

APA SEEKS TO ACCREDIT PSYCHOLOGY MASTER'S PROGRAMS

Increasing demand for psychological services and other factors have led APA to create competencies and offer accreditation to master's-level psychology programs, just as it does for doctoral-level programs

BY STACEY LARSON, JD, PsyD

APA policy states that the doctorate is the minimum level of education required for entry into professional practice as a psychologist. But several factors—including the need to expand access to mental health care, concerns about current standards for accrediting master's-level psychology programs and the scope of practice for master's-level practitioners—have prompted APA to re-examine its stance on accrediting master's programs.

APA is the only psychology program accreditor recognized by the U.S. Department of Education. APA only accredits doctoral psychology programs, internships and postdoctoral programs, although it has developed national standards for high school psychology curricula as well as guidelines for the undergraduate psychology major, core competencies for interprofessional collaborative practice for doctoral-level health service psychology (HSP) and standards for providers of continuing education.

Many master's programs in psychology are not accredited. The Masters in Psychology and Counseling Accreditation Council

(MPCAC)—which is not a federally recognized accreditor—is the only organization that accredits master's-level clinical and counseling psychology programs. There are more than 30 accredited programs.

Cathi Grus, PhD, APA's acting chief education officer, says accrediting master's programs would help APA close a gap in the psychology training spectrum and ensure that students graduating from those programs have the knowledge, skills and attitudes needed for professional practice. "Accreditation provides quality assurance for students and is part of protecting the public by ensuring students are trained in programs that meet standards set by the profession," Grus says.

To continue promoting quality and excellence in education and training across all levels of education, in 2018 APA's Council of Representatives approved a motion to pursue the accreditation of HSP master's-level programs, which include clinical, counseling and school psychology. Competencies for these programs are now being developed.

"Developing competencies for these

programs and accrediting them could increase the numbers of clinicians trained in the science of psychology practice at the master's level and increase access to psychological services for consumers," says Lynn Bufka, PhD, APA's senior director for practice research and policy.

A PUSH FOR APA INVOLVEMENT

One issue that's driving APA to accredit master's programs is the changes to the standards used by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) to accredit master's-level counseling programs. In 2013, CACREP began to require counseling program faculty to have doctoral degrees in counselor education, not psychology. As a result, some counseling psychology master's programs were forced to close, resulting in a smaller pool of future clinicians available to provide services. Other programs ended up replacing most of their psychology faculty members.

"CACREP standards have affected who we can hire," says Jesse Owen, PhD, a professor in the University of Denver (DU) counseling psychology department. "Our counseling psychology folks have been training master's-level counselors for decades, so it seems odd to have an accreditation body that excludes an interdisciplinary approach to training."

These types of changes in accreditation standards affect the makeup of graduate program faculty as well as licensing regulations. State licensing boards rely on outside organizations, such as MPCAC and CACREP, to develop standards for education and training leading to licensure for master's-level providers of psychological services.

"CACREP now has more accredited programs than APA does," says Owen, who along with several other psychologists, faculty and staff from DU is a member of the DU Licensure Task Force, chaired by Lynett Henderson Metzger, JD, PsyD, a clinical associate professor and assistant director of DU's master's in forensic psychology program.

"Scope of practice is directly tied to

how powerful these accreditation bodies are at the national level and the state level, and they can have a major influence on insurance companies and state licensure boards,” says Owen.

In line with APA’s stance on accreditation of doctoral programs, APA’s Model Act for State Licensure of Psychologists encourages state licensing boards to recognize the doctorate as the minimum educational requirement for providing professional services as a psychologist, but this is not the consensus at the state level. Currently, 34 states require practitioners to have a doctorate, while 17 states allow individuals with master’s degrees to practice independently or with supervision.

Many of these 17 states require graduates to have a master’s degree from a psychology program, or from a related field, to apply for licensure. However, there is no consistency in the scope of practice of master’s-trained providers or in the titles they use for themselves once licensed.

“The lack of defined competencies differentiating doctoral-level psychology programs from master’s-level programs combined with a lack of defined scope of practice and clear title distinction differentiating master’s and doctoral psychology providers have led to increased confusion among consumers,” says Deborah Baker, JD, APA’s director of legal and regulatory policy. For example, in West Virginia, master’s-level providers can refer to themselves as psychologists. In Kansas, independent master’s-level practitioners take the title of licensed clinical psychotherapist.

“Without clear delineations specifying the differences in training, title and scope of practice for a doctoral-level psychologist versus a master’s-level provider, people trying to access psychological services may be easily confused when trying to select the appropriate provider,” Baker adds.

For graduates applying for licensure as a professional counselor (LPC), several states now have policies requiring that they have master’s degrees from CACREP-accredited counseling programs. These statutes disenfranchise thousands of individuals with

psychology master’s degrees, or degrees from programs not accredited by CACREP, from becoming licensed providers of mental health services. Data from APA’s Center for Workforce Studies show that 22 percent of people—more than 130,000 individuals—with a master’s degree in psychology worked as counselors in 2017. In addition, 15 percent of those with doctorates in psychology teach at postsecondary programs, including counseling programs.

“Master’s-level practitioners typically work with more underserved clients, often in specialized areas, so they are not necessarily competing head-to-head with psychologists for work,” says Henderson Metzger. “The idea of closing doors to practice seems antithetical to the idea of creating a qualified workforce to meet the unmet mental health needs of many marginalized groups.”

APA’s development of competencies for HSP master’s programs and its work to expand its accreditation standards will not change the state requirements for doctoral licensure, Bufka says, “and it will ensure that APA continues to maintain relevance in the field of psychology.”

Rehabilitation psychologist and APA council member Kim Gorgens, PhD, ABPP, adds that it’s important for APA to have a voice in master’s-level accreditation because this issue has major implications for practicing psychologists. “Psychologists’ job security is in APA having a voice and saying here are the competencies for professional practice at the doctoral level and here are competencies for professional practice at the master’s level,” says Gorgens. “If APA isn’t dictating the competencies required for master’s-level practice, someone else will.”

Others point out that accrediting master’s-level programs could also provide psychologists with a larger pool of candidates to train and mentor, helping psychologists fulfill supervision and consultation competencies. “Accrediting master’s programs allows for psychologists to expand on the competencies we already have to really be able to own them,” says Lavita Nadkarni, PhD, associate dean and

director of forensic studies at DU.

In addition, APA accreditation would provide a path to accreditation for master’s-level psychology programs that cannot, or do not want to, pursue CACREP accreditation in counseling.

APA ACTION

In February 2019, an APA Board of Educational Affairs task force developed a blueprint for APA to follow in pursuing accreditation of master’s programs in health service psychology.

Based on that blueprint, APA has formed a new task force to develop competencies for students in master’s-level health service psychology programs. The group plans to present their competencies to APA’s council in 2020. Bufka says that group will aim to differentiate the expected competencies of graduates with a master’s degree in health service psychology from those with a doctoral degree.

“APA will continue to monitor developments,” Grus says, “but members and students should also be on the alert for any potential changes introduced at the state level regarding licensure eligibility.” •

Jewel Edwards-Ashman contributed to this report.

Resources

American Psychological Association, Task Force on Guidelines for Master’s Programs in Psychology. (2018). *APA guidelines on core learning goals for master’s degree graduates in psychology*.

Grus, C.L. (2019). Accreditation of master’s programs in health service psychology. *Training and Education in Professional Psychology, 13*(2), 84–91.

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Report of the BEA Task Force to Develop a Blueprint for APA Accreditation of Master’s Programs in Health Service Psychology. (2019).