Submission to Senate Enquiry on ‘COMMONWEALTH FUNDING AND ADMINISTRATION OF MENTAL HEALTH SERVICES.’

Dear Senate Standing Committee,

Re: Reduction of sessions:

The Better Access initiative, in my opinion, has been a huge success. It has allowed many people to expedite their access to psychological support. This is particularly true for children and young people. I have worked in both public and private settings and I am aware that unless there is a very serious situation, such as suicidal intent, that children and families can wait over a year to receive help. There is a plethora of research pointing to the importance of early intervention, particularly with children. When timely intervention is not received problems become more serious and develop into chronic conditions that cost the community and the government enormous amounts of money. The Better Access initiative has made it possible for people of all ages and economic backgrounds to seek help.

Although there are children who only require a few sessions, there are certainly some who really need those extra sessions. Some young people have learning difficulties and require a slower pace; some need extra support to practice the techniques they have learnt; others already have chronic and severe conditions e.g. early onset psychosis and will require considerable support. It is also the case that some may need time to practice their skills or a break in their sessions before they return for follow up or booster sessions.

I would also recommend that funding is made available for families because it is extremely difficult to treat a child without the involvement and support of families.

Re: Two Tiered Medicare Rebate for Psychologists:

It has often been said that, “Psychologists don’t work for the money.” As a group we are generally quite altruistic but there has been much disagreement about the Medicare Rebate for Psychologists. It really boils down to feeling valued and a desire to provide the best service possible for our clients. If all Psychologists were paid at the same level it would appear that the years of study, the years of clinical experience and the expertise gained are undervalued. In my case I have a BSc Hons an MSc in Psychology and a Doctorate of Clinical Psychology. This adds up to 8 years of rigorous study, research and clinical experience. Prior to this I worked for 3 years as an Assistant Psychologist and post graduation I have 15 years worth of clinical experience and I am a Member of the Clinical College of Psychologists. Whilst I understand that resources are finite, to be paid the same as someone who has completed an undergraduate degree + 2 years work experience does not seem fair or equitable.