Dear Senate Committee,

Re: Increased public access to Neuropsychological services and specialist endorsement of Neuropsychologists by the Psychology Board of Australia.

I am writing to advocate for increased public access to neuropsychological services, particularly for minority and disadvantaged populations, and to state my support of and absolute recommendation for specialist endorsement of neuropsychologists by the Psychology Board of Australia. I am a Doctor of Clinical and Clinical Neuropsychology trainee currently enrolled at the University of Western Australia.

Neuropsychology is a growing field in Australia but one that is much more established and recognised further abroad, for example, in Europe and the U.S. Neuropsychologists provide a unique perspective on the integration of brain injury or disease and psychological functioning. Neuropsychology relies heavily on a specific understanding of the neuroanatomical and neurological components underlying a range of significant diseases/disorders such as Alzheimer's disease, Parkinson's disease, Attention Deficit & Hyperactivity Disorder and Epilepsy. Additionally, many Neuropsychologists are involved in the assessment, diagnosis, treatment and rehabilitation of patients who have sustained head trauma or stroke. A neuropsychological assessment is not only informative to the client, who may have concerns about memory loss and dementia onset, decreased motivation following a stroke, or personality changes after a head injury, but can also inform multidisciplinary teams on appropriate rehabilitation approaches and in differential diagnoses, to ensure precious resources are used in a way that will maximally benefit patients. A Clinical Neuropsychologist is able to use their specific expertise, gained from extensive theoretical and practical training, to make targeted assessments and relevant recommendations based on the individual needs, concerns and situations of clients, not just based on test results. It has an important role within our health care system and hospital teams in providing specific, appropriate services in relation to the head injury or disease.

Training to become a Clinical Neuropsychologist is extensive. On top of completing a three year undergraduate degree, followed by an Honours year, applicants must also, if accepted, complete at least two years of postgraduate study with a focus on neuroanatomy, neuropsychological disorders, neuropsychological assessment, and rehabilitation. In addition, students also have to complete to standard numerous and varied supervised placements as well as generate a substantial research thesis. In other countries, for example in the U.K. a psychologist must complete Doctoral level study in order to even have the title of 'psychologist'. I strongly believe that Australia should be progressing and increasing the standards in the profession of psychology, not compromising them by removing recognition of higher training by eliminating specialist title. The specialist knowledge and rigorous assessment that comes with postgraduate responsibilities is worthy of recognition. This doesn't only apply to the specialist field of neuropsychology as training in neuropsychology also does not equate to training in clinical or organisational psychology. Without specialist endorsement the public is put at risk of being misdiagnosed, having diagnoses missed, and not receiving services appropriate to their needs. We all have our own areas of unique training and expertise which need to be recognized under specialist endorsement, not overturned by the large numbers of generalist psychologists, who are not "endorsed."

On a different note, I would also like to highlight that access to Allied Psychological Services program does not cover the psychological needs of people with neuropsychological disorders. The World Health Organization have disclosed that neurological disorders and
disease account for the largest proportion of medical disability in the developed world, yet Australians with these conditions have been neglected by the Mental health funding initiatives of recent years. Neuropsychological assessment and treatment can inform the treatment undertaken by a Clinical Psychologist for the same patient. Additionally, neuropsychological disorders (e.g., cognitive/behavioural difficulties due to neurological, medical or developmental disorders) are not considered the same as mental health disorders by the mental health funding scheme, however neuropsychological disorders have significant mental health ramifications, such as the experience of adjustment issues, anxiety, depression, postictal psychosis and so forth. People with neuropsychological disorders often have disabilities that are life-long, and sometimes progressive, with major ramifications to their psychosocial adjustment, education, careers, and families. Their needs are not being met by the focus on only providing psychological assistance to people with mental health disorders.

Additionally, there are not enough services in the community available to support people with neuropsychological disorders, especially those with non-compensable conditions, or those aged under 65. People with acquired brain disorders, for example, often struggle to access community services and those requiring supported and residential care find that the options available are limited and lacking.

The relatively small neuropsychology workforce means that linguistically diverse communities, indigenous communities, and rural and remote Australians may not be able to access such health services. Without enough neuropsychologists, a significant portion of the general public will be missing out on important health services. The focus of providing psychological services to people with mental health conditions effectively discriminates against those people suffering from neuropsychological conditions. Neuropsychology clients have a specific need for therapeutic psychological interventions, but are currently severely underserviced.

Thank you for the consideration of the points addressed in this letter. Together with my peers in neuropsychology I hope that you will consider the importance of providing better access to neuropsychological services as well as recognise how crucial maintaining specialist title registration is for all postgraduate trained clinicians and for the health and safety of the wider community.

Yours sincerely,

Kia Pfaeffli

-  

DPsyC (Clinical/ Clinical Neuropsychology) Trainee