

## **Submission to the Senate Enquiry on Medicare and Mental Health.**

I tend to agree that a two-tiered Medicare rebate system is appropriate, however to separate one type of psychologist from the others is inappropriate and divisive.

Prior to the implementation of the two tiered system, psychologist chose to follow the career path that suited their personality, values, and/or lifestyle. That is they chose to be a clinical psychologist, counselling psychologist, health psychologist, forensic psychologist, educational psychologist, organisational psychologist, neuro-psychologists, or whatever other choice they might have made.

The impact of isolating clinical psychologists as being special, has resulted in a hierarchical status that has been very divisive in a profession which has previously stated in its ethical guidelines that no member will promote themselves as being superior to another, or denigrate any other professional. Especially when most of the above psychologists will include clinical work in their practice, just the same as clinical psychologists will include counselling, health, forensic, and educational in their practice.

However it does seem appropriate that those who have made more of a personal sacrifice of time, money, and other opportunities by furthering their studies in completing a Masters, Doctorate, or PhD should be suitably recompensed. Normally in private practice they would be expected to charge more, considering the cost of post-graduate studies in university, one could consider these degrees as equivalent to investment in capital equipment by a manufacturing business, (except at a somewhat more personal level).

Many counselling psychologists, forensic psychologists, health psychologists, educational psychologists, neuro-psychologists, and organisational psychologists have also completed masters degrees, doctorates, or PhD's, surely they should also expect recompense for their additional sacrifice?

Therefore I propose that the two-tiered system be continued, but not just for clinical psychologists, but all psychologists who have completed additional approved studies of relevance to those clients referred for personal therapy. Admittedly organisational psychology studies may not provide additional training for individual therapy, but then it is unlikely that an organisational psychologist will be accepting medical referrals, although they certainly may counsel clients.

I feel sure that universities can provide the necessary information to determine which post-graduate studies will meet the criteria necessary to recognise psychologists who have previously chosen alternative fields to clinical. As well this change in policy would allow universities to offer a broader range of courses, to meet the expertise needed to fill all psychological requirements of the community which, at the moment, has a danger of ending up with a skewed quantity of clinical psychologists at the expense of alternative fields.

It would also mean that psychologists will be more motivated to obtain higher qualifications in their own field of endeavour, rather than feeling pressured into following a clinical path. That should be better for clients, the universities, the psychologists and society in general.

Thank you for the opportunity to offer an opinion.