In addition to the havoc of its permissiveness, Section 20(B) would simultaneously destroy the possibility of prosecuting charlatans of this sort under the Healing Arts Practice Act, which presently says that no unlicensed person shall treat anyone with any mental disorder (in my knowledge of the language this includes the term psychotherapy). It does not provide exceptions to the Act merely on the grounds of belonging to a group that thinks psychotherapy of the mentally ill is within its code of ethics and sphere of professional competence. Section 20(B) of this Act, on the other hand, places the code of ethics in judgment of any such so-called professional group above existing law.

At the present time, the Healing Arts Practice Act prevents individuals from diagnosing and treating bodily and mental disorders and diseases unless they have the proper medical training and a medical license. But trained psychologists do treat mental diseases and disorders. At the present time, it is clear that this must be done subject to medical responsibility. This vital aspect of the practice of psychology is regulated at present.

The proposed bill does not distinguish between these medical activities of psychologists, and those which involve psychological experimentation and testing with animals, public opinion polls, testing, job counselling, and the myriad other functions performed by psychologists. The Congress must be concerned with this homogenizing of the various activities of psychologists in one licensing act which poses the threat that the medical responsibility which the public expects for its protection will be lost. In this statement, we shall deal with the problem of the psychologist in this medical arena.

The reason we must be concerned with the role of the psychologist in clinical practice is that they are not physicians and their training and background is rarely sufficient for dealing with the mentally ill.

Recently I read an article in the Journal of the American Psychological Association, itself, by Saul Rosenzweig, Professor of Medical Psychology ot Washington University (although himself a psychologist, not a physician) in which Professor Rosenzweig makes the point that psychologists "lack adequate practical or clinical experience" and that their "scientific and research preparation [is] inadequate."

May I add we are prepared to furnish copies of this speech to the subcommittee.

Although most psychologists in clinical practice are highly trained for their particular specialty, extremely competent, and highly ethical, I and my colleagues have seen sufficient evidence in our practices of persons who have been misdiagnosed, medically, by themselves or by non-medical counsellors and therapists, to be absolutely certain that non-medical specialists should not be allowed to legislate for themselves the status to diagnose and treat mental disorders which they are not competent to do. It simply is not warranted by their training, which frequently is in installations such as student counselling services in universities and similar clinics, at which the clients suffer generally from relatively mild disorders or personality adjustments. I venture to say that if every psychologist appearing today were to be asked by this Subcommittee whether he ever had full responsibility for patient care during the course of his training, he would be forced to admit that he had not.