

**Personal Background:** I am currently a provisionally registered psychologist who will be receiving my full registration as a Counselling Psychologists after completing my Masters degree in Psychology at Swinburne University. For the last 9 years I have been volunteering my time in running a depression recovery program at the Winepress Church in Berwick due to my passion in helping those struggling with depression. This 12 week program only costs participants \$60 to cover morning tea and materials.

1. **Those suffering most cannot afford private mental health services:** In running this program, I have become aware that those that really need help cannot afford private health insurance and certainly cannot afford to pay a counsellor or psychologist for the very services they need. They are not sufficiently unwell to need hospitalisation and so they are stuck with no services to turn to but their GP and the Better Access to Mental Health Scheme that offers some Medicare funded psychology services.
2. **Reduction in number of sessions through Better Access Service impacts Depression Recovery Services:** Unfortunately, in the most recent budget announcement, the number of sessions that are available to a person struggling with mental health issues have been reduced significantly (from 18 to 10). Not only do I see it impacting the care these individuals will be able to receive, I also see it impacting my own ability to help the very people I hoped to help once I receive my registration. It is important to note that Depression is one of the most debilitating mental illnesses that impacts such a large part of a person's life that it requires a comprehensive process of working with your client to facilitate full recovery. Many clients who attended the 12 week recover program still need to also work with a psychologist on particular issues of past trauma or current relationship that have contributed to their depression.
3. **Focused psychological strategies impacts ability to provide full range of Depression Recovery Services:** I am concerned that the current restrictions on the types of psychological services to be provided by Counselling Psychologists will impact the quality of care I am able to provide my clients. My experience in running the Depression Recovery program has shown that it requires a very wide range of evidence based interventions to address the full range of issues that people with Depression struggle with; not just the focused Psychological Strategies currently allowed through the Better Access scheme for Counselling Psychologists.
4. **Reduced sessions result in reduced service that is not yet available anywhere else:** I have reviewed the rationale behind the government's decision to reduce the sessions as based on the level of usage reported in the most recent review of this system (being approximately 70% of people only using up to 6 sessions). My understanding is that this reduction in the number of sessions requires people with more severe issues such as Depression to change from one health professional when their sessions have run out into another service which is usually government funded with mostly junior salaried staff being employed to provide those services. Although there appears to be an intention to improve the quality of these services, right now they do not provide the high quality specialist care they are supposed to for more severely ill individuals. I feel there is a flaw in the reasoning process of cutting one service before another service is able to take its place.
5. **Change in Better Access Scheme impacts psychologists' mental health.** The currently proposed change in funding away from private practice into more government funded

services, forces psychologists into working in government funded services due to the limited ability of Medicare to fund private practice. As a working mother, private practice is more appealing as it enables me to juggle my hours to be able to also take care of my family. Leaving psychologists with only the option of working in a salaried position in a government funded service significantly reduces their ability to balance their own mental health, which is a really critical issue for people involved in this demanding type of work.

6. **Change in Better Access Scheme impacts psychologists' ability to fund their qualifications:** My intention was never to set up in private practice in inner Melbourne where private clients are able to pay the full APS \$218 recommended rate. I wanted to work in the City of Casey with the people in this local area who cannot afford those services and was willing to have my practice funded by Medicare Rates. At the moment I do not see a viable financial career for myself in private practice with the restrictions in the type of work I can do, the type of psychological strategies I can use with my clients and then receiving a reduced rebate compared to Clinical Psychologists working with the same client population. Not only will I have a study debt of over \$30,000 which I was required to incur to attain this professional qualification, I have also had 4 years of earning very little professionally to make time for all the practical work I've had to put in free of charge as part of my various psychology placements. These requirements are identical for Counselling and Clinical Psychologists. There does not seem to be a lot in the current system to motivate anybody to qualify to become a mental health professional.

**A Final Word:** The only thing motivating me is my faith and the fact that I really want to help those with mental health issues. Please consider the reality of the current situation. 1 in 5 people in Australian are affected by Mental Health Issues. This impacts their ability to be well functioning and contributing members of the Australian society and economy. We need all the services we can get both in private practice as well as government multi-profession team based services to improve the level of mental health in our country. We cannot afford to cut any services. Although I appreciate the money that is set aside for new services, I feel it a serious mistake to reduce any services that are currently available and see it significantly impacting the help available to those that I work with in my depression recovery programs.