The Senate Inquiry into changes to Mental Health services 2011

As a recipient of psychological services under the medicare scheme I wish to express my opposition to the winding back of the number of treatments possible by a psychologist from 18 to 10 in a year.

Providing sufficient treatment is critical to prevent mental illness becoming chronic, or from deteriorating and leading to loss of work, or at least increased days off work, relationship stress and breakdown etc.

While in the initial stages of mental illness, treatment may need to be weekly to regain equilibruim and be supported to regain or maintain employment, relationships and ability to be a productive member of society. In the case of chronic illness there may be times of exaccerbation of symptoms which likewise require intensive treatment to be able to keep going. I am very grateful to the current arrangement to provide this support to myself and one of my children who has been able to complete a university degree which would not have been possible without those frequent treatments. Without this help her future would be very different, possibly with debilitating symptoms continuing into adulthood.

Given the cost of psychology services it is beyond the reach of those on a low to average wage to pay for services.

The proposed changes are I believe discriminating against those with mental illness, given that patients with other conditions have access to treatments required without limits and often involving much greater costs eg cancer.

Have the opinions of health professionals across the spectrum of expertise (psychiatrists, psychologists, GP's) been canvassed prior to this change? Is the change based on best practise guidelines for treating mental illness or purely on cost saving measures? Is there research evidence to back up reducing treatments?

Mental illness needs to be treated as any other illness in our health system. Give the mentally ill a fair go, and a chance at balanced productive lives.

yours faithfully,