

Committee Secretary
Senate Standing Committees on Community Affairs
PO Box 6100
Parliament House
Canberra ACT 2600
Australia
1/8/11

Dear committee members,

I am a Senior Counselling Psychologist at the RMIT University Counselling Service and routinely work with clients who have significant mental health issues. Although I am not in private practice currently, it is my intention to enter into private practice in future. I am writing to you out of concern both for the funding cuts to the Better Health Access scheme but also out of concern for the lack of recognition of the work of Counselling Psychologists as specialist psychologists.

In my work as a counselling psychologist, I conduct mental health assessments and treat a wide array of clients with diagnosed or diagnosable mental health disorders including mood disorders (depression and bipolar disorder), anxiety disorders, eating disorders, and psychotic disorders. My training included advanced training in psychopathology and use of the DSM in diagnosis. In addition, I have received significant training and experience in a wide range of therapeutic approaches including evidence based approaches such as CBT and routinely attend professional development training to further my knowledge and skills in working therapeutically with clients. My training required me to complete a minimum of 6 years of university training and 2 years of supervision in my specialist area. I therefore consider myself a specialist practitioner with a strong focus on therapeutic processes and client engagement.

I believe that it is a great oversight not to include Counselling Psychologists as specialist psychologists in the top tier. I object to the “dumbing down” of my profession of Counselling Psychology and although I certainly respect my Clinical Psychology colleagues and the excellent training that they receive, I would argue that the training that I received is of equal value and that its strong emphasis on therapeutic methods – the “how to” of therapy and treatment makes Counselling Psychologists suitably and extremely qualified to provide treatment to clients referred for specialist treatment by the Better Health Access scheme. Many of my colleagues have applied for and successfully gained entry into the Clinical College and had their training recognised as specialist training, however, I have chosen not to do this as I believe that Counselling Psychologists deserve recognition in their own right as specialist mental health treatment providers. My fear is the loss of my profession as upcoming students may not see the value of counselling training as a unique speciality and I believe that this would be a great disservice to the community.

I would like to emphasise that Counselling Psychologist have had to complete post graduate training that provides the appropriate skills treat clients with mild, moderate and severe mental health disorders. I completed placements in a variety of clinical settings and was supervised by a range of highly competent and trained Counselling Psychologists. I have also been a full member of the APS

since graduation and after an additional 2 years of supervised experience, became eligible to be a member of my specialist college, the College of Counselling Psychologists. In addition, I, like other members of my profession, routinely update my learning through regular professional development in assessment and treatment.

I hope that you will reconsider both the removal of the 2 tier system and the addition of Counselling Psychologists to the top tier.

Thank you for your consideration in this manner.

Liz Matjacic