

Good afternoon Chair and members of the Panel on Health Services,

I am grateful to be here today and while I fully agree about the purpose of this AR Scheme for clinical psychologists - to protect the public - I hope to be able to express my deepest concern for the current proposal that has been submitted.

My name is Dr. Kaili Chen. I have lived in many countries but have lived in Hong Kong for almost 18 years of my life and I consider this international city home. I am a graduate of the California School of Professional Psychology/Alliant International University - Hong Kong program and am now a practicing clinical psychologist in private practice. I am a member of the American Psychological Association, a Chartered Member of the British Psychological Society and a registered clinical psychologist in New Zealand. Since graduating from the program, I have had the honor to serve approximately 300 clients - adolescents and adults - all from non-Cantonese speaking, ethnically, and culturally diverse backgrounds.

According to the Hong Kong Government census in 2016, there is approximately 7.4 million people residing in Hong Kong. Approximately 432,000 (6.1%) of the Hong Kong population use English as a primary language other than Cantonese, Mandarin, or another Chinese dialect.

As stated earlier, I am here to express my deepest concern for the current AR Scheme for clinical psychologists because even with all of my education and training, according to the documents of this proposal, I will not qualify. Overall, what concerns me the most is what appears to be the potential to exclude individuals who did not complete their education in Hong Kong because of the word usage of 'case-by-case' evaluations. The phrase is vague at best.

Given the requirements of the current proposal, it has been confirmed by the American Psychological Association that if I were to register for the AR Scheme, as a member of the APA I would be in violation of ethical codes due to client privacy infringements.

Additionally, I would like to question the feasibility, logistics, and infrastructure of remedial training that is going to be offered. Although I am ethnically Chinese, I do not speak Cantonese and details of remedial training is uncertain, which could potentially hinder the services I would be able to provide to the community I serve.

At the end of the day, I would like to again express my concern about the current AR scheme and would like to call upon DCP to have a more collaborative effort that includes members who are not only DCP members but professionals who represent Asia's world city to effectively and safely provide mental healthcare to those who need.