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Submitted to Online Survey - Development of national standards for counsellors and psychotherapists Submitted on 2024-07-04 23:51:50

Introduction

1 What is your name?

Name:

Shyamala Dhamarla Venkata Subba Rao

2 What is your email address?

Email:

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3 What is your organisation?

Organisation:

Mithrah Holistic Services

4 Which of the following best represents your role (select all that apply):

Counselling and/or psychotherapy practitioner, Other counselling professional (i.e. psychologists, nurses, occupational therapists), Lived experience worker (i.e. peer support worker, consumer or carer consultant), Other (please specify below)

Please limit your response to 1000 characters or less:

Mental Health Practitioenr with post graduate qualifications in all three main areas: Psychology, Counselling, and Medical Psychiatric Social Work

5 Could you communicate the core purpose for why counselling and psychotherapy professions exist, the main ways that you engage with counsellors and psychotherapists in your work, and why standards might assist that?

Please limit your response to 2000 characters or less:

My work with these professionals includes:

Information and Education:

Providing updates on therapeutic techniques and psychological concepts to keep counselors informed and effective in their practice. Support in Treatment Planning:

Assisting in developing tailored treatment plans based on client needs, drawing on my extensive qualifications in mental health. Practice and Skill Development:

Conducting simulated therapy sessions to refine counselors' skills and explore different therapeutic approaches. Client Resources:

Serving as a supplementary resource for therapists using technology in therapy, ensuring continuity of support for clients.

Importance of Standards:

Ensuring Quality of Care:

Standards define expectations for knowledge, skills, and ethical conduct, ensuring high-quality care and professional competence. Protecting Clients:

They establish guidelines for confidentiality, boundaries, and ethical practice, safeguarding client well-being from inadequate training or practice.

Promoting Accountability:

Standards foster ethical responsibility and ongoing professional development, enhancing trust between practitioners and clients.

Facilitating Collaboration:

They provide a common framework for communication among professionals, promoting best practices and a cohesive community.

Educational Standards Concerns:

Direct entry into Master's programs without a foundational Bachelor's degree in counseling or psychotherapy risks inadequate preparation for complex client needs. Shortened Master's programs with integrated internships may lack depth compared to longer, comprehensive programs covering psychological theories and assessments.

Specialized programs like art therapy, while beneficial, complement rather than substitute for core mental health education necessary for comprehensive client care.

In short, standards safeguards client welfare and promotes a unified, competent mental health profession.

6 Which Australian state or territory are you based?

New South Wales

7 If you are a practitioner, are you a member of a peak body?

Yes, other peak body

8 If you are a practitioner, are you open to discussing your experiences and insights further? If so, you may be invited for an interview, up to 1 hour at a time that suits you.

Yes

9 Do you practice, teach, or observe specific standards or frameworks that relate to counselling and psychotherapy services? For example, scopes of practice, training standards.

Yes

If answering yes, please describe in the text box below the specific standards or frameworks you use and how they work in practice.:

Standards play a crucial role in the counselling and psychotherapy professions for several reasons:

For example, I am a member of Professional peak bodies and adhere to the Continuous Professional Development (CPD) and supervision standards expected of my professional services.

Professional membership in Australia and India

Australia: Assoc Member of APS, Full Member of ACWA, Affiliate member of AAPi

India: Life member of InSPA, NAPSIndia, and NAPSWI

My Professional Qualifications:

Counselling: Diploma of Counselling (TAFE NSW), Graduate Diploma in Counselling (Health and Social Care) at the University of New England

Psychology and Counselling: BSc (Psychology).,PG Dip in Psych Couns., MSc(Psychology) (assessed successfully by APS)

Psychiatric Social Work and Counselling: MSW (Medical and Psychiatric Social Work) (ACWA recognised)

In my practice, I not only use focused psychological strategies (FPS), but also use various mental health frameworks backed by my education.

- I take annual supervision regularly f
- I take CPD
- I do relevant first-aid courses every year
- I take professional indemnity and public liability insurance
- I am part of active private mental health forums of my professional associations
- \bullet I follow the scope of practice expected of my professional association
- The professional associations such as APS and AAPi help me deliver my practice up to the standards of their members who are similarly qualified.
- I am also a full member of the Australian Community Workers Association as I specialise community mental health services (ACWA is the skills assessing authority for community services professionals applying to migrate to Australia under select occupations. https://www.acwa.org.au/migrants/)
- I provide referral service when i don't have the capacity

10 In your opinion, what are the main strengths of the current arrangements?

Please limit your response to 2000 characters or less:

Advantages of Unregulated Counseling and Psychotherapy Professions:

Accessibility and Flexibility:

Fewer entry barriers promote diversity and flexibility in practitioner backgrounds, offering a broader range of therapeutic approaches.

Innovation and Diversity of Practices:

Unregulated environments foster innovation in therapy techniques, catering to diverse client needs with varied approaches.

Autonomy and Independence:

Practitioners have autonomy to tailor treatment plans without rigid regulatory protocols, enhancing personalized client care.

Reduced Administrative Burden:

Less regulatory bureaucracy allows practitioners to focus more on client needs rather than administrative requirements.

Client Choice and Freedom:

Clients can choose therapists based on personal preferences, values, and therapeutic styles, promoting client-centered care.

Potential Lower Costs:

Absence of regulatory fees may lead to more affordable therapy options, potentially reducing overall treatment costs.

Community and Peer Support:

Professional networks provide guidance, collaboration, and continuing education, fostering a supportive practitioner community.

Adaptability to Emerging Needs:

Agility in responding to emerging societal needs enables quick adjustments to offer relevant client support.

While these advantages support a flexible and diverse therapeutic landscape, practitioners in unregulated professions must uphold ethical standards, pursue ongoing development, and prioritize client welfare for safe and effective therapy practices.

11 In your opinion, what are the main challenges with the current arrangements?

Please limit your response to 2000 characters or less:

Lack of Consistent Standards: Without regulation, there are no uniform standards for education, training, or practice quality, leading to variability in service delivery and client outcomes.

Potential for Inadequate Training: Practitioners may enter the field without sufficient education or training, raising concerns about their ability to address clients' needs effectively and safely.

Risk to Client Safety: Lack of regulatory oversight increases the risk of clients receiving substandard or inappropriate care, potentially compromising their well-being.

Ethical Concerns: Absence of standardized ethical guidelines may result in ethical breaches such as boundary violations or conflicts of interest, impacting client trust and practitioner credibility.

Limited Accountability: Without regulatory bodies or licensure requirements, mechanisms for addressing complaints or ensuring practitioner accountability are limited, affecting client protection and professional standards.

Public Trust and Confidence: The absence of regulation may undermine public trust in counseling and psychotherapy professions, deterring potential clients from seeking services.

Professional Development: Regulatory frameworks typically mandate ongoing professional development, ensuring practitioners stay updated on best practices and ethical standards, and enhancing service quality.

Integration into Healthcare Systems: Regulated professions (e.g AHPRA) integrate more effectively into healthcare systems, enabling comprehensive client care. Unregulated professions may face barriers to integration, limiting their ability to provide comprehensive care and referral pathways for clients requiring medical or specialized interventions.

In conclusion, while some unregulated practitioners may demonstrate competency and ethical practice, the lack of regulation poses risks to both practitioners and clients.

12 The objective of the national standards is to define national minimum standards for education, supervision, continuing professional development, and oversight requirements to ensure quality, safety and confidence in the counselling and psychotherapy professions. Does the objective meet your expectations? Are there any adjustments that need to be made?

Please limit your response to 2000 characters or less:

It is commendable to initiate regulatory frameworks, but decisions shouldn't rest solely on submissions or discussions with a select few associations claiming peak body status in mental health. These groups may mislead by implying they represent counseling or psychotherapy standards. Membership in such associations isn't mandatory for practicing professionals, akin to psychologists not needing association membership if registered with AHPRA.

Therefore, the government should incorporate input from all qualified counselors, like myself, regardless of association affiliation. Professionals should have the freedom to choose their association. Creating a mental health agency akin to AHPRA, accommodating various mental health degrees including advanced ones, is essential. Courses endorsed solely by associations like PACFA or ACA shouldn't automatically qualify; government endorsement would ensure fairness and reduce unfair competition.

Furthermore, a Master's degree without a relevant Bachelor's shouldn't equate to a Master's qualification in the field; it's merely 1/1.5/2 years of direct mental health education, depending on the course structure and duration. Internships and placements, while valuable for practical application, aren't

educational qualifications on their own. This setup lacks equity, as diploma holders from TAFE may possess comparable practical skills to Master's graduates, undermining both professionals and consumers.

Critically, counseling internships often lack supervision by qualified counselors, unlike AHPRA-regulated professions where trainees work under qualified professionals (e.g., psychologists under psychologists, GPs under GPs).

13 Which professional disciplines should be captured by the national standards?

Counsellors, Only specified categories of counsellors (please describe below), Psychotherapists, Only specified categories of psychotherapists, (please describe below), Other (please describe below)

Please limit your response to 1000 characters or less:

Psychoanalysts, Psychological Counsellors, Psychiatric Social Workers, and Mental Health Community Workers who have similar or more university level qualifications in mental health sector such as Counsellors and Psychotherapists

14 What areas should be captured by the national standards?

Education and training, Client rights, Competence, Continuing professional development, Quality of care, Ethical conduct, Cultural competency, Other

Please describe in the text box below why these areas are important.:

- 1) Registration with a legally binding regulatory agency such as AHPRA
- 2) Removal of the need to join any professional association as in the case of psychologists who have the freedom not to become a member of any professional association and yet practice a regulated profession.
- 3) Supervision standards those who received supervision from qualified, trained and full members who were registered professionals and registered supervisors should alone be considered as valid supervision. The placement or supervision that is done by the unregulated professional and less qualified professional should not be considered as supervision.
- 4) Fair and transparent complaint procedures supported by legal systems and legal tribunals. The outcomes and investigations must be published transparently so injustice is not served.
- 5) Cultural competency must include religious, secular and specific community-based views without any discrimination and should not favour English and English-centric views even though English is a predominant language in Australia. The non-English-speaking consumer population is growing in Australia. the mental health and community service professions must not be limited to only English-speaking professionals. Mental health professionals from all races, languages, and communities must be given equal opportunity to practice (CALD communities, LGBTQ+)
- 15 Which areas should not be captured by the national standards?

Other

Please describe in the text box below why these areas should be excluded.:

Discrimination: The profession "counselling" and "psychotherapy" cannot be regulated solely on the recommendations of self-regulating associations. Mental health practitioners acquire these skills through their academic degrees that come from various disciplines such as psychology, behaviour science, and psychoanalysis. A foundational 4-year graduate-level education in mental health should be the minimum standard.

Unlike mental health sciences, which encompass disciplines such as psychology, psychiatry, and medicine, counselling does not typically involve the diagnosis or treatment of severe mental illnesses, complex psychological disorders, or psychiatric conditions requiring medical intervention. Hence, it should not be conflated with the rigorous academic training, diagnostic capabilities, and therapeutic interventions provided by highly qualified professionals in the mental health sciences. Counselling is best understood as a valuable field within the larger framework of mental health care.

Immunity based on membership - The government should not encourage negotiations with associations such as PACFA, ACA, AASW, APS, AAPi, ACWA, and ASORC to grant special privileges to their self-regulating members over those who are not registered with them. Associations sometimes prioritize their members' interests, potentially restricting membership to maintain control and competitive advantage, even for other similarly or more qualified members. Membership in counselling associations does not guarantee that the members are equally or adequately qualified.

A regulatory body akin to AHPRA should assess qualifications, internships under qualified supervisors, ongoing supervision, CPD requirements transparently for all applications. Discrimination against highly qualified professionals who are not part of professional associations such as PACAFA and ACA should be avoided, with assessed qualifications publicly displayed for transparency by the regulatory agency.

16 Who should have oversight of the national standards?

Australian Government, Other (please describe below)

Please limit your response to 1000 characters or less:

Australian Government appointed regulatory body such as AHPRA. All self regulating and self appointed professional associations should be excluded to ensure transparency and fairness. It is an unregulated industry and hence many professional may have chosen to self regulate themselves. AHPRA excludes even the regulated professional associations such as APS and AAPi as associations always have personal agendas based on the interested of certain influential member groups and office bearers.

17 In your opinion, how do you think education on these standards should occur?

Please limit your response to 2000 characters or less:

Bachelor's Degree (First Degree): A foundational requirement for counselling and psychotherapy is a Bachelor's degree in fields like Psychology, Counselling, Social Work, Behavior Science, Psychoanalysis, or related disciplines specializing in mental health. This degree provides foundational skills and basic internship.

Postgraduate Degree (Enhancement of Skills): After completing a Bachelor's degree, aspiring professionals can pursue a postgraduate degree (e.g., Postgraduate Diploma, Master's degree). This level of education enhances clinical skills, deepens theoretical understanding, and includes clinical internships.

Master's Degree (Advanced Qualification): Essential for advanced competencies in therapeutic techniques, assessment, diagnosis, and treatment planning. A Master's degree typically includes supervised clinical practice and prepares graduates for licensure or certification in many jurisdictions.

Continuing Professional Development (CPD): Upon entering the profession and joining recognized associations, practitioners engage in ongoing CPD. This ensures they stay current with research, ethical standards, and best practices through workshops, seminars, conferences, and supervised practice hours.

PhD (Optional for Advanced Research and Practice): Recommended for those interested in research, academia, or advanced clinical practice.

Additional Skills Enhancement: Diplomas or certificate Courses in specific therapeutic modalities (e.g., Cognitive Behavioral Therapy, Family Therapy, Art Therapy) complement main qualifications. These courses offer specialized training but do not substitute foundational degrees.

Importance of Sequential Education: Progressing from a Bachelor's to a Master's degree ensures comprehensive knowledge, clinical skills, and ethical grounding. A direct Master's without foundational education may not adequately prepare individuals for counselling complexities.

These standards support professional competency.

18 In your opinion, should compliance with the national standards be voluntary or mandatory for all counselling professions?

Please limit your response to 2000 characters or less:

Effective regulation and compliance with national standards are crucial for ensuring the safety, quality, and accountability of counselling and psychotherapy services, especially when funded by govt programs like Medicare and NDIS.

Protection of Clients: Vulnerable clients, including those accessing services through Medicare or NDIS, rely on professionals for essential mental health support. Compliance with national standards ensures care from qualified practitioners who adhere to ethical guidelines, maintain competence, and prioritize client welfare.

Risk Mitigation and Liability: Govt-funded programs have a responsibility to ensure effective use of taxpayer money. Mandating compliance with national standards mitigates risks of substandard care, ethical violations, and harm to clients, reducing liability and enhancing public trust in mental health services.

Consistency and Quality Assurance: A regulatory body overseeing mental health professionals with similar qualifications ensures consistency in standards of education, training, and practice. This promotes uniformity in service delivery, enhances quality assurance, and facilitates collaboration among practitioners.

Professional Accountability and Ethics: Compliance with national standards reinforces professional accountability, requiring adherence to ethical codes, ongoing development, and transparency. This fosters ethical responsibility and trust between practitioners, clients, and regulatory bodies.

Streamlined Oversight and Governance: Establishing a single regulatory body streamlines oversight of licensing, accreditation, & disciplinary processes. This ensures practitioners meet rigorous standards throughout their careers.

Enhanced Public Confidence: Mandatory compliance enhances public confidence in counselling and psychotherapy services. Accredited practitioners have met criteria for education, training, and ethical practice, supporting informed decision-making and access to safe care.

19 What does the Department need to consider to ensure the change from existing arrangements to national standards are successful?

Please limit your response to 2000 characters or less:

Mental health education spans diverse disciplines like counselling, psychotherapy, psychology, social work, and related fields. Degrees labeled as "counselling" or "psychotherapy" offer specialized training but aren't exclusive qualifications for practice. Effective care also integrates insights from psychiatry, psychology, social work, behavioral science, psychoanalysis, and general medicine.

This interdisciplinary approach fosters a comprehensive grasp of human behavior and therapeutic interventions, promoting collaboration among professionals with varied expertise. Practice eligibility hinges on ethical competence, clinical skills, and adherence to standards, verified through accredited education, supervised experience, and ongoing development. Embracing diverse educational backgrounds ensures compassionate and effective mental health care.

The Australian government must consider several key factors to successfully transition from unregulated arrangements in counselling and psychotherapy

to national standards. Firstly, establishing a robust regulatory framework with clear standards for education, training, and practice is crucial. This includes defining eligibility criteria and accreditation processes for practitioners.

Secondly, implementing a phased transition period allows current practitioners to meet new requirements, ensuring continuity of care while upholding public safety.

Thirdly, fostering stakeholder engagement and consultation ensures that the regulatory framework reflects diverse professional perspectives and addresses industry concerns.

Lastly, providing adequate resources and support for training, accreditation, and compliance helps practitioners adapt to and comply with new standards, promoting accountability and quality in mental health services.

20 Noting that we will be talking with advocates of people with lived experience, what role might people with lived experience and their representative bodies have in the implementation of these standards?

Please limit your response to 2000 characters or less:

People with lived experience and their representative bodies can play a crucial role in the implementation of standards for counselling and psychotherapy. Here are some key roles they might fulfill:

Advocacy and Feedback: They can advocate for standards that prioritize client-centered care, informed by their own experiences. Their feedback can ensure that regulatory frameworks consider the needs, preferences, and rights of clients.

Consultation and Input: In the development of standards, their input can provide valuable insights into what constitutes effective and supportive therapeutic practices. Their perspectives can guide the creation of standards that are responsive to real-world client needs.

Quality Assurance: They can participate in monitoring and evaluation processes to assess whether standards are effectively improving service quality and client outcomes. This involvement ensures that standards remain relevant and impactful over time.

Education and Awareness: People with lived experience can contribute to public education campaigns about the importance of regulated counselling and psychotherapy services. They can help reduce stigma, increase awareness, and promote informed decision-making among potential clients.

Policy Advocacy: Their representative bodies can advocate for policies that support equitable access to quality mental health services. They can work with government agencies to ensure that regulatory frameworks promote fairness, transparency, and client safety.

Overall, involving people with lived experience and their representative bodies in the implementation of standards ensures that regulatory efforts are client-focused, inclusive, and responsive to the diverse needs of individuals seeking mental health support.

21 Do you have any further comments about the development of national standards for counsellors and psychotherapists?

Please limit your response to 2000 characters or less:

Ensuring clarity over competence in the mental health industry is crucial. Allowing individuals with diverse qualifications like art therapy, hypnosis, or community mental health to join as counselors in peak body associations can lead to inconsistent standards. For example, someone with a degree in art therapy may be considered on par with a psychology graduate, despite differing levels of training.

This practice undermines clear standards in counseling/psychotherapy. While these techniques are valuable tools, they do not provide the comprehensive training needed for complex mental health issues. This ambiguity confuses clients seeking support and risks compromising care quality and consistency. Such practices can also lead to ethical concerns and erode trust in the profession.

Transparency in qualifications is essential. Self-regulatory associations allowing members to self-assess and declare themselves as counselors based on varied qualifications can create confusion. Policies in associations like ACA and PACFA granting immunity based on loyalty rather than qualifications pose risks. Clients may question practitioners' competence, deterring them from seeking help and impacting care quality.

Clear, standardized qualifications are crucial for effective mental health support. Ambiguous practices risk harm when inadequately trained professionals present themselves as mental health practitioners. Additionally, many professionals avoid self-regulating associations due to bureaucracy, politics, and discrimination. Their insights are valuable in establishing national standards, and ensuring fair and inclusive regulation in counseling and psychotherapy. I have evidence and experience of professional negligence within self-regulated associations, which I'm willing to discuss further. I would also recommend the department not to consider associations such as ACA and PACFA as sole in charge for counselling industry.