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Senate Community Affairs Reference Committee inquiry into Commonwealth Funding and Administration of Mental Health Services

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The Committee

The submission specifically relates to the two-tier Medicare rebate system for psychologists. The submission argues that the higher rebate for clinical psychologists (i) limits the choices available to the public by discouraging access to health provider psychologists with different skills, and (ii) ignores the value of work experience in the acquisition of skills relevant to the provision of treatment. The dynamics which led the Government to the two-tier system reflects a strong influence of one-sided academic thought aimed to build up clinical psychology to the detriment of other branches of psychology in the provision of health care.

The policy behind the higher rebate claims that only clinical psychology deals with mental illness. In fact counselling psychology as indeed other areas of psychology in the delivery of healthcare have similar levels of expertise. On this basis the application of the policy discourages broader access to treatment by members of the public by devaluing the skills of eg counselling psychologists. The policy is contrary to evidence in the recent Medicare review that clinical and non-clinical psychologists are similarly effective in treatment delivery. In my experience GP's generally refer clients on the basis of how well were earlier referred clients treated rather than whether the psychologists are clinical or not.

In illustrating the inequity of the rebate policy to non-clinical psychologists and its disservice to the public I draw from my own experience. I have been a long-standing member of the Australian Psychological Society (APS). I am also a member of its Counselling College and have been endorsed in counselling by AHPRA. I have been in practice in NSW since 1996 and in Victoria in the mid 1970's. From mid 1970 to mid 1990 I was a public servant in the ACT working on policy tasks relevant to psychology. After work hours I was voluntarily counselling individuals mainly of Greek background, given my bilingual skills.

In Sydney I set up a private practice which attracted initially counselling work but it soon included assessments. I wanted to further my skills in psychology by undertaking doctoral studies. I did complete a Master of Education at Monash some years ago by major thesis on reinforcement theory - a topic relevant to clinical and counselling psychology.

My logical choice now was for a doctorate (DPsych). Mainly clinical doctorates were available. I was dismayed when I realised the extent to which university requirements were inflexible and beyond my capacity to meet as an individual in the workforce with family responsibilities. I could not understand why a psychologist of long experience would be required to undertake many hours supervision as part of degree requirements. A further barrier was the shortage of places for DPsych and preference being given to high academic achievers.

Nonetheless I wanted to upgrade my qualifications. I found I could undertake an EdD from New England in clinical research where I would be supervised by the psychology department. I researched the treatment of depression using a web-based module which integrated with face-to-face treatment. I was conferred the EdD in April 08. My research, subsequently published, indicated potentially large savings in treatment costs. I have informed Medicare of my research.

Since I began my practice in Sydney I have met many psychologists who do not have a D or MPsych and yet are capable clinicians. Many of these, as in my case, trained at a time when the D or M Psych did not exist.

The abolition of the higher rebate would remove the unwarranted restriction, as demonstrated by recent research, to the public's right of choice of psychologists with different healthcare provider skills. It is not a question of differences in quality of treatment - all psychologists in the field of healthcare, notably counselling psychologists, receive appropriate training. Their experiences and ongoing professional development enhance their skills in providing for their clients.

Equally importantly the higher rebate has been shown by recent research to be a waste of money. Its removal would result in considerable Government savings.

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