

Submission to Psychology Board of Australia re:
Consultation Paper 5
Proposed revisions to the Guidelines on Area of Practice Endorsements

Dr Christopher Duffy

Correspondence to
Dr Christopher Duffy
PO Box 99 Kingsville
VIC 3012

Executive Summary

Australians have a record of excellence in many fields including sport, medicine, design and manufacture. I believe that we should continue this tradition in the field of psychology by continuing to promote the rich diversity of psychology areas of practice that have been a part of our psychology landscape in allied health care in Australia. This can be achieved by implementing two more areas of practice; those of health psychology and community psychology

Thank you for the opportunity to respond to Consultation Paper 5: Guidelines of Areas of Practice Endorsements and the opportunity to provide constructive comments. I agree with the proposed guidelines except for the issue of seven areas of practice endorsement. I believe that there should be nine areas of practice endorsement in line with the nine established and operating Australian Psychological Society (APS) colleges. I have provided a rationale and supporting evidence for this position as follows.

Constructive comments on guidelines - Additional Endorsements and Use of Title

There should be nine areas of practice instead of the seven approved for endorsement. These would include health psychology and community psychology. The following reasons outline the rationale for inclusion of these two additional (existing) specialty fields.

As the university courses conducted and leading to practice in these two specialty areas of practice area are APAC accredited and they meet the requirements for translation into the new national structure for psychology (as for the other seven selected endorsement areas).

These two areas of practice are longstanding specialist psychology disciplines satisfying recognition for Australian Psychological Society College membership requirements. They meet the requirements as health disciplines more so than some other endorsed areas of practice, such as sports psychology and organizational psychology both of which gained recognition as endorsed areas of practice. Just as sporting and organizational health need to be recognized so do the areas of health psychology by providing leadership role in the development and application of evidence-based psychological solutions to improve the health and wellbeing of the community (APS), and community psychology by supporting communities of people, and individuals within communities, as they face various challenges to their physical and mental wellbeing, such as drought, unemployment, violence and poverty (APS). It is difficult to

imagine that these two areas of practice cannot be relevant in our Australia context (particularly so in the rural and regional areas).

If these important and specialist areas of practice are neglected by the Psychology Board of Australia then Australians risk losing the rich and important diversity of academic and practical application of these two fields to other higher profile areas of practice (but not necessarily relevant to these two areas) both in university training and practical application of these skills and knowledge. It has become obvious that the onslaught of clinical psychology is already a threat to other disciplines due to the monetary incentives of the Medicare Better Access services for clinical psychology. The exclusion from the Guidelines on Areas of Practice Endorsements would spell the death knell for these two specialty disciplines.

Over a long period of time the psychology profession in Australia with the support and guidance of the peak body the APS has developed nine important and specialty areas of practice to meet the Australian public's psychological needs. This has not been by accident but rather by careful design. I strongly urge the Psychology Board of Australia to work hard to reinstate Health Psychology and Community Psychology the two remaining areas of psychology for practice endorsement.

To this end, I recommend that the Consultation Paper 5 be amended in the following areas:

Sect 1

Para 1: strike the word ~~seven~~ and insert the word nine.

Para 2: insert: "health and community psychology"

Sect 3.1.3

Include Health Psychologist definition here (see APS)

Include Community Psychologist (definition (see APS)

Attachment B

Include: (h) Health psychology

(i) Community Psychology