

EPASSA NEWS

Newsletter of the Educational Psychology Association of South Africa

Volume 3, Number 1

March 2017

CONFERENCE



EPASSA's *First Annual, South African Educational Psychology Conference* was held on 3 and 4 March 2017, with over 80 delegates from around the country attending a wide variety of presentations at the impressive Birchwood Hotel conference facility.

The standard of presentations was high, with feedback such as "worth every cent," "the best conference I have ever attended" and "world class." There were opportunities for networking, purchasing of therapy equipment and continuing professional development.

We include photographs and the EPASSA Chairperson's keynote address and closing statements.

Keynote Address

Educational Psychologists in a Mental Health Environment that Discriminates against them

Dr Martin Strous, EPASSA Chairperson

Eric Berne, the founder of transactional analysis said, “The moment a little boy is concerned with which is a jay and which is a sparrow, he can no longer see the birds or hear them sing.” We can pretty much say the same thing about psychologists. There are those obsessed with categorisation, who may want us to believe that educational, clinical and other categories of psychologists are fundamentally different in type. There is variation, but let us not fall into the trap of believing that psychologists from different categories belong to a different type of genus or social class. We need to beware not to dissect psychology as a profession to the extent that we no longer see its beauty or hear its song.

It is with this opening message that I welcome you to EPASSA’s first, annual, South African Educational Psychology Conference. EPASSA aims to promote the interests of Educational Psychology as a profession and to facilitate the provision of quality psychological services to the public. Our conference is part of that vision and contributes toward facilitating continuing professional development.

In this keynote address, I explore how Educational Psychology has often had to define its identity and defend its existence. I argue that despite the discrimination they face in their own practices, educational psychologists can and should contribute toward more accessible mental health services in South Africa. We must protect and promote the competencies that educational psychologists contribute in a country with limited mental health delivery resources. Educational psychology is a national resource. We can make a valuable contribution if our profession is regulated properly and democratically.

Challenges faced by Educational psychology

Educational psychology has always had to define its identity and even defend its existence, from the time of the first edition of the *Journal of Educational Psychology*, in 1910 and up until now. During the first half of the twentieth century, some critiqued educational psychology as being little more than an inept translator of pure psychology. Educational psychology defended its integrity against allegations that it claimed for itself an undeserved, independent status. By 1982, nearly 14 percent of members of the American Psychological Association identified themselves as educational psychologists.

South Africa’s need for non-discriminatory mental health services

As with Psychology in general, the practice of Educational Psychology in any context is influenced by its host culture. We are psychologists at the tip of Africa, and we are influenced by global trends.

We cannot understand the role of psychologists and the psychological needs of South Africans without understanding our apartheid past. Apartheid resulted in enforced racial separation, inequality, frustrated aspirations, widespread poverty and suffering for millions of Black people. This played out in every field, including psychology and education.

South Africa still suffers from the effects of apartheid practices, together with the effects of current socio-economic and political realities. There is an historical nexus between racism, poverty, poor schooling and a sparsity of psychological services.

South Africa's shortage of psychologists

Both historically and presently, counselling services have been inadequate for the majority Black population, whereas private services are more accessible in traditionally White areas. We have an immense need for psychological services, but a shortage of psychologists. The relevance of American and Eurocentric models has also been queried, in relation to all categories of psychology.

Our regulator, the HPCSA's Professional Board for Psychology, may argue that South Africa's mental health service delivery is not too bad for a developing country. This does not detract from the fact that there is a serious shortfall. We should not be striving for the lowest common denominator when it comes to mental health. Last year we saw the tragic loss of over 100 lives because of a negligent approach by the Department of Health to the care of Life Esidimeni patients - an incident that some are calling a "mental health Marikana." Mental health in South Africa has always been a woefully neglected area.

The contributions educational psychologists can make

We need to ensure a more equitable distribution of power and equal opportunity structures in mental health. Psychology and Educational Psychology could have a lot to offer, were they given a chance. There have been earnest attempts by psychologists to abandon Apartheid-style elements and to embrace principles and practices of non-domination, egalitarianism and respect for diversity.

Unfortunately, private practitioners, who constitute the vast majority of applied psychologists in this country, are largely excluded from policy discussions. Applied psychologists are mostly confined to private practices – partly out of choice, but mostly because there are few public positions for psychologists. Discussions about revisiting the country's mental health system are largely confined to universities and regulatory authorities, and excludes most private practitioners.

Some academics and policy-makers regard private practitioners as self-centred, money-making enterprises. On the other hand, many private practitioners, who may be progressively minded, feel alienated and strangled by scope of practice issues that threaten their livelihoods, which are in any event modest. There is growing suspicion between policy makers, drawn mostly from the ranks of academics, who may enjoy fixed salaries and benefits, and private practitioners who feel unsupported and betrayed by the academics who trained them. University departments and the HPCSA's Professional Board for Psychology have on occasion made assertions about the scope of educational psychology in a manner that effectively restricts private practices, despite practitioner's competences, experience, skills and desires to work ethically and competently. The situation is fuelling schisms and turf wars between psychologists from different registration categories, organisations and fields. Costly legal action, disciplinary threats and time-consuming meetings on scope of practice achieve little, but bog down the profession and professional development.

Obviously, the more broadly and competently trained psychologists are, the better this will be for members of the public requiring services. A need to make Psychology and Educational psychology less elitist and to harness multiple helpers is pertinent given our shortage of psychologists. It is silly if not unethical for the role of educational psychologists to be unduly limited.

The legitimate role of educational psychologists

It is my contention, and the contention of the committees of both EPASSA and the South African School Psychologists Association (SASPA), that so long as they have the requisite training, skills, knowledge and/or experience, all psychologists, no matter their registration category, are legally entitled to evaluate behaviour, mental processes or personality adjustments; to use psychotherapeutic procedures to relieve or change personality, emotional, behavioural or adjustment problems or mental deficiencies; and to use psychological methods to prevent such problems or mental illnesses. This understanding is not our own concoction; it is based on current regulations.

Educational psychologists should not be thought of as glorified remedial therapists or restricted to areas of learning support. Many educational psychologists are well trained in various clinical procedures, with adults, children, families and groups. In terms of defining our role, we should capture the essence of Educational Psychology - the unique contributions that educational psychologists make in addressing pressing issues relating to learning and development. At the same time, we must protect the core competencies that educational psychologists contribute in a country with limited resources. We need to move beyond *either-or* to *both-and* conceptualisations of the role of educational psychologists.

Some medical aids and developers of National Health Insurance, who wish to skimp on spending on mental health service delivery, seize on the terms *learning* and *development*, which terms are used in government gazette regulations to describe the role of educational psychologists. They apply these terms narrowly to justify discriminating against educational psychologists.

These medical aids and policy developers find accomplices amongst a few clinical psychologists who are monopolistic and territorial in trying to keep educational psychologists out of what they regard as their turf. For these antagonists, a sparrow is a sparrow, and a jay is a jay. They neither see nor hear that these creatures share marked similarities.

It makes no sense to define the words *learning* and *development* narrowly. Learning and development are manifold and broad concepts. UNESCO, the United Nations Educational, Scientific and Cultural Organization, has identified Four Pillars of Learning in a document compiled by global representatives. This document recognises learning as a process that provides (1) cognitive tools to better comprehend the world; (2) skills that enable participation in the global economy and society; (3) self-analytic and social skills that help individuals reach their potential; and (4) exposure to principles of human rights, democracy, intercultural understanding, respect and peace.

Interventions such as the assessment of areas of strength, weakness and/or pathology, counselling and therapy may be used by educational psychologists to help support persons, by means of learning and development, to transcend psychological and social barriers, to attain optimal functioning and to address

maladjustment and pathology. In 2012, an Educational Psychology Task Team identified that educational psychologists often work with clients with a broad range of psychological conditions.

Discrimination against educational psychologists

Despite the legitimate role of educational psychologists and the contributions they can and do make in a country short on mental health services, educational psychologists have experienced a slamming closed of doors. Several medical aids incorrectly claim that educational psychologists cannot treat the same conditions as clinical psychologists. These medical aids have been aided and abetted by statements from the Clinical Psychology Forum. Thankfully, the Clinical Psychology Forum has been unable to adversely influence Discovery Health, the largest private medical aid. Tremendous damage has been caused in the case of several other medical aids. This includes large, but cash-strapped medical aids that curtail pay-outs to educational psychologists for family, adult and child mental health services.

There has been insufficient open protest against this discrimination from the regulators of our profession and from institutions that train educational psychologists. The Professional Board for Psychology promulgated invalid regulations relating to our scope of practice in 2011, and, by failing to guide the profession appropriately, tacitly colluded with discrimination against educational psychologists. I pause here to note that I recently discovered that in October 2016 several universities wrote to the professional board about our scope of practice. I do not know the contents of their letter, but hope to receive a copy of it shortly.

EPASSA for its part repeatedly requested the Board to release guidelines that would properly assist psychologists who are victims of discrimination. We requested that the Board consult with EPASSA while drafting such guidelines. The Board – which never misses an opportunity to miss an opportunity - refused, and over a year later dumped guidelines on the Internet that one of our committee members discovered by chance. I personally believe that the guidelines have potential, but need refining, as they are quite inadequate in, amongst other things, describing the reasons why referrals may be made to educational psychologists. Other EPASSA committee members believe that the Board's recent guidelines reflect an attempt to reframe the role and to redefine the identity of educational psychology as academic support, in a manner that they think places undue weight on the preferences of mostly Stellenbosch and University of Johannesburg academics serving on or influencing the Board, as opposed to the lived experience of other psychologists. Whether this assumption is correct, I do not know.

Some EPASSA members believe it is time for us to call publicly for the resignation of the Professional Board. Others fear that such action would lead to Board members feeling injured to the extent that they would vindictively enact restrictions on our scope of practice. Some think the Board operates like a constitutional reprobate and should be scrutinized by the office of the Public Protector.

The apparent silence of influential academic psychologists when it comes to speaking out against all this creates an impression of implicit collusion with a form of discrimination against their own colleagues. There are notable exceptions, but there appears to be a general silence about the attenuation of educational psychology practices. I hear certain personalities year after year professing to care for the profession, but ultimately blind-siding private practitioners. They announce plans of action, carry the

hopes of educational psychologists along with them, and then down the line renege on positions they professed to adopt.

It is a blight on our profession that discrimination and complicity is tolerated within our own ranks. South African psychologists, who have had to confront their own collusion with apartheid structures, should be more aware of how processes of exclusion, elitism, empathic failure and inflexibility undermine personal and group rights. Increasingly, I hear educational psychologists stating that the educational psychology profession is doomed and that they would discourage any youngster from embarking on educational psychology as a career.

Misrepresentation of our role

One reason the *Relpag vs Professional Board for Psychology and Minister of Health* court case was important, and why in the absence of legal adjudication there continues to be disagreement about the skills set of educational psychologists, is that the training of psychologists has not been uniform. The training of educational psychologists has varied across time, across different universities, and across the interests of individual educational psychologists. If one took the training history, experience and areas of interest of any educational psychologist, one would find that in some ways we are each very much alike one another as psychologists, in some ways we are pretty much alike, and in other ways we are quite different to one other.

The same could be said about our activities in relation to other categories of psychologists. Educational, counselling and clinical psychologists are all very much alike, in some ways they are pretty much alike, and in other ways they are quite different.

We must guard against incorrect insinuations or statements that different categories of psychologists have vastly different skills or follow different theoretical paradigms. We cannot make blanket statements about the competence of any one category of psychologists. There is variability and similarity both within and between registration categories.

Competence is best evaluated on an individual basis, from person-to-person and sometimes from case-to-case. Blanket statements of competence will always be challenged. For example, the Board's recent guidelines state that educational psychologists deal with mild to moderate mental disorders. That would mean, if we took the guidelines seriously, that educational psychologists must refer severe cases of learning disability to clinical psychologists. However, the Clinical Psychology Forum states that clinical psychologists cannot treat learning disabilities at all! This is an instance of guidelines relating to competence making no sense.

The founders of many theories that have affected psychology profoundly – for instance Sigmund Freud, Eric Berne, Donald Winnicott, Aaron Beck and Franz Fanon – were not educational psychologists, clinical psychologists or counselling psychologists. They were not psychologists at all. I mention this to illustrate how illogical it is to apply obsessional standards of categorisation and to discriminate against educational psychologists. Confining professionals to watertight compartments leads to stagnation when we need development.

Some years ago, the Clinical Psychology Forum stated that clinical psychologists were the only psychologists who were sufficiently trained and experienced to diagnose and treat patients with psychological and/or psychiatric disorders. This, of course, is incorrect. All psychologists may, by law, diagnose and treat individuals in ways that are compatible with their training and experience.

The Clinical Psychology Forum (CPF) seems determined to position clinical psychology in the medical field, and appear to have made it their business to try impress on medical aid schemes what services schemes should and should not pay for. CPF statements have suggested a lack of knowledge, and disregard or disdain for the scope of profession stipulated in gazetted regulations. Psychological acts apply to the field of Psychology as a collective, not to just some clinical psychologists who present themselves as the chosen few.

The Clinical Psychology Forum recently alerted clinical psychologists that they may be obligated to report other colleagues who act outside of their scope of practice. However, when challenged by EPASSA, the CPF has been unable or unwilling to identify what would constitute acts outside of the scope of educational psychology. I believe that the CPF are unable to find any regulation that prohibits educational psychologists from engaging in any particular psychological act. I have never come across anyone, any medical aid, organizational body, university or regulatory body that has been able to answer with any shred of evidence where any law stipulates a psychological condition or event that an educational psychologist may not treat.

The Clinical Psychology Forum are adamant that there are fundamental differences in the training of different categories of psychologists. In an affidavit submitted to Court, the CPF claimed, "Those wanting to practice Education Psychology must complete Bachelors, Honours and Masters Degrees in Educational Psychology which is different from Psychology." This is nonsense. How can Educational Psychology be different to Psychology? There are many educational psychologists who completed the exact same Bachelors, Honours and Doctoral Degrees as clinical psychologists; and there are many whose Masters degrees, internships and post-qualification experience and training overlapped significantly with the training of clinical psychologists. I am advised that until recently, two universities in South Africa offered their training at Master's degree level for educational, counselling and clinical psychology in the same class. Many educational psychologists are trained in clinical ways, have worked in clinical settings and continue to work competently and lawfully in the assessment and treatment of a wide range of mental disorders across the life span. We must challenge deceptive narratives that prejudice educational psychologists in violation of constitutional rights and the rights of the public.

It is appalling that the current Professional Board for Psychology also seems to misunderstand and misrepresent the law relating to our profession. As mentioned, some colleagues believe that the Professional Board's recent guidelines perpetuate a narrow view of the role and identity of educational psychology. Tellingly, Professor Tholene Sodi, deposing to an affidavit on behalf of the Professional Board for Psychology (and incidentally, who is the incoming Chairperson of PsySSA) wrote last year, "It would not be in the public interest for an educational psychologist to perform acts for which a clinical psychologist is registered to perform without the professional board first certifying that such a psychologist be qualified to do so."

No matter what Professor Sodi avers, there exists no convenient mechanism whereby the Board certifies which educational psychologists may or may not engage in psychological acts for which a clinical

psychologist is registered. Sodi's statement is misleading and contradicts the scope of profession regulations. There was a time when Professor Sodi's own, clinical, private practice engaged in psycho-educational assessments.

The Professional Board for Psychology has in a manner sided with the Clinical Psychology Forum. Professor Gertie Pretorius, deposing to an affidavit on behalf of the Professional Board, stated that the Clinical Psychology Forum had presented an argument "in line with the underlying rationale for the 2011 Amendment Regulations." We now know that those regulations, enthusiastically referred to by Prof. Pretorius, were passed unconstitutionally. However, the Professional Board still tacitly supports discrimination against educational psychologists by failing to speak out coherently against such discrimination.

Both the Professional Board for Psychology and the Council for Medical Schemes turned a blind eye when we implored them to protect educational psychologists against unfair discrimination. Both these bodies are made up of people appointed by the Minister of Health. These ministerial appointees do not necessarily enjoy the support of most psychologists. Many psychologists feel bewildered and betrayed by these organs of State. Some suspect that there is complicity or active collusion between the Board, some university academics with specific interests and certain academics who serve on the executive committee of PsySSA.

The Professional Board's elective mutism around the plight of educational psychologists in private practice needs to be seen in the context of the HPCSA's attitude toward medical aid issues. The President of the HPCSA believes that medical aids should not exist. About a month ago, the HPCSA president stated that with half of South Africa's health professionals catering to only 17% of the population on medical aid schemes, the entire setup is, what he called, "a crime against humanity" and should be abolished. We have been barking up the wrong tree hoping for the Professional Board to endorse our rights to be paid by discriminating medical aids when the HPCSA believe that medical aids should not exist in the first place.

There is a perception that educational psychology was again treated unfairly toward the end of 2016 when in the Board exam for educational psychologists only 10% of educational psychology interns passed the exam. Several members of the EPASSA-SASPA ethics committee this month formed the opinion that Board exams should be halted for good.

At present, we have a "perfect storm": incorrect assertions made by some staff at the Professional Board, seeming collusion by the Council for Medical Schemes, disparaging comments by non-educational psychologists protecting their turf, and apparent inaction on the part of some academics,

When it comes to discrimination against educational psychologists, psychologists of all categories and academic psychologists need to break the silence within their own ranks. Claiming to remain supposedly neutral, as did PsySSA during the Relpag court case proceedings, is no answer. Eldridge Cleaver once said, "There is no more neutrality in the world. You either have to be part of the solution, or you're going to be part of the problem." The history of South African psychology is clear that when incorrect events occur, maintaining a stance of supposed neutrality makes one irrelevant at best and complicit at worst.

If ours is to be a united profession, we must move away from tolerating the marginalisation of educational psychologists and from the habitual, unethical casting of aspersions on the legitimate activities of educational psychologists. I would like those who seem to cow-tow too much to the “gods” on the Professional Board, to hear these words: “There comes a time when one must take a stand that is neither safe, not politic, nor popular. But one must take it because it is right.”

Those are not my words. They are the words of Martin Luther King Jnr, in an address to the American Psychological Association in 1967. They seem quite appropriate to our context, 50 years after Martin Luther King spoke them.

Let us be clear on one thing: Discriminating against educational psychologists is not about protecting the innocent from unskilled and fraudulent psychologists or about serving community needs. It is about being territorial, it is about bullying, and it is about standing on the side-lines and watching victimization.

Two weeks ago, at a meeting held at Wits university, I proposed that the 2011 scope of practice regulations should be allowed to decay into oblivion. The 2008 scope of profession document and the competence clauses in the scope of conduct adequately protect the profession of psychology and the public, whereas the 2011 scope of practice document has been used unjustly to discriminate against educational psychologists. An overwhelming majority of attendees at the meeting, which meeting was called by PsySSA for all psychologists, indicated by show of hands that their preliminary thinking was that the scope of practice should fall, or that the scope of practice should be amended, with all psychologists being trained as generalists at a masters level, so that specialization training will occur only after one has trained as a generalist on core competences. These options are largely in line with EPASSA’s thinking. The question is, ‘Will the Board care to hear or listen?’

Democratic and constitutional principles

The HPCSA and Board of Psychology are organs of state, and the Constitution of our country requires that public administration must be governed by democratic values and principles enshrined in the Constitution. The Professional Board must actively engage with both private and public practitioners and the public. We do not want lip service to be paid to some vague notion of public and professional engagement. We want significant democratic consultation. We need to hold policy makers accountable to the profession and to the people of this country. We must insist on real and meaningful professional and public participation in the formulation of mental health policies.

Psychology, of all professions, should be committed to consulting with people rather than pulling and pushing people where they do not wish to be. This is not important only in relation to scope of practice and medical aid issues, but also in terms of meeting the needs of the poorest of the poor, who are not on medical aids. We stand a better chance of helping to facilitate the development of healthy identities - in ourselves and others - if we adhere to themes of diversity, respect, human rights, self-determination and collaboration.

EPASSA’s role in protecting the profession.

In my closing words, I will read to you two poignant letters from educational psychologists. I will also speak about EPASSA’s role in protecting the profession. For now, I will just say this: EPASSA will not

stand by and idly watch discrimination against educational psychologists and our clients. To those who think they can speak on behalf of educational psychologists and practitioners to the detriment of the profession and the public, EPASSA has been responding by saying with an increasingly strong voice, *Nihil de nobis, sine nobis* – “Nothing about us without us!”

Never, under the current committee’s watch, will EPASSA succumb to those who discriminate against us. We may function in an environment that belittles us, but we are on the right side of justice. We will pursue what is right, and speak up against illogical and unfair discrimination that the Professional Board for Psychology, the Council for Medical Schemes, the Clinical Psychology Forum and several medical aids engage in or tacitly collude with through silence.

I have a lot more to say, but I would like now to open the floor for comment. EPASSA sent out an invitation to members to reflect on their attitude toward the guidelines for the profession of educational psychology that the Professional Board finalised recently. We would welcome comments from the floor as to your views on these guidelines, as well as on other matters pertaining to the state of our profession.

Conference attendees:



*Prof Joseph Seabi,
Dr Martin Strous,
Vanessa Gaydon*



*Examining
Therapy materials*



*June Manala and
Linda de Rooster*



Dr Tiaan Kirsten speaking on ethics



Margie Gibson on neuropsychology

Dr Zamo Mbele on racism



Dr Jacqui von Cziffra - Bergs Brief Solution Focused Therapy



Dr Martin Strous

Closing address

Dr Martin Strous

This conference has covered a wide sweep of topics. We have heard presentations on infancy and child development, ADHD, sensory processing, abuse, ethics, DSM 5, racism in therapy, group therapy and brief solution focused therapy.

I would like to thank all the presenters. Their presentations were top class. Of course, we all thank the efforts of the organizers of this conference. Linda de Rooster, Tania Holz, Vanessa Gaydon, Gill Berkowitz and Doret Kirsten were part of the planning committee. Linda de Rooster has put in huge effort aided by Denise James and Linda Swart. Vanessa Gaydon has attended to all financial aspects. I am sure you will agree that the conference has been superbly organized and that ongoing conferences like this will continue to strengthen EPASSA as an organization and all of us as professionals.

Yesterday, my opening keynote address was on discrimination against educational psychologists. We discussed, amongst other things, the identity of Educational psychology, the contributions that educational psychologists should make in a country with limited resources and the legitimate scope of practice of educational psychologists. Today, I want to tell you a bit more about EPASSA's role in promoting and protecting the profession.

EPASSA waged many battles in 2016 to protect educational psychology from short-sightedness and blatantly inaccurate perceptions about the role of educational psychologists. We hoped that many issues that are tantamount to discrimination against educational psychologists would be resolved in Court in November 2016, in the legal action that was brought by RelPAG, the Recognition of Prior Learning Action Group. However, despite being well-prepared and incurring hundreds of thousands of rand in legal expenses, EPASSA as *amicus curiae* was unable to argue its case *viva voce* in the High Court. This was a blow, as we believe the Court would have accepted our legal arguments.

The Minister of Health conceded before the court case, as argued by EPASSA in legal papers, that the scope of practice was promulgated unlawfully and was invalid. However, RELPAG, the main applicants to the court case, ran out of funds and agreed that the scope of practice regulations would nevertheless operate for the next two years. This turn of events provides the Minister with an opportunity to amend the regulations before they lose their legal effect in two years' time and emboldens some to continue misinterpreting our profession.

If we had sufficient funds, EPASSA could apply, in accordance with a recent Constitutional Court ruling, to have the Relpag case re-opened. But we have outstanding legal bills and we do not know that in 2017 we can again ask our members to come up with hundreds of thousands of rand for resumed court action. EPASSA has decided instead, at least for now, to rely on the South African Human Rights Commission, the Competitions Board and the Competitions Tribunal to take up our cause.

We are trying just about everything we can think of to address the intolerable situation where several medical aids are claiming that Educational Psychologists are acting illegally or what they call "fraudulently". To date, GEMS, BONITAS, PROFMED, POLMED, SANLAM HEALTH, MEDIHELP and

CAMAF have stopped paying for the services of Educational Psychologists. We are aware that their regulator, the Council for Medical Schemes, cannot force these medical aids to pay for the treatment of particular disorders or problems. However, we believe that by paying for services rendered by clinical and counselling psychologists, and not educational psychologists, these medical aids are being discriminatory. The Medical Aid Liaison Board, of which EPASSA forms part, has requested an urgent meeting with the Council for Medical Schemes and the Professional Board for Psychology because both these bodies have a history of either delaying on answering our correspondences, or when they do answer, of referring us back and forth between each other for an answer.

This month, EPASSA has liaised with or attended meetings together with other organizations, including the Board, PsySSA and its educational psychology division, the CMS, Relpag, SASPA, the South African Psychoanalytic Confederation and universities. We were on talk radio, we hosted a meeting where a decision was taken to form a new coalition of mental health practitioners, perhaps to be known as SAAMHELP, the South African Association of Mental Health Practitioners, and we have held this conference today. Now we are ready to extend ourselves further. In the next few weeks, we will make submissions to the Competitions Board and the Competitions Tribunal. At a meeting held at Wits University on 18 February 2017, I invited PsySSA and all the organizations present to join EPASSA in lodging complaints against the CMS and various medical aids with the SAHRC and the Competitions Tribunal. EPASSA also intends communicating with university vice-chancellors. We are ready to make our issues a political issue. I will be forwarding concerns, such as those I raised yesterday, to the Minister of Health, to the DA's shadow minister of health, to the EFF and to other political parties. EPASSA will notify the press as well of all these events. I would like to ask each of you to assist us with providing any email addresses you may have for members of the press, parliamentarians and university heads.

Part of EPASSA's submissions will incorporate two poignant letters that I have seen from educational psychologists, and I would like to read these letters to you. The first letter speaks about the crucial role of educational psychologists in assessing the best interests of children. The second deals with the hardship of being an educational psychologist.

Here is the first letter, which speaks about the important role of psychologists in assessing the best interests of children. The colleague wrote:

Proper IQ assessments take a lot of time, often over three hours and Medical Aids only pay for two hours a day. There is also no provision from Medical Aids that pays for reports such as these, which often take two to three hours to compile and type. Educational psychologists generally do these on pro bono basis.

Departmental educational psychologists are so thinly spread that they simply cannot do proper assessments with children. I currently have a seventeen-year-old male patient who is in grade ten. He failed for the first time when he was in grade nine, he repeated grade nine and was "passed" to grade ten. He failed and is now repeating grade ten. According to "the system" he will be pushed up to grade eleven even if he fails grade ten again at the end of this year, furthermore he will be passed to grade twelve at the end of 2018 because the system only allows the school to fail a child once in a three-year phase! I assessed this young person. I was shocked at the results. Scholastically this boy is totally illiterate and barely numerate. He has a reading age of 6 years 3 months!!! The overall IQ is 52!

My friend who works at a township school has more than twenty grade six pupils who are in desperate need of special education, but departmental psychologists do not arrive and occasionally when they do they do, they do a Bender Gestalt and say the child is fine! So they fail one of the grades of the phase they are in and get passed up to fail again two to three years later, once in the next "phase". At least when educational psychologists could claim from a medical aid, those whose parents had a medical aid could be assessed privately and properly placed. Now this no longer happens! I feel so sorry for the above mentioned young person, he can neither read, write nor spell, what is going to happen to him? With an IQ of 52 he is eligible for a state grant, but had Discovery Health not been willing to pay for the assessment, no-one would have known that, and he would have ended up with the hundreds of pupils, who fail the matriculation exam every year and who either repeat it fruitlessly to power of "n" or drop out completely to become one of the millions of unemployed and unemployable people!

Here is the second email, written last year by another colleague, who works in what I assume is a non-affluent area. As with the previous email, I have edited it, shortened it and removed identifying information. It was written last year. Since then, the situation for educational psychologists has worsened.

I am a qualified Educational Psychologist. I am also a single parent. My family survives only through my private practice. However, the current challenge is that since the beginning of May 2016 no medical aid has remunerated me for any services rendered.

Now, like many of my colleagues, I find myself in a total mess. I am drowning without any monthly income, I have bills such as bond, cars, rent, insurance, municipality bills, groceries, employees and not to mention petrol to and from this job, every single day, when it doesn't even pay me.

What do I say to banks and debt collectors because they rightfully want their money? I have been working tirelessly for the past 3 months but have received NOTHING for my expertise.

I am tired of being given the run around, can [you] possibly alert banks about this contention experienced by those who are fulltime in private practice? To at least give us 3 months while we wait to possibly be reimbursed for our past services and possibly seek employment elsewhere?

Every single Educational Psychologist is a parent, a provider, a valuable citizen and a possessor of a critical and scarce skill. We have studied and worked so hard to be repaid with this emotional disintegration, financial abuse and humiliation.

Educational Psychology as a discipline is being brought into disrepute without opposition. Whatever happens to our children when people disregard the importance of those who raise them? How do we afford this conference if we can't even feed our kids? Where will we be by then? In the streets? In our current political crises is the mental wellbeing of South Africans secondary to the wants of medical aid companies?

I hope and pray the committee will prioritise this issue and intervene on our behalf before we are unemployed, homeless, and trampled upon.

Friends, these are heart-rendering letters. To those who discriminate or collude with discrimination against educational psychologists, I say, *Shame on you!*

Psychologists aim to be skilled helpers. According to Gerald Egan, ideally skilled helpers are people with both the resources and the will to act. I would say to the Professional Board of Psychology, to the heads of university departments and to other professional organizations:

“You have access to incredible resources, training, experience and expertise. But do you have the will to act? Your actions, or inactions, will influence whether our profession will respond responsibly to the needs of others and be the noble profession that it should be, or whether our endeavours will be hindered by psychology’s own internal strife.”

EPASSA is at the forefront of attempts to protect the profession. As I said yesterday, EPASSA will not stand by and idly watch discrimination against educational psychologists and our clients. We will fight against the illogical and unfair categorization that the Professional Board for Psychology, the Council for Medical Schemes, the Clinical Psychology Forum and several medical aids promote and/or collude with.

In the second half of this year, EPASSA will hold its second Annual General Meeting. We hope to see you all there. In the meantime, please look out for EPASSA’s newsletters, our emails in the form of *EPASSA Pulse*, our postings on *Facebook*, *LinkedIn* and our website, and coverage in the press. Let us have your feedback. Please continue supporting us and please spread the word about EPASSA’s importance to educational psychologists.

I wish you all well. Thank you for joining us at EPASSA’s first-ever annual conference – the prototype, I hope, for what will be future such events. Thank you, and *Bon Voyage*.

“There comes a time when one must take a stand that is neither safe, not politic, nor popular. But one must take it because it is right.”



Martin Luther King Jr,
address to American Psychological
Association, 1967.

Contact EPASSA

082 418 0645

epassainfo@gmail.com

Website:

www.epassa.net

Facebook:

Educational Psychology Association of South Africa

LinkedIn:

Educational Psychology Association of South Africa

