

Community Affairs, Committee (SEN)

Educational and Developmental Psychology and Funding of Mental Health

To Whom It May Concern:

Re: Funding of Mental Health

I have been prompted by the College of Educational and Developmental Psychologists to contact the Senate with regard to the promotion and advancement of Educational and Developmental Psychology and in response to the Government's 2011-12 Budget changes relating to mental health.

As an Educational and Developmental Psychologist I see my role as critical in the provision of mental health services to children, adolescents and their parents and the school system.

Educational and Developmental Psychologists receive specialist training in the development of individuals across the lifespan and in the early identification, assessment, diagnosis, intervention and treatment of mental health disorders, learning disabilities and developmental disorders and disabilities. This training, knowledge and expertise is significantly more extensive than any other specialist field of Psychology (e.g. Clinical Psychologists). As an Educational and Developmental Psychologist I promote Prevention and Early intervention. Throughout the research literature this is considered a fundamental treatment approach to ameliorating symptom severity, preventing the exacerbation of future symptoms, and improving developmental outcomes. Prevention and Early intervention have also been found in the research literature to reduce the long term cost to society by reducing the requirement for provision of long term support and services.

Given the critical role of Educational and Developmental Psychologists in the provision of mental health services across the lifespan, the current two-tiered Medicare rebate system for psychologists is disadvantageous for individuals that require the expertise of an Educational and Developmental Psychologist as they do not receive similar rebates to a clinical Psychologist (Approximately \$81.60 compared to \$119.80). This has the potential to negatively impact or obstruct the treatment delivered to individuals as it would leave the individual with larger out of pocket expenses which impacts on the number of services they may be able to access (which may result in the cessation of treatment prematurely), alternatively the \$40.00 rebate difference may necessitate accessing treatment from a clinical Psychologist who does not have similar expertise and knowledge.

Furthermore, the two-tiered Medicare rebate system for psychologists is somewhat discriminatory in nature as it applies discrepant financial remuneration (Medicare Rebates) to Psychologists with the same level of training and qualifications. This devalues the profession and qualification of an Educational and Developmental Psychologist as the two tiered system promotes and values one area of speciality in psychology (Clinical) and in doing so communicates the devaluing of other areas of speciality. This two-tiered Medicare rebate system also has the potential to impact on the employment of an Educational and Developmental Psychologist as the discrepant rebate makes it significantly more attractive to utilise the services of a clinical psychologist, a decision which would be based primarily on money rather than qualification or expertise and knowledge.

The final point for attention is the potential negative impact reducing the number of sessions an individual will be eligible to receive Medicare rebates for from 12 to 6 per calendar year.

The research literature reliably demonstrates that the number of sessions required for long term gains and maintenance of gains from intervention exceeds 6 and is closer to 12 sessions, and in many cases, closer to 18. This would result in the premature cessation of treatment which will have long term negative effects not only on the individual's mental health and functioning but will also increase the cost and demand to provide long term support and services in the future.

Based on the rationalisations provided above, It is my stance that Medicare Rebates should be made equal amongst all Psychologists and that the number of sessions individuals will be eligible to access under the Mental Health Care Plan should remain as it is currently, and not reduced as planned.

If you require anything, please do not hesitate to contact me.

Kind Regards

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founder & director/Ed & Dev psychologist

