



Canadian Psychological Association

The Canadian Psychological Association (CPA) is the national association for the science, practice and education of psychology in Canada. With almost 7,000 members and affiliates, CPA is Canada's largest association for psychology. There are approximately 18,000 psychologists registered to practice in Canada.

What is a Psychologist?

Psychology is the study of how people think, feel and behave. Psychologists use this knowledge to develop assessments and treatments that can help people to understand, explain and change their feelings, thinking and behaviour. Psychologists diagnose developmental problems like learning disabilities and autism, neuropsychological problems that result from head injury or dementia, and mental disorders like depression and anxiety. They help people to recover from and manage these problems and disorders using evidence-based psychological treatments which they develop and evaluate. Training to become a psychologist takes from 7 to 10 years of post-secondary study.

Psychological treatments:

- are proven effective in treating a wide range of mental health disorders such as depression, anxiety, eating disorders, and substance abuse. People with depression who are treated with psychological therapy tend to relapse less frequently than those treated with medication.
- helping people manage chronic health problems and conditions like heart disease and chronic pain.
- are less expensive than, and at least as effective as, medication for a number of common mental health conditions like depression and anxiety.

Issue: Access to Psychological Services

In any given year, one in five people in Canada is living with a mental health problem or disorder with estimated costs to the economy of 51 billion dollars annually. Up to 70% of problems brought to family physicians are for mental health issues or have a mental health component.

Psychologists are the largest, regulated, specialized mental health care providers in the country – outnumbering psychiatrists about 4:1. However, the services of psychologists are not funded by provincial health insurance plans, which make them inaccessible to many Canadians with modest incomes or no insurance. Although there are some publically funded services available in Canada, these are often in short supply, wait lists are long and the criteria to access these services can be restrictive. Despite an awareness of the benefits of evidence-based psychological interventions, there continues to be a severe gap in the ability of patients to receive needed care. As a result, the burden of mental health care surpasses the public health expenditure.

The Mental Health Commission of Canada has recognized this issue. Its national mental health strategy calls for increased access to evidence-based psychotherapies by service providers qualified to deliver them.

Other Jurisdictions

The United Kingdom, Australia, the Netherlands, and Finland have launched mental health initiatives that include covering the services of psychologists through public health systems, particularly primary care. The United Kingdom has invested to make evidence-based psychological therapies more accessible, and Australia has also enhanced access to psychologists through its publicly funded health insurance plans. The UK and Australia have demonstrated the cost effectiveness of psychological services on a population wide basis.

A Business Model for Better Access

In 2013 the Canadian Psychological Association commissioned a report from a group of health economists to develop the model for enhanced access to psychological services for Canadians. The report ‘An Imperative for Change: Access to Psychological Services for Canada’ by David Peachey, Vern Hicks and Orvill Adams provides a business case for improved access to psychological services based on demonstrating positive return on investment and proposed service that yields desired outcomes.

The Canadian business case for improved access to psychological services rests on two well established facts: One there is widely acknowledged need for increased mental health care. Approximately 14% of the population experience impaired mental health but only about one third are receiving care. Two, psychological services are a cost effective way to provide mental health care. There are ample academic studies to confirm this fact.

Models and Recommendations for Canada

- 1) UK’s Improved Access to Psychological Therapies (IAPT) – could be adopted provincially/territorially. These programs are designed to deliver care for people with the most common of mental health problems such as depression and anxiety, staffed by teams of psychologists and low intensity therapists (e.g. peer support, self-help, counselors) using a stepped care approach. In Canada, they could be managed by Regional Health Authorities (RHA), coordinated with existing community mental health services and function as training venues. Provinces that wish to establish IAPT programs be encouraged to begin with RHAs that serve populations that are underserved in terms of mental health care. Additional sites could be added incrementally, gaining from experience by pioneering sites. Financial incentives could be provided for IAPT models that excel in terms of innovative approaches and patient outcomes.
- 2) Collaborative primary care models that include psychologists should become an accepted fact in the evolution of collaborative care in Canada. Administrative structures and funding methods need to support the range and ratios of health professionals who can meet the needs of populations served and recognize the importance of professional and client decision making. Incentives should be provided for best practices with demonstrated improved patient outcomes. These models should follow a stepped care approach to mental health care with psychologists roles focusing on assessment and diagnosis, consultation and education with health team members, program and service development and evaluation, treatment of complex and chronic co-morbid conditions involving mental health and addictions and supervision of other providers as appropriate.



- 3) Collaborative specialist care models should be implemented and/or expanded in hospitals and other sites offering secondary and tertiary care for conditions where psychological services are core to effective care (i.e. mental health conditions) and/or have been shown to improve outcomes (i.e. health conditions such as heart disease, cancer, obesity, diabetes, and chronic pain). As concerns tertiary care of mental health conditions, psychologists can carry out most or all of the responsibilities presently assigned to psychiatrists in psychiatric inpatient or outpatient care. The removal of referral bottlenecks to psychological assessment and care in tertiary care mental health facilities could enhance the provision of timely and appropriate care to those in need of mental health services.

- 4) Fee-for-service models continue to be the preferred funding method for insurers, social security funds (WCB and publicly funded liability insurance), and for individuals who prefer to use private practice psychologists' services. Mental health, and the provision of appropriate mental health service, needs to be chief among the workforce concerns of Canadian employers given that lost productivity resulting from mental illness and addiction is estimated at \$20 billion annually. Employers could expect to recover \$6 to \$7 billion of this amount annually with attention to prevention, early identification and treatment of mental health problems. With timely and meaningful insurance coverage that delivers effective psychological services, insurers also stand to reduce disability costs – given that approximately 30% of long term disability claims made to Canadian employers are for mental conditions.