

The Honourable Pete Hodgson
Minister of Health
Parliament Buildings

Dear Sir

Re: Psychologists' access to accredited ethics committees for reviews of proposed research

You will be aware that, under the Health Practitioners Competence Assurance Act 2003, psychologists are health professionals (S169 and Schedule 2). Consequently they practice within the scopes of practice (S8) promulgated by the Psychologists' Board, the relevant authority under S11 of the Act.

You are probably not aware that for the last eighteen months members of the New Zealand Psychological Society have been seeking to ensure that the growing numbers of psychologists working outside of universities can have research proposals reviewed by an accredited ethics committee. As President of the Society I am asking you to intervene and resolve an intolerable situation that may expose members of the public to unsafe practices and place practitioners in jeopardy. We have approached you because the health and disability ethics committees (HDECs), currently the only accredited non-institutional ethics committees, are a responsibility of your ministry. We have sent copies of this letter to your colleagues who have responsibility for areas in which numbers of psychologists work.

Psychological practice has long been grounded in the scientist-practitioner model that is reflected in both the current scopes of practice and *The Code of Ethics for Psychologists working in Aotearoa/New Zealand 2002*. These documents require practitioners to provide evidence-based interventions and to submit proposals for research to an ethical review conducted by "an appropriately constituted ethical review committee" (S2.6.2 *The Code of Ethics*). Psychologists were widely involved in the development of these requirements and consider they provide appropriate protection for both practitioners and those with whom they work. No evidence base is perfect or complete and for some interventions evidential support is limited and may

be suspect. As a profession we expect those who need to offer such interventions to be involved in research to check, extend and enhance the quality of the evidence base.

However, and this is why I write to you, unless research is deemed to be health and disability research a practitioner who is not affiliated to a university will be unable to have any proposal for that research to be reviewed. That was confirmed by Therese Egan, Manager Strategic Policy on Ethics and Innovation, Ministry of Health (14 May 2007) to Mr Peter Coleman who has been leading our efforts on this matter. She wrote: “Research conducted by health practitioners that is considered to be education research would not generally be considered by HDECs”. Although her answer has focused on educational psychologists it has wider relevance as the logic of the exclusion applies equally to forensic, community, industrial/organisational, and counselling psychologists in government departments, NGOs, or private practice.

I trust you can see the problems this impasse creates. For those receiving psychological services; there can be a constraint on available interventions and it is less likely that interventions developed overseas can be safely tested and adapted for local conditions. It also reduces the opportunities for clients to affect wider psychological practice. For practitioners it creates a double jeopardy; they could face a complaint for practising without or beyond a relevant evidence base and, were they to attempt to address that evidential lack, could face a complaint for undertaking research that had not received ethical approval. We consider this is intolerable and request your urgent intervention.

Yours sincerely

Raymond Nairn PhD
President New Zealand Psychological Society

cc

The Honourable Mark Burton, Minister of Justice

The Honourable Steve Maharey, Minister of Education

Minister Research, Science and Technology

The Honourable David Benson-Pope, Minister Social Development and Employment