

2018

Complementary Health

INDUSTRY REFERENCE COMMITTEE
INDUSTRY SKILLS FORECAST



SKILLSIQ

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Skills Forecast

Name of IRC:

Complementary Health

Name of SSO:

SkillsIQ Limited

About SkillsIQ:

SkillsIQ supports 18 Industry Reference Committees (IRCs) representing diverse 'people-facing' sectors. These sectors provide services to people in a variety of contexts such as customer, patient or client. The IRCs are collectively responsible for overseeing the development and review of training package products, including qualifications, serving the skills needs of sectors comprising almost 50% of the Australian workforce.

Our qualifications deliver skilled people that are valued and make a difference to others.

- Cross Sector Skills Committee, February 2018



Executive Summary

The disciplines within the Complementary Health sector aim to improve an individual's health and wellbeing through the use of a number of different modalities and the application of the respective belief systems that accompany them. The growing numbers of individuals who seek out these modalities believe them to be an effective means of contributing to their health care needs and improving their general wellbeing and quality of life. Professionals within the Complementary Health sector advocate for the integration of Complementary Health disciplines with the practice of more conventional treatments, and consider their modalities as contributing to a more holistic approach towards treatment, support and care.

The Complementary Health Industry Reference Committee (IRC) has nine qualifications under its remit which are packaged within the HLT Health Training Package. The qualifications are aligned to job roles within the following sectors:

- Ayurveda
- Aromatherapy
- Kinesiology
- Massage and Remedial Massage Therapy
- Shiatsu
- Reflexology
- Traditional Chinese Medicine Remedial Massage.

The National Schedule details the training package review and development work commissioned by the Australian Industry and Skills Committee (AISC). The National Schedule is informed by this Industry Skills Forecast, which outlines the proposed timing for the update of existing training package products. This Forecast has been compiled using a number of information sources, including academic literature, statistical data, IRC member input and expertise, feedback received via public consultation, and an industry analysis of both new and emerging workforce skills needs within the Complementary Health sector.

The sector is predominantly made up of small businesses, the majority of whom are sole practitioners and/or small establishments employing an average of 1.15 workers per business, with a high proportion of practitioners working part-time. Overall, strong job growth is forecast within all the disciplines that make up the Complementary Health sector, which currently comprises approximately 30,000 businesses nationwide with a workforce of 35,230 practitioners overall.

The sector is currently experiencing several challenges and opportunities which are impacting workforce skill requirements. These include:

- Government reforms relating to private health coverage rebates; namely, the removal of subsidies for rebates for a number of different therapies within the Complementary Health sector
- An increase in demand for Complementary Health services, including services to treat a wide range of chronic or debilitating illnesses
- An increasing role for Complementary Health services within rural and regional communities
- High incidences of part-time employment and earnings which are, on average, below national wage levels, and
- Regulatory changes, particularly the recent introduction of a Code of Conduct for Unregistered Health Practitioners in some states and territories.

It is proposed that the Complementary Health Training Package products be reviewed in the 2019–2020 fiscal year. These training package products were initially scheduled for review in the current fiscal year, but because the products contained within this Industry Skills Forecast were extensively reviewed in 2015, no pressing skills gaps have been identified which require immediate action. Industry also notes that it is vital to allow for the proper implementation and testing of the training package products which were implemented in 2015 prior to recommending any further revisions.





Sector Overview

Complementary Health is defined within the Australian and New Zealand Standard Industrial Classification (ANZSIC) as consisting of health practitioners engaged in the provision of health care and treatment services. Practitioners in the Complementary Health sector treat patients with physical, mental, spiritual and emotional needs by considering the ‘whole person’, as well as focusing on their specific symptoms, and by using various therapies, techniques and practices.¹

Complementary Health disciplines are often utilised to complement conventional Western medicines, or as an alternative option for treatment.

There are several major companies with a significant market share in the sector which is primarily made up of small businesses or sole traders. The majority of small businesses specialise in a single discipline and operate as stand-alone establishments, with only a select few expanding into multi-site companies and multi-disciplinary clinics. Complementary Health disciplines focus on high levels of customer care with lots of one-on-one interaction between the client and practitioner, making delivery of services labour intensive.

The Complementary Health IRC represents the following disciplines:



Aromatherapy

Aromatherapy is the evidence-based, therapeutic use of essential oils to treat, influence or modify the mind, body and spirit by aromatherapists (professionally qualified therapists) to promote health and wellbeing. Based on the needs of the individual, a number of applications are employed by an aromatherapist, including inhalation, diluted topical use and massage. Essential oils have been used medicinally for hundreds of years and are selected for an individual based on their traditional use, clinical experience and the results of modern scientific evaluation.



Ayurveda

Ayurveda - ‘*Ayu*’ means life and ‘*Veda*’ means knowledge, so the word Ayurveda translates to knowledge of life – is a traditional Indian integrative medicine which has developed over 5,000 years and which comprises a holistic/preventative style of medicine that includes nutrition, herbs (plant-based apothecary), body therapies (*Panchakarma* therapies), *Marma* (vital points in the body) massages, lifestyle changes, yoga and meditation (which are branches of Ayurveda). Ayurveda is a classical, traditional medical system which originated thousands of years ago in India. It is recognised by the World Health Organisation and is prevalent globally.²

The primary objective of Ayurveda is to maintain and preserve good health and promote healthy living by means of personal hygiene, good nutrition and a disciplined/balanced lifestyle. Ayurveda focuses on individual diet, lifestyle and eating habits to eradicate the root cause and not just the effects/symptoms of ill-health, with particular focus on gut health and mental health.

Ayurvedic assessment is based on pulse analysis and the psycho-biological constitution, or the body type, genetically inherited by an individual. It seeks to treat the imbalance caused due to the eating habits or lifestyle of an individual and attempts to provide modalities to restore the individual back to his or her original ‘constitution’.



Kinesiology

Kinesiology, originating in the 1970s, encompasses holistic health disciplines that use muscle monitoring to access information about a person’s health and wellbeing. Kinesiology identifies causes of imbalance in the body and works to restore balance and health to neurological and physiological function.



Massage and Remedial Massage Therapy

Massage therapists perform therapeutic massage and administer body treatments for health, fitness and remedial purposes.³ Therapeutic massage is the manipulation of muscle and connective tissue, generally by hand, to promote bodily function, assist in the relevant tissue recovery and enhance wellbeing.



Reflexology

Reflexology is specialised tactile therapy. Reflex points, which relate to all parts of the body, can be found in the feet, hands, face and ears, and these points respond to pressure, stimulating the body's own natural healing process.⁴ The application of pressure and soothing techniques to these reflex points can improve nerve and blood supply, relax the body and mind, and help restore balance and wellbeing. Tailored to individual needs, the holistic approach and treatment may benefit clients of all ages.



Shiatsu

Shiatsu is a therapeutic form of acupressure, muscle meridian stretching and corrective exercises derived from Japan. Shiatsu involves applying pressure to the body using a practitioner's thumbs, palms, elbows, knees and feet. It is founded on the principles and theory of Traditional Chinese Medicine that energy moves through channels within the body, known as meridians. Shiatsu practitioners aim to restore the balance of energy through meridians in order to promote health and strengthen the body's healing abilities.



Traditional Chinese Medicine Remedial Massage

Traditional Chinese Medicine Remedial Massage follows a philosophy of disease which employs an assessment based on an overall observation of the patient and a holistic understanding of his or her symptoms. The Traditional Chinese Medicine system involves the study of fourteen meridians, or channels, which are at the core of the Chinese Medicine framework. It generally encompasses techniques such as *Tui Na* (Chinese massage), acupressure, cupping, topical herbology and Gua Sha (using massage instruments, e.g. spoon, jade, stone, coin, etc.) to balance the circulation of energy through the body.

Nationally Recognised Complementary Health Qualifications - Current as at June 2018

Qualifications in various Complementary Health disciplines were introduced into the HLT Health Training Package in 2002. The current qualifications are:

- HLT42015 Certificate IV in Massage Therapy
- HLT52015 Diploma of Remedial Massage
- HLT52115 Diploma of Traditional Chinese Medicine (TCM) Remedial Massage
- HLT52215 Diploma of Shiatsu and Oriental Therapies
- HLT52315 Diploma of Clinical Aromatherapy
- HLT52415 Diploma of Kinesiology
- HLT52515 Diploma of Reflexology
- HLT52615 Diploma of Ayurvedic Lifestyle Consultation
- HLT62615 Advanced Diploma of Ayurveda.



Registered Training Organisation Scope of Registration

Table 1 indicates the number of Registered Training Organisations (RTOs) with Complementary Health qualifications on scope. This data is current as at June 2018, per the listing on the National Register of VET (www.training.gov.au).

Table 1 Number of RTOs by nationally recognised qualifications on scope – Complementary Health Training Package Products

Qualification Code	Qualification Title	No. of RTOs with Qualification on Scope
HLT42015	Certificate IV in Massage Therapy	60
HLT52015	Diploma of Remedial Massage	87
HLT52115	Diploma of Traditional Chinese Medicine (TCM) Remedial Massage	3
HLT52215	Diploma of Shiatsu and Oriental Therapies	4
HLT52315	Diploma of Clinical Aromatherapy	7
HLT52415	Diploma of Kinesiology	10
HLT52515	Diploma of Reflexology	8
HLT52615	Diploma of Ayurvedic Lifestyle Consultation	5
HLT62615	Advanced Diploma of Ayurveda	5

Source: Training.gov.au. RTOs approved to deliver this qualification. Accessed 26 June 2018.

Qualification Enrolments and Completions

The latest Complementary Health qualifications were released in August 2015. 2015–2016 was a transition period between the HLT07 version of the qualifications to the updated HLT version of the qualifications. Therefore, both versions of the qualification have been included in Table 2. In 2016, there were approximately 12,000 enrolments across all VET qualifications catered to by Complementary Health Training Package products. The most popular qualifications in 2016 included the Diploma of Remedial Massage (6,812 enrolments across the current and superseded qualification code) and the Certificate IV in Massage Therapy (3,961 enrolments across the current and superseded qualification code).

An overview of the key traits regarding Complementary Health Training Package product enrolments for 2016 is also provided, followed by a breakdown of enrolments and completions for individual qualifications in Table 2.

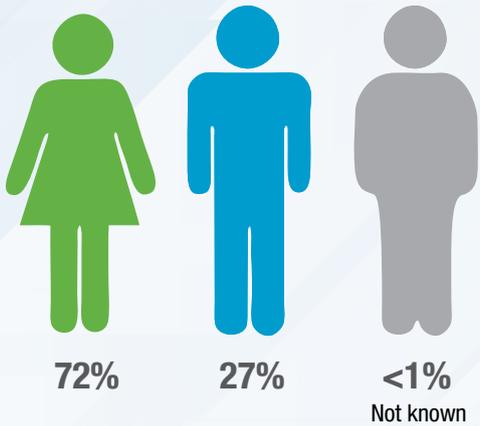
General notes on statistics

1. Enrolment and completion data is sourced from NCVER VOCSTATS (Database: Program enrolments and completions), accessed March 2018.
2. It is important to note that not all training providers are currently required to submit enrolment and completion data. Some figures presented may therefore under-represent the true count of enrolments and completions for a qualification. From 2018, all training providers will be required to submit data. Current discrepancies noted between the national NCVER figures versus actual attendance should therefore be minimal in future releases. The data presented in this report is shown for indicative purposes.
3. Figures reflect public and private RTO data.
4. Completion data for 2016 represents preliminary outcomes (i.e. not a full year).
5. 'E' represents Enrolment.
6. 'C' represents Completion.
7. * Denotes superseded qualification.

2016 ENROLMENT SNAPSHOT

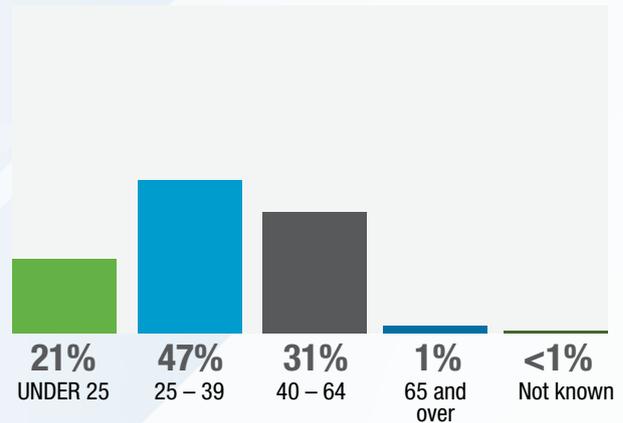
COMPLEMENTARY HEALTH TRAINING PACKAGE PRODUCTS

GENDER

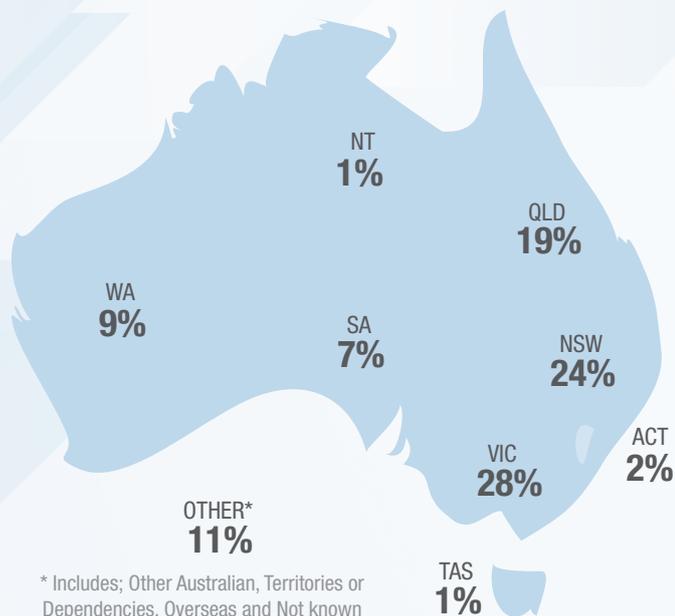


AGE

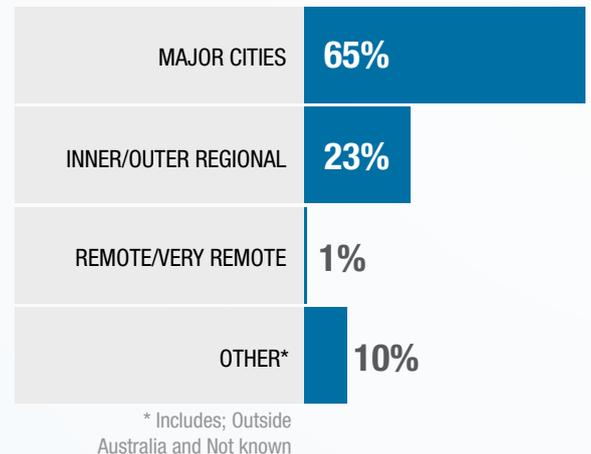
Percentage Years of age



STATE/TERRITORY OF RESIDENCE



STUDENT REMOTENESS REGION (2011 ARIA+)



Source: NCVER VOCSTATS (Program enrolments 2016 by various breakdowns)

Base count n = 11,954

Note: Please refer to Table 1 for a list of qualifications that are included in the enrolment summary. Due to the way in which enrolment data is currently registered, superseded qualifications are included in the total enrolment count to provide a more representative picture of volume. The superseded qualifications are as follows:

HLT40312 Certificate IV in Massage Therapy Practice

HLT50307 Diploma of Remedial Massage

HLT50112 Diploma of Traditional Chinese Medicine Remedial Massage (An Mo Tui Na)

HLT50212 Diploma of Shiatsu and Oriental Therapies

HLT51407 Diploma of Aromatherapy

HLT51507 Diploma of Kinesiology

HLT51712 Diploma of Reflexology

HLT41212 Certificate IV in Ayurvedic Lifestyle Consultation

HLT60712 Advanced Diploma of Ayurveda.



All Student Programs – Enrolments and Completions

TABLE 2 Total number of enrolments (Total VET Activity [TVA]) and completions by nationally recognised qualifications on scope – Complementary Health Training Package Products, 2015 and 2016

QUALIFICATION	E/C	2015	2016	TOTAL
HLT40312 Certificate IV in Massage Therapy Practice*	E	7,483	2,584	10,067
	C	3,444	1,239	4,683
HLT42015 Certificate IV in Massage Therapy	E	2	1,377	1,379
	C	0	199	199
HLT50307 Diploma of Remedial Massage*	E	4,530	2,473	7,003
	C	1,722	1,455	3,177
HLT52015 Diploma of Remedial Massage	E	62	4,339	4,401
	C	0	533	533
HLT50112 Diploma of Traditional Chinese Medicine Remedial Massage (An Mo Tui Na)*	E	282	33	315
	C	26	12	38
HLT52115 Diploma of Traditional Chinese Medicine (TCM) Remedial Massage	E	0	22	22
	C	0	0	0
HLT50212 Diploma of Shiatsu and Oriental Therapies*	E	205	24	229
	C	28	13	41
HLT52215 Diploma of Shiatsu and Oriental Therapies	E	0	66	66
	C	0	6	6
HLT51407 Diploma of Aromatherapy*	E	97	69	166
	C	25	11	36
HLT52315 Diploma of Clinical Aromatherapy	E	0	52	52
	C	0	2	2
HLT51507 Diploma of Kinesiology*	E	278	183	461
	C	58	124	182
HLT52415 Diploma of Kinesiology	E	41	317	358
	C	0	23	23
HLT51712 Diploma of Reflexology*	E	355	128	483
	C	51	68	119
HLT52515 Diploma of Reflexology	E	0	50	50
	C	0	0	0
HLT41212 Certificate IV in Ayurvedic Lifestyle Consultation*	E	59	14	73
	C	35	14	49
HLT52615 Diploma of Ayurvedic Lifestyle Consultation	E	28	56	84
	C	3	15	18
HLT60712 Advanced Diploma of Ayurveda*	E	107	79	186
	C	31	2	33
HLT62615 Advanced Diploma of Ayurveda	E	17	88	105
	C	2	0	2

Source: NCVER VOCSTATS, accessed March 2018.

Note: The number of enrolments in these qualifications reflect the specialised nature of jobs in this sector. Due to extended implementation and transition periods for qualifications, enrolment data may be registered under superseded qualification codes (listed in italics and noted with an asterisk).

Businesses Involved

The latest industry statistics available show that, in 2016–17, there were 29,359 businesses involved in providing alternative and complementary health therapies, which include some products and services supported by the Complementary Health Training Package products, such as massage and reflexology.⁵ Whilst not all businesses in this count are relevant to the sector covered by the training package products, the figure provides preliminary insights into the size of the potential businesses practising in the industry. Another source, the Australian Bureau of Statistics (ABS),⁶ states that the count of businesses in 2016 for businesses classified as providing ‘other allied health services’,⁷ including therapeutic massage services, was approximately 19,500. Again, while this count includes businesses not entirely in the scope of this sector as defined by the HLT Training Package, it provides another account of the potential size of the sector and a better understanding of the business environment.

Although the figures quoted show that the number of businesses in this sector range from 19,500 to nearly 30,000, the profiles and locations of the businesses possess similar characteristics. The sources confirm the sector consists mainly of individual practitioners and/or small establishments, with the average employment rate being 1.15 workers per business. The location of businesses is driven by population distribution, with over 80% located in New South Wales, Victoria and Queensland.⁸

Stakeholders

National Peak Bodies and Key Industry Players

Organisations which perform a variety of key roles in this sector are listed below. These organisations and their networks are well placed to offer industry insights at the time of training package review. Engagement and consultation activities will include a broad range of industry stakeholders beyond those included in this list.

- Government departments and agencies
- Peak and industry associations:
 - Australasian Association of Ayurveda
 - Australian Acupuncture and Chinese Medicine Association
 - Australasian Ayurvedic Practitioners Association
 - Australian Institute of Kinesiologists
 - Australian Kinesiology Association
 - Australian Natural Therapists Association
 - Australian Traditional Medicine Society
 - Association of Massage Therapists
 - International Aromatherapy and Aromatic Medicine Association
 - Massage & Myotherapy Australia
 - Reflexology Association of Australia
 - Shiatsu Therapy Association of Australia
- Regulators
- Public and Private Registered Training Organisations
- Universities and non-self-accrediting Higher Education providers
- Large and small employers across metropolitan, regional, rural and remote areas.



Challenges and Opportunities

Impact of Government Reforms on Private Health Rebates

The Review of the Australian Government Rebate on Private Health Insurance for Natural Therapies commenced in 2012, and in October 2017 the government announced a suite of changes to private health insurance. The federal government currently provides a rebate that amounts to 30.0%⁹ of the price of consumers' private health insurance premiums. As part of the reforms, from April 2019 health insurance providers will no longer be subsidised for providing rebates for between 12–16 natural therapies. Health funds may still provide rebates but they will not be subsidised.

The therapies under the remit of the Complementary Health IRC which are affected are Ayurveda, Aromatherapy, Kinesiology, Shiatsu, Reflexology and Traditional Chinese Medicine Remedial Massage, as well as other natural therapies not under the scope of this IRC. Remedial Massage Therapy is excluded from the proposed reforms and will continue to attract subsidies.

The removal of private health insurance subsidies may lead to a reduction in the number of people accessing the affected services due to the increased cost to the consumer. In addition, if there are fewer people accessing services, this may influence the number of employees in the sector and thus the number of students participating in training.

Demand for Complementary Health Care

Australia has some of the highest utilisation of Complementary Health therapies in the developed world.¹⁰

The ageing population, individuals' overall health, and the mainstream acceptance of complementary therapies by the public contribute to ongoing demand. Consumers are increasingly seeking alternatives to conventional medicines, with a higher expectation of achievable health,¹¹ and complementary health approaches are increasingly accepted and recommended by mainstream health practitioners. For example, there is evidence of a substantial interface between massage therapy and rural/regional general practice, with more than three-quarters

of GPs (76.6%) referring patients to massage therapy at least a few times per year, and 12.5% of GPs referring at least once per week.¹²

The findings of a 2015 review of complementary therapy use in Australia indicate that women are more likely to use complementary therapies than men. In addition, female complementary therapy users are more likely to be middle-aged with a higher education and higher annual income in comparison to female non-users. Rural Australians are also more likely to use manual therapies more frequently compared to urban Australians. Complementary therapy users are more likely to use those therapies for a range of chronic conditions, including diseases identified as National Health Priority Areas by the Australian Government.¹³

There is some evidence that Australians with chronic or debilitating illness are more likely to use Complementary Health approaches. For example, back pain is the second most common complaint cited by patients in general practice, affecting 75% of the Australian adult population. Research conducted within Australia suggests that General Practitioners commonly encourage the use of massage and yoga for the treatment of back pain.¹⁴ Similar studies have also reported on the proportions of individuals suffering chronic conditions who seek Complementary Health services. These studies have found that individuals with musculoskeletal conditions, conditions that are complex, and conditions requiring pain management are more likely to have visited a Complementary Health practice.¹⁵ Additionally, a 2014 review of the literature found that depression was one of the most frequent indications for use of complementary therapies. In particular, high rates of complementary therapy use were found among those with bipolar disorder, an illness known to cause substantial impairments in health-related quality of life.¹⁶

Access to health care in rural and regional Australia is also a key driver of demand for the use of complementary therapies. Recommendations made in the *Australian Journal of Rural Health* suggest that rural health policy and planning should give adequate consideration to the role of Complementary Health practitioners in contributing

to the improved health and wellbeing of Australians within these locations.¹⁷

A high level of demand for complementary therapies is also evident in the number of private health insurance benefits paid. In 2015, private health insurance benefits were paid for 87.256 million allied health services, an increase of 3.2% versus the previous year. Of these, 37.119 million were for dental services, 11.428 million were for optical services, 9.716 million were for chiropractic services, 11.128 million were for physiotherapy services, and 5.711 million were for natural therapy services. It is unclear whether the current demand will continue if consumers have reduced access to health fund rebates.

Complementary modalities, such as Ayurveda and Traditional Chinese Medicine Massage, attract individuals with broad cultural backgrounds. Some consumers will continue to support and seek these treatments regardless of the removal of health insurance subsidies.

Employment Status and Earnings

Studies of Australian massage therapists indicate that most practitioners work part-time and earn below the national average wage, even where massage therapy is the only, or major, source of income.¹⁸ A more recent workforce survey of 480 massage therapists, conducted by the Association of Massage Therapists in 2017, shows that underemployment and part-time employment are still prevalent. The majority of massage therapists (88%) are either self-employed sole traders (64%) or subcontracting their services to other businesses (24%). Non-genuine contracting practices are common within the industry, which helps to account for the relatively small percentage of therapists who are legitimately employed under the Health Professionals and Support Services Award (only 8.5%, of whom more than half are working as casuals (4.5%))¹⁹. The lack of stable, long-term employment opportunities remains a significant workforce development issue.

A recent survey conducted by the Shiatsu Therapy Association Australia (STAA) found that Shiatsu practitioners are generally involved in part-time work as sole traders.²⁰

The majority (75%) of Shiatsu practitioners surveyed were working part-time, i.e. less than 20 hours per week. Results varied greatly, ranging from 1 to 48 hours, with a median of 10 hours (average 13 hours) worked per week. This included time with clients (usually paid), and time spent on business administration and marketing (unpaid). Within this sector there is growing concern regarding the lack of training providers offering nationally recognised training that produces skilled and qualified practitioners.²¹

This data is also reflective of other Complementary Health professions.

The creation of viable and professional career pathways remains a challenge for the industry. Retention rates can be an issue due to lower than average incomes. Small business owners and employers need to be equipped with the marketing and business skills to compete effectively in the marketplace.

Regulation

Registered health practitioners operate in accordance with the *Health Practitioner Regulation Law Act 2009*. Unregistered health practitioners, such as those who work within the Complementary Health sector, are not overseen by a uniform national regulation system. However, they are typically overseen by a professional body or association that provides accreditation and monitors quality and conduct. Currently, practitioners are required to be registered with a professional association to be eligible for status as a health fund provider.

The Australian Health Ministers' Advisory Council (AHMAC) carried out national consultation in 2011 to determine whether unregistered health practitioners should be subject to a single, national statutory Code of Conduct, similar to that in effect in NSW at the time. In June 2013, the Standing Council on Health agreed in principle to a national Code of Conduct, and to strengthen state and territory complaints mechanisms and statutory powers to assist in the enforcement of the Code.²²

There are four states in Australia which currently confer powers on state health regulatory bodies to impose sanctions on unregistered health practitioners. A *Code of Conduct for Unregistered Healthcare Practitioners* came



into effect in New South Wales in 2008, South Australia in 2013, Queensland in 2015, and then Victoria in 2017. The Northern Territory and Western Australia have recently undertaken public consultation on a proposed code of conduct which would bring both states into line with the National Code of Conduct.

Industry Growth

Australians are increasingly accepting of Complementary Health disciplines as a key contributor to an individual's overall physical and psychological wellness. The number of establishments in the sector has increased over the last five years due to this acceptance. Steady demand growth is projected to drive revenue up by an annualised 2% over the next five years through 2021–22, to reach \$4.4 billion.²³

External factors, such as the impending changes to private health insurance subsidisation of natural therapies, may have widespread impact on these continued growth patterns given the discretionary nature of spending associated with the use of complementary therapies.





Employment and Skills Outlook

Labour Force Data

Complementary Health Training Package qualifications can lead to employment in a range of occupations, including massage therapists, reflexologists, kinesiologists, Complementary Health therapists and other related positions. Employment data collected and published by the Department of Jobs and Small Business provides a complete account of the overall Complementary Health sector's labour market actual volume, but focuses only on a limited number of relevant occupations within it. For example, the most recent employment figures from the Department show that across Australia there are 7,300 Complementary Health therapists²⁴ and 15,500 massage therapists (May 2017). *IBISWorld Industry Reports* provides a different account of employment for the industry. It defines the industry as most closely aligned to the sub-sectors and practices of those covered by the Complementary Health Training Package products as 'Alternative Health Therapies',²⁵ and estimates a total employment level of 35,230 (2016–17) for the industry. Employment estimates available for relevant occupations and sectors can vary noticeably, and be incomplete. Therefore, in order to understand the extent of employment across various sub-sectors, individual associations and organisations have been conducting their own specific workforce surveys and research. For example, the Shiatsu Therapy Association of Australia (STAA) and the Association of Massage Therapists (AMT) conducted surveys in 2017 to gather professional workforce data for Shiatsu practitioners and massage therapists working in Australia, which has been quoted in previous sections.²⁶

A summary of the data available for relevant occupations is noted below.

Complementary Health Therapists

Note: This data set is inclusive of Acupuncturists, Homoeopaths, Naturopaths, Traditional Chinese Medicine practitioners and Complementary Health therapists.

- Employment levels for Complementary Health therapists are expected to reach 8,300 by 2022, which is equivalent to an increase over the next five years of 13.9%²⁷
- The industry is anticipated to grow modestly over the next five years, by 2.0% to \$4.4 billion in 2021–22.²⁸

- 29,359 Complementary Health therapy businesses were operating in 2016–17.²⁹
- In 2015–16, 5.9 million claims were made for natural therapies, at an estimated cost of \$179.1 million.³⁰
- Complementary Health has the largest presence within New South Wales with 32.4% of businesses operating in this state. 0.6% operate in the Northern Territory, representing the smallest presence within Australia.³¹
- In the 2016–17 year, 35,230 individuals were employed in the Complementary Health industry, a growth of 1.0% from the previous year.
- The average number of employees per Complementary Health establishment was 1.15 people in the 2015–16 financial year.³²
- Complementary Health therapists have a relatively low proportion of full-time positions (53%). For Complementary Health therapists working full-time, average weekly hours are 37.2 (compared to 40.0 for all occupations).³³
- Unemployment for Complementary Health therapists in 2016 was below average.
- Complementary Health Therapists are mostly (71.1%) female and 28.9% male.

Massage Therapists³⁴

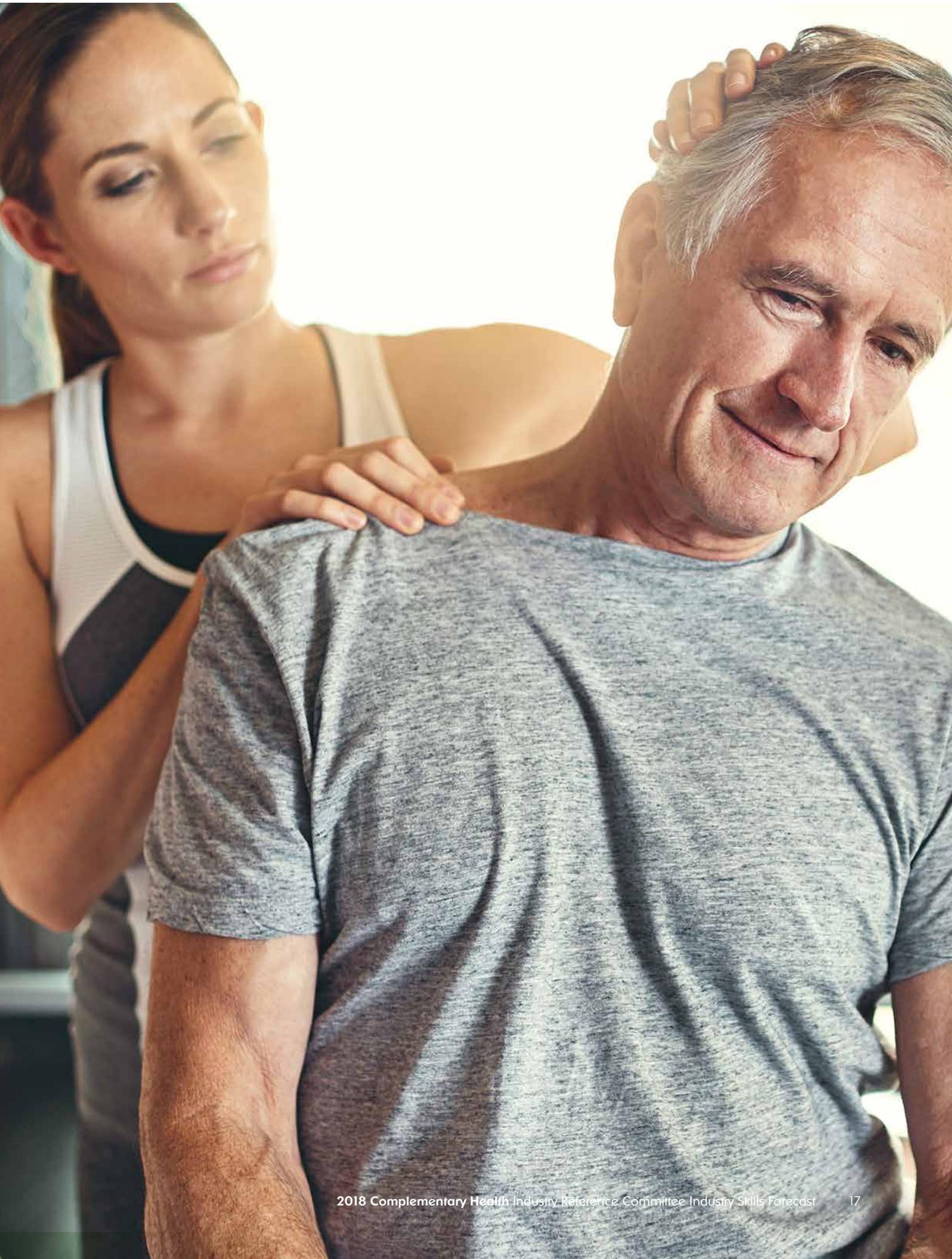
- Employment levels for massage therapists are expected to reach 17,700 by 2022, which is equivalent to an increase over the next five years of 13.8%.³⁵
- In 2016, the unemployment rate was similar to the average.
- Part-time work is very common. Full-time workers, on average, work 36.6 hours per week (compared to 40.0 hours for all occupations).
- Massage therapists have the largest presence within Victoria, with 35.4% of businesses operating in this state. 0.6% operate in the Northern Territory, representing the smallest presence within Australia.
- Female Share: 68.1%, Male Share: 31.9%

Key Generic Skills

– Ranked in Order of Importance

Note: The 12 generic skills listed below, including the descriptors, were provided by the Department of Education and Training for the purpose of being ranked by industry representatives. For the 2018 ranking exercise, an ‘Other’ generic skill option was included in the list to capture any additional key skills considered important for an industry. Please note that, in this case, no other generic skills were identified.

1	COMMUNICATION / COLLABORATION / SOCIAL INTELLIGENCE	Ability to understand/apply principles of creating more value for customers and collaborative skills. Ability to critically assess and develop content with new media forms and persuasive communications. Ability to connect in a deep and direct way.
2	LEARNING AGILITY / INFORMATION LITERACY / INTELLECTUAL AUTONOMY / SELF-MANAGEMENT	Ability to identify a need for information. Ability to identify, locate, evaluate, and effectively use and cite the information. Ability to develop a working knowledge of new systems. Ability to work without direct leadership and independently.
3	CUSTOMER SERVICE /MARKETING	Ability to interact with other human beings, whether helping them find, choose or buy something. Ability to supply customers' wants and needs. Ability to manage online sales and marketing. Ability to understand and manage digital products.
4	FINANCIAL	Ability to understand and apply core financial literacy concepts and metrics, streamlining processes such as budgeting, forecasting, and reporting, and stepping up compliance. Ability to manage costs and resources, and drive efficiency.
5	ENTREPRENEURIAL	Ability to take any idea and turn that concept into reality/make it a viable product and/or service. Ability to focus on the next step/move closer to the ultimate goal. Ability to sell ideas, products or services to customers, investors or employees etc.
6	LANGUAGE, LITERACY & NUMERACY (LLN)	Foundation skills of literacy and numeracy.
7	DESIGN MINDSET/ THINKING CRITICALLY / SYSTEM THINKING / PROBLEM SOLVING	Ability to adapt products to rapidly shifting consumer tastes and trends. Ability to determine the deeper meaning or significance of what is being expressed via technology. Ability to understand how things that are regarded as systems influence one another within a complete entity, or larger system. Ability to think holistically.
8	TECHNOLOGY AND APPLICATION	Ability to create/use technical means, understand their interrelation with life, society, and the environment. Ability to understand/apply scientific or industrial processes, inventions, methods. Ability to deal with mechanisation/automation/computerisation.
9	DATA ANALYSIS	Ability to translate vast amounts of data into abstract concepts and understand data- based reasoning. Ability to use data effectively to improve programs, processes and business outcomes. Ability to work with large amounts of data.
10	MANAGERIAL / LEADERSHIP	Ability to effectively communicate with all functional areas in the organisation. Ability to represent and develop tasks and processes for desired outcomes. Ability to oversee processes, guide initiatives and steer employees toward the achievement of goals.
11	STEM (Science, Technology, Engineering and Maths)	Sciences, mathematics and scientific literacy.
12	ENVIRONMENTAL / SUSTAINABILITY	Ability to focus on problem solving and the development of applied solutions to environmental issues and resource pressures at local, national and international levels.



Key Drivers for Change and Proposed Responses

This Industry Skills Forecast, including the Proposed Schedule of Work, was made available via SkillsIQ's website for comment and promoted to over 17,000 stakeholders registered in SkillsIQ's network for feedback. The draft was prepared through an online national survey administered in November/December 2017 in consultation with the Complementary Health IRC, with input from wider industry stakeholders.

No training package development work has been proposed in 2018–2019, as consultation with the IRC and broader industry did not identify any skills gaps which require action in the current year. The Complementary Health Training Package products are proposed for review in 2019–2020. These training package products were initially scheduled for review in 2018–2019. However, industry notes that it is vital to allow for the proper implementation and use of the training package products, which were extensively reviewed in 2015, before recommending any further revisions.



Proposed Schedule of Work

YEAR	PROJECT TITLE	DESCRIPTION
2019-20	Massage Therapy	The IRC proposes to update the following two qualifications and any associated skill sets and units of competency relating to the job roles of massage therapists and remedial massage therapists: <ul style="list-style-type: none">• HLT42015 Certificate IV in Massage Therapy• HLT52015 Diploma of Remedial Massage.
2019-20	Traditional Chinese Medicine (TCM) Remedial Massage	The IRC proposes to update the following qualification and any associated skill sets and units of competency relating to the job role of remedial massage therapists who use Traditional Chinese Medicine (TCM): <ul style="list-style-type: none">• HLT52115 Diploma of Traditional Chinese Medicine (TCM) Remedial Massage
2019-20	Shiatsu and Oriental Therapies	The IRC proposes to update the following qualification and any associated skill sets and units of competency relating to the job role of Shiatsu therapists: <ul style="list-style-type: none">• HLT52215 Diploma of Shiatsu and Oriental Therapies
2019-20	Aromatherapy	The IRC proposes to update the following qualification and any associated skill sets and units of competency relating to the job role of clinical aromatherapists: <ul style="list-style-type: none">• HLT52315 Diploma of Clinical Aromatherapy
2019-20	Kinesiology	The IRC proposes to update the following qualification and any associated skill sets and units of competency relating to the job role of kinesiologists: <ul style="list-style-type: none">• HLT52415 Diploma of Kinesiology
2019-20	Reflexology	The IRC proposes to update the following qualification and any associated skill sets and units of competency relating to the job role of reflexologists: <ul style="list-style-type: none">• HLT52515 Diploma of Reflexology
2019-20	Ayurveda	The IRC proposes to update the following two qualifications and any associated skill sets and units of competency relating to the job roles of Ayurvedic lifestyle consultants and Ayurvedic practitioners: <ul style="list-style-type: none">• HLT52615 Diploma of Ayurvedic Lifestyle Consultation• HLT62615 Advanced Diploma of Ayurveda





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