Submission to Senate enquiry into psychologists.

_I am writing to support the view that there should be one-tier system for all psychologists and that the system of 18 psychological sessions a year should be reinstated._

I am a practicing psychologist with considerable experience and extensive education. I am fluent in several languages which enables me to work with war refugees suffering from trauma.

The majority of my patients are thus refugees from war-torn countries who need many sessions, more than 10 a year. They come with extremely sensitive issues and the engagement process is slow and difficult. Some of them have witnessed killing of their family members, have been tortured in concentration camps, suffered all kind of deprivations such as long periods without food or water. They have been uncertain about their survival on a daily basis living in places where at any moment they could step on a landmine or could be taken from their homes and killed or there could be shooting in the streets. One of my concerns is the potential for suicide if psychologists don't have enough time to help them in therapy. If their mental health issues are not addressed, their children will have ongoing psychological issues which in turn will have an effect on their mental health. Eventually the Australian taxpayers will have to bear the cost when these patients become part of the public health system.

I bulk bill all of these patients, thus Medicare support is crucial to the clinical help that can be provided for them by psychologists.

I am experienced with a variety of evidence-based therapeutic strategies and so can address issues my patients bring to the consulting room such as the whole spectrum of anxiety disorders, including posttraumatic stress disorder, clinical depression, bipolar disorders, alcohol and drug abuse, personality disorders and chronic pain. In addition there are issues related to adjusting to a new culture which worsen their problems and require particular attention. I provide skilled therapeutic interventions and I would imagine there would be few psychologists (including my “clinical” colleagues) who would deal with the level of complexity with which I work every day. Consequently, the two-tier system is unjust for both psychologists and patients.

A labor government would well understand that poor people in particular need to be supported by Medicare. I am requesting that a serious consideration be given to establishment of one-tier system for all psychologists and restoring 18 sessions a year. If the lower rebate was decided for all psychologists, the funds thus saved may contribute to extend the number of psychological sessions provided by Medicare. Given that there is no research evidence that suggests that one group of psychologists is more skilled than any other I urge you to consolidate the two tiers into one. Thank you for the opportunity to send you this submission.

Yours sincerely,

Dr Sophie Bibrowska, Psychologist