

Dear Senators

(I have already submitted a letter to you yesterday by Express Post, because there was no electricity in our area yesterday and therefore no Internet access. This is a later submission, now that access is available.)

As a Counselling Psychologist in private practice I would like to explain why the proposed changes to the Better Access programme will severely disadvantage some of my most vulnerable clients.

My client base this year has ranged in age from under 4 years to 83 years. My clients have included people who are struggling with emotionally exhausting treatment for illnesses such as cancer. One of my clients failed to recover, and I was so glad that I was able to continue to help her to maintain a sense of peacefulness and calm acceptance to the end. Thankfully, the proposed cuts to the number of sessions available had not become reality before she died.

At the other end of the age range, I see many children who are struggling to attend school. Some of them are doing their best to cope with very difficult physical conditions, e.g. life threatening allergies and other physical illnesses that require specialist medical attention. Others are suffering from severe anxiety. For these children, a school camp or even an excursion can be a huge challenge. Recently, a Year 6 boy who was desperately keen to attend a school trip to Canberra found himself becoming physically ill at the mere thought of leaving his parents. Fortunately his treatment was successful, and I was delighted to hear from his parents that his completed trip will always be a truly happy highlight for their son. Some young clients with very high anxiety need ongoing treatment, however. The sudden cutting off of sessions for such severely anxious children would leave them without support, and would be likely to compromise their school life to the extent that they may never enjoy their school experience or achieve their true potential.

Extreme grief can overwhelm clients of any age when they lose a person who has been an integral part of their lives. During the past twelve months I have worked with many clients who find themselves devastated by the loss of a very dear person. Healing from severe grief is a very long process, and even when progress appears to be happening, these clients can be flooded with grief so strong that they find themselves unable to get out of bed on some days. The pain of separation is so great at times that some contemplate ending their own lives. For these clients, the calm space of the counselling session is a lifeline. The sudden curtailment of available sessions would whisk this lifeline out of reach.

Clients suffering from Post Traumatic Stress Disorder form another group who are severely disadvantaged by the proposed limit to the number of sessions available under the auspices of Medicare. This is a debilitating condition that requires intense **ongoing** psychological intervention. Left half done, this work will fail to release these clients from a life devastated by trauma.

My clients have been sent to me by their General Practitioners, who clearly recognise their patients' need for counselling. When I have requested Reviews for further sessions, these have never been refused, presumably because the doctors are well aware of the needs of their patients and the benefits that have been achieved so far.

I would like to emphasise that most of my clients are struggling financially. Many of the parents of the young children that I see are battling to stay afloat in the current financial

climate. The cutting off of Medicare supported sessions for themselves or their children would immediately put psychological help out of reach for most of them.

Almost half of my current clients are bulk billed. This leads me to ponder the "two tiered system" that all psychologists are subject to at present.

I am so grateful for the years of training, study and experience that I have been able to bring to my work. I am very glad that I have been trained to work with children and adults suffering from a diverse range of conditions. My most intense areas of special interest, study and training have been focused on psychological treatment of Post Traumatic Stress Disorder, Grief and Loss, Physical and Sexual Abuse, Childhood Anxiety and Trauma. Although these are the conditions with which I work most frequently, I am also very glad to say that my training and experience are rich and experienced enough to enable me to feel confident of my ability to offer psychological help and healing to clients suffering from any form of emotional distress.

I am also very grateful to be a member of the APS College of Counselling Psychology. I greatly value the quiet, informative professional support and access to journals and other sources of learning that they provide.

It is puzzling, however, to contemplate the reasoning behind the two tiered system. When I first began my work, psychologists were a cheerful bunch who respected and valued each others' specialties. There were no attempts to assume superiority, or to label fellow psychologists as lesser beings. Looking at the healing work that we do, I am unable to see how Clinical psychologists have become "specialists" who are reimbursed at a higher rate. This becomes particularly noticeable to me when I bulk bill my clients, and remember that I am receiving **\$81.60** for each session from Medicare, while my Clinical colleagues are receiving **\$119.80** for a session that may - or may not- have had as successful an outcome as mine.

Any thorough investigation of outcomes of practice would reveal the excellent work that is done by most psychologists, regardless of their "labels". The labels themselves are meaningless without practical evidence of successful client healing. As a Counselling Psychologist I am saddened by the divisive antipathy aroused by the two tiered system.

I value input and discussion from ALL my colleagues, and I know that it is professionally and morally counterproductive to continue to support this two tiered system. It's also costly - maybe the number of sessions would not have needed to be cut so drastically if we had all been paid at the same level, instead of bowing to the perceived need for an inflated rebate for Clinical psychologists.

In the end, vulnerable clients will suffer if the number of available sessions is cut. I am hoping that you will please remember to consider the needs of those most at risk - the young and the elderly, the low income earners and pensioners, who are suffering from severe and debilitating psychological conditions.

Thank you.

Mil McCormack, MAPS, Counselling Psychologist.