

**Submission to the Inquiry into Commonwealth
Funding and Administration of Mental Health Services**

As a psychologist in private practice, I wish to make a personal statement while endorsing the submission made to this enquiry by The Australian Psychological Society (APS) and which my investigation has shown has researched this matter accurately and thoroughly.

I feel the need to make a personal statement because I am most concerned regarding the recent budget cutbacks to the proposed number of Medicare funded visits available to my clients who have come to me under the Australian government's Better Access to Mental Health initiative. I believe these cutbacks would be to the psychological detriment of most of my clients and my role is to assist them with regard their psychological issues.

This Better Access initiative has been of great assistance to most of my clients. Indeed, for the majority it has enabled them to be able to afford to see a psychologist for the first time. And they have really needed to see a psychologist. I have had only a few clients come with mild difficulties. The clients who have come to me, as a Medicare provider, under Better Access provisions, have been moderately to seriously mentally afflicted. I and they have been extremely appreciative of the availability of up to 18 (not 12 as is often misstated) psychological sessions per annum per person.

The now proposed 10 sessions are simply insufficient to provide psychological assistance to such people to the extent that they need for their mental well being and to assist them to cope. This is serious and I am worried about these cutbacks as they are not in the interests of most of my clients and who are

necessarily referred to me by members of the medical profession as being diagnosable with a significant mental affliction. Actually the most seriously affected clients need more than the 18 visits which they can still obtain till 1 November 2011, under Better Access provisions.

I appreciate the generous and massive financial contribution the Australian government has been making via the Better Access initiative and Medicare. No doubt the extent of this has been a concern to the government. I think there are other ways this expenditure can be lessened without depriving persons needing psychological care of that care. One way that has often occurred to me has been to utilize the financial contribution that can be made to this cost for persons with relevant levels of private health cover. I have no doubt other options are possible.

People who need Medicare assistance so they can see a psychologist should surely receive, if not the assistance they need and which is extensive in some cases, at least not less than up to 18 visits per annum.