

[REDACTED]

16<sup>th</sup> September 2019

[REDACTED]  
Minter Ellison  
Level 23,  
Rialto Towers  
525 Collins St  
MELBOURNE

Via email:  
[REDACTED]

Dear Madam

**Re: Nicola Gobbo**  
**DOB: 16/11/1972**

Thank you for your request for a report regarding Ms. Gobbo. Ms. Gobbo was referred to me in late 2009 for [REDACTED] in relationship to her [REDACTED] stroke (2004) by [REDACTED] and her GP, [REDACTED].

I am a clinical and counselling psychologist with [REDACTED] years of experience and have specialist qualifications/endorsements in [REDACTED] and clinical psychology.

I consulted with Ms. Gobbo regularly providing active psychological treatment (2-3 weekly) from 2010-2016. I continued to consult with her providing supportive counselling in 2017 (3 consultations), and 2018 (4 consultations). I had further contact from her in early 2019 and offered support and arranged for a referral for her to see a Clinical Psychologist [REDACTED].

Answers to your questions:

1. Since you gave evidence in the court proceeding in 2016, have any of the opinions which you expressed in your evidence changed? If so, please explain how your opinion has changed.

*I have not had the opportunity to review the transcript of my evidence given in the court proceeding in 2016. To the best of my knowledge however the opinions expressed then remain the same.*

2. In what circumstances did you first meet Ms. Gobbo?

*She was referred to me by [REDACTED] (via letter dated 11/12/09) who stated that Ms. Gobbo has "a major stressor in her life which has led to a significant deterioration in her [REDACTED] following a stroke in July 2004". I had my first consultation with Ms. Gobbo on 1/2/10.*

[REDACTED]



[REDACTED]

3. How did Ms. Gobbo present when your first met her?

*She was under stress due to her [REDACTED] and [REDACTED] and was taking [REDACTED]. She reported that she had had further health problems in early 2010 with [REDACTED] and had reported that she had been [REDACTED] due to concerns about her safety. She indicated that she had suffered suicidal ideation without intent.*

4. What was Ms. Gobbo's diagnosis when you first met her?

*She was suffering from Major Depressive Disorder [REDACTED]. She had low motivation, poor sleep and difficulties with concentration and memory related to somnolence from medications. She had also suffered lesions on her leg which her specialist was treating and were said to be stress-related and had been diagnosed with a perineal tumor. [REDACTED] referred her to a psychiatrist for review in April 2010.*

5. We understand that you ceased contact with Ms. Gobbo in May 2019. Prior to this time:

a) How often did you see Ms. Gobbo?

*I had approximately 60 consultations with Ms. Gobbo from 2010-2016. I was consulting with Ms. Gobbo as required in 2017 and 2018. I saw her for 4 consultations in 2018. The last time I saw her face-to-face was 17/12/18. I have had some SMS contact with her whilst I tried to refer her to another clinical psychologist [REDACTED]*

b) What care was Ms. Gobbo receiving?

*From 2010-2016, Ms. Gobbo attended myself, a psychiatrist (episodically), [REDACTED] a Dermatologist, an Oncological Gynecologist and her GP. Our sessions focused on [REDACTED] ( [REDACTED] stress management, pacing and routine, self-care and mood management. She had symptoms of PTSD and lived in fear for much of the time. By 2016 she had [REDACTED] children which she was caring for [REDACTED]. Both her parents had passed away and she was estranged from her sister. She derived support from a community of friends and neighbors and her [REDACTED].*

c) Did you have contact with her children?

*[REDACTED] When she attended appointments, she often brought the children with her particularly when they were very young. They were happy in session and she interacted appropriately with them.*

6. In respect of the period December 2018 to May 2019:

a) How would you describe Ms. Gobbo's mental health?

*Ms. Gobbo was very angry at Victoria Police, desperate and hopeless and reported that she had limited support [REDACTED]. I referred her to a colleague [REDACTED] and I believe she continues to consult that clinical psychologist whom she can see in person. Ms. Gobbo reported she was suicidal but lacked intent due to [REDACTED]*

[REDACTED]



[REDACTED]

the children, and that she was [REDACTED] to when we first met in 2010. She [REDACTED] with little personal support. She has not had secure accommodation.

[REDACTED] Her mental state is precarious. She is frightened for her life and [REDACTED] safety [REDACTED] and feels she has nowhere to turn to for help.

7. What matters adversely impact on Ms. Gobbo's mental health?

Ms. Gobbo has communicated to me that there have been recent threats [REDACTED] due to safety considerations. This has serious repercussions in terms of her suicidality. She has financial difficulties.

She reports she does not have a secure home or identity for herself or her [REDACTED] She focuses on her role as a mother [REDACTED] but reports poor sleep and ruminations about all that has happened to her pre-occupying her thinking. She reports she is depressed due to isolation and uncertainty and a sense of hopelessness and helplessness.

8. Is there anything else which you wish to add or address?

Not currently.

Yours sincerely

[REDACTED]

[REDACTED]

