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## Bring back 20 subsidised psych sessions per year

*Despite new data showing dropping rates of intimate partner violence, 10 sessions are not enough to help those impacted, say psychologists.*

Psychologists have called for a return to 20 Medicare subsidised sessions per year in the wake of “concerning” new data on intimate partner violence and emotional abuse from the AIHW.

Although the numbers show rates of IPV against women have fallen from 2.3% in 2016 to 1.5% in 2021-22, they continued to highlight the volume of impacted people who need help, said a director of the Australian Association of Psychologists.

Cohabiting partner emotional abuse decreased from 4.8% in 2016 to 3.9% in 2021-22. For men, the 12-month prevalence rate of cohabiting partner emotional abuse decreased from 4.2% in 2016 to 2.5% in 2021-22.

“While these declines might show that community education is working, we still need to focus on those who need significant mental health support due to the trauma and stress that comes with these kinds of experiences,” said Carly Dober.

“The data showed that 23% of women and 7.3% of men have [experienced physical and/or sexual violence from an intimate partner since the age of 15](#).

“People’s trust and safety in the world and their self-confidence are often shattered after gendered violence experiences, and they need support in building up their lives to be whole again.

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The Better Access initiative originally offered 10 Medicare subsidised psychology sessions per year. The scheme was expanded early in the covid pandemic to offer 20 sessions, but was cut back to 10 sessions at the end of 2022.

Health Minister Mark Butler has maintained that cutting the number of MBS funded session improves equity with more Australians accessing getting mental health services, as per the findings of the [Better Access evaluation report](#).

“That’s the message they are trotting out,” Ms Dober told [HSD](#).

“However, if you read the government’s own report, they recommended to keep the additional 10 sessions for those who have complex mental illness – things like trauma, schizophrenia – but the government still chose to not do that anyway.

“Yes, it’s fortunate that more people have accessed psychology sessions, but many more people aren’t,” she said.

Ms Dober said that the extra services had been absorbed by more affluent people living in cities, leaving regional needs unaddressed.

“Rates of [bulk billing in allied health are still tracking downwards](#). The access and affordability issue has not been solved with the cutting of 10 extra sessions,” she said.

[New figures released by the Australian Institute of Health and Welfare](#) show that nearly a quarter of Australian women and over 7% of Australian men have experienced physical and/or sexual violence from an intimate partner since the age of 15.

Ms Dober said that “decades of research” on cross-cultural clinical data indicate that it can take between 10 and 18 sessions to “make any headway” in psychological consultations with a person traumatised by domestic and sexual violence.

“When people have had interpersonal violence of any forms, their sense of safety, trust and connection in the world can be deeply impacted. What that means is that making a connection with a health professional and sharing what happened can take time.

“Sometimes even you’ll be meeting someone for five sessions and they won’t share anything and then suddenly, ‘Boom!’ How can then can you effectively treat and manage trauma within the remaining five sessions? It doesn’t work.

“That’s why we are calling for 20 sessions instead of just 10,” she said.

On a positive note, Ms Dober said that the new figures from the AIHW show that family violence rates are dropping.

“Not every instance of violence or interpersonal violence is recorded. However, it is still exciting and hopeful that rates are dropping,” she said.

“It means that community attitudes and education around violence against women changing and that is great.

“However, the figures still show a significant amount of people who are both are going through that pain now and people who have experienced it in their past.

“We still need to provide significant mental health support due to the trauma and stress that comes with these kinds of experiences,” Ms Dober said.