

ACA Advocacy: Canberra 15th to 19th February 2021

The ACA CEO, Philip Armstrong and Industry Liaison Support Officer, Melody Stephenson-Smith travelled to Canberra to meet with several key Ministers and Senators who have an interest in mental health. We were accompanied to Parliament House with our government relations officer David Alexander from Barton and Deakin. Due to the short meeting times and to keep our message concise and simple for Ministers and Senators we designed a strategic drop sheet that could be left at each meeting which outlined our primary concerns. For the purpose of advocacy, the reference to counsellors includes psychotherapists. The following is a copy of the issues and solution we outlined.

- ACA is the peak body in Australia for counsellors and psychotherapists, with over 7,500 members.
- Psychological therapies are effective: almost eight out of ten individuals who participate in counselling or psychotherapy improve to a greater extent than the average person who does not participate in therapy. (Essential Research Findings in Counselling and Psychotherapy: The Facts are Friendly, Mick Cooper, SAGE Publications 2008, pages 34-35)
- Counselling and psychotherapy are cost-effective forms of mental health treatment – affordable for mainstream Australians, effective in reaching lower-socio-economic groups and regional and rural Australia.

The key issues:

- Mental health issues are large and growing. The top issue GPs were presented within 2019 was psychological issues (65%), a 4% increase from 2018 (RACGP Health of The Nation 2019, P.3).
- Current estimates from Brain and Mind Centre:

	pre-COVID-19 projection	Current projection	% change
Suicide	3,792	4,983	+31%
Self-harm hospitalisation	29,648	38,530	+30%
ED presentations	295,510	378,237	+28%
Psychological distress	1,929,000	2,700,000	+40%

- There is an undersupply of mental health services. Deloitte Access Economics forecasts an undersupply of GPs, both urban and regional areas, over the ten years to 2030, of 9,298 full-time GPs or 24.7% of the GP workforce. (DAE General Practitioner Workforce Report, 2019).

- Australians who live in rural and remote areas have poorer access to mental health services than those who live in cities.
- Existing mental health services (psychiatrists, psychologists, GPs) disproportionately focus on high end and expensive treatments; there is a strong need for cost-effective and affordable services to be available to mainstream Australians across the nation.

The solution:

- Have Bachelor and Masters level Counsellors, and Psychotherapists (ACA level 3 & 4) added to the category of Medicare-funded mental health providers.
- This will increase the supply of affordable mental health services across Australia.
- ACA estimates approximately 3,000 counsellors that would immediately meet the current criteria for the Medicare Benefits Schedule, with an additional 1,000 registering within six months.

Meetings

Barton and Deakin: On Monday we met David Alexander at the Barton and Deakin office situated in the National Press Galley building in Barton. We spent the day strategising and going over the biographies of each of the Ministers we were meeting with and which committees etc that they were involved in that were relevant to Mental Health. I prepared my presentation for each visit and we discussed potential questions and responses that would be raised at the meetings. Just prior to our arrival in Canberra the Prime Minister had just established a **Select Committee for Mental Health and Suicide** that was to report directly to him. This was an important new addition to stakeholders we needed to meet with and interestingly did not come directly under Hon Greg Hunt's portfolio of Health. The primary goal of our visit was two-fold, to raise the issue of counsellors coming under Medical Benefits Scheme (MBS) <https://chf.org.au/publications/what-mbs> and identifying barriers to employment for counsellors in government funded services. A secondary objective where possible was to discuss National Disability Insurance Scheme (NDIS).

Senator Jacqui Lambie: Senator for Tasmania whose primary interest in relation to mental health was veteran's mental health and is pushing for a Royal Commission into Veterans Suicide. I have met with Jacqui on several occasions to discuss veteran issues, so a good accord had already been established. My primary message was that there are many veterans and ex-service personnel who are registered as counsellors however are denied access to Department of Veterans Affairs (DVA) contracts to provide counselling services to veterans due to not having provider numbers under MBS. There is a shortage of mental health service providers to veterans and DVA have in other meetings stated they would not have an issue using counsellors if they were bought in under MBS. We were also aware of shortages in mental health services in Tasmania and believed counsellors being added to the MBS would help to address this. Senator Lambie was very responsive to our concerns and agreed that counsellors should come under MBS and be able to offer services under Medicare. She also agreed that counsellors should be able to apply for employment positions within government agencies and funded services. We left the meeting with Senator Lambie stating she would support any motions for counsellors to come under MBS and remove obstacles to employment contracts.

Senator Wendy Askew: Senator for Tasmania, who is on the Joint Standing committee for NDIS and had also worked as adviser to Minister Dan Tehan within the portfolio of DVA.

Senator Askew was extremely interested in our concerns and agreed that it did not make sense that counsellors were excluded under MBS. She was also genuinely concerned about the lack of access to counsellors by veterans. Senator Askew was happy to support a motion for counsellors to come under MBS.

Dr David Gillespie, MP: Dr Gillespie has held positions as Assistant Minister for Rural Health, Assistant Minister for Health and Assistant Minister for Children and Families. His electorate is in rural NSW and as such he is very aware of the lack of service providers in health and mental health in rural and regional Australia. He was extremely interested in the spread of counsellors in rural and regional areas and how through MBS these counsellors would be able to help address the shortages in mental health services. He was also interested in how many veterans live in rural and regional areas and again how access to mental health services would increase for them should counsellors come onto MBS. Dr Gillespie was happy to support counsellors into MBS.

Minister Mark Coulton, MP: Minister for Regional Health, Regional Communications and Local Government. As a member of the National Party who is involved in health Minister Coulton was very aware of issues of mental health in rural and regional areas. Minister Coulton concerns about mental health in rural and regional Australia were very reflective of Dr Gillespie. Minister Coulton as a previous farmer and grazier and was also aware of the psychological impact of natural and manmade disasters on workers and families in rural and regional Australia. Minister Coulton was supportive of counsellors coming under MBS.

Gladys Liu, MP: Ms Liu is the member of Chisholm in Victoria which includes Monash. Ms has previously worked as a speech pathologist for the Department of Education in Victoria. Ms Liu was aware of the many multi-cultural issues within mental health. We were able to inform Ms Liu of the ACA Chinese, Portuguese/Brazilian, Korean Chapters and many other similar groups within ACA which reflected the multi-cultural nature of our membership. We pointed out that the addition of counsellors to MBS would add a significant field force of multicultural and bilingual mental health professionals to MBS. We also pointed out that many counsellors came to Australia originally as refugees and have lived experience of trauma through exposure to war and civil unrest. Ms Liu indicated that she would be willing to support counsellors into MBS.

Julian Simmonds, MP: Member for Ryan in Queensland which includes the University of Queensland campus. Mr Simmonds is importantly is a member of the **Select Committee for Mental Health and Suicide Prevention**. Fortunately, as the ACA Head Office is in Brisbane, we able to discuss local issues and challenges in mental health. Mr Ryan was extremely interested in issues to do with employment issues through Primary Health Networks and the obstacles created through restricting tenders, contracts and employment opportunities to mental health professionals with MBS provider numbers. Mr Simmonds suggested that I should do a presentation to the new Select Committee on these issues and how we could resolve them to which I replied ACA would be appreciative of the opportunity. Mr Simmonds indicated he would be supportive of counsellors coming under the MBS system.

Vince Connelly, MP: Member for Stirling and is on the **Select Committee for Mental Health and Suicide Prevention**. Mr Connelly is new to Parliament being elected to the House of Representatives in 2019. Mr Connelly is a veteran with several decades of service in the regular and reserve forces. As a fellow veteran I was able to discuss the issue of veteran's mental health succinctly and quickly and how they are unable to access counselling services due to counsellors not being a part of the MBS system. Mr Connelly also has interests in small business which lead into discussions about private practitioners not being able to offer MBS rebates or apply for contracts against tenders due to not having access to MBS. Mr Connelly also suggested that I do a presentation to the Select Committee to discuss how

counsellors can resolve field force and other similar issues. Mr Connelly indicated that he would support counsellors under the MBS.

David Coleman, MP: Assistant Minister to the Prime Minister for Mental Health and Suicide Prevention. Unfortunately, Mr Coleman was not personally able to meet with us however his senior adviser did meet with us. We briefed the adviser who reflected a solid understanding of the issues at hand and was also incredibly supportive of counsellors. The adviser indicated that he believed the Assistant Minister would be extremely interested in our business plan and solution for primary issues confronting access to mental health services. The adviser indicated that Mr Coleman would be supportive of our efforts, obviously he was unable to speak on behalf of the Assistant Minister.

Dr Fiona Martin, MP: Chair of Select Committee on Mental Health and Suicide Prevention, we will be meeting Dr Martin in mid-March.

Department of Health meeting: We were able to meet with several senior members of the Department of Health who work within the Mental Health Division. We have now entered into more prolonged and detailed discussions and will be meeting regularly with them. Several issues over and above MBS were discussed in detail. Employment issues were top of the order, it was felt that counsellors should make up more the field force within government funded agencies and initiatives such as the Adult Mental Health Hubs in Victoria. Access to MBS should not be a prerequisite for jobs within these funded services and jobs should not be siloed to only be available to one type of discipline. There was significant discussion on the use of multi-disciplinary teams that included counsellors. We also discussed the lack of representation of counsellors on Department committees, round tables, reviews etc. We were assured this will be addressed particularly as multi-disciplinary teams become the norm as opposed to the exception.

Feedback: The most common response we received from Ministers, Senators and advisers was that the business plan that we brought to meetings was very comprehensive, cost effective and doable. We brought solutions not problems and these had been well thought out. All were very surprised to find out that registered counsellors/psychotherapist were able to access private health fund provider numbers, able to access contracts under most EAPs, part of NDIS, had formal accreditation processes for tertiary qualifications, had a formal Scope of Practice, and were employed in most areas of mental health. It was noted by many that registered counsellors were far more advanced as a profession that similar professions which stood us in good stead to move under the MBS.

Future: We have created a solid level of momentum which we will build upon. We have further meetings with Ministers and Senators and the Department in March. We will also be having further meetings with our Government Relations officer in early March to further develop our strategies. ACA have employed a new policy and research officer who worked in the Department of Health (Qld) until taking up this new position. The primary task of the policy and research officer is to supply appropriate documents for the Department of Health as required and to also start the ball rolling to break down other roadblocks such as education. ACA will also be developing a member strategy to involve members in this process.

Conclusion: This is the first time I have received such positive responses all round, no roadblocks or negativity. A major milestone has been reached reflected by us now working directly with the Department of Health towards a common goal. As stated by many I spoke to in Canberra, registered counsellors offer a real, cost effective and professional solution to current field force issues that cannot be immediately addressed by any other profession. The difference between now and other times? We have passed significant milestones such as recognition by Private Health funds, EAPs and NDIS, we have a professional pathway via

the education system, over 80% of Australian Universities deliver counselling qualifications as do several private providers, we are efficiently self-regulated, and we meet many other similar benchmarks used by government to measure whether a profession is advanced enough to be considered for access to MBS. We are sitting in a perfect storm of unmet needs by desperate Australians and we are the only boat big enough to stay afloat and deliver a professional cohort of unutilised professionals who can meet these needs. The journey continues however we are working hard for the profession as there is an end in sight.