

Making Evidence-Based Psychological Care Accessible to Canadians

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Dear Editor:

We read with substantial agreement Gratzner and Goldman's article published in the October 2016 issue of the Canadian Journal of Psychiatry.¹ Canada does not do a good job making evidence-based psychological therapies accessible to Canadians. The lack of accessibility to psychological treatments has been first among the Canadian Psychological Association's (CPA) advocacy agenda with funders (private and public) and stakeholders in health. In 2013, the CPA commissioned a report from a group of health economists, asking them to develop and cost out models of enhancing access to psychological services.²

Key to the report's recommendations is that Canada needs sustainable and structural change to the way it delivers mental health care. The bulk of nonpharmacological mental health care is not delivered by psychiatrists or physicians. Unfortunately, however, our publicly funded health systems do not cover the services of psychologists, or other nonphysician health providers for that matter, outside of publicly funded institutions. To access the services of a psychologist in the private sector, patients either pay out of pocket or rely on extended health insurance plans in which the limits of coverage are often too low to provide a sufficient dose of psychological treatment.

While Gratzner and Goldman do a thorough job evidencing the effectiveness of psychological treatments and shining a light on how Canada falls short in making them available, they do not acknowledge the fundamental reasons for this state of affairs. In our view, it is because our public health system does not fund the services of those who provide it. It is also because our private health insurance plans do not provide sufficient amounts of coverage. Neither insurance plan funds the right service, from the right provider to the right person at the right time and place, an imperative that stakeholders, inclusive of medicine, recommend.^{3,4}

The CPA's report costs out several models to make psychological treatment more accessible to Canadians. Some of its recommendations are aimed at the private sector; others target the public sector and how Canada could adapt models such as the United Kingdom's Improving Access to Psychological Therapies (IAPT). A Canadian IAPT would make use

of the expertise and skills sets of health providers, such as psychologists, whose training and work *is* the design, delivery, and evaluation of psychological treatment.

We are on the brink of a historic opportunity for mental health. We have a prime minister whose mandate letter to the Minister of Health included making "quality mental health services more available" to Canadians. We have a minister of health negotiating a new Health Accord with the provinces and territories where new money may well be targeted for cost- and clinically-effective service delivery in areas such as mental health. The research is clear: cost- and clinically-effective mental health service includes psychological treatments. Canadians deserve better access to the trained and regulated providers who deliver them—psychologists chief among them. The CPA is and will continue to do its part to make that happen.

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