

SPECIALTIES AND ACCREDITATION IN PSYCHOLOGY

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This paper assumes that Professional Psychology in Spain has become mature enough to have a permanent structure of specialties and subspecialties (under the name of Experts). We analyze the state of this topic in Spain and professional organizations of psychologists from around the world, with special emphasis on those culturally and sociologically close to us. We differentiate between official specialty titles and those endorsed by professional organizations, in our case the Associations of Psychologists and the connection between them. We produce, for discussion in the psychologist community, a proposal that includes a limited number of specialties, unlimited expert qualifications and accreditation procedures with the minimum conditions for obtaining them.

Key Words: *Specialties, Accreditation, Expert*

Este trabajo parte de la base de que la Psicología Profesional ha alcanzado en el estado español la madurez suficiente para tener una estructura permanente de especialidades y subespecialidades (bajo la denominación de Expertos). Se analiza el estado de la cuestión en España y en las organizaciones profesionales de psicólogos de otras partes del mundo, con especial hincapié en las cultural y sociológicamente próximas y de nuestro entorno. Se diferencia entre los títulos de especialidades oficiales y los avalados por organizaciones profesionales, en nuestro caso Colegios de Psicólogos y la conexión entre ellas. Se realiza, para su discusión por la comunidad de Psicólogos, una propuesta que incluye un número limitado de especialidades, ilimitado de títulos de expertos y los procedimientos de acreditación con las condiciones mínimas para su obtención.

Palabras Clave: *Especialidad, Acreditación, Experto.*

In a well-known article published in Spanish, Matarazzo (1989) spoke against the specialties in psychology, arguing, among other things, that they could lead to the dismemberment of the common core and the generation of various unconnected professions. Over 20 years later, it seems that this danger has dissipated and now no one doubts the unity of Psychology as a basic discipline that generates different professional applications from a common core.

With the backing of 120 years of history, Psychology is one of the areas of knowledge that is already part of our socio-cultural heritage: it has an established theoretical corpus, which is based primarily on data from research within the parameters of our culture at this historical moment; it is part of the learning programs in universities and formal educational systems in all countries worldwide; and it forms the basis of professional practices

that are widely recognized socially and, in some cases, officially, serving large segments of the population. It has completed all of the phases that characterize the definitive establishment of a discipline. There may not be unanimous agreement on whether Psychology belongs to a group of specific knowledge from the point of view of research and teaching; its link oscillating between Health Sciences and Social Sciences. It is likely to maintain a certain duality, but with a marked tendency to be ascribed professionally to the area of knowledge of Health Sciences (Buela-Casal, 2004), as evidenced by the majority of schools of Psychology in Spain being affiliated to this area and the recent regulation of Health Psychology. This is also the approach in countries that are a strong reference for Psychology, such as the USA or the UK.

From the point of view of professional competence there is virtually no area that involves human activity in which psychology has not developed a professional competence or shown the potential to do so, namely mental health and health in general; the world of education; the company

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and work; social and community activities; sports, family relationships; leisure; justice; penitentiary institutions; the military; the emergency services, etc.

It follows that the professional qualification of origin and that identifies us is that of psychologist, which in terms of training is guaranteed by a degree in Psychology. However, given the growth in knowledge and applications that psychology has experienced in the past 50 years, it seems unrealistic to expect that, in the future, the degree qualification will grant the knowledge and skills for practice in all areas of Psychology. It is no longer possible to think of a versatile and knowledgeable psychologist who, like a Renaissance scholar, understands all areas and can tackle all kinds of tasks. On the contrary, a pattern of increasing specialization has emerged in the profession, which in education is manifested through different Master's programs that clearly aim to specialize, including in research.

If this description of the current status of the profession is considered judicious, it appears that now is the time for collegial planning and organization regarding the various specialties related to the professional practice of psychology, their recognition and their connection within schools as well as the process of their acquisition, maintenance and professional recognition.

This paper provides a description of the current situation in our country and a study of the scenario in several others regarding the specialties in psychology and their accreditation processes. A series of considerations are outlined and finally a proposal is presented, comparing the situation in Spain with that of other European countries.

SPECIALTIES IN PSYCHOLOGY IN SPAIN

The recognition of a specialty can occur at two levels: official recognition, from the government, which has legal consequences, or recognition by professional organizations, represented in Spain by the official associations of psychologists (COPs) based on concepts such as service to society, a guarantee of quality in professional services, social prestige, fighting intrusion, and continuing education; but which has no direct legal impact. If a specialty is recognized only by the professional organizations, it does not necessarily entail legal consequences, but the social ones can be powerful and influential, both for the association members and society.

Official recognition

In Spain, at present, there is only one specialty in Psychology with official recognition: Psychologist Specialized in Clinical Psychology (PsiCl).

The specialty in PsiCl has been recognized since October 1993 at a regional level and since December 1998 nationwide by Royal Decree 2490/1998. It is accessed through the training program to become an Internal Resident Psychologist (PIR), which has a set duration of four years, preferably undertaken within the mental health services, although it includes rotations that encompass other health areas. Thus the title of Specialist in Clinical Psychology can be equated to what has traditionally been understood as a mental health specialist. A certification procedure has also been established for professionals practicing prior to its legal regulation.

Recently, psychology has been officially recognized as a health profession through Law 5/2011 of the Social Economy approved March 16, 2011 and the General Public Health Law 33/2011 adopted in October of the same year. These laws recognize the legal authority of the Health Psychologist to practice in health facilities, whereas the practice of clinical psychology in public institutions is limited to those holding the official title of clinical psychologist. The title of Health Psychologist will be accessed via a master's degree, which universities must organize in the next three years, having established a transitional process for the recognition of professional psychologists during these three years via a postgraduate master's degree or by showing a professional résumé related to subjects in the Area of Personality, Evaluation and Psychological Treatment or Clinical and Health Psychology from the schools of psychology. The definitive accreditation system for veteran practitioners has yet to be defined.

Clearly this legislation is an important step in the official recognition of specialties in Psychology, situated within a professional framework where experience has shown that these changes occur first: professional practice related to the clinic and health. Obviously we cannot yet evaluate the consequences and the impact this will have for the profession, but it is expected that it will affect, in some way, the general structure of professional accreditations and their processes as, we shall see, happens in other countries.

Collegial recognition

An important milestone in association or collegial



accreditation is the Certificate of Accreditation for Psychologists Specializing in Psychotherapy, from the European Federation of Psychologists' Associations (EFPA). This certificate falls within what we refer to as a specialist qualification, which we will differentiate from that of 'expert'. The wording of the certificate recognizes that a psychologist has the skills needed to practice psychotherapy, and allows the public to identify psychologists that are qualified and have the necessary skills to be Psychologists Specializing in Psychotherapy. It is also evidence that these are psychologists that are committed to the vital continuous professional training, and it is the psychologist's quality mark, which does not restrict the professional practice of psychologists who do not wish to apply or do not fulfill the requirements.

In 2012 in Spain the special process for obtaining this certificate in the category of veteran expert was closed, it being necessary thereafter to be trained via the psychotherapy programs accredited by the EFPA. However, this accreditation has no official recognition other than that of the associations forming the EFPA, including the Spanish national associations of psychology through the General Council of Psychologists Associations. To date more than 2,400 associates have been certified nationwide.

The EFPA itself is currently designing a specialist qualification in the area of Occupational and Organizational Psychology.

Regarding the existence of processes of professional accreditation by the national associations of psychology, there are already a number of examples in our country.

Accreditation processes are open via the Official Association of Psychologists of Catalonia in two areas: Forensic Psychology and Neuropsychology. Both have been carried out by their respective Professional Sections: Legal and Forensic Psychology and Clinical and Health Psychology (Neuropsychology Group).

- ✓ Forensic Psychology: The accreditation process began in 2007. Two access routes were established, one for professionals with a specific master's or postgraduate qualification and another for veteran experts without such training but with extensive professional experience. Sixty-six applications were submitted, and 57 people were accredited as Expert Psychologists in Forensic Psychology.
- ✓ Neuropsychology: The accreditation process began in 2006, with the first associates accredited in 2008. In this initial process two access routes were considered,

for professionals with postgraduate or master's qualifications and veterans without this training who have extensive professional experience. One hundred and forty-eight applications were submitted, and 118 individuals were accredited as Expert Psychologists in Neuropsychology. A second accreditation process began in 2011.

In both cases, efforts have been made to disseminate the professional accreditation in their specific fields and other sections have accreditation procedures underway.

The College of Psychologists of Madrid, also through its Professional Sections, has two professional accreditation procedures: that of Expert Psychologist in Coaching and Expert Psychologist in Neuropsychology.

The creation of the first Council Divisions has generated new initiatives in Professional Accreditation, such as the work of the Division of Sport and Physical Activity or the Division of Occupational, Organizational and Human Resources Psychology. Indeed, the internal regulations of the Divisions distinguish between ordinary and accredited members, which will lead to the development of regulations for accreditation. Other accreditation procedures are also planned, such as Expert Psychologist in Emergency and Disaster Psychology and Expert Psychologist in Coaching.

COMPARATIVE STUDY

This section analyzes the situation in some of the major professional organizations internationally, primarily through searching their websites. We must differentiate between the sections or divisions that make up the majority of professional organizations of psychologists, understanding that these are areas of strengthening and developing psychological knowledge with or without direct professional projection in the areas of professional accreditation that are defined by their direct professional projection.

United Kingdom

The British Psychological Society (2012) proposes 8 areas of psychology in which one may be accredited:

- ✓ Clinical Psychology
- ✓ Psychological Counseling
- ✓ Educational Psychology
- ✓ Forensic Psychology
- ✓ Health Psychology
- ✓ Neuropsychology
- ✓ Work Psychology



✓ Sports Psychology

✓ Teachers and Researchers in Psychology

Almost all the areas mentioned above are regulated by the Health Professions Council (2012) (HPC), the official body that oversees the quality of health professionals and their service to the public. Noteworthy in this regard is the definition and regulation of "Professional Psychologist" carried out by the HPC to differentiate these from other psychologists. Professional psychology can only be practiced by registration with the HPC.

In the case of the UK, the processes of specialization are highly ordered, structured and organized around a limited number of accreditations: eight in total. There is a tendency to group these in large specialties such as those relating to health.

France

There is no single professional organization of psychologists, nor is there a protocolled process of specialization and accreditation. Each organization has its own system. The French Psychological Society and the National Union of Psychologists are noteworthy for their number of registered members. It is difficult to quantify exactly the psychologists in clinical activity or those in other specialties, since there is no equivalent organization to the Medical Association.

The official studies of Psychology are organized in a traditional way (Paineau, 2004; Dan Popelier, Lymes, Tedeschi, and Grazini 2007): Bachelor, Master, and finally, Postgraduate Diploma in Psychology (DESSP), with a clear professionalizing vocation and whose main specialties include Clinical Psychology, Work Psychology and Social Psychology, varying from one university to another. With the latter diploma, professionals can practice in general or psychiatric hospitals, day hospitals, medical-psychological centers, etc. Many psychologists undertake psychoanalytical training, at the same time as their university studies, or in another context, and they become established as psychoanalysts or clinical behaviorist psychologists, etc. There is a longer tradition of grouping by schools than in other countries.

Another way to train as a psychologist in France is to study at the *École des Psychologues Praticiens* founded in 1951. It is a private higher education establishment that prepares students for practice in the areas of health, business, education and law. Its aim is to train generalists within the fields of application of psychology.

One can also study for the Psychologist Diploma at the

National Conservatory of Arts and Trades (CNAM) and obtain a State Diploma in School Psychology, or those of Psychological Guidance Counselor (COP) or Occupational Psychologist.

Thus, in France, there is no uniform or orderly process of specialization.

Germany

The German Psychology Society (DGP) has a number of specific areas of study, but these do not constitute areas of professional expertise, as they mix those that clearly have this orientation (Forensic Psychology) with those of academic specialization (General Psychology), and they are more like the current equivalent of our sections and the Divisions of the APA.

Italy

To become a psychologist in Italy, it is necessary, after graduating, to spend a placement year under the supervision of a qualified psychologist. The placement year is a prerequisite for sitting the State examination, which qualifies individuals to practice the profession.

As for the specialty, psychologists have the opportunity to attend university for postgraduate master's training - levels I and II - doctoral schools or specialist schools, these being awarded by the Ordine degli Psicologi del Lazio (2012):

- ✓ Clinical Psychology
- ✓ Neuropsychology
- ✓ Life Cycle Psychology
- ✓ Health Psychology
- ✓ Psychological Evaluation and Counseling

In Italy, there are also private schools of specialization in psychotherapy, with a minimum duration of four years, recognized by the Ministry of Education, Universities and Research (MIUR), which issue a specialist qualification in Psychotherapy, a diploma equivalent to the schools of the corresponding university. A psychologist who attends a private school of specialization must complete four years of practical experience as a psychotherapist in a center - public or private - associated with the same graduate school.

In Italy, there is no professional recognition process for the psychological specialties. These are determined by the type of postgraduate studies and academic qualification held, associated with the public or private institutions and validated later in an official register of professionals. Registration of psychologists is carried out within the



MIUR, which is the official registration body for professionals with legal authorization to practice. Permission is generic for the whole Psychology profession. However, psychological specialties that the universities or other colleges offer are limited in number and implicitly correspond to large areas of specialization in Psychology.

Sweden

In Sweden, specialization is granted by the Swedish Psychological Association (2012), after the due process of accreditation. The difference is established between the large areas of professional practice and several subspecialties within them, acknowledging the following:

- Psychology of Work/Labor:
 - ✓ Work Environment (Psychosocial Risk)
 - ✓ Leadership
 - ✓ Organizational Psychology
 - ✓ Personnel Selection
- Clinical Psychology:
 - ✓ Child and Adolescent Psychology
 - ✓ Forensic Psychology
 - ✓ Disabilities
 - ✓ Health Psychology
 - ✓ Psychology of Abuse and Dependence
 - ✓ Neuropsychology
 - ✓ Psychological Treatment/ Psychotherapy
 - ✓ Adult Clinical Psychology
- Educational Psychology:
 - ✓ Disability
 - ✓ Psychology of Early Childhood
 - ✓ Health Psychology in Education
 - ✓ Personnel Management and Organization of Educational Systems
 - ✓ School Psychology
- Teaching and Research in Psychology

Thus, Sweden presents a new model consisting of a very small group of broad areas of specialization, the traditional ones in psychology, within which there is a group of subspecialties in an orderly and structured process similar to the British system.

Switzerland

In Switzerland, there are specialties that are supported by the Swiss Federation of Psychology (FSP). They have no official legal recognition, psychologists can practice without them, but they offer social prestige and it is common for the patient/client to take an interest in the specialty of the psychologist they go to. The FSP (2012) recognizes the following:

- ✓ Psychologist Specializing in Psychotherapy
- ✓ Psychologist Specializing in Child and Adolescent Psychology
- ✓ Psychologist Specializing in Professional Development and Human Resources
- ✓ Psychologist Specializing in Clinical Psychology
- ✓ Psychologist Specializing in Neuropsychology
- ✓ Psychologist Specializing in Road Psychology
- ✓ Psychologist Specializing in Forensic Psychology
- ✓ Psychologist Specializing in Health Psychology
- ✓ Psychologist Specializing in Sports Psychology
- ✓ Psychologist Specializing in Coaching Psychology

Thus, there is a reasonable number of specialties that are recognized by a professional institution, again in an orderly and highly structured process.

USA

The American Psychological Association (APA) has 56 divisions. Obviously there is no equivalence between division and specialization, as these define areas of interest within psychology which may or may not coincide with groups of professional skills. In fact, the APA (2012) recognizes the following specialties:

- ✓ Clinical Neuropsychology
- ✓ Health Psychology
- ✓ Psychoanalytical Psychology
- ✓ Teaching of Psychology
- ✓ Clinical Psychology
- ✓ Clinical Child Psychology
- ✓ Counseling Psychology
- ✓ Industrial-Organizational Psychology
- ✓ Cognitive and Behavioral Psychology
- ✓ Forensic Psychology
- ✓ Family Psychology
- ✓ Clinical Gerontopsychology

The level of professional training is determined by the level and academic degree acquired in some specialties, e.g. in clinical psychology, a higher level is required: a doctorate program with postdoctoral professional training.

In the structure of the APA we can observe, therefore, the equivalence of professional competence and an academic degree (master's/doctorate) plus supervised training. The requirement for high competence presupposes a high degree of qualification. There are also two points of interest, in addition to the already mentioned lack of identification between division and specialty: firstly, although the list of specialties is more extensive than in



most western countries, it remains limited; and secondly, there are simultaneous specialties for professional competencies and those obtained in the context of the schools of psychology.

Australia

In order to practice, Australian psychologists are required by law to enter the Psychological Society Register in their state or territory, but this does not imply the obligation of specialization. Following the Anglo-Saxon model, specialties established by the Australian Psychological Society (2012) are as follows:

- ✓ Clinical Neuropsychology
- ✓ Clinical Psychology
- ✓ Community Psychology
- ✓ Counseling Psychology
- ✓ Educational and Developmental Psychology
- ✓ Forensic Psychology
- ✓ Health Psychology
- ✓ Organizational Psychology
- ✓ Sports and Exercise Psychology

Thus, the Australian model is similar to the British one; it has few specialties and all are recognized by their professional organization.

CONSIDERATIONS

Regarding the origin of the qualification: the difference between a university degree and professional accreditation

Possibly the biggest transformation undergone by the Spanish state university system after the restoration of democracy is the implementation of the system of bachelor's and master's degrees in the context of the Bologna Process. This process involves changing the classic model of the Spanish university (based on the Napoleonic models) for that of the Anglo-Saxon university, which focuses on the linking of university degrees to the labor market. One of the formative stages is the official master's program, which – despite having a specific path connected with research – has a clearly professionalizing design, as a fundamental part of the content is linked to specific professional skills.

At this point, the question arises whether a master's degree implies specialization and is therefore recognized by a professional organization (and potentially also the official authority), as in the Italian model, or whether there is a process for recognition of professional expertise (professional accreditation) established above the

academic degree, as in the case of the Anglo-Saxon model.

In our opinion, the recognition of professional accreditation seems inevitable in the current environment of the psychological profession, which in recent years has greatly diversified its supply and has fields of work that require professional organization and recognition. Several arguments support this view.

Firstly, given the substantial modifications to the university studies available and the alignment with a European framework for teaching and research, we must pay attention to our neighboring countries and assume the need to establish general frameworks of professional activity that, in accordance with the references cited above, provide a professional body to the fundamental areas of psychology work.

Secondly, this option should not be interpreted as a mere formality with no consequences in the professional field. The fact that there is currently no formal legal effect of collegiate accreditation does not prevent its procurement from entailing consequences. Essentially, in an environment where quality and evaluation criteria are permanently present in professional activity, collegial organization must assume and establish mechanisms to create access to a certain professional specialty, whilst also ensuring that this accreditation signifies the quality of the accredited professional. The endorsement of the association, as a prestigious institution that recognizes competence in an area of psychology and identifies the quality and prestige of the professional, will crystallize into social recognition of professional quality and excellence.

Finally we believe that the system of professional accreditation is right for promoting lifelong learning processes, which will play an important role in the future of professionals and colleges.

In summary, we propose that the qualification of specialist in a professional field of psychology be awarded by the association on the basis of prior academic accreditation, awarded by the universities (ideally of an official nature), plus the fulfillment of a series of clear and known conditions defined by the collegiate authorities.

Regarding the naming, three levels are distinguished: title, specialist and expert

If the above approach were adopted, the structure that would define professional competence in psychology



TABLE 1
SUMMARY OF SPECIALTIES RECOGNIZED BY COUNTRY

United Kingdom (9)	<ul style="list-style-type: none"> ✓Clinical Psychology ✓Psychological Counseling ✓Educational Psychology ✓Forensic Psychology ✓Health Psychology ✓Neuropsychology ✓Occupational psychology ✓Psychology of Sport and Exercise ✓Teachers and Researchers in Psychology 	British Council of Psychologists (Professional with legal consequence)
Italy (6)	<ul style="list-style-type: none"> ✓Psychology of the life cycle ✓Clinical Psychology ✓Health Psychology ✓Neuropsychology ✓Psychological Evaluation and Counseling ✓Occupational Psychology 	Academic degree and registration
Sweden (3)	<ul style="list-style-type: none"> ● Occupational Psychology <ul style="list-style-type: none"> ✓Working environment ✓Leadership ✓Organizational Psychology ✓Recruitment ● Clinical Psychology <ul style="list-style-type: none"> ✓Child and Adolescent Psychology ✓Forensic Psychology ✓Disabilities ✓Health Psychology ✓Psychology of Abuse and Dependence ✓Neuropsychology ✓Psychological Treatment/ Psychotherapy ✓Adult Clinical Psychology ● Educational Psychology <ul style="list-style-type: none"> ✓Disabilities ✓Early Childhood Psychology ✓Health Psychology in education ✓Personnel Management and the Organization of Education Systems ✓School Psychology 	Swedish Association of Psychology (Professional)
Switzerland (10)	<ul style="list-style-type: none"> ✓Psychologist specializing in psychotherapy ✓Psychologist specializing in Child and Adolescent Psychology ✓Psychologist specializing in career development and human resources ✓Psychologist specializing in Clinical Psychology ✓Psychologist specializing in Neuropsychology ✓Psychologist specializing in Road Psychology ✓Psychologist specializing in Forensic Psychology ✓Psychologist specializing in Health Psychology ✓Psychologist specializing in Sports Psychology ✓Psychologist specializing in the Psychology of Coaching 	Swiss Federation of Psychology (Professional)
USA (12)	<ul style="list-style-type: none"> ✓Clinical Neuropsychology ✓Health Psychology ✓Psychoanalytical Psychology ✓Teaching of Psychology ✓Clinical Psychology ✓Clinical Child Psychology ✓Psychology of Counseling ✓Industrial-Organizational Psychology ✓Cognitive Psychology and Behavioral Psychology ✓Forensic Psychology ✓Family Psychology ✓Clinical Gerontopsychology 	American Psychological Association (Professional)
Australia (8)	<ul style="list-style-type: none"> ✓Clinical Psychology ✓Community Psychology ✓Psychology of Counseling ✓Forensic Psychology ✓Health Psychology ✓Organizational Psychology ✓Psychology of Sport and Physical Activity 	Australian Psychological Society (Professional)



would be shaped in a pyramid-like scheme similar to that of the medical specialties. At the apex of the pyramid would be the title "psychologist", the basic condition of the whole process, guaranteeing the functional unity of psychology, defending the original formulation (Matarazzo, 1989; Peiró & Munduate, 1994) of one profession with multiple applications.

The professional specialty would be situated at the second level. The primary relationship between specialty and title must be defined, in our opinion, by the community of experts represented by the divisions/sections. As we shall see in the next section, it is usual to distinguish between practitioners before and after Bologna (senior/junior), and postgraduate training requirements can vary greatly because the contexts in which psychological specialties move are varied and not uniform. However, we understand that the specialty will be necessarily linked to the master level in the future. This accreditation is based on a horizontal axis of specialization and corresponds with the broad traditional areas of psychology and the level of specialist.

Finally, there remains the issue of subspecialties. Professional experience shows that specific high-level skills acquired by a psychologist in his or her work can go beyond the characteristics of one of the main specialties (clinical, legal, etc.). For example, a clinical psychologist who has spent much of their training and work rehabilitating chronic mental patients may see themselves as a good clinical psychologist with great skills in this particular area. This type of accreditation of professional competences is connected to the broad areas of psychology on a vertical axis and corresponds with the level of expert.

At this last level, the possibilities are numerous and not exclusive (a forensic psychologist can specialize in issues related to family law and become extremely competent in assessing the credibility of the witness, but may not be interested in other matters). In fact, no professional organization has yet made a catalog of these possible subspecialties in psychology. The closest to this would be the Swedish Psychological Association. In our opinion, there should be no limitation established for this third level, which would be the base of the pyramid and should consist of a list of subspecialties within each specialty, a list that is modifiable in changing circumstances. In fact, this is the level that is probably most directly related to the changing demands of the labor market. The dominion of

any of these subspecialties would warrant the generic name of "Expert".

Thus the scheme would be defined by a psychologist who has one or a number of main psychological specialties and has achieved high competence in several specific areas within their specialty (Psychologist Specialized in Educational Psychology, Expert in Early Childhood Psychomotricity; Psychologist Specialized in Forensic Psychology, Expert in Assessment of Damage and Repercussion, etc.).

Regarding the starting position: one degree, few specialties, many subspecialties

In our opinion, there is no discussion as to the start and end point. There should be just one professional title, "Psychologist". Conversely, it is not possible to limit the subspecialties, as they are theoretically infinite and changing, and they depend on scientific progress and the social needs that arise related to each specialty. This is something that simply cannot be predicted, but it is possible to enable each specialty to adapt and respond to the demands of society and the market in the medium-short term.

Thus, the discussion revolves around the specialties. In this respect, two positions can be assumed: restrictive or lax. The restrictive position involves a limited number of items that are very generic, whereas the lax one involves a larger number and reaches a higher level of expertise. It is difficult to define what constitutes a large or small number of specialties. In other countries' organizations, there are never fewer than four or five (with the aforementioned exception of Sweden), and never more than twelve.

These are the advantages of the former position:

1. It probably represents better the tradition of psychology and is, therefore, easier to define in terms of the conditions of accreditation, for example in terms of the masters' that support them.
2. A greater number of professionals can take shelter under its umbrella regardless of the subspecialties they have and, therefore, it can be reached by almost all associated members.
3. It is easier to coordinate with the international professional organizations since they will be identified more easily with the common areas.

The advantages of the latter position, the lax choice, which doctrinally advocates a greater number of specialties, are the following:



1. It better represents the specific work areas of each psychologist and, therefore, it can make it easier to defend their specific interests.
2. It can cover a greater number of emerging fields.

Weighing up both types of argument, we believe that the interests of the profession are better defended by opting for the former position, that is, a reduced number of specialties, in a traditional style, that can accommodate several subspecialties. That is to say, the model we propose would be defined as follows: one profession (psychology), a few specialties (maximum ten) and multiple subspecialties.

Some organizations in some countries are also articulated by specialties defined around models (psychoanalysis, behavioral, etc.). In our opinion, this should not be taken into account in the proposal on the grounds that the theoretical model does not encompass areas of professional competence. The competence required, for example, in working as a clinical psychologist, that it can be exercised from one perspective or another or from a combination of perspectives. Specialties according to models should be included within professional organizations equally, which can obviously be arranged in associations.

It can be argued whether it is appropriate for each specialty to have a record of subspecialties that are updated regularly, the problem arising from how to confirm a subspecialty according to a specialty. Although, of course, political and/or administrative issues come into play and associations must ensure reasonable coordination, this is primarily a technical issue, so each division should be left to decide if they believe that this should exist. And if so, they should regulate the recognition of subspecialties. In this sense, the association should establish a framework procedure to avoid conflicts or duplicities.

Regarding the legal consequences

As discussed above, the framework upon which this is based is the distinction between official and professional recognition. Official recognition has obvious legal implications, for example that of being recognized within the healthcare professions register. The trend should be for professional recognition to precede official recognition and to serve as the basis for establishing it, where appropriate.

Obviously this should be easier for some specialties than for others, and for some it may not be desirable or even possible. In all probability, among the former are those

most related to public services and among the latter are those most directly involved in the free practice of the profession or activities related to private companies. Each specialty must define its interest in being regulated officially, the advantages and disadvantages that this would create and the chances of this being possible in the medium-short term.

ACCREDITATION PROCEDURES

Before outlining the common factors of the accreditation processes in different countries, we must remember that the existence of two extraordinary routes of accreditation is possible:

1. The organization assumes the accreditation obtained via official channels and integrated into the national systems of professional recognition, as in the case of the Spanish PIR.
2. The organization assumes the master's degree and/or doctorate awarded by the university as accrediting the specialty. This could be the case with the newly recognized degree of Health Psychologist; we are currently waiting to know how the catalog of master's degrees in the area of psychology will look ultimately.

Regarding the ordinary processes of accreditation examined earlier, they all incorporate four conditions to a greater or lesser measure. Their strength and exceptions are analyzed:

1. The possession of a Degree in Psychology. This is a strong condition, present in all the processes analyzed.
2. Postgraduate training in the specialty. This is a strong condition, present in all the processes analyzed. It has two variants:
 - 2.1. Master's degree or postgraduate degree equivalent in hours. This is the most common, especially in the context of southern Europe.
 - 2.2. Presentation of a research thesis leading to a Ph.D. or equivalent degree. Frequent in Anglo-Saxon and Nordic countries and sometimes exclusive to the clinical specialty, but it can be extended to other specialties.

The exception is the case of veteran professional experts, presumably with extensive professional experience, but no master's degree. They are usually required to prove their hours of training in the specialty within any context, including the private arena.

3. Being an association member or belonging in full right to the accrediting organization. This is a condition present in all of the processes analyzed.



4. Fulfilling certain requirements. This is a strong condition (established by all), but it varies depending on the requirements of different countries. In general these are as follows:
 - 4.1. Hours of training. The master's degree or doctorate is generally considered sufficient; the lesser of the two requires additional hours, variable in number, in very specific areas for accreditation on the vertical axis.
 - 4.2. Minimum experience in the practice of the specialty. Most consider this an essential requirement, although the duration varies by country and specialty (with a tendency to a higher number of years being required in clinical specialties), the least demanding do not ask for proven experience (those that consider the degree to be sufficient). The requirement may vary as to whether the practical experience must be carried out under the supervision of a tutor or not and in a public and/or private center, including the free practice of the profession. University professors tend to be exempt from this requirement, since they satisfy the training needs by definition.
 - 4.3. Some form of examination before a judging panel. This is a weak condition that is usually not specified, and can take place through the defense of a curriculum, a report or any other professional document, or by taking a traditional exam.

PROPOSALS

Depending on the data and arguments presented so far and considering the current structure, we make the following proposals for submission to the various levels of discussion, evaluation and modification by the Collegial Boards of Government. Logically, it would be desirable that the final outcome were to constitute a single organizational unit, which could be called the "National Accreditation System for Psychological Specialties."

The following specialties are emerging and their dependency in the order established in the article by Santolaya, Berdullas and Hermida (2002):

1. Clinical Psychology: Division of Clinical and Health Psychology
2. Health Psychology: Division of Clinical and Health Psychology
3. Psychotherapy: Division of Clinical and Health Psychology

4. Neuropsychology: Division of Clinical and Health Psychology
5. Educational Psychology: Division of Educational Psychology
6. Psychology of Work, Organizations and Human Resources: Division of the same name
7. Psychology of social intervention: Division of the same name
8. Psychology of Traffic and Security: where appropriate the Division of the same name
9. Legal and Forensic Psychology: Legal Psychology Division
10. Psychology of Physical Activity and Sport: Division of the same name

The Divisions, through their Coordinator, shall establish their rules of accreditation, which will follow the general guidelines established by the Board. The Coordinator shall ensure respect for the styles, rules and democratic procedures throughout the whole of this process.

Each Coordinator shall establish the way of relating the corporate title of specialty to the official degree and the way to progress towards the official recognition of the corporate title, if it is deemed appropriate. For example, it would seem logical that in clinical psychology accreditation were automatically recognized once upon awarding of the official degree is obtained.

The accreditation processes must always take into account the two realities of the profession: the veteran experts and graduates with a master's and/or a PhD. An extraordinary period of accreditation, limited in time, should be established for the former and a standard time procedure for the latter.

Each division shall establish whether or not it is necessary to have a catalog of subspecialties and the type of recognition and process for them. The Coordinator or, where appropriate, the Governing Council shall act as an arbitrator in case of dispute.

It is recommended that the associations establish a system of continuing vocational training in coordination with the Coordinators of the Divisions to favor the development of specialties and facilitate access to the members.

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LEGALISLATION

- Law 5/2011, passed 29 March, Social Economy. BOE nº 76, on 30 March 2011.
- Ley 33/2011, passed 4 October, General Public Health. BOE nº240, on 5th October 2011.
- Royal Decree 2490/1998 passed 20 November, by which the official title of Psychologist Specialized in Clinical Psychology is created and regulated. BOE nº 288, on 2 December 1998.