

25 July 2011

The Senate Community Affairs Committee

Re - Commonwealth Funding and Administration of Mental Health Services

I write to voice my concern at any proposal to disband the two-tiered system of Medicare funding for psychologists, and also the proposal for reduced numbers of Medicare-funded sessions for clients with mental health disorders. My concern is for the welfare of individual Australians with a need to utilise psychological services, and for the Australian community as a whole.

The currently existing two-tiered system recognises the vast array of clinical presentations. While generalist psychologists develop important skills relevant to less severe or complex presentations, the skills learned over many years of intensive study by Clinical Psychologists – including the assessment, diagnosis and treatment of psychiatric disorders – cannot be likened to these. In my view, the two-tier system should be extended, rather than minimised or removed, to recognise these real differences.

I am currently completing Doctoral training in Clinical Psychology. However, I was previously working as a lawyer, a substantially better-remunerated career. I have therefore made great financial sacrifices in order to retrain; I chose a route (university training) involving loss of income and high cost, however, this decision was borne of a passionate desire to ensure my skills were adequate to provide the most effective and efficient therapeutic interventions for clients with a range of presentations, rather than in a more limited capacity. I am therefore not motivated by financial reward; it was simply clear that only clinical training could provide me with a basis for developing the necessary expertise to make a *real* difference in the lives of many with severe disorders. A differential system recognising the knowledge-base and skills of clinical psychologists better provides for individuals who deserve greater compensation when accessing help, particularly for more severe or extensive problems and/or presentations.

It seems that a number of generalist psychologists have been successful in campaigning for change to be considered. However, a comprehensive quality of service to the Australian public is more important than an effort by generalist psychologists to obtain financial parity. Access and equity for those affected by mental disorder is the issue at the fore; better enabling access to clinical psychology services will provide individuals with the greatest opportunity to participate in a functional environment, enabling them to take charge, shape and further their lives. It ensures that those who are disabled (through either mental illness, extreme unmanageable stress or for any other reason) receive support from their society. Another factor, that in my view is less important but nevertheless relevant, is that reward should reach those who work hard and show initiative (eg., by undertaking extra training to attain clinical skills) that results in better outcomes for others.

Abolishing the two-tiered system and/or reducing numbers of funded or subsidised sessions will have immediate effects with regard to individuals' well-being, and that of associated

families, employers, and so on. In the longer-term, effects to the community will include the enormous cost of lost days of employment, increased welfare payments, and increased utilisation of other health services, to name a few. As a taxpayer as well as a psychologist, I find this abhorrent, particularly in a climate of increased stressors.

Thank you for considering my submission.

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