The Current State of Medical Psychology in Iran

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This paper reviews medical psychology in Iran and describes the two major professional associations representing the profession. The unique role of religion in Iran is stressed, and limitations of the current health care system are described. The paper also addresses human resource issues and the educational requirements for the practice of psychology in Iran.

KEY WORDS: health psychology; clinical psychology; medical schools; Iran.

Twenty-five clinical psychologists in Iran currently hold the Ph.D. degree. Most of these psychologists live in Tehran, the capital city of Iran, and teach at universities or work in private and public agencies. In addition, there are 389 clinical psychologists with masters degrees working in Tehran and other metropolitan areas. All of these psychologists are working in urban areas. Clinical psychologists are reluctant to work in rural Iran because of difficult living conditions. There are also more than 5,000 individuals with Bachelors degrees in Psychology currently living in Iran (Statistical Center of Iran, 2000). Despite the nation's need, more than two-thirds of Iranian psychologists are not able to find jobs in their field because of the economic condition in Iran, and these individuals are working in other professions or they don't have jobs at all. In addition to psychologists, only 636 psychiatrists and 291 neurologists are licensed to practice in Iran; in contrast, 63,331 physicians are licensed to practice (Medical Council of Islamic Republic of Iran, 2000).

There are two psychological nongovernmental organized bodies in Iran with different goals: the Iranian Psychological Association (IPA) and Iranian Psychologists Association. These associations have their own publications. The Iranian Psychological Association has a more religious and cultural orientation than the Iranian Psychologists Association. Practitioners and scientists in the field of psychology work harmoniously in Iran, and there isn't any obvious tension between them. The most eminent and distinguished psychologists in Iran are those who combine theory and practice, refining their theories with their practice and shaping their practice with their theoretical and academic findings.

Clinical psychologists are socially very honored and respected by the general public; however, their incomes are often lower than those of other health professionals such as physicians.

There is no requirement for licensure or certification for clinical psychologists who practice in the private or public sectors, but these individuals must work under supervision of physicians or psychiatrists. This is one of the major differences separating medical psychology as it is practiced in Iran and in the United States. Requiring certification for psychologists working in Iran will bring prestige to the field and improve the quality of psychological practice. Mandatory certification for psychologists is one of the top priorities of the Iranian Psychological Association.

PSYCHOLOGY AND RELIGION

Currently, psychologists in Iran face daunting challenges and controversial issues such as exploring the impact of religious beliefs and attitudes on mental health and psychological well-being. Most of the

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preliminary findings support an association between religious beliefs and practices and positive mental health. For instance, Jalili (1998) discovered that there was a significant and meaningful correlation between religious beliefs and mental health (p < 1%). In this study, the SCL-90-R was used as a symptom checklist, which was found to have negative correlations with religious beliefs and attitudes (i.e., higher scores on religious beliefs were associated with lower indexes on somatization, depression, anxiety, hostility, and phobic anxiety). Likewise, Qods (1998) discovered that there was a negative correlation between prayer and anxiety in university students in Tehran, (p < 1%). In some studies, reliance on God has been shown to reduce stress and anxiety (Bolhari, Ehsanmanesh, & Karimi, in press; Ghobari, Nasafat, & Khodayari, in press). These examples illustrate the Iranian research, examining the interface between psychology and religious beliefs or practices.

Despite numerous studies supporting a relationship between religion and mental health, some Iranian psychologists do not feel that religious beliefs and attitudes are an appropriate area for psychological research and practice.

FINANCING MENTAL HEALTH SERVICES IN IRAN

The constitutional law of the Islamic Republic of Iran states that good health is a basic right. The government is obliged to provide the facilities needed to make this right a reality. Society's commitment to good health starts in the family and extends to citizens' active participation in health-related activities. It also requires the establishment of health care centers.

The health network is the foundation of Iran's health care system. The network aims to eliminate discrimination and reduce the health status disparities among different groups, particularly people in poor and rural areas and those who are vulnerable, notably women and children (Plan and Budget Organization, 1999).

The health care system in Iran is designed to provide equal access to health care for all people including those in rural areas, and Iranian constitutional law mandates the provision of Primary Health Care (PHC) services for all residents (Mohit, Shahmohammadi, & Bolhari, 1998). Mental health is an integral part of these services that are provided by the Ministry of Health and Medical Education. However, there are obvious discrepancies between what is mandated and what is practiced. For example, most hospitals in urban areas have better equipment than

that found in rural hospitals. Metropolitan cities have better access to medical and psychological treatment than small cities. More attention is given to the treatment of physical illnesses than mental disorders. One of the goals of the leaders of Iran is to fill in the gap between what is stated by law and what is actually practiced. Even though there are adequate numbers of nurses, physicians, psychiatrists, social workers, and psychologists in public hospitals (i.e., those supported by the government's budget), private hospitals have better equipment and more specialized human resources. The gap between services in private hospitals and public hospitals is growing due to economic problems, and wealthy people often receive preferential treatment because of their access to private hospitals.

Psychiatrists can write prescriptions and these costs are paid by insurance companies; psychologists do not have this authority and cannot directly bill insurance companies. Their orders must be endorsed by physicians or psychiatrists. This makes provision of psychological services difficult in comparison to the provision of medical treatment for poor people, especially in rural areas.

Despite practical hindrances and obstacles to the provision of mental health services, satisfactory services are provided for people throughout the country, and over the past 10 years an infrastructure for the national health care system has developed throughout the country. Regional health organizations now cover vulnerable people such as children and women, child immunization programs, family planning services, premarital counseling, breast feeding, and mental health programs in the national level (Plan and Budget Organization, 1999).

Iran has elected to emphasize outpatient treatment and provision of psychiatric care in different communities. Our main goal is to minimize hospitalization and to return patients to their families and work settings. A formal plan to achieve this goal has now expanded to 143 cities and covers 40% of the villages (Mehrabi et al., 2000).

Psychologists play an active role in providing primary mental health care in Iran, and it is widely acknowledged that the service and help of psychologists are required for an effective primary health care system. The Iranian National Mental Health Care System is found in all areas of the country, and each district has psychologists who consult with other care providers. Psychologists provide psychological assessment as well as psychotherapeutic interventions in clinics and psychiatric hospitals.

HUMAN RESOURCE ISSUES

The number of psychologists in Iran is growing rapidly. In addition to major universities throughout Iran, Islamic Azad University has established undergraduate and graduate programs to train Iranian psychologists. The exact number of psychologists in different areas is hard to estimate at this point of time. However, there are 9.3 psychologists for every 100,000 people in Iran. These psychologists work in public and private sections in 20 psychiatric hospitals and 28 psychiatric wards in general hospitals, as well as in counseling centers. (Mehrabi et al., 2000). In addition, many psychologists are working in the private sector and are not included on the list of official organizations and ministries. Because of the economic problems that limit the employment of psychologists (as well as other professionals) in government organizations and agencies, there are numerous young psychologists searching for employment in Iran. However, this problem in employment does not mean that the country has a surplus of trained psychologists. In the near future, as the economic situation in Iran improves, there should be full employment for any psychologist with strong academic credentials.

Almost all rural areas in Iran have a shortage of psychologists, and most hospitals in small cities do not have psychologists available to provide counseling or psychotherapy. However, there are more psychologists than psychiatrists in Iran, and this disparity appears to be increasing. Iran has approximately equal numbers of social workers and psychiatric nurses.

In addition to governmental organizations, psychologists work in private sectors and mental health clinics. The Higher Counsel of Youth and Adolescents, established under direct supervision of the Iranian President, has established specific criteria for founding counseling service centers.

In addition to psychologists, religious leaders and traditional healers provide psychological help to people who present with symptoms of stress, emptiness, or anxiety (Langsley, Barter, & Amirimoshiri, 1983; Shahmohammadi, Bayanzadeh, & Ehsanmanesh, 1998). These healers are gradually beginning to include scientific and psychologically sound treatments in their attempts to help troubled people.

EDUCATION AND TRAINING OF PSYCHOLOGISTS

The bachelor of science (B.S.) degree in psychology is required for all individuals who are working in a helping profession like psychology. This is a minimum level that all psychologists need to have to be eligible to work in public and private sections. Most clinics prefer to hire psychologists with higher degrees (e.g., the M.S. or Ph.D.). According to the latest national census (1997), Iran has 5,218 clinical psychologists with B.S. degrees, 389 clinical psychologists with M.A. degrees, and 25 clinical psychologists with Ph.D. degrees. Most of these psychologists are employed in the ministry of health and medical education. All psychologists in Iran work under the supervision of psychiatrists or neurologists in hospitals and clinics, and there is no system of licensure or credentialing similar to that which exists in the United States. The only professional identification these individuals have is evidence of graduation from psychology departments in recognized universities.

Several specific universities in Iran train most clinical psychologists. The dominant training models are cognitive therapy, cognitive-behavior therapy, and behavior therapy. These programs have both supporters and critics. There is widespread consensus that the Tehran Psychiatric Institute and Tehran University are the most distinguished clinical psychology training programs. However, accreditation of graduate programs in clinical psychology in the manner that exists in the United States does not exist in Iran. The Iranian Psychological Association has been encouraged to establish explicit criteria to assess competency of graduate and undergraduate programs in clinical psychology and related fields.

Not everyone with a graduate degree in psychology can practice clinical psychology. Clinical practice in Iran requires specific coursework in clinical psychology, counseling psychology, and developmental psychology in addition to specific courses, practicum, and an internship in a psychiatric hospital, as well as competency in administration and interpretation of personality tests.

Most Ph.D. psychologists in Iran graduated from universities in the United States, Canada, Australia, and England as well as from universities in some other countries such as France, Germany, and India. Therefore, many different schools of psychology are represented in Iran.

SCOPE OF PRACTICE FOR PSYCHOLOGISTS

Most psychologists in Iran work in traditional mental health settings. In these settings they provide diagnostic services, interviews, psychological testing, and psychotherapeutic interventions. There is a good relationship between psychologists, neurologists, and psychiatrists. The number of psychologists in hospitals, clinics, polyclinics, and psychiatric hospitals is increasing. Most psychiatrists and neurologists recommend biological treatments in conjunction with psychological, behavioral, or cognitive treatments. Young professionals in the field of psychiatry and neurology do not limit their treatment to medication or other biological treatments. In private clinics, most physicians work closely with psychologists and solicit their assessment in the treatment of psychosomatic disorders.

The interaction of mind and body has a wide acceptance in Iranian culture, and departments of psychology in medical schools have outstanding programs that are respected and valued. One of these departments with a distinguished staff and a highly competitive program is Tehran Psychiatric Institute. It offers an excellent program for training of clinical psychologists. In fact, it is one of the only two certified and recognized centers currently offering the Ph.D. degree in clinical psychology.

Despite appreciation for the role of psychologists in helping psychiatrists, neurologists, and other care providers, psychologists are not permitted to admit patients to hospitals and this privilege is restricted to physicians. However, psychologists can help physicians and other medical staff by writing chart notes and following patients' mental and psychological reactions to hospitalization.

Gradually, psychologists are finding ways to compete with other care providers. For example, psychologists can open private clinics, and there is a systematic methodology for billing for their services, such as assessment and psychotherapeutic services. However, even psychologists in private clinics have to be affiliated with a psychiatric clinic or have a psychiatrist available for consultation.

There are different theoretical models with which psychologists coordinate their practices. The most common theoretical approaches among psychologists in Iran are psychoanalysis, cognitive therapy, behavior therapy, cognitive-behavior therapy, and humanistic psychotherapy. Some psychologists use hypnosis to treat various disorders.

Most psychologists use eclectic methods that are linked to the availability of the client resources and the special experience and training of the psychologist. Recently, religious approaches to the treatment of clients have been getting more and more attention. Relationship Between Psychology and Psychiatry

Both psychiatrists and psychologists in Iran treat psychological rather than physical problems. In addition, they are both members of the health professions team and work in close relation with one another. However, Iranian psychiatrists tend to look at psychological problems from a biological point of view, and they often believe that biochemical abnormalities cause all human problems. Given this viewpoint, it is not surprising that psychiatrists recommend biological treatments such as medication. On the other hand, psychologists emphasize the psychological dimensions of human problems and tend to conceptualize dysfunction in terms of the dynamics of psyche or faulty information processing.

Psychologists mostly offer psychological treatments, whereas psychiatrists prescribe drugs, and, in some cases, refer their clients to psychologists for behavior and cognitive therapies, or for relaxation training. One promising improvement in recent years is that psychologists have acknowledged the biological origins of disorders such as depression, anxiety, obsessive-compulsive disorders, and some other behavioral problems.

In Iran, psychologists and psychiatrists acknowledge each other's distinct areas of competence and value each other's opinions. In spite of the fact that psychologists and psychiatrists are aware of each other's complementary roles in treatment of individuals with psychological problems, psychologists are often uncomfortable about being so dependent on psychiatrists in official and organizational systems. They want to be independent in treatment, writing prescriptions, admitting patients to psychiatric hospitals, and so on.

Continuing Education

Continuing education for psychologists in Iran is encouraged by establishing incentives to attend seminars and scientific conventions. In addition, publications and research are very important criteria for their advancements in the profession, especially in the university system. Psychologists are also encouraged to attend national and international seminars in their own field. However, full participation in international seminars or conventions is limited due to economic problems in the university system in Iran. At times, the Ministry of Higher Education and Ministry of Health and Medical Education pay for a portion of travel costs, but most psychologists cannot afford to pay for these expenses without government support. The difficulties associated with obtaining visas to enter other countries also discourage some psychologists from participating in international seminars.

There are officials in the executive body and among president Khatami's ministers who want to reduce barriers to a minimum level and encourage scholars to attend international seminars. The same tendency exists in most representatives of the parliament. Psychologists attending national meetings, conventions, and seminars are usually expected to present research papers.

There are certain popular journals that most Iranian psychologists read and in which most Iranian psychological research is published. These include the *Journal of Psychology* (Quarterly Journal of the Psychological Association of Iran), *Quarterly Journal of Andeesheh Va Raftar* (A Journal of Psychiatry and Clinical Psychology), and the *Journal of Psychology and Education* (published by the faculty of psychology and education in Tehran University).

Continuing education is not mandated by law for psychologists or psychiatrists, and there are no formal contingencies for failure to keep up with new developments in one's field. Currently, psychologists are becoming more familiar with telecommunications and they are showing more interest in using the Internet to communicate with other researchers throughout the world. In the coming years, Iranian psychologists will use computerized databases and the Internet more widely for their research and communications.

Prescriptive Authority

Psychologists currently do not have authority to write prescriptions for the patients they treat, and the prescription of psychotropic medication is viewed as the exclusive right of neurologists and psychiatrists. Likewise, psychologists do not prescribe or administer electroconvulsive therapy. There is little interest among Iranian psychologists in pursuing prescriptive authority. However, psychologists have objected to the dominance of psychiatrists in official decision making regarding the treatment of patients and the evaluation of people who have committed crimes.

FUTURE CHALLENGES AND PROSPECTS

The public in Iran is gradually becoming more sophisticated about mental health. They are getting

more help from professionals for the treatment of anxiety, depression, and other mental and psychological problems. They are becoming more aware of the possible benefits of psychological and psychiatric treatments. Psychologists as well as psychiatrists are facing major challenges in treating war veterans, youth and adolescents coping with the transition from traditional cultural values in a new and fast changing world. To cope with these problems, cultural resources including religious psychology are often necessary. After the Islamic Revolution in Iran (1977), psychologists became more aware of the importance of culture and belief systems in influencing human motivation and behavior.

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