

Law

FEEDBACK: FROM THE CONSEJO GENERAL DE LA PSICOLOGÍA DE ESPAÑA (General Council of Psychology of Spain)

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The General Council of Psychology is an official organisation that legally represents 95,934 psychologists before national and European authorities. It has been given the responsibility by the Ministry of Health to evaluate the applications of those European Union psychologists who have decided to migrate to Spain and practise the regulated professions of Psicólogo General Sanitario (Health Psychologist) and Psicólogo Clínico (Clinical Psychologist).

Facilitating labour mobility within the European Union responds to the real need for countries that urgently require skilled labour to obtain it by reducing or eliminating the bureaucratic hurdles, avoiding the need to maintain their own permanent—and costly—training resources. However, this type of solution creates a serious problem in the labour markets of those countries whose education systems train enough professionals to meet their needs, especially in the area of healthcare. In the event that the Qualifications Recognition Directive could seriously harm other EU member states and third countries, the intended changes should be reconsidered, and the possibility that certain universities in EU countries will stop offering degrees that do not have reference activities in today's economies should be considered. In fact, what is being suggested is that education systems should be adapted to the labour needs of each country.

It is understood that the approval of the Recognition Directive has introduced a new procedure to facilitate professional mobility—mobility that in some professional areas does not pose a threat to the integrity and well-being of individuals. In the field of health, however, where this may indeed be the case, it is absolutely necessary that the emigration of professionals from other EU member states or third countries be subject to the system and set of evaluation requirements derived from the aforementioned Directive or from the shared system of Common Frameworks of Training. Both assessment systems are appropriate: the first, relating to the individualised recognition of professional qualifications, seems apt when only part of a profession's activity is regulated; and the second, when the profession's activity is regulated in its entirety.

In the case of psychology, although all its activities are aimed at improving the well-being of the population, regulation is partial for the degree and total for the areas of health psychology and clinical psychology. This is an unusual situation, and the General Council of Psychology and the European Federation of Psychologists' Associations advocate the need to create a CFT for the profession throughout the EU and to regulate psychology as a health profession.

Current experience shows little demand for our profession from EU migrants, but significant demand from Latin America. The former typically pursue qualification recognition, while the latter must undergo mandatory homologation.

If the recognition of professional qualifications were a less hostile route for migrants from third countries, a fairer—though not easier—option would be to opt, for the most part, for recognition in order to establish oneself in a regulated professional field, that of General Health Psychology.

This leads us to an analysis of the requirements used over time to assess applications for the recognition of professional qualifications in the regulated area of Health Psychology, the positive evaluation of which gives access to professional practice as a General Health Psychologist.

The first requirement is the assessment of curricular similarity. The comparability of the application is carried out step by step, checking the total number of credits taken by the applicant, the number of those that can be defined as health-related, both at undergraduate and master's level, similarity in the number and content of subjects, and hours of supervised practice and professional practice. Curricular similarity is verified and compared with the contents of the General Health Psychologist training programme, which requires a degree of 240 ECTS, 90 of which must be health-related, and this is exclusively for the purpose of accessing or studying the Master's Degree in General Health Psychology, a specific 90 ECTS master's degree enabling professional practice with the same title in Spain.

For clarification, we must emphasise that possession of a bachelor's degree (including the 90 specific health credits) does not give access to the practice of the profession in the health field. Therefore, the CV to be submitted by the applicant for recognition must demonstrate that both their bachelor's degree and the master's degree completed in their country of origin correspond to a percentage of similarity with the content of the curriculum in the country where they intend to practise.

Our experience in evaluating this first requirement reflects the difficulty of matching the names and content of the subjects, which rarely correspond to the content of those subjects in our curriculum. This requires an enormous effort of research and analysis of cases from different countries, universities and traditions within the EU's educational space. Accordingly, the international recruitment of psychologists (from our point of view, not necessary in Spain) should, as a minimum, meet the same requirements prescribed for the European psychological workforce. Filling positions without a proper evaluation of the education received in third countries may not be adequate to give patients the quality care and safety they need.

The second requirement deals with the analysis of the number of hours dedicated to university-supervised practice and specialised professional practice, the latter being necessary to achieve correspondence with the regulated title of Health Psychologist. The General Council of Psychology (COP) wishes to convey the message that these two requirements, together with one year of professional experience, have proven most difficult for migrant applicants to fulfil. To ensure compliance with these requirements, supplementary measures—as prescribed by the Directive—were required in numerous cases.

Once the first steps have been evaluated, it is time to consider the applicant's ability to communicate in the language of the country where they have decided to settle and work. Applicants should be able to demonstrate a profound knowledge of the language they are to use with their patients. This is one of the most important requirements when working in different areas of healthcare, but even more so when the professional has to provide their services to patients who need mental healthcare. In this case, knowledge of the patients' language becomes essential in order to perform well in the different stages of psychological intervention: diagnosis, treatment selection and follow-up. Here, language fluency becomes an instrument to interpret double meanings, nuances, slang, etc. Therefore, language knowledge is relevant, and applicants—from the EU or third countries—should be submitted to a very rigorous control.

Another aspect that has been observed in the curricula from different universities is the lack of subjects related to ethical behaviour (codes of conduct) governing the relations between patients/clients and health providers. One of the most frequent questions received from national coordinators of the national systems for recognition of professional qualifications relates to the possibility of having had suspensions or misbehaviour with patients/clients in the countries of origin. The General Council of Psychology of Spain suggests that all totally or partially regulated professions should have nationally regulated associations that would include National Ethical Committees in their structures, in order to hear public complaints and ensure ongoing ethical training for professionals. This is of great importance when we know that they have to deal with intimate matters relating to their clients' personal and relational problems. At this point—and building on the above—the COP would also like to reaffirm the need for nationally regulated associations. These would be appropriate, not only to look after good ethical training and behaviour of their associates, but also for their continuous professional development.

Finally, based on the above points, we believe that digitisation can effectively facilitate the assessment of professional qualifications and provide more agile responses, although this requires further clarification. Assessments are likely easier when applicants belong to fully EU-regulated professions (i.e., those with established Common Training Frameworks, or CTFs). Where only part of a profession is unregulated, however, individualised evaluations remain necessary.

In the case of psychology, the procedures for determining the comparability of curricula are extremely difficult—as previously explained—and rely heavily on the experience, knowledge and expertise of the evaluators. Nevertheless, the EFPA has been issuing EuroPsy certificates for many years, serving as a benchmark in the construction of psychology degree curricula and built around a common training framework.



Francisco Santolaya Ochando
President
General Council of Psychology of Spain