



Alignment of complementary health qualifications to the Australian Qualifications Framework

Australian Register of Naturopaths and
Herbalists submission

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About ARONAH

The Australian Register of Naturopaths and Herbalists (ARONAH) was formally established as a registered non-profit entity in 2010 to provide an independent registration body for the profession of naturopathy and Western herbal medicine. The establishment of ARONAH was precipitated by the gap in public protection caused by delays in the development of statutory registration of these professions, delays brought about by the move from individual state-based registration to the national registration and accreditation scheme (NRAS).

The Constitution of ARONAH requires it to mirror the standards of the NRAS administered by the Australian Health Practitioner Regulation Agency (AHPRA) and the National Law which guides the national registration process. Despite numerous formal government assessments indicating the requirement for statutory regulation of naturopathy and Western herbal medicine, these professions do not currently fall under this scheme.

Following exhaustive national consultation with stakeholders in the development of standards specific to the professions of naturopathy and Western herbal medicine ARONAH began receiving applications for membership in June 2013. ARONAH is the first independent accreditation and registration body in these professions that ensures minimum standards of training and education and promotes the public's interests when visiting these practitioners. ARONAH works with all practitioner members from all professional associations and graduates of all accredited programs to set minimum benchmarks for training and practice, and to provide the public with an independent complaints handling mechanism, as well as liaising regularly with health commissioners, peak consumer groups, health insurers and other health professional bodies to ensure minimum standards across these professions. ARONAH has also been involved in the development of Trans-Tasman standards with regulators and educators in New Zealand. ARONAH standards can be found online at: <http://www.aronah.org/aronah-documents/>.

Due to the disadvantages and weaknesses of self-regulation ARONAH supports statutory regulation of the professions of naturopathy and Western herbal medicine to ensure public protection, and the ARONAH Constitution formally requires it to co-operate with any attempts to statutorily regulate these professions, should this occur in the near future.

ARONAH is committed to increasing standards of training, practice and accountability in the professions of naturopathy and Western herbal medicine. More information on ARONAH can be found on the website: <http://www.aronah.org>.

Response to Discussion Paper

Thank you for the opportunity to comment on the proposed questions regarding the *Alignment of Qualifications to the Australian Qualifications Framework for Complementary and Alternative Health* are outlined below. AS ARONAH focuses on two professions (naturopathy and Western herbal medicine) ARONAH has made detailed responses to each of the questions below with respect to these professions:

1. What are your general views on the mapping presented in Table 1, which suggests CAH Advanced Diploma qualifications could be aligned to Bachelor degree level?

It is the view of ARONAH that not only is it appropriate that minimum expected educational requirement for CAH practitioners including naturopaths and herbalists is Bachelor degree level, it is inappropriate that anything less than Bachelor degree level be accepted. The first government report recommending incorporating naturopathic and herbal medicine education in the degree (then university alone) sector was published in 1975¹. This level of education has been supported as the minimum level appropriate to adequately prepare naturopaths and herbalists for practice by every government review of the regulatory requirements of naturopathy and Western herbal medicine since²⁻⁴. The most recent of these reviews (the Lin report³ – see Appendix 1 attached to this submission) explored this in details and has recommended a four-year Bachelor degree minimum for entry into the professions of naturopathy and herbal medicine

Furthermore, the Australian and New Zealand Standard Classification of Occupations – of which there is a whole-of-government requirement to adopt – has listed naturopaths and herbalists as Skill Level 1 professions requiring a Bachelor level qualification or higher, and have listed this requirement since 1997. It is ARONAH's opinion that initial alignment of naturopathy and herbal medicine education to vocational training was erroneous from the outset. Not only had government reports highlighted the need for these professions to have degree-level training for over two decades before the implementation of the health training packages, Bachelor level education already existed. The first university course in naturopathy had been proposed and developed (though not implemented) by Northern Territory University in 1989⁵, and the first university course in naturopathy was offered by Southern Cross University in 1995⁶. Naturopaths were also registered by the government of the Northern Territory between 1985 and 1992⁷. Registration required graduation from a four-year diploma program, whereas many practitioners today can seek accreditation graduating from programs of less than half that duration. It is ARONAH's belief that these developments should have been more appropriately supported, rather than promoting a model of education in the sector that had already been deemed insufficient for preparing naturopathic and herbal medicine graduates for unsupervised practice, and actively encouraged reductions in education standards in these professions.

However, the necessary transition to AQF 7 as a minimum educational requirement has been prevented by various commercial and political interests – primarily associations and college owners – who may not prioritise public safety or appropriate standards. These interests have been examined in detail in recent critical reviews of naturopathic education⁸ and regulation⁷ (see Appendix 2). This resistance has been in spite of broad support from all

other stakeholders (patients, government, other health providers) for degree-minimum training³. Associations promoting the retention of AQF 6 training have been doing so against the wishes of their naturopathic and herbal medicine practitioner members – the majority of whom support degree-level minimum training for these professions⁹.

2. If you believe that qualifications in Aromatic Medicine, Homeopathy, Naturopathy, Nutritional Medicine and Western Herbal Medicine should become Bachelor degree qualifications, what is your rationale based on the AQF descriptors? Please specify which modality your feedback relates to.

As the scope for ARONAH centres on ensuring minimum standards for competent and appropriate practice of naturopathy and herbal medicine, our submission relates directly to qualifications in Naturopathy and Western Herbal Medicine.

Purpose

The two features of a Bachelor degree which differentiates its purpose from an Advanced Diploma are: *a broad and coherent body of knowledge* and *undertake professional work*.

There is a clear need for contemporary naturopaths and herbalists to be able to apply a broad and coherent body of knowledge and to undertake professional work. Current evidence indicates that naturopaths and herbalists in Australia are providing primary health care services to a significant proportion of the population (approximately 10%¹⁰, increasing in more serious conditions such as cancer¹¹). This primary care role is compounded by the large therapeutic footprint of naturopathic practitioners in Australia – who not only form the largest CAH profession but are also present in many underserved areas where other health services may not be present¹². This often means they are providing the first level of care to individuals who may have substantial and complex health conditions (evidence suggests one-third of CAH patients use their CAH provider as their primary care provider^{13, 14}), and they need to be able to access a broad and coherent body of knowledge to be able to provide appropriate care and referral where necessary. Likewise, a vast number of individuals who consult a naturopath and herbalist also receive care from a conventional health care provider and need to be able to negotiate their role in the care team in a professional manner which respects other health professionals and prioritises patient safety¹⁵. Without such education and critical analysis skills the public are exposed to significant direct and indirect risks to their health and welfare - including potential medication interactions, failure to refer and delayed diagnosis¹⁶.

Knowledge

The key characteristic of the knowledge acquired through a Bachelor degree which distinguishes it from an Advanced Diploma is: *a broad and coherent body of knowledge with depth in underlying principles and concepts as basis for independent lifelong learning*.

The need for knowledge that links closely with underlying principles and concepts is a core feature of naturopathic and herbal medicine and has been so in Australia for many years, as well as linking back to the historical traditions of these two professional practices, both of which have existed as established professions in Australia for over 100 years¹⁷. However,

due to the vocational training package approach to defining naturopathic and herbal medicine practice by therapeutic tools (e.g. herbal medicine, nutritional medicine, massage, homeopathy etc.) – as opposed to the more internationally recognised principles-based “Rippling River conference” definition¹⁸ – this vital element of practice has been severely jeopardised¹⁹. This approach has also led to the removal of valuable elements of naturopathic practice that do not fit this definition. For example, physical medicine and hydrotherapy were extensively incorporated into all naturopathic courses before the development of the health training package²⁰, but most courses now limit training to therapies prescribed by the vocational definition. The absence of requisite competencies which include the core principles of naturopathic and herbal medicine philosophical approach to treatment has resulted in significant concerns amongst the practitioner population.²¹ These concerns link back to the ability for practitioners graduating from AQF 6 courses to utilise the therapeutic tools in the context of the underlying principles and concepts upon which naturopathic and herbal medicine practice is based.

In addition, the absence of a focus on independent lifelong learning in AQF 6 courses compromises the ability for practitioners to provide safe and appropriate care, particularly in the context of the evidence-based paradigm. It is important that contemporary naturopathic and herbal medicine practitioners are able to navigate the interface between evidence-based practice and traditional knowledge.²² This is made possible through a deep knowledge of the underlying philosophical approach to practice as this approach provides a vehicle for understanding and incorporating new health and medical knowledge throughout their professional life²². Naturopathic student focus groups have also established that the current vocational approach to knowledge has made it difficult to learn new and emerging therapies, or to dismiss therapies that are found to no longer be clinically useful, as courses are built around specific therapies as opposed to critical approaches to clinical training and delivery²³.

Skills and Application of Knowledge and Skills

Skills which are expected to be included within a Bachelor degree course and which are not expected from Advanced Diploma training are: *the ability to review critically, consolidate information and knowledge; exercise critical thinking and judgement in problem solving with intellectual independence; and communication skills to present clear, coherent and independent exposition of knowledge and ideas*. In addition, graduates from degree level training are expected to be able to undertake *decision making in professional practice* and show *accountability for own learning and professional practice*.

These skills are vital for any contemporary health practitioner and are particularly important for those who are providing primary health care services to the public. The current Advanced Diploma level of education for naturopaths and herbalists does not provide this training and a number of issues have been identified which can be linked to this training deficit. One such issue is poor inter-professional communication, with preliminary Australian survey work identifying a low level of both formal and informal communication between naturopaths/herbalists and conventional health care providers.²⁴ The result is potential gaps in transfer of information between health professionals providing care to the same

individual which contributes to the aforementioned direct and indirect risks. Additional research in this area has indicated that a profound barrier to effective inter-professional communication between conventional and complementary health care practitioners relates to CAM practitioners use of jargon and ignorance to scientific language.²⁵ This issue needs to be overcome to ensure the public can access safe and collaborative health care.

The ability to critically review and consolidate information and knowledge is imperative for all health practitioners who practice in the contemporary health care system given the value placed on evidence-based practice. This is particularly the case for naturopaths and herbalists who are attempting to navigate between the information and knowledge available through both empirical research and traditional information sources²². In addition, the need for naturopaths and herbalists to exercise critical thinking and judgement in problem solving in clinical practice has also been identified in Australian research²⁶. In particular, practitioners report needing to draw on inductive reasoning when transferring research findings to their clinical practice environment.

Volume of Learning

It is also noted in the discussion paper that the *volume of learning for degree typically starts at 3 years*. The most recent government examination and review of education and regulatory requirements for the professions of naturopathy and herbal medicine recommended that a minimum four-year Bachelor degree was required to appropriately prepare naturopaths and herbalists for practice³. ARONAH believes that naturopaths and herbalists are CAH providers with similarly broad scope and similar education and training needs as the regulated CAH professions of chiropractic, osteopathy and Chinese medicine, which also require higher education-level training of between 4-5 years. International comparisons for naturopathic training would also indicate this level of training (4-5 years) is appropriate. Licensed naturopaths in the United States and Canada are required to graduate from a four-year program accredited by the Council on Naturopathic Medicine Education. Naturopathy is regulated by AYUSH in India and graduates there are required to complete a university program of between 4-6 years duration. In South Africa the University of Western Cape runs the only accredited naturopathic program in that country and requires 5 years of training. Recognition by the General Council and Register of Naturopaths in the United Kingdom requires graduation from a 3 year degree or 4 year diploma. NZQA accreditation of naturopathy and herbal medicine requires a minimum of 3 years of training. This level of training has also been reported in the UK for herbal medicine education, though education levels for these professions are still being discussed due to the impending registration of that profession.

3. If you believe that qualifications in Aromatic Medicine, Homeopathy, Naturopathy, Nutritional Medicine and Western Herbal Medicine should remain as Advanced Diploma qualifications, what is your rationale based on the AQF descriptors? Please specify which modality your feedback relates to.

As outlined above ARONAH believes that retaining the Advanced Diploma as a qualification for Naturopathy and Western herbal medicine practitioners is inappropriate, and is not in the interests of students, patients, practitioners or the broader profession and public.

ARONAH would suggest that many of these points are relevant to any CAH practitioner in unsupervised practice.

4. If your expertise lies in the area of Ayurveda, what are your views about how Table 1 relates to work as an Ayurvedic practitioner? Please indicate if Advanced Diploma or Bachelor Degree is the most appropriate qualification, and provide your rationale based on the AQF descriptors.

ARONAH holds concerns about the current practice by which Ayurvedic qualifications are considered suitable for health fund rebates in Naturopathy by various private health insurers. There are significant differences between Ayurveda and Naturopathy in Australia and it is ARONAH's belief that they should be individually recognised accordingly. ARONAH believes that this situation has largely occurred due to the lack of other formal recognition pathways for Ayurvedic recognition and therefore supports the development of education standards for Ayurveda.

ARONAH believes that due to their scope of unsupervised practices Ayurvedic practitioners should be held to the same educational level requirements as other CAM practitioners with a significant primary care scope – such as Chinese medicine, chiropractic and naturopathic practitioners. This would suggest that a degree minimum (AQF 7) qualification is required.

Attachments

Appendix 1:

“The Lin report”: Lin V, Bensoussan A, Myers S, et al. The practice and regulatory requirements of naturopathy and western herbal medicine. Melbourne: Department of Human Services, 2005 (Attached)

Appendix 2:

Journal articles on naturopathic regulation and education:

Wardle J, Steel A, Adams J. A review of tensions and risks in naturopathic education and training in Australia: a need for regulation. *J Altern Complement Med* 2012; **18**(4): 363-70

Wardle J, Steel A, McIntyre E. Independent registration for naturopaths and herbalists in Australia: the coming of age of an ancient profession in contemporary healthcare. *Aust J Med Herbalism* 2013; **25**(3): 101-6

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