



**AASW**

Australian Association  
of Social Workers

# **Submission to the Interim Report – Review of the Mental Health and Suicide Prevention Agreement**

Productivity Commission

August 2025

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## About the Australian Association of Social Workers

The Australian Association of Social Workers (AASW) is the national professional body representing more than 17,000 social workers throughout Australia. The AASW works to promote the profession of social work including setting the benchmark for professional education and practice in social work, while also advocating on matters of human rights to advance social justice.

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## Recommendations

The AASW recommends:

- Recognise the vital role of social workers in the mental health workforce to address the gaps and issues identified in the report
- Ensure social workers are involved in the codesign of future mental health reform
- Increase social work representation on governance processes and structures relating to mental health policy and future reform
- The national registration of social workers via the National Registration and Accreditation Scheme (NRAS) be introduced
- Increase the Medicare rebate provided to AMHSWs who deliver services via the Better Access Scheme
- Include social workers in the development and codesign of solutions for the gap in psychosocial supports
- Include social workers in the development of comprehensive guidelines for the commissioning and planning of PHN mental health service delivery

## Our submission

### Lack of reference to, and recognition of, social workers as a vital part of the mental health workforce

The interim report overlooks the vital contribution of social workers within the mental health workforce, with no mention of their role on pages 95 and 97, where the mental health workforce is discussed. Currently, in Australia, there are a total of 49,500 social workers.<sup>1</sup> In 2022-2023, social workers were the largest group of allied health professionals working in state and territory specialised mental health care facilities across Australia (nearly 40%).<sup>2</sup> Specialised mental health care is delivered in and by a range of facilities, including public and private psychiatric hospitals, psychiatric units or wards in public acute hospitals, community mental health care services and government-operated and non-government-operated residential mental health services.<sup>3</sup> By not highlighting this contribution, the report misses a key opportunity to harness the full potential of this workforce to address the gaps and issues raised.

Social workers offer a unique contribution to the mental health sector, as they operate at the interface between people and their social, cultural, physical and natural environments while recognising the impact of the economic, psychological, emotional, political, social, legal and environmental determinants of health and wellbeing. The social work profession is committed to maximising the well-being of individuals and society, and this is underpinned by principles of social justice and respect for human dignity and human rights. As such, social workers maintain a dual focus in both assisting with and improving human wellbeing and addressing any systemic and/or structural issues that may impact on wellbeing, such as inequality, injustice and discrimination.

Social work is a tertiary-qualified profession recognised nationally and internationally. In Australia, employment as a social worker is often dependent on eligibility for membership of the AASW, which requires completing an academic qualification that is accredited by the AASW (or recognised as equivalent). This includes a Bachelor of Social Work or Master of Social Work Qualifying. These degree programs give students the knowledge and skills to better understand and support people, promote community participation and advocate for social change.

Social workers are trained to understand and assess that the mental illnesses or ill-health experienced by individuals, families, groups and communities are not caused or determined by a single factor. There may be intrinsic personal factors, combined with familial, psychological, economic, health, educational, employment, legal or other societal issues that contribute and pose obstacles to people achieving positive mental health and wellbeing. These environmental stressors are the social determinants of physical and mental health and are a central focus for social workers in supporting people with a mental illness.

Building on this tertiary qualified foundation is the opportunity to gain a further credential in mental health, demonstrating expertise through proven practice experience. Social workers who are members of the AASW and who have met certain criteria in mental health settings can seek

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<sup>1</sup> [Social Workers | Jobs and Skills Australia](#)

<sup>2</sup> [Specialised facilities - Mental health - AIHW](#)

<sup>3</sup> [Specialised facilities - Mental health - AIHW](#)

accredited status as an Accredited Mental Health Social Worker (AMHSW)<sup>4</sup>, which was introduced before 2008. The AASW is an Accrediting Authority recognised by the Federal Government.

The accreditation indicates that the practitioner is a highly skilled mental health clinician in assessment, treatment planning, complex case formulation, and the delivery of evidence-based therapeutic interventions across formative and life stages in collaboration with service users.

Accredited Mental Health Social Workers are recognised providers with Medicare Australia and other programs, delivering Focused Psychological Strategies (FPS) in mental health settings and utilising a range of evidence-based strategies. As of August 2025, there are 3,670 AMHSWs currently accredited across Australia.

Social workers focus on analysing whether change needs to occur at the individual level, as well as in other domains. This interactive and systemic analysis distinguishes social work from other health professions in the mental health sector. In their commitment to human rights and social justice, professional social workers advocate for the rights of clients against discrimination, reduced opportunities and abuse they can experience. Through therapeutic interventions and the mobilisation of services and supports, mental health social workers enhance the person's social functioning, promote recovery and resilience and aim to reduce stigma.

Social workers in mental health practice can work in the following settings and fields:

- **Public mental health**, such as clinical, community, residential, inpatient and emergency department settings. This also includes psychosocial outreach, recovery and rehabilitation.
- **Adult mental health** working as part of multidisciplinary teams and providing Individual/family/carer assessment, intervention, treatment and support, including coordination of discharge planning.
- **Private practice** as self-employed Accredited Mental Health Social Workers providing counselling and therapeutic interventions. This can be direct fee for service or through government-funded initiatives.
- **Community teams** working as case managers or lead clinicians in combination with multidisciplinary teams including psychiatrists, particularly with disorders such as schizophrenia, bipolar disorder and eating disorders.
- **Child and adolescent mental health** teams as part of multi-disciplinary teams, in lead or clinician roles, supporting the mental health needs for children of ages 0 to 18 years and their families. This can include inpatient and/or community settings.
- **Primary mental health care**, providing longer term therapy for more high prevalence disorders such as anxiety and depression where the psychiatric risks are not of a severe and enduring nature.

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<sup>4</sup> <https://www.aasw.asn.au/credentials/aasw-accredited-mental-health-social-worker-application-criteria/>

- **Tertiary mental health services** undertaking assessment, case management, crisis intervention, rehabilitation and inpatient treatment. This can also include involvement in the implementation of community treatment orders as psychiatric case managers.
- **Non-government organisations (NGO)**, providing outreach mental health services and working closely with the government psychiatric services.
- **Prevention programs** working in an educational context, where social workers are based at or attached to schools, educational settings and in the early childhood sector.
- **Perinatal services** working in community-based multidisciplinary teams supporting expectant or new mothers and partners, focusing on those at risk of a mental illness or disorder.
- **Maternity support services** working as an inpatient service, supporting new mothers and parents generally, and when risks of post-natal depression or other emerging needs are identified.
- **Aged mental health**, liaising closely with family members, community teams, GPs, aged care facilities in the coordination of discharge planning and transition to community or an aged facility.
- **Veterans' services**, working with veterans and serving ADF personnel, and their families, and providing psychosocial interventions.
- **Aboriginal and Torres Strait Islander communities** providing mental health and wellbeing services to Aboriginal and Torres Strait Islander communities.
- **Specialist services** including forensic services, transcultural mental health Services, and prison mental health services

Working in these settings, social workers can deliver the following services:

- Assessment, intervention, treatment and support, including therapy to individuals, their families/carers and groups with mental health disorders, or to prevent the emergence of mental health concerns in vulnerable people
- Mental State Examination and other relevant assessments across the range of presentations and the lifespan
- Evidence-based therapeutic treatments for DSM 5/ICD 10 illness categories
- Bereavement, grief and loss counselling
- Family/parent-child interventions, including evidence-based family interventions
- Couple therapy and relationship counselling
- Therapeutic and psycho-educational group programs
- Assessment and treatments for alcohol and other drug misuse and dual diagnosis/comorbid presentations
- Culturally competent interventions and/or referrals for specific groups

- Coordinating intra and inter agency services for individuals and families with complex presentations requiring multiple levels and types of services/resources
- Advocacy with services for clients to provide continuity of care and safety around admission and discharge to services
- Contributing to the resolution of socio-legal issues and guardianship issues
- Crisis intervention (according to relevant state Mental Health Acts), safety planning, risk assessment and risk management, referral to required services
- Responding to the wellbeing and needs of children, including those who are vulnerable and at risk
- Facilitating access to information, services and resources
- Coordination of care in relation to mental health and physical health disorders
- Program development, management and leadership
- Community development and mental health promotion
- Program and policy practice development
- Research and evaluation

Social workers contribute greatly to their clients and organisations by undertaking evidence-informed assessments and interventions. The social work assessment process considers the impact of biomedical factors and the range of psychological, social and other needs of the individual experiencing a mental health disorder. Within this framework, social workers respect the primacy of the individual's rights (within medico-legal requirements) and work towards developing skills and confidence to assist individuals and their families to maintain control of their lives and take responsibility for recovery and wellbeing.

The approach and framework in which social workers operate, together with their direct experience working with people who have lived experience, equip them with valuable insights for shaping effective policy and driving reform. Social workers must be included in all future co-design processes, governance arrangements, and decision-making structures. This includes the development of a renewed National Mental Health Strategy.

Social workers are also the only profession named in mental health who are employed across every system listed in Schedule A – from justice and education to housing and health. Future national agreements should leverage the profession's broad systemic influence, distinctive expertise, and capacity to drive a whole-of-government reform agenda into action.

### Accredited Mental Health Social Workers (AMHSWs)

The crucial contribution of AMHSWs to the delivery of mental health services remains both under-recognised and under-utilised. Feedback from consumers and carers in the interim report indicates that there are significant issues with affordability and access to care. There are currently 3,670 AMHSWs accredited across Australia, with many located in rural, remote and regional areas. Our survey data also indicates that AMHSWs have relative availability, indicating that there may be issues with recognition of their skills, experience, and capabilities by key referrers such as

GPs. This needs to be addressed to unlock access to mental health treatment for consumers and help to address the access issues identified in the report.

The current inequity with the Medicare rebate is also contributing to the unaffordability of mental health care via the Better Access Initiative. The Better Access scheme plays a crucial role in enabling community members to obtain mental health support, and it is encouraging that AMHSWs are recognised as approved providers. Nevertheless, a major theme raised by AMHSWs is that the discrepancy in the MBS rebates provided compared to other mental health professionals creates service access issues.

The rebate provided for AMHSWs is too low. Consequently, AMHSWs often must charge a gap fee to the service user, particularly for those who work in private practice and require a minimum amount for business continuity. This, in turn, impacts the accessibility and affordability of sessions delivered via Better Access.

For those members who do choose to bulk bill, this is often an ethical decision driven by a motivation to increase access to mental health services and reduce systemic barriers for people experiencing disadvantage. For example, member feedback indicated that they bulk billed service users who were experiencing family violence, single parents with low incomes, service users experiencing bereavement, older people on government payments and young people who have been unable to access other services. One respondent raised the negative impact of poor mental health on a person's financial circumstances. Another member indicated that it was necessary to bulk bill some service users to prevent them from ceasing therapy due to the unaffordability of the gap fee.

This inclination to bulk bill based on access and affordability also aligns with recent data released by the National Mental Health Commission, showing that nationally, in 2023-24, 20.4% of all respondents delayed or did not see any mental health professionals in the last 12 months due to cost. This has increased each year since 2020. Across Australia, the proportion of people who accessed MBS/DVA services was also lower for people in lower socioeconomic areas compared to higher socioeconomic areas,<sup>5</sup> suggesting that access to affordable mental health care may be reduced.

However, it is important to note that the decision to bulk bill has serious financial implications for members and is often unsustainable in the long term. We fear that some members have been forced to cease service delivery due to high costs and inadequate remuneration. Our recent research with members indicated that 75% of survey respondents experienced some form of impact on service provision because of the MBS rebate amount.

Another unintended consequence of the tiered MBS rebate levels is that service users are more inclined to book appointments with clinical psychologists and psychologists, and GPs are more likely to refer to them due to the larger rebate. This increases pressure on waiting lists, even though service users could receive mental health treatment sooner by seeing an AMHSW.

The Medicare rebate for AMHSWs must be increased to enable greater service access for consumers who are receiving mental health treatment via the Better Access scheme.

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<sup>5</sup> [13 Services for mental health - Report on Government Services 2025 - Productivity Commission](#)

## The need for national statutory registration of social workers

Social workers hold an incredibly important and often statutory responsibility as they work with vulnerable people, including young children and women who are at risk of harm, people who are at risk of suicide, people who are at risk of offending or reoffending, and others in highly complex and high-risk situations. There is little margin for error in settings in which violence, abuse and neglect are prevalent.

Currently, social work is a self-regulating profession in Australia. The AASW is committed to its role in setting and upholding the standards for social work practice and professional education; however, there are limitations to this regulatory model. Only the 17,000 members of the AASW are subject to the self-regulating functions of the AASW, with the remainder outside of a clear, consistent professional regulatory framework. Social workers must be qualified and work to the highest standards of practice for the health, safety and wellbeing of service users. There are significant negative consequences for service users and the public that arise from poor social work practice.

The AASW recommends that social workers be nationally registered to ensure public safety and support for people who work with them. This needs to occur via the National Registration and Accreditation Scheme (NRAS), administered by the Australian Health Practitioner Regulation Agency (Ahpra), alongside other health professions, such as psychologists and occupational therapists, with whom social workers often work closely.

We need the national registration of the social work profession for:

- **Public safety** - A public register of practitioners and protection of the title 'Social Worker' ensures that only those with the requisite education and training who practise safely and ethically can work as a social worker. The public is protected from misconduct and negative outcomes from poor standards of practice.
- **Professional capabilities** - All social workers are regulated against consistent, high-quality, national professional standards. Social workers will be required to maintain a program of supervision, continuing professional development (CPD) and adhere to recency of practice requirements.
- **Professional accountability** - Registration includes statutory powers to investigate professional misconduct and mechanisms to place conditions on practice or to ban a social worker from practising.
- **Workforce mobility** - National registration makes it easier for social workers to work across different states and territories in Australia. This provides consistent protections for the public and improves access to services in South Australia and in other states and territories.

National registration via NRAS would also facilitate more robust and systematic data collection, enabling greater workforce development and planning. Registration of the social work profession through NRAS is critical to unlocking the potential of the profession to support the Australian mental health system better and improve health outcomes. The AASW has strongly advocated for this reform as the singular most important and effective means of facilitating reforms in Australia.

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## Development of comprehensive national guidelines on regional commissioning and planning for PHNs

The AASW supports work to improve the commissioning and planning for PHNs across Australia, as we understand there are several issues impacting service delivery under the current processes. It should also be noted that the final report for the review of the PHN Business Model (closed for submissions on 22 January 2025) has not been released, which further hinders efforts to address the issues as identified in the interim report. The AASW has also received member feedback indicating that successful programs are being defunded without a communicated rationale, leaving consumers without access to services. This is highly unethical and can likely impact the safety and well-being of consumers. These practices must be addressed by developing comprehensive national guidelines on regional commissioning and planning for Primary Health Networks.

## Development of solutions for the gap in psychosocial supports

As noted, social workers make an immense contribution to the mental health sector and service delivery. They must be included when developing solutions for the gap in psychosocial supports. For example, as the foundation of social work practice is undertaking holistic psychosocial assessments, social workers have a deep understanding of the psychosocial needs of priority populations such as CALD and Aboriginal and Torres Strait Islander individuals and communities. By conducting these assessments and engaging with people in their own contexts, social workers gain insight into how culture influences an individual's presentation and understanding of mental illness, as well as the ways diverse cultural perspectives shape family and community dynamics.

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