

Dear Department of the Prime Minister and Cabinet,

The Australian Association of Psychologists Incorporated (AAPi) are the leading not-for-profit peak body representing all psychologists. We have over 10,000 members and are committed to supporting the health and wellbeing of psychologists and Australians who need access to psychological support.

Please see our comments provided below regarding the COVID-19 inquiry.

# 1. Key Health Response Measures

- a. COVID-19 Vaccinations and treatments
  - The Australian Government has demonstrated commendable efforts in securing COVID-19 vaccines and treatments for the population, leading to high vaccination rates. However, public awareness campaigns should be sustained to encourage booster shots and overcome vaccine hesitancy, which many psychologists were required to work through with their clients. Many cross-cultural resources were not created or distributed in a timely enough fashion to combat much of this misinformation and disinformation. Psychologists, particularly health and community psychologists, can provide expertise in this area and should be adequately utilised.
- b. Medical supplies and personal protective equipment Ensuring a consistent supply of PPE to healthcare workers and essential services is vital. Transparency and collaboration with industry partners like the AAPi are key in managing these supplies effectively. During the pandemic, many psychologists were not allowed to access PHN-supplied PPE and, at times, were required to see highly vulnerable clients without access to PPE, leaving them at risk of contracting the virus and infecting clients. This led to significant distress that impacted their mental health.
- c. Public health messaging

Public health messaging needs to be clear, consistent, and culturally sensitive to reach diverse populations effectively. Such messaging should emphasise the importance of accessing psychological support, vaccinations and preventive measures. Psychologists, particularly health and community psychologists, can provide expertise in this area and should be adequately utilised.

AAPi were concerned that during the pandemic inadequate emphasis on the need to access mental health support was provided. Particularly during times of crisis, such as snap lockdowns, crisis support lines should have been prominently displayed along with the urging of people to reach out for support and the continuation of psychological treatment.

Psychologists reported to us that it would have been beneficial if clients could refer themselves to psychologists, eliminating the significant bottleneck at GP clinics, which were overwhelmed during many periods of the pandemic. This would ensure, for future pandemics, that GPs could focus on physical health appointments, and



clients would not need to wait for weeks or months before accessing support for their mental health.

# 2. Broader health supports

a. Mental health and suicide prevention

The mental health impact of the pandemic, particularly during lockdowns, has been significant. There is a pressing need to increase funding for mental health services, focusing on timely access to care and suicide prevention programs. The McKell report (2023) notes that investing in psychology services clients can access under Medicare would significantly ease this access issue.

b. Access to screening and other health measures
Ensuring uninterrupted access to essential health screenings and preventive mental
health measures is vital. Psychology telehealth services should be promoted,
especially in areas with lockdowns and regional areas in which residents often forgo
or ration vital mental health support due to how inaccessible it currently is.

## 3. Support for Industry and Business

b. Labor shortages

There is a widely acknowledged psychology workforce shortage that shows no signs of easing. Meaningful strategies should be adopted to address labor shortages, including facilitating paid placements for student and provisional psychologists as well as allowing the 8,000 provisional psychologists in Australia to be able to work under the Medicare system, to support regional and rural psychologists to live and study in their home towns, to diversify psychology training and study pathways by reopening the 4+2 pathway, and workforce upskilling to meet industry demands.

c. Housing and homelessness

Investments in affordable housing and homeless support services should be prioritized, as without these basic measures, population mental health will be unable to shift towards greater mental health and wellbeing in any meaningful way (Singh et al., 2022).

d. Family and domestic violence measures

Efforts to combat family and domestic violence need to be comprehensive, providing support and refuge for survivors and also more funding and programs that work directly with perpetrators as there was a strong increase in domestic violence incidents between pre- and post-lockdown periods (Piquero et al., 2021) which continues to impact the health, safety, and wellbeing of all Australians impacted.

### 4. Mechanisms to better target future responses

Future responses should consider the unique needs of various populations, including gender, age groups, socio-economic status, geographic location, people with disabilities, First Nations peoples, and culturally and linguistically diverse communities.

The requirement to bulk bill for Telehealth at the start of the pandemic also became an issue as this put many businesses into financial difficulty as it meant a large income cut. Many businesses have struggled to remain financially viable since the pandemic, and as they are not eligible for government funding, are considering closing their doors.

Turning your attention to the role of psychologists in the COVID-19 response, it is essential to acknowledge the extraordinary challenges they have faced. Throughout the pandemic, psychologists have been at the forefront of providing mental health support to Australians who have been grappling with the psychological toll of COVID-19 and lockdowns.



Psychology private practices, which often employ provisional psychologists, faced significant difficulties in meeting the population's demands. One major issue was the inaccessibility of Medicare rebates for provisional psychologists, despite their equivalent training and qualifications to mental health social workers. This disparity created financial hardships for both provisional psychologists and the clients they served.

Moreover, the two-tier psychology rebate system, which is not evidence-based, resulted in psychologists with clinical endorsement and other psychologists with similar qualifications rebated at vastly different levels. This discrepancy not only created financial challenges for psychologists but also left Australians in financial distress to make difficult choices when seeking mental health services.

Workforce shortages in psychology services were a concern even before the COVID-19 pandemic, and the crisis further exacerbated this issue. There is an urgent need to expand pathways for provisional psychologists to gain full registration, especially in regional areas where the shortage of mental health professionals is more acute (McKell report, 2023).

Many psychologists feel undervalued and unsupported by the government, which has contributed to a significant number leaving the profession. This attrition is counterproductive to the nation's mental health needs. For future pandemics or crises, it is imperative that we prioritise the well-being, career development, and retention of psychologists in Australia. They are a crucial part of our healthcare system, and their expertise and support are essential during challenging times.

The Australian government has shown commendable dedication to addressing the challenges posed by COVID-19. However, there is room for improvement in several key areas, particularly in supporting the mental health needs of the population and addressing the disparities within the psychology profession. By taking action in these areas, we can better prepare our healthcare system for future crises and ensure the well-being of both the public and the dedicated professionals who serve them.

Thank you for your attention to this matter. I trust that the insights and recommendations provided in this response will contribute to a more resilient and responsive healthcare system in Australia.

Warmest Regards



Carly Dober

Director and psychologists

Australian Association of Psychologists



#### References

- 1. *Under Pressure: Australia's Mental Health Emergency* The McKell Institute. (2023, February 14). The McKell Institute.https://mckellinstitute.org.au/research/reports/under-pressure-australias-mental-health-emergency/
- 2. Chung, R. Y. N., Chung, G. K. K., Gordon, D., Mak, J. K. L., Zhang, L. F., Chan, D., ... & Wong, S. Y. S. (2020). Housing affordability effects on physical and mental health: household survey in a population with the world's greatest housing affordability stress. *J Epidemiol Community Health*, 74(2), 164-172.
- 3. Singh, A., Daniel, L., Baker, E., & Bentley, R. (2019). Housing disadvantage and poor mental health: a systematic review. *American journal of preventive medicine*, *57*(2), 262-272.
- 4. Piquero, A. R., Jennings, W. G., Jemison, E., Kaukinen, C., & Knaul, F. M. (2021). Domestic violence during the COVID-19 pandemic-Evidence from a systematic review and meta-analysis. *Journal of criminal justice*, 74, 101806.
- 5. Pomeranz, J. L., & Schwid, A. R. (2021). Governmental actions to address COVID-19 misinformation. *Journal of public health policy*, *42*, 201-210.