

10th April 2023

Australian Health Practitioner Regulation Agency National Boards GPO Box 9958 Melbourne, VIC 3001

RE: Public Consultation - Updating the Competencies for General Registration

The Australian Indigenous Psychology Education Project 2 (AIPEP-2) is pleased to submit this submission on the Ahpra review of the psychology competencies for general psychology registration. AIPEP-2 strongly supports the concerted steps towards supporting a stronger, competent, and progressive psychological workforce that benefits all Australians.

AIPEP-2 agrees with the rationales raised by Ahpra and PsyBA for the competencies to be updated. AIPEP-2 contends that there is a significant need for the psychology competencies to be radically reformed. This reform can support and improve wellbeing for Aboriginal and Torres Strait Islander peoples and psychologists, rather than burdening this cohort and privileging mainstream understandings.

Organisations such as the Australian Indigenous Psychologists Association (AIPA) and AIPEP-2 must be properly and genuinely engaged in the development, release and evaluation of the competencies, and AIPEP-2 assert that this suggested competency reform **will not be** sustainable without their involvement.

Please see AIPEP-2's recommendations, with comprehensive answers to the public consultation questions located <u>here</u>.

Recommendations:

Recommendation 1: Address systemic racism and decolonise mainstream psychology by updating the current psychology general registration competencies. Therefore AIPEP-2 supports option 2, which is to adopt the draft professional competencies for psychologists,

Recommendation 2: The establishment of an Aboriginal and Torres Strait Islander reference group to oversee and provide expertise on language, terminology, and updates to the professional competencies over time. It is recommended that the reference group includes partnership with AIPA and AIPEP,

Recommendation 3: Strengthen Aboriginal and Torres Strait Islander leadership in overseeing the continued development, implementation, and evaluation of all the competencies to ensure that Indigenous knowledge systems are embedded across each of the proposed competencies; scientific knowledge, ethical practice, assessment, intervention, communication, health equity and human rights approaches. Each of these areas (competencies) impact on Aboriginal and Torres Strait Islander populations,



Recommendation 4: Strengthen further Aboriginal and Torres Strait Islander leadership in overseeing the discrete competencies related to Aboriginal and Torres Strait Islander health equity and human rights,

Recommendation 5: Ensure greater accountability for the competency reform by utilising robust evaluation measures co-designed with Aboriginal and Torres Strait Islander researchers using Indigenous data sovereignty principles,

Recommendation 6: Cost and seek long term funding to support the competency reform processes. Ahpra PsyBA must support and/or advocate for resourcing of AIPEP-2. AIPEP-2 is time-limited and has already supported significant educational and practical reforms to embed cultural safety with Aboriginal and Torres Strait Islander peoples. Further resources will likely be required to support the implementation appropriately,

Recommendation 7: Improve the public consultation process by having targeted consultations, rather than an expectation, that groups will have the time to provide feedback to Ahpra and PsyBA. Consult with other disciplines who already have had traction in this area,

Recommendation 8: A communications and education strategy should be applied alongside the competency updates for psychology.

AIPEP background:

The **Australian Indigenous Psychology Education Project (AIPEP)** is an innovative Aboriginal-led project pioneering the way in transforming and decolonising higher education psychology across Australia. AIPEP-2 falls under Stream 2: Empowering the Workforce arm of the Transforming Indigenous Mental Health and Wellbeing grant. Stream 2 aims to empower the psychology and mental health workforce to deliver culturally safe care for Aboriginal and Torres Strait Islander Australians.

AIPEP-2 aims to transform psychology higher education by decolonising and Indigenising psychology curricula and increasing Aboriginal and Torres Strait Islander student participation in psychology education and graduation into the psychology workforce. AIPEP-2 works in close partnership with the Australian Indigenous Psychologists Association (AIPA). AIPEP-2 has established a national Community of Practice to support and empower Higher Education Providers (HEPs) transform psychology education and better meet the needs of Aboriginal and Torres Strait Islander students. Currently, 34 higher education providers (HEPs) have joined the Community of Practice, which is 80% of HEPs that offer APAC-accredited psychology courses.

We will be more than pleased to discuss this submission further. Reach us by emailing the AIPEP-2 team on aipep@uwa.edu.au.

Yours sincerely,

Tanja Hirvonen, Belle Selkirk, and Joanna Alexi,

on behalf of the AIPEP-2 governance and team.



Appendix 1

Answers to the questions posed in the public consultation.

Preferred option

1. Are you in support of updating the professional competencies for general registration? Please provide a rationale for your view.

Your answer:

Yes, AIPEP-2 are in support of updating the professional competencies for general registration.

The update of the new professional competencies for general registration is timely and necessary. Particularly in the areas of cultural safety in working with Aboriginal and Torres Strait Islander peoples. Psychology curriculum that supports the presence and strength of Aboriginal and Torres Strait Islander peoples and their true account is critical, noting that there is a lack of accurate or any education pertaining to Aboriginal and Torres Strait Islander peoples from year 1 to year 12. The Higher Education Providers' (HEPs) curriculum can challenge the field of psychology (decolonisation) by ensuring that there are courses that celebrate and introduce Indigenous psychology concepts.

Further understanding of behaviours of people as individuals, as communities, as families within the socio-economic political and national context will support psychologists to understand and appreciate diversity, similarities and differences. To not do this, may be at the detriment for both the psychologist and the people they work with in many areas, such as assessment, therapy, and support just to name a few.

Structure of the updated competencies

2. Do you agree with the approach to create a single document that lists all the professional competencies in one place?

Your answer:

Yes, AIPEP-2 agree with the approach to create a single document that lists all of the professional competencies in one place.

Any streamlined process or visual that supports and reflects the expectations and requirements is welcomed. This will improve access, openness and modernise the current curriculum.



For such changes in the curriculum standards and subsequent changes in the Areas of Endorsement having a single document is visually appealing, increases the ability to perceive and access the information easily and helps to minimise any distracting information.

3. The term 'threshold professional competency' has been introduced to describe the minimum professional competency necessary to practise safely and effectively as a registered psychologist in Australia. Do the Draft professional competencies sufficiently describe the threshold level of professional competency required to safely practise as a psychologist in a range of contexts and situations?

Your answer:

The draft professional competencies sufficiently describe the threshold level of professional competency required to safely practice.

Cultural safety and cultural responsiveness have been described, but more work needs to be conducted in how this is applied operationally or in direct practice. Many practitioners, HEPs and Aboriginal and Torres Strait Islander peoples across the nation have differing terminology and understanding about concepts of cultural safety and cultural responsiveness. Case studies and examples will be able to demonstrate this in action.

Reflexivity is a concept used to improve and learn with regards to cultural safety and cultural responsiveness. Therefore, the application of reflexivity must also be considered.

A communications and education strategy should be applied alongside the competency updates for psychology. We believe this will reduce the risk of misinterpretation and misunderstanding of concepts such as cultural safety and cultural responsiveness. Consistency in the application and understanding of cultural safety and cultural responsiveness is required for the psychology discipline to move forward, particularly when we are using these concepts to base a threshold for general psychology registration.

4. We have improved our approach to drafting the competencies to better align with international psychology regulators, to emphasise that the competencies are interconnected (holistic approach) and to improve how we write the competencies (e.g., using action verbs). Do you agree with the updated drafting approach?

Your answer:

Yes, AIPEP-2 agree with the updated drafting approach.

However, we would like to provide commentary to the interconnectivity between the competencies.



The multi-dimensional approach to the competencies needs to be reflected in the psychology curriculum inclusive of different psychological techniques, orientations, paradigms, epistemologies, and approaches.

5. The Draft professional competencies for psychologists have been written at a high level. This aims to provide both sufficient information for clarity and direction, but also be flexible enough to be relevant to the diverse contexts where psychologists train and work. Did we get the balance right? Please provide a rationale for your view.

Your answer:

AIPEP-2 <u>do not</u> agree that the balance is right and are strongly recommending that further direction and clarity is required.

The high-level drafted competencies are helpful; however, they are open to interpretation. With the introduction of areas such as cultural safety, cultural responsiveness and reflexivity, and self-care there will need to be more direction and more clarity. For some psychologists, they are still abstract concepts and there is little understanding of how to operationalise these concepts. If the concepts are not clear, there will also be difficulty in measuring them. Clarity will reduce subjectivity and minimise the potential for misunderstandings.

Further, these concepts are not taken lightly, and there is a concern that these could be seen differently across HEPs and across disciplines, and eventually could be viewed differently between practitioners (including Board approved supervisors). This could be a concern, particularly during assessment of the practitioners, during supervision and in practice.

It is recommended that PsyBA establish an Aboriginal and Torres Strait Islander reference group to collaboratively operationalise these concepts. This is vital in the implementation of the new competencies, including the education and capacity building of the psychology workforce. It is recommended that the reference group includes partnership with AIPA and AIPEP.

6. The Draft professional competencies for psychologists include a preamble (p. 3-10) and definition section (p. 16-19). Do you support this addition? Is the content clear, relevant and complete?



Your answer:

The preamble and definition section needs further clarification.

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There needs to be an accompanying document that provides clear understanding and examples of the definitions. The document relies heavily on language, and it can be a vehicle to either support or hinder the new competencies. The language and definitions used in this document has links to the new culture desired for the psychology discipline, therefore this section requires significant further work.

The definition section is missing some key concepts such as:

Aboriginal and Torres Strait Islander peoples Discrimination Equity vs Equality Cultural appropriation Culture Culturally informed Ethnocentrism Healing-informed Holistic health and wellbeing Indigenous Indigenous psychology Power Privilege Race Racism **Reflection vs Reflexivity** Self-determination Social and Emotional Wellbeing **Unconscious Bias**

7. Is the language and structure of the Draft professional competencies for psychologists helpful, clear, relevant, and workable? Are there any potential unintended consequences of the current wording?

Your answer:

The language and the structure of the Draft Professional Competencies for psychologists is somewhat helpful and relevant.

For the competencies to be workable there needs to be further clarity in the definitions and understandings for the cultural safety, cultural responsiveness, and reflexivity areas. There could also be further additions and modifications of some of the language in the competencies, to further



strengthen them. There would be utility in asking Aboriginal and Torres Strait Islander peoples to review them, in the context of decolonisation.

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Words and the way we use them can have a dramatic impact on how the new competencies are understood and how decisions are made. The words can influence and inspire the new generation of psychologists. The unintended consequences are that psychology educators of HEPs, registered and provisional psychologists, board approved supervisors, and psychologists in training, could potentially take on different meanings.

Relevance over time:

Definitions and language are constantly evolving - broadening, narrowing and as time progresses, historical definitions and language can also become negative. We would like to better understand whether there have been considerations to the update and review of the language and definitions described in the professional competencies.

Evaluation:

To better understand how psychologists are engaging with the proposed new competencies, and the outcomes and impacts of the competencies, evaluation of the competencies over time, with robust evaluation measures are needed.

We recommend that evaluation measures are co-designed in collaboration with an Aboriginal and Torres Strait Islander reference group at the introduction of the competencies. It is recommended that the reference group includes partnership with AIPA and AIPEP.

Organisation of the updated competencies

8. The Draft professional competencies for psychologists propose to reorganise the eight core competencies.

Are you in support of combining the current Knowledge of the discipline (Competency 1), and Research and evaluation (Competency 5) into a new competency: Applies scientific knowledge of psychology to inform safe and effective practice (updated Competency 1)?

Your answer:

Yes, AIPEP-2 is in support of combining competency 1 and competency 5 into new updated competency 1: Applies scientific knowledge of psychology to inform safe and effective practice.

We will provide the following commentary:

- 1. That this scientific knowledge also incorporates the acknowledgment that Indigenous knowledge systems are its own science and has existed for more than 60 000 years, and that this holds significant epistemological value.
- 2. That research on Aboriginal and Torres Strait Islander peoples has been used in a harmful manner in the past, and that any research relating to Aboriginal and Torres Strait Islander



peoples must be driven by Aboriginal and Torres Strait Islander peoples and communities as a matter of self-determination, sovereignty and governance.

- 3. Research ethics with Aboriginal and Torres Strait Islander peoples, including data sovereignty and Indigenous authorship, are a key competency area for understanding.
- 4. How to not appropriate Aboriginal and Torres Strait Islander people's knowledge systems etc.,
- 5. Cultural safety, cultural responsiveness and reflexivity is factored into this competency.

Recommended adding word epistemologies to descriptor 1.1: Possesses knowledge of psychological concepts, constructs, theories, *epistemologies*, models of intervention and methods.

Recommend adding *culturally informed* to list of definitions as this is noted in descriptor 1.4.

9. The Draft professional competencies for psychologists propose to place an intentional focus on professional reflexivity, deliberate practice and self-care (updated Competency 3). Do you support this proposal? Please explain why.

Your answer:

Yes, an intentional focus on professional reflexivity, deliberate practice and self-care is supported.

Again, clarification on what this looks like for psychology educators of HEPs, registered and provisional psychologists, board approved supervisors, and psychologists in training, is encouraged to support the intent of the updated competencies.

Professional reflexivity should be a stand-alone competency, however the practice of reflexivity is encouraged throughout all competencies.

Recommend further explanation of *professional* reflexivity, in particular clarity that reflexivity in professional roles includes inner inquiry of personal beliefs, biases, and assumptions. There is the danger this may be misinterpreted to reflexivity from a professional positionality only. When engaging in authentic reflexive practice, professional and personal positionalities are inseparable.

Recommend greater articulation that *reflexivity* differs to reflection, and that reflection is insufficient on its own in culturally safe professional practice.

Recommend that description 3.4 includes word reflexivity. For instance: *Engages in reflection and reflexivity* on the impact of one's own culture, values, beliefs and biases, and acts upon such reflection and ensures practice is responsive and adaptive to client, context, and culture.



10. The Draft professional competencies for psychologists include amended and expanded core competencies on Aboriginal and Torres Strait Islander health and cultural safety (updated Competency 7).

Is there any content that needs to be clarified, added, amended or removed? Please provide details.

Your answer:

7.1

No additional commentary for this competency.

7.2

No additional commentary for this competency.

7.3

Cultural safety needs to be clarified and operationalised with regards to what this looks like for psychological practice for psychology educators of HEPs, registered and provisional psychologists, board approved supervisors, and psychologists in training. It would be good to have examples and meanings in this section.

7.4

What are the differences between trauma-aware and healing-informed care? These concepts were not in the definitions section and will need to be clarified further as they are very open to interpretation. Also noting for consistency, use of term *culturally informed* in C1 descriptor 1.4.

7.5

Further clarification is needed. What are the learnings that will be needed to demonstrate this competency? There are restricted learnings from Indigenous knowledge systems etc.

7.6

No additional commentary for this competency.

7.7

In regard to consultation, Aboriginal and Torres Strait Islander peoples are the most over-consulted group in Australia. Perhaps knowing what consulting is appropriate and principles regarding consultation. This section may need to be reworded.

11. The Draft professional competencies for psychologists include an expanded core competency on working with people from diverse groups, including demonstrating cultural responsiveness (updated Competency 8).

Is there any content that needs to be clarified, added, amended or removed? Please provide details.



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Your answer:

Cultural responsiveness needs to be clarified. To provide helpful suggestions here, we would suggest a workshop, time, and resources. It is necessary that the content is reviewed before release, it is currently not fit for purpose.

What does it mean, how do you perform it and in which contexts can you use it?

Competencies and their descriptors

12. The Draft professional competencies for psychologists outline eight updated core competencies:

Competency 1: Applies scientific knowledge of psychology to inform safe and effective practice

Competency 2: Practices ethically and professionally

Competency 3: Exercises professional self-reflection and deliberate practice

Competency 4: Conducts psychological assessments

Competency 5: Conducts psychological interventions

Competency 6: Communicates and relates to others effectively and appropriately

Competency 7: Demonstrates a health equity and human rights approach when working with Aboriginal and Torres Strait Islander Peoples, families and communities

Competency 8: Demonstrates a health equity and human rights approach when working with people from diverse groups.

Do you suggest any changes to the eight core competencies and their descriptors? What would you like to see changed?

Your answer:

We recommend that cultural safety is embedded in all the competencies. We recommend that Aboriginal and Torres Strait Islander knowledge are also embedded, acknowledged and included across all of the competencies in some way.



Outcome of implementing the updated competencies

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13. We propose that an advanced copy of the professional competencies for psychologists would be published when approved, but not take effect until a later date. The estimated date of effect will be 1 December 2024. This coincides with the annual renewal date for general registration to make it easier for psychologists to plan their CPD and and for stakeholders to prepare to meet the updated competencies.

Are you in support of this transition and implementation plan?

Your answer:

This lead in time with the transition and implementation phase is critical.

This should and must be accompanied with a targeted communication strategy that takes into account diversity and how this applies to not only registered and provisional psychologists, but also psychology educators of HEPs, board approved supervisors, psychologists in training, and community (end-users).

There will need to be an extensive suite of resources and workforce capacity building/training options for psychology educators (HEPs), registered and provisional psychologists, board approved supervisors and psychologists in training to undertake during the implementation phase. The suite of resources and training may be different for each of these groups. For instance, psychology educators of HEPs and board approved supervisors will need specific guidance on how to teach and role model the new competencies. This may be challenging where there is limited existing research and resources. For instance, culturally safe and responsive psychological supervision with Aboriginal and Torres Strait Islander peoples.

Long term partnerships and collaboration with AIPEP-2 and AIPA are strongly recommended.

14. We have recommended changes to the *Provisional and General Registration standards* and the Guidelines for the 4+2 internship program to remove reference to the current core competencies for general registration and replace with the updated competencies (see Attachments F, G, and H). Are you in support of these changes?

Your answer:

Yes, AIPEP-2 are in support of these changes.



5. The Board proposes a transition process and timeframe for updating board documents with the new competencies including the:
• Guidelines for the 5+1 internship program (separate consultation in 2023)
• <i>Guidelines for the National Psychology Exam,</i> and <i>National psychology exam curriculum</i> (separate consultation in 2023/2024).
Are there any comments you have on the proposed consultation plan and transition timeframes?
Your answer: A good lead in time for the transition and implementation of the new competencies is important
 Psychology educators of HEPs to come on board and have the infrastructure in place for the proposed changes. Board approved supervisors to have increased knowledge and skills to provide guidance on new competencies, specifically health equity and human rights approaches when working with Aboriginal and Torres Strait Islander peoples, families, and communities. Psychology workforce organisations and service systems to provide adequate support and capacity building of registered and provisional psychologists, and psychologists in training. Organisations such as AIPA and AIPEP will be central in the capacity building of the current psychology workforce.
6. Are there specific impacts for practitioners, higher degree providers, employers, clients/consumers, governments or other stakeholders that we should be aware of, if the Draft professional competencies for psychologists were to be adopted? Please consider both positive impacts and any potential negative or unintended effects in your answer.
Your answer:
The impacts should be more concerned with the end users - which are the public. The expectation is that the changes will ensure that the impacts of psychologists providing psychological care will be helpful and positive.
Lack of standardisation:
This is the risk with the definitions being too high level. The consistency across the nation and discipline will differ.



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Teaching skills:

Psychology educators of HEPs will need to learn more skills to support the competency changes - which in turn will necessitate curriculum change. AIPEP will continue to provide support to HEPs in decolonising and Indigenising psychology curricula.

17. Would the proposed changes to the Draft professional competencies for psychologists result in any potential negative or unintended effects for Aboriginal and Torres Strait Islander Peoples or other priority groups in the community? If so, please describe them.

Your answer:

Political Adjustment:

The political ideals in Australia have evolved. Australia has a colonial history that it still needs to come to terms with. As the disciplines in E-health and wellbeing move forward, this will help to move Australia forward to inclusivity, self-determination, and a true human rights movement.

Resourcing/Lack of appropriate knowledge:

The unintended outcomes for the competencies that consider Aboriginal and Torres Strait Islander content and data. HEPs will need to consider curriculum updates, and there will be an expectation that the current Aboriginal and Torres Strait Islander psychology (or health and wellbeing) workforce manage this new workload, with inadequate resourcing and remuneration. That this would be an added duty to their already busy workload.

Funding supports:

Organisations such as AIPA may require funding by Government and organisations such as AIPEP should be further funded to support the additional workforce pressures. PsyBA may be unintentionally leveraging on organisations to pick up this load.

Cultural load:

There is a concept termed cultural load, whereby there will be an additional workload by Aboriginal and Torres Strait Islander psychologists because there is little resourcing to resource these changes effectively. Or alternatively, the changes are made or supported in HEPs with and by non-Indigenous peoples with a non-Indigenous lens - this counteracts the whole movement - to become more culturally safe and inclusive.

18. Would the proposed changes to the Draft professional competencies for psychologists result in any adverse cost implications for practitioners, patients/clients/consumers or other stakeholders? If yes, please describe.



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Your answer:

There are always implications for changes to competencies. Sometimes these are not known until the competencies are released. It would be good to have transition time for release and ability for evaluation.

The foreseen implications are if the concepts are misinterpreted, misapplied, and misused in any way. The competencies are there to protect the public, but there is an unintentional risk if they are not clarified appropriately.

Other

19. Do you have any other feedback or comments about the Draft professional competencies for psychologists?

Your answer:

Cultural safety, cultural responsiveness and reflexivity can be utilised in each of the competencies that have been re-drafted.

This is an exciting time for the psychology discipline, and updating the competencies is a very opportunistic time to get this right for the next generation. Spending the time consulting with focused consultations with the community (end-users) would enhance this consultation process.