

4 August, 2011

Dear Sir/Madam,

I wish to convey my frustration with the current inequitable and arbitrary two-tier Medicare arrangement for psychology services.

I am a member of the APS and I am listed as a generalist psychologist and therefore considered to have limited therapeutic skills. As such, I am constrained to offer only focused psychological strategies to patients who are referred to me under the current Medicare arrangements.

There are a number of other established, valuable and effective psychotherapeutic approaches with proven efficacy, and to restrict the professional judgment of the psychologist in the assessment and treatment process is unfortunate and puzzling.

I have high-level psychotherapy training including a Masters in Child Psychoanalytic Psychotherapy from Monash University as well as extensive training in adult psychotherapy. I have presented and published papers which include clinical and theoretical material in psychoanalytic psychotherapy.

I provide teaching and/or supervision in four psychotherapy training programs:

- Victorian Association of Psychoanalytic Psychotherapy Training Program (adult)
- Masters of Child Psychoanalytic Psychotherapy (Monash)
- Victorian Advanced Training in the Psychotherapies (Royal Australian and New Zealand College of Psychiatry)
- Graduate Diploma in Child Psychotherapy Studies (Monash, Distance Education: Techniques of Child Psychotherapy: a subject which I authored)

Two of these training programs are university-run and two are privately-run psychotherapy training programs, and provide comprehensive teaching of theory and skills in psychoanalytic psychotherapy.

This is very different from the various masters, doctorate and PhD courses offered by the schools of psychology which provide academic input but not psychotherapy training. These latter courses are geared to research and not to the teaching of psychotherapy, but under the current

arrangement they are erroneously deemed to produce clinical psychologists with superior psychotherapy skills.

I believe that the two-tier system would be best converted into a single-level provision of psychological services, with the resultant savings going towards restoring the original 12-18 sessions available under Medicare.

Yours sincerely