able to tread

more securely in the knowledge that I will have the tools to help me to cope with challenges in a healthier, more positive way.

What I have also found hugely beneficial during my treatment so far, is the knock-on effect it is having on the immediate members of my family. I have been able to use the tools and strategies that I have been learning during my sessions to support and encourage my husband, who has experienced bouts of depression in the past, as well as one of my daughters, who also shows signs of anxiety and worried patterns of thinking. This 'sharing' of information between family members is just another reason to consider how beneficial and absolutely crucial it is for all Australians to have equitable access to mental health care early on when General Practitioners, as primary carers, are approached by patients with a 'cry for help' or when they, themselves, recognise the need.

I would be very concerned if this fantastic scheme were to become a 6-10 week, capped sessions, band-aid approach to mental health care, rather than the important, life-changing experience that it can be for patients when it is given the recognition, the funding and the time it needs to achieve the outcomes it set out to achieve when it was first introduced.

Surely our Government wants to be able to be assured of the quality of service provision for patients with mental health issues, mild, moderate or severe? Funding cuts and reducing the number of visits under the Better Access Scheme would certainly be detrimental to those in need of quality service. Indeed, cutting patient access off after six to ten visits, when they may be in need of longer, on-going treatment would be extremely difficult for the doctors and psychologists involved, as it would go against their professional judgement, and would have potentially damaging effects on patients who are left with incomplete, and ultimately ineffective, treatment.

Would doctors consider beginning a course of chemotherapy treatment for a cancer patient and then cut off access to that treatment after a few visits due to funding cuts? Of course not! I am extremely grateful for the opportunity to benefit from the Better Access Scheme and to have on-going access to such an experienced, highly trained and professional clinical psychologist. My only hope is that Australians currently suffering in silence from untreated mental health issues, will continue to have equitable access to such care in the future.

Yours Sincerely,