

## Professional Activities of N.Z. Psychologists Employed in Public Service: Actual, Ideal and Expected<sup>1</sup>

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A comprehensive survey of the descriptive characteristics, training, and occupational duties of public service psychologists within Justice, Education and the Health service was undertaken from October to December 1979. The current report focuses on how psychologists are actually spending their time in the field, comparing this with how they ideally would like to discharge their responsibilities and what expectations are perceived to be required by their employers. Treatment, assessment, teaching and research featured prominently within the first four or five functions advocated by all three public service groups.

Having examined some of the basic descriptive data concerning Justice, Health, and Education psychologists in New Zealand in a previous article (Walker, McKerracher & Edwards, 1982), it is now appropriate to look at some details of what respondents from each of these three groups reported about the organisation and orientation of their professional activities.

A description of the survey format has already been provided and this present report concentrates specifically upon data gathered from psychologists concerning their involvement with, and attitudes towards, assessment, treatment research, administration, teaching, public relations, and refresher activities.

The authors were interested not only in estimations of the amount of time actually spent in various activities, but also in perceived employer expectations. These were contrasted with what psychologists considered to be the ideal arrangement.

### Findings

The allocation of time spent weekly on professional activities is arranged in rank

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order of importance for the total group, expressed by mean percentage time actually devoted to each activity (see Table 1).

### 1. Treatment/Therapy Procedures (Total mean time = 30.3%)

Health and Justice psychologists are very similar in their average actual time expenditures on treatment (almost 40%) in comparison with Educational psychologists who spend only about 20%.

Hospital Board psychologists consider that this proportion of time is ideal and would like to continue to be involved in treatment at this level, but Justice would prefer to reduce it to about one-third of their time. Again, Educational psychologists emerge as significantly different from the other groups. Although they would ideally like to increase the amount of time spent in direct therapy, they consider nevertheless, that only a quarter of their time should be so committed.

In all three groups, the perception is that employers expect less time to be spent on therapy than is actually being undertaken. Actual and ideal amount of time allocated to treatment is similar for Hospital Board psychologists in spite of the perception of lower expectations for this role by their employer. Psychologists in Education wish to increase their therapy time in spite of perceived low employer emphasis accorded to such activities. Justice psychologists wish to drop their involvement in therapy so as to be

Table 1

Comparison of actual, ideal, and employer expected amounts of time for professional activities engaged in by psychologists rank-ordered by mean percentage of time reported. Standard deviations (S.D.) are in brackets.

HOSPITAL PSYCHOLOGISTS					
Activities	% Actual Time	Activities	% Ideal Time	Activities	% Expected Time
Treatment	38.2 (20.7)	Treatment	37.9 (19.7)	Treatment	27.8 (23.7)
Assessment	21.0 (14.6)	Assessment	15.9 (11.9)	Assessment	22.8 (21.2)
Diplomatic/Political	10.3 (8.1)	Teaching	9.4 (8.6)	Teaching	8.4 (12.4)
Teaching	9.4 (11.6)	Research	8.9 (9.5)	Administrative	6.2 (10.8)
Administrative	*8.5 (10.7)	Diplomatic/Political	7.6 (5.9)	Diplomatic/Political	5.9 (7.5)
Research	4.8 (7.3)	Administrative	6.9 (9.8)	Research	3.8 (7.2)
Refresher	4.0 (5.2)	Refresher	6.3 (6.7)	Refresher	*2.2 (3.9)
Other Responsibilities	2.2 (5.9)	Other Responsibilities	3.1 (12.6)	Other Responsibilities	0.7 (3.5)
EDUCATIONAL PSYCHOLOGISTS					
Assessment	**31.8 (16.7)	Treatment	**26.4 (12.5)	Assessment	24.7 (19.9)
Treatment	**21.3 (13.6)	Assessment	**21.8 (11.6)	Treatment	**16.4 (13.8)
Administrative	15.0 (12.1)	Teaching	12.0 (10.5)	Administrative	8.0 (9.0)
Diplomatic/Political	10.0 (9.9)	Administrative	9.3 (9.2)	Teaching	7.2 (12.2)
Teaching	7.8 (9.6)	Diplomatic/Political	8.7 (8.0)	Diplomatic/Political	6.3 (7.2)
Refresher	4.4 (4.0)	Research	7.8 (6.1)	Refresher	4.0 (4.0)
Research	3.0 (4.3)	Refresher	7.5 (4.8)	Research	3.9 (4.7)
Other Responsibilities	3.0 (7.6)	Other Responsibilities	1.9 (6.9)	Other Responsibilities	1.6 (5.6)
JUSTICE PSYCHOLOGISTS					
Treatment	39.3 (15.4)	Treatment	33.6 (15.2)	Treatment	33.8 (20.8)
Assessment	17.3 (12.9)	Research	**16.2 (10.7)	Assessment	16.2 (16.1)
Administrative	14.9 (15.3)	Assessment	13.5 (10.9)	Administrative	†13.5 (21.5)
Teaching	8.5 (7.8)	Teaching	11.5 (11.2)	Research	*9.2 (10.7)
Research	*8.0 (6.1)	Administrative	7.7 (7.7)	Teaching	5.8 (6.5)
Refresher	5.3 (4.6)	Refresher	6.9 (6.1)	Other Responsibilities	2.6 (3.7)
Diplomatic/Political	†5.1 (6.2)	Diplomatic/Political	†4.3 (4.5)	Refresher	5.6 (5.7)
Other Responsibilities	1.8 (4.2)	Other Responsibilities	1.3 (3.7)	Diplomatic/Political	2.8 (5.6)

Probability of employment groups not being significantly different from each other based on one-way analyses of variance:  
 \*\*  $p < .001$   
 \*  $p > .001 < .01$   
 †  $p > .01 < .05$

more in line with their perceptions of employer expectations.

It is important to note that all but one of the distributions are bimodal, suggesting that in each employment group there is a division between those who are less committed and those who are strongly committed to therapy. One possibility is that experience and responsibility play an important part in de-

termining how much emphasis is given to therapy. In order to examine this hypothesis, a comparison was made of the amount of time reported to be spent in the discharge of therapeutic duties by full-time staff (N=153) within each of the three services, taking into account the rank of practitioners. After inspecting the data, a 20 per cent cut-off point was used to examine differences amongst the

Table 2  
Comparison of actual time spent in treatment  
by rank of practitioner amongst Health,  
Education, and Justice psychologists.

Percentage of Time Allotted to Treatment	Health			Education			Justice		
	Assistant Basic Grade Senior			Assistant Basic Grade Senior			Assistant Basic Grade Senior		
0-20	1	8	0	4	19	24	0	0	0
21+	15	26	7	5	23	4	2	12	3
	N = 57			N = 79			N = 17		
	N = 153								

## (a) Overall comparisons

Assistant psychologists: chi-square = 3.299, df = 2,  $p = .2$  (N.S.) (with Yates' correction).

Basic grade psychologists: chi-square = 8.010, df = 2,  $p < .02$  (with Yates' correction).

Senior psychologists: chi-square = 21.224, df = 2,  $p < .001$  (with Yates' correction).

## (b) Health and Justice combined compared with Education

Assistant psychologists: chi-square = 3.553, df = 1,  $p > .05$  (N.S.) (with Yates' correction).

Basic grade psychologists: chi-square = 6.716, df = 1,  $p = .01$  (with Yates' correction).

Senior psychologists: chi-square = 19.599, df = 1,  $p < .001$  (with Yates' correction).

Table 3  
Comparison of employee categories in terms of  
distributing ideal amounts of time to  
be spent in treatment

Psychologist Group	% (S.D.)		Variance F	P	Type of Distribution
	Ideal Time to Expend	Analysis of			
Hospital Board Education	37.9 (19.7)				Bimodal 28/75%
Dept Justice	26.4 (12.5)				Bimodal 23/38%
Dept	33.6 (15.2)	10.7	<.001		Bimodal 28/48%

groups. The results are shown in Table 2. It was found that only four out of 28 senior psychologists in Education Department employment spent more than 20 per cent of their working hours engaged in therapy. By contrast, all of the full-time seniors in Hospital Board and Justice posts allotted more than 20 per cent of their time to therapy. The same trend was in evidence for basic grade and assistant psychologists, though it failed to reach significance in the latter

group. Clearly, there is no evidence to substantiate the hypothesis that professional rank and employment experience are the major factors influencing Health and Justice psychologists in the amount of time they give to therapy activities. However, it would seem that rank does have a decisive influence upon the amount of time spent on therapy by Educational psychologists. Assistant and basic grade levels allocate more of their time to this than seniors. This could be due either to a marked increase in the administrative responsibilities undertaken by seniors in this service, leaving them less time for therapy than their counterparts in Health and Justice, or to the fact that many seniors may have experienced training programmes in which therapy was not emphasised so much as it is at the present time.

It is of interest that in all three groups the less committed agree that therapy should ideally consume about a quarter of their time, whilst the more strongly committed vary markedly. Hospital Board psychologists, for example, who ideally favour providing more therapy, consider that as much as three-quarters of their overall time should be spent in this fashion, whereas convinced therapists in Justice would prefer 48% of their time to be so assigned, and enthusiastic Educational therapists only 38% of their working hours (see Table 3).

## 2. Assessment procedures (Total mean time = 25.7%)

Compared with Educational psychologists, those in Health and Justice spend significantly much less time (see Table 1) in assessment (about one-fifth as against one-third). In Education it seems that assessment takes precedence over therapy and the bimodal distribution indicates that there are some who are even more heavily committed to assessment than is suggested by the average time allotted.

Referring to the mean scores of actual time devoted to assessment (see Table 1), it would seem that both Health and Justice psychologists are performing these functions at a level commensurate with their perceptions of employer demands. Educational psychologists, however, are operating in practical terms at 10% above employer expectations, in spite of the fact that they ideally

Table 4  
Comparison of actual time spent in assessment and years in service amongst Health, Education and Justice psychologists

Percentage of Time Allotted to Assessment	Years in Service					
	Health		Education		Justice	
	0-5	6+	0-5	6+	0-5	6+
0-20	27	13	12	14	8	4
21+	17	3	32	23	7	0

- (a) Overall comparisons between groups  
Less than five years' service: chi-square = 10.688, df = 2, p = .01.  
Six years or more in service: chi-square = 8.761, df = 2, p < .02 (with Yates' correction).
- (b) Within group comparisons  
Health: chi-square = 2.033, df = 1, p = 2 (N.S.)  
Education: chi-square = 1.007, df = 1, p = 5 (N.S.)  
Justice: chi-square = 2.360, df = 1, p = 2 (N.S.)  
Health and Justice combined: chi-square = 4.304, df = 1, p < .05.

Table 5  
Comparison of employee categories in terms of distribution of ideal amounts of time to be spent in assessment

Group	Ideal Time to expend	Analysis of Variance		Type of Distribution
		F	P	
Hospital Board	15.9 (11.9)			Positive Skew
Education Dept	21.8 (11.6)			Bimodal 5/18%
Justice Dept	13.5 (10.9)	6.87	<.001	Bimodal 5/18%

S.D. in parentheses

wish to be in line with perceived employer demands.

Why the Education group continue to stress the assessment role when there is perceived pressure to do less, is not clear. It could be that many still support the concept of intelligence and achievement testing to a greater extent than their counterparts in other services because this has traditionally been such an important part of their role and has been emphasised as such in their previous training.

In examining whether a possible division

of opinion *vis a vis* assessment exists between psychologists who have been more recently trained and those who have been practising in the field for some time (see Table 4), it was found that in Health and Justice there is a slight trend for those who have been longer employed to be less committed to assessment (three out of 16 and none of the four respectively) whereas in Education, length of employment bears no relation to amount of assessment undertaken.

In ideal terms, all three groups prefer to restrict the amount of time spent in various forms of assessment (see Table 1). Educational psychologists aspire to trim back their activities to 22% of their overall time, whereas Health and Justice want a more modest cutback of only 4-5% to between 14% and 16% of overall time. This still leaves Education significantly more committed to assessment procedures than either Health or Justice.

While in each service the bimodal distribution shows up individuals who *ideally* would prefer to minimize commitment to assessment, there are, at the same time, other individuals who would like to be able to spend more time assessing (see Table 5). The preferences of this latter group would be more in line with perceived employer expectations which range from 23-38% of working time involved in this activity.

### 3. Administrative duties (Total mean time = 12.3%)

Education and Justice are almost identical in the actual amount of time they spend administering (15%) and allot significantly more time to such duties than Hospital Board psychologists (8%) (see Table 1).

All three groups ideally wish to reduce their administrative time to between 7% and 9% of working hours. This would bring Education and Health down to the level of perceived employer expectations. The relatively large amount of time spent by Justice psychologists in administration is, in fact, apparently considered to be *in line* with their employer expectations. But ideally, they would like to reduce their involvement in this activity, even though by doing so, they would be able to fulfil only a little over half of what they believe is expected of them.

4. *"Diplomatic" / multidisciplinary responsibilities (Total mean time = 9.6%)*

Interactions and negotiations with other professionals and community agencies might normally be expected to be a constituent part of a psychologist's role. Such involvements would reflect the relatively recent emphasis advocated in reports like that of the Trehowan Committee (1977). It is, therefore, a little surprising that such activities (a) take up only 5% to 10% of working time across all three employment categories at present; (b) ideally, are seen as being further reducible; and (c) are perceived to be of even less importance in terms of employer expectations. Justice psychologists in particular consider that their employing authority expects them to spend very little of their time in this form of activity (about 3%). On the basis of the current data, New Zealand psychologists as a group have little ambition or perceived need to extend or establish their multidisciplinary role, nor do they believe they are given much encouragement to do so by their employers.

5. *Teaching duties (Total mean time = 8.6%)*

Teaching psychological skills to trainees or instructing other professionals (e.g. teachers or nurses) or the public about topics of a psychological nature is ranked fifth in terms of time actually spent (8% or 9%) by all three groups. Hospital Board psychologists consider that this proportion of time is appropriately expended, should not be altered, and is also in keeping with their interpretation of what is expected by their employer.

Education and Justice psychologists perceive that the amount of teaching already carried out is slightly above employer expectations, but ideally think that it should be expanded still further to account for 11% or 12% of their overall time and be ranked third in terms of time priorities.

6. *Research functions (Total mean time = 4.3%)*

In spite of the heavy emphasis usually given to research in psychology training programmes and the efforts made to promote the model of the scientific practitioner, it is clear that research as a separate undertaking plays a very minor role in all three employ-

ment groups at present. Justice psychologists are twice as likely as those in Health or Education to be involved with research projects, but even then, the amount of time set aside is only 8%. Each of the groups ideally thinks it should double the amount of time spent on research, but this would be well beyond what their employers are seen to want. Comparatively speaking, the Justice Department, as an employer, seems to encourage more research (9.2%) than either the Educational Department (3.9%) or the Hospital Boards (3.8%) in the eyes of the employees.

It should be added that the research activities with a capital "R" that are referred to in responses to this question do not necessarily mean that a research approach is not being adopted with casework or with professional interventions in general. Systematic monitoring of aspects of everyday work could still be employed as an integral function of the scientific approach to dealing with all problems to be solved. Such research need not be regarded as a separate undertaking that has to be conducted in addition to on-going casework. Information about how much research (with a small "r") is undertaken by New Zealand psychologists is to be found in Table 6.

Using a seven-point scale from "Never" to "Always", mean ratings of actual, ideal, and expected amounts of time allocated to research for both casework and more formal projects were calculated. The actual usage of research techniques was at best rated as occurring RARELY. Even in ideal circumstances psychologists do not envisage applying research methodology to their work to a markedly greater extent since the highest mean involvement of research techniques is calculated as SOMETIMES.

It would seem that the heavy emphasis on research-based approaches to solving clinical and fieldwork problems during training is not generalising to the practical job situation, nor do practising psychologists appear to wish for any greater application of their formal training in this respect.

7. *Refresher activities (Total mean time = 4.3%)*

Like research, time allotted to refresher activities is very low and though all employment groups express a wish to increase this

Table 6

Comparison of mean ratings on a seven point scale by Hospital ( $N = 73$ ), Education ( $N = 94$ ) and Justice psychologists ( $N = 19$ ) of the amount of research time perceived by themselves to be:

- (1) actually spent in the course of their duties;  
 (2) desirable ideally; and  
 (3) expected by others, e.g. employers.

	Hospital Psychologists	Educational Psychologists	Justice Psychologists	Analysis of Variance	
	Distribution M.T. Rating*	Distribution M.T. Rating*	Distribution M.T. Rating*	F	P
<i>Single case research studies (publication attempted)</i>					
Actual	1.6	1.4	1.7	—	N.S.
Expected	2.0	2.6	2.4	—	N.S.
Ideal	3.3	2.9	4.1	7.85	.0006
<i>Single case research orientation (publication not attempted)</i>					
Actual	2.7	2.1	3.1	5.23	.0006
Ideal	4.2	3.4	4.2	5.47	.0005
Expected	2.6	2.8	3.2	—	N.S.
<i>Planning other research projects</i>					
Actual	2.6	2.7	3.4	2.88	.05
Ideal	3.7	3.6	4.3	—	N.S.
Expected	2.8	3.3	3.6	3.28	.04
<i>Carrying out other research projects</i>					
Actual	2.5	2.5	3.2	—	N.S.
Ideal	3.6	3.5	4.1	—	N.S.
Expected	2.7	3.2	3.7	3.32	.04
<i>Writing research projects</i>					
Actual	2.2	1.9	2.7	3.17	.05
Ideal	3.4	3.2	4.0	3.12	.05
Expected	2.4	2.9	3.4	3.37	.04

\* Time rating: 1 = Never; 2 = Almost Never; 3 = Rarely; 4 = Sometimes; 5 = Frequently; 6 = Almost Always; 7 = Always.

amount of time, their ideal goal is still minimal and only slightly above the perceived amounts of time expected by their employers. The exception is the Hospital Board psychologists who would like to increase the amount of time spent in refresher activities to treble that perceived to be desirable by their employing bodies. On the other side of the coin, Hospital Boards appear to be the least likely of the three employment authorities to promote or encourage such time expenditure.

#### 8. Other roles and responsibilities (Total mean time 2.6%)

The very low level of time consumed by a

variety of activities not specially named by the investigators suggests that the seven major professional roles identified in the questionnaire form a reasonable synopsis of the range of duties discharged by psychologists.

### Conclusions

In evaluating the activities reported to be undertaken by the three groups, the following conclusions can be drawn:

- Educational psychologists do less treatment and more assessment than the other two groups. Although they would ideally like to increase treatment at the expense of assessment, the balance would still not be comparable with the relative emphasis given to these two functions by their counterparts in Justice and the Health setting. This could reflect different emphases in the training programmes or different job demands that have to be met in the field.
- Irrespective of the actual amount of administration carried out, all three services would like to reduce their commitments in this area, with Education and Justice psychologists being most keen to cut down. It is noticeable that administration currently consumes a considerable amount of time in the latter job categories, being ranked as third after assessment and treatment functions.
- Refresher experiences are accorded low priority by all psychologists. More would be appreciated, especially by Hospital Board employees, but little encouragement is perceived to be given by employers. This, added to the lack of research emphasis, discussed below, could result in a profession that is unable to keep abreast of recent developments in the field.
- There appears to be little encouragement from employers and little interest across all services (particularly Justice) in expanding multidisciplinary interactions of a diplomatic and political nature. This is an interesting finding in an era when structured co-operation with other disciplines has been championed as a desirable necessity. It suggests psychologists in New Zealand wish to practise inde-

pendently within the limits of their own discipline without having to consult or negotiate with other disciplines to any marked extent. Perhaps the time spent in diplomatic and political interchanges is seen as unproductive by the busy psychological practitioner who wishes to preserve his autonomy of function and to limit interdisciplinary arrangements to those where they are strictly relevant to the welfare of immediate clients.

- (e) Health psychologists are already undertaking teaching at a level which is in line with their own ideal and employer expectations. Education and Justice psychologists would ideally like to expand their teaching role further, though it is already somewhat in excess of employer expectations. For them this means that teaching moves into third place in terms of ideal professional emphasis, displacing administrative duties.
- (f) Neither formal research projects nor single case design projects nor even systematic and scientific monitoring of everyday casework occupy any more than a token amount of the time of psychologists in all three services. Justice personnel are the most active and also the most interested in committing a relatively greater amount of time to research than their professional colleagues, ranking research second to therapy in ideal terms. This relative lack of application to employment situations of the research skills learned during university training must be disquieting for university teach-

ers. It is traditionally claimed that one of the major variables distinguishing psychologists from other health, education and welfare professionals is their scientific expertise. If those trained to be scientific practitioners are not functioning in this role, then several interesting questions arise: how relevant are many of the training requirements to the eventual job situation? What factors in the job situation militate against the operation of scientific principles in regular psychological practice? Are psychologists so deeply immersed in busily doing things to help their clients that they have no time to be concerned with whether what they are doing is really effective? Do New Zealand psychologists have a different orientation towards applied psychology from overseas colleagues who argue a diminished justification for trying to preserve distinct roles at a service level? (Keats, 1976; Pond, 1977; Sheehan, 1978; Trethowan, 1977.)

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