To the Senate committee investigating the Medicare rebates for psychological services,

I am writing as a clinical psychology student, completing my 7th and final year of a postdoctoral program. I was greatly shocked to read about the recent inquiry into the reduction of rebates for clinical psychologists. First and foremost, I am concerned that this is an incorrect “one-size-fits-all” approach to individuals seeking assistance from the mental health system.

Clinical Psychology requires a minimum of eight years training and is the only profession, apart from Psychiatry, whose entire accredited and integrated postgraduate training is specifically in the field of lifespan and advanced evidence-based and scientifically-informed psychopathology, assessment, diagnosis, case formulation, psychotherapy, psychopharmacology, clinical evaluation and research across the full range of severity and complexity. We are well represented in high proportion amongst the innovators of evidence-based therapies, NH&MRC Panels, other mental health research bodies and within mental health clinical leadership positions.

Therefore, suggesting that a Clinical Psychologist is at the same level as a Generalist Psychologist is akin to suggesting that a recently graduated medical doctor should receive the same pay as a qualified psychiatrist who is a Fellow of the Royal Australian and New Zealand College of Psychiatrists.

Furthermore, Clinical Psychology is recognised as one of several specialisations within psychology within the United States and Britain. If this has been recognised internationally it does not make sense that the Australian Senate would consider it differently when two similar nations have identified Clinical Psychology as separate from four year only degree psychologists.

I would like to end on a personal note. I am lucky enough to not need mental health assistance in my life. Some of my friends, however, have not been so lucky. Those in particular that have suffered from severe mental illness (e.g. Anorexia, Borderline Personality Disorder) have been fortunate enough to receive specialised assistance from Clinical Psychologists. I know these individuals are grateful to be alive because of the assistance given to them from Clinical Psychologists.

I am incredibly concerned that there will be no incentive left for Clinical Psychologists to work with such severely ill populations. I am incredibly concerned for these most vulnerable members of our society. And as qualified practitioners, we should not be expected to provide professional services at sub-standard rates.

Considering these factors I respectfully and strongly oppose the proposed changes to the professional and funding structure within psychology.

Yours sincerely,

A concerned clinical psychology student