

12 May 2026

MEDIA RELEASE

Mental health invisible in this year's Budget

The peak body for all psychologists says mental healthcare has again been abandoned in this year's Federal Budget.

Australian Association of Psychologists (AAPi) Executive Director, Tegan Carrison, said mental health was invisible in the Budget fact sheets.

"Mental health conditions and substance use disorders accounted for almost 15% of Australia's total burden of disease, yet only receives around 7% of health expenditure.

"Australians continue to experience record levels of psychological distress, yet mental health still receives less than half the level of investment relative to its burden on the community," she said.

"If any other area of healthcare represented 15% of the national disease burden while receiving only 7% of health funding, it would be labelled a national crisis."

Ms Carrison said she was pleased the mental health needs of veterans had been recognised, with the allocation of \$583.4 million to implement recommendations from the Royal Commission into Defence and Veteran Suicide, along with \$169.7 million for allied health services for veterans.

"While this is good news for the veteran community, it seems there will still be millions of other Australians left struggling to access affordable, consistent psychological care."

"Mental ill health costs this country \$220 billion each year, while one in five has experienced a mental health disorder in the past 12 months."

Ms Carrison said mental health funding is a real investment in productivity, workforce participation, and long-term economic stability.

"Mental health funding should not be viewed as a Budgetary cost," she said.

"When Australians can access timely psychological support, they are more likely to stay engaged in work, education, family life, and their communities.

"Delaying access to psychological care often results in greater long-term costs to hospitals, crisis systems, disability supports, and the broader economy.

"The economic cost of untreated mental ill-health far exceeds the cost of providing early, accessible psychological intervention.

"Investing in psychology is preventative infrastructure - it keeps people well, connected, productive, and participating in society."

In its pre-Budget submission, AAPi had called for the following:

- Increase the Medicare rebate for the clients of ALL psychologists
- Increase Medicare Better Access from 10 to 20 sessions per year for people with higher psychological support needs, ensuring care is based on clinical need rather than capacity to pay
- Expand Medicare eligibility to provisional psychologists, immediately increasing workforce capacity, reducing waitlists, and strengthening early-career training pathways
- Introduce rural and regional psychology workforce incentives, including expansion of the Workforce Incentive Program, to address longstanding maldistribution
- Increase Commonwealth Supported Places (CSPs) for psychology training and align CSP costs across psychology pathways to remove inequitable financial barriers
- Expand eligibility for the Commonwealth Prac Payment to address placement poverty and support students to complete required training
- Fund structured graduate and placement programs across all Commonwealth-funded mental health services, including Medicare-funded services, headspace, youth and perinatal programs
- Commit funding to the implementation of psychology training pathway reforms, with appropriate transition supports for students and providers.

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