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RESPONDING TO THE MENTAL HEALTH NEEDS OF ONTARIANS:

**A Case for Investing in Training Psychologists
and Growing the Psychologist Workforce**



Executive Summary

There is a well acknowledged crisis in getting mental health help to Ontarians who need it¹. The Government of Ontario has recognized the extent of the mental health crisis in Ontario and we commend the much-needed commitment of \$3.8 billion in new spending over the next 10 years.

Psychologists are an important part of the province's regulated mental health care resource. ***The unique training of Psychologists allows for the provision of triage, diagnostic assessment, supervision, clinical direction, and treatment services that are unique from, but complementary to, the province's other health providers.*** Psychologists' training enhances the efficacy of mental health services both when working in the private sector or when funded as collaborative partners with other mental health professionals in the provision of comprehensive service. Psychologists have played pivotal roles in developing highly effective evidence-based therapeutic techniques (i.e., CBT, DBT, ACT, etc.).

The purpose of this document is to highlight the fact that demand for services by psychologists in all sectors far exceeds current capacity in Ontario and provide recommendations to address service gaps.

Unfortunately, Ontario is falling behind the rest of Canada when it comes to the number of psychologists per capita. The current demand is far outpacing the supply, and this trend will only continue in the years to come. Two of the major contributing factors include,

- i. Ontario Universities are not producing enough doctoral- level graduates, and**
- ii. Hospitals as well as other institutions do not have sufficient funding to sustain residency positions for graduates to complete their training and settle into clinical practice in Ontario.**

There are approximately 3,800 psychologists in Ontario. More than 1,700 of these reside and practice within a 30-minute drive from downtown Toronto. The remaining largely practice in other major population centres, leaving the most vulnerable in rural and remote communities with little or no access to the specialised skills of psychologists that they urgently need. Furthermore, a number of Ontario doctoral graduates leave the province entirely due to the limited number of psychology residency training programs. It is well known that Doctoral students tend to remain in the communities where they completed their residency training. The residency year is when they start to establish their careers and settle into communities.

As detailed below, the demand for trained psychologists is seen in the insurance industry, the Workers Safety and Insurance Board (WSIB), public education, youth mental health centres, hospitals, and correctional systems. Even large teaching hospitals in centres such as Toronto, Hamilton, London and Ottawa struggle to fill positions. WSIB, for example, has stated in a communication with OPA that claims requiring psychologists to assess, diagnose and treat injured police officers, paramedics, firefighters and nurses are increasing, and they will require hundreds of additional psychologists to address this need.

More psychologists are needed to help meet the promise of improved mental health access and care to Ontarians. Strategic investments in our universities and residency programs will go a long way to support the mental health needs of the people of Ontario, reduce more expensive downstream costs to the public health system, and will improve the lives of Ontario families across the province.

Recommendations

As more and more people are opting to seek help, psychologists provide an invaluable service. Ontario lags behind most provinces in terms of access to psychological services (see Figure 4 below). Bold actions are required to address the shortage of psychologists and enable Ontario to better meet the mental health needs of its citizens. Recommendations are as follows:

Recommendation 1: Investment in Doctoral University Training Programs

Ministry of Training, Colleges and Universities investment is needed for the creation of 100 new Doctoral psychology spots each year through funds earmarked for mental health and addictions (MOHLTC). This investment would immediately begin the training of additional psychologists across Ontario's universities with existing psychology programs that can be expanded to include professional-focused streams to graduate more students. The creation of **five professional doctoral (e.g. Psy.D.) programs** distributed across the province would enable the profession to address current specialty gaps (neuropsychology, school, health, and rehabilitation psychology in particular and clinical psychology in Northern Ontario) and respond to current and emergent mental and cognitive needs of Ontario's populations (e.g. older adults, chronic disease, brain injury, Indigenous peoples, rural communities).

Recommendation 2: Investment in Psychology Residency Programs

Investment in 50 new residency positions in hospitals and related placements is needed across the province through 2023. The number of residency positions should increase to 100 by the time the first cohort of doctoral students are ready for their residency in 2024. The creation of provincially-funded residency positions, rather than positions that are funded at the discretion of individual hospital budgets, creates more stability of training and can effectively increase the number of graduate students who stay and train within the province. Positions could be targeted to geographically dispersed hospitals/facilities to increase retention in currently underserved communities. Psychology residencies are one year in duration and are the final requirement for graduation with a doctoral degree in professional psychology. Residents bring considerable skill and knowledge to the settings where they practice.

Projected costs of the two recommendations above will be approximately \$6,490,000 per university over a 5-year period. This amounts to \$32,450,000 for the creation of five university programs over the same time period.

Recommendation 3: Invest in an Incentivization Program for Psychologists to provide services to regions with limited or no access to psychological services

The government is encouraged to work with the OPA towards the creation of an effective incentivization program with the goal of increasing the number of psychologists in underserved, rural, and remote communities. This can be developed based upon the needs of various communities and across sectors with greater needs.

Introduction

Ontario is at a crossroads with regard to mental health services. On the one hand, stigma associated with mental illness has decreased with a corresponding rise in demand for services. On the other hand, capacity to deliver psychological, neuropsychological and psychoeducational services remains highly strained. As referenced below, wait times in public systems have increased, requiring public institutions to place limits on access to this important service; a decision that has been shaped less by evidence-based guidelines, and more by economics and pressure to reduce the size of wait lists. Unfilled positions in schools and hospitals abound.

This document highlights the Ontario Psychological Association (OPA) and Canadian Psychological Association's (CPA) recommendations aimed at supporting Ontarians and addressing the ballooning mental health crisis in the province.

The context – demand in Ontario for psychologists and challenges with access

Limited access to psychological services places considerable pressure on the people of Ontario. This unnecessarily burdens our hospitals and emergency services, contributing greatly to the problem of “hallway medicine”. According to RBC Insurance, mental health claims are now as high as 29%.² Similarly, 41% of Ontarians supported by the Ontario Disability Support Program (ODSP) have a diagnosed mental health condition.³ The economic burden of mental illness in Canada is \$51 billion per year due to health care costs, disability costs and reduced health-related quality of life. This figure does not capture all costs, such as those borne by the education and criminal justice systems or by caregivers.⁴ A pilot project undertaken by RBC demonstrated that rapid access to psychologists for diagnosis and treatment reduced the duration of insurance disability claims by over 37% and resulted in noticeable changes in functioning with favorable return to work outcomes.

While Canada's psychologist workforce is a healthy and growing one, growth has been minimal in Ontario, despite a sharp increase in demand for psychological services. Investing in our university training programs will help ensure Ontarians gain access to the high-quality care they need.

Nearly 10,000 users now visit the *Find a Psychologist* webpage⁵ of the Ontario Psychological Association (OPA) every month. This is, of course, understandable in light of data on the incidence of mental illness in Canada.⁶ A recent survey from Sunlife Financial has shown almost half of Canadians had experienced a mental health issue at one point in their life.⁷ **Sunlife has also indicated that as of 2019, psychologists are now the second most searched professional group on its provider search.**

According to the Canadian Occupational Projection System (COPS),⁸ employment growth for psychologists increased sharply over the 2014-2016 period.

The unemployment rate was at an extremely low level of 0.7% in 2016 and well below the national average of 7.0%. Hence, analysis of key labour market indicators suggests that the number of job seekers was insufficient to fill all job openings in this occupational group. Over

the period 2017-2026, new job openings (arising from expansion demand and replacement demand) are expected to total 16,500, while 15,400 new job seekers (arising from school leavers, immigration and mobility) are expected to be available to fill them. The labour shortage conditions seen in recent years is expected to persist into the 2026-2017 period and could even become more acute as the projected number of job openings is expected to be substantially larger than the projected number of job seekers over that period. Job openings are projected to arise from expansion, demand and retirements.^{iv}

Retirement information was obtained through a recent OPA survey (2018) which showed that 17% of surveyed psychologists planned to retire in the next five years. In addition, wait times for psychological services have increased over the past five years and have reached a critical state in Ontario’s publicly funded systems.⁹ As seen in Figure 2, the pressures are more pronounced in Northern Ontario.

Figure 1.

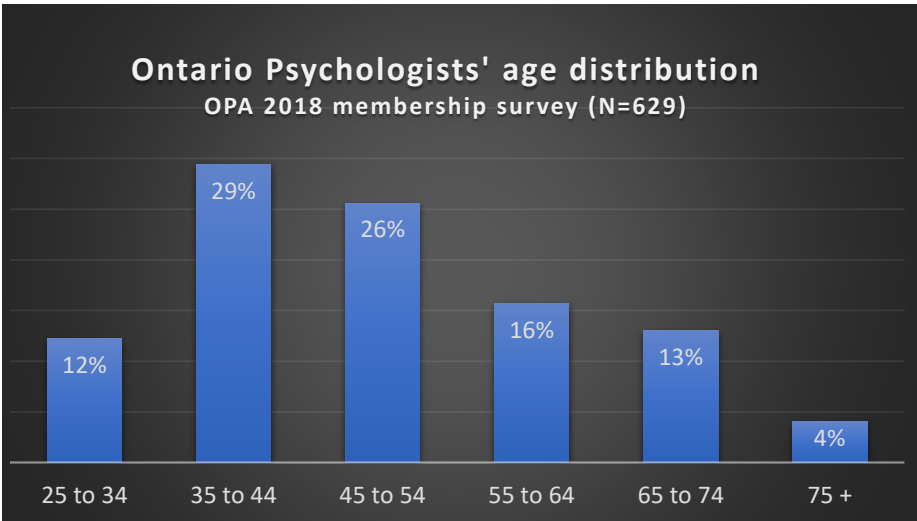
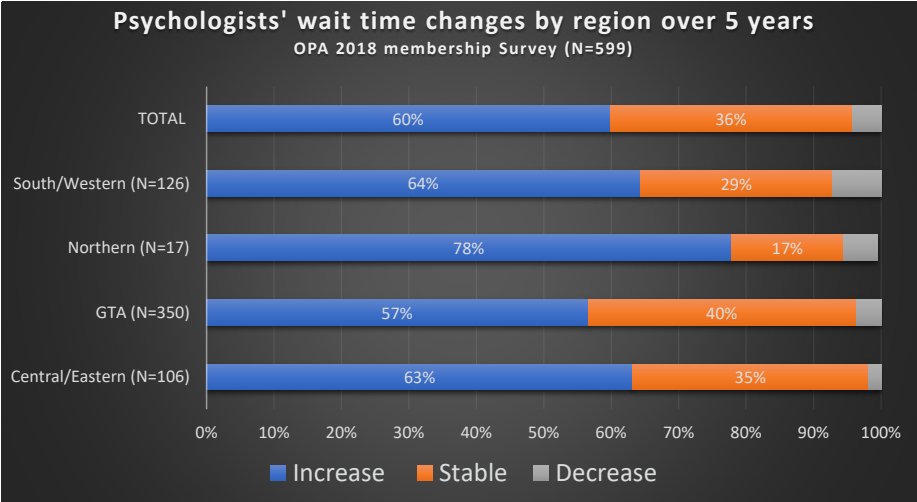


Figure 2.

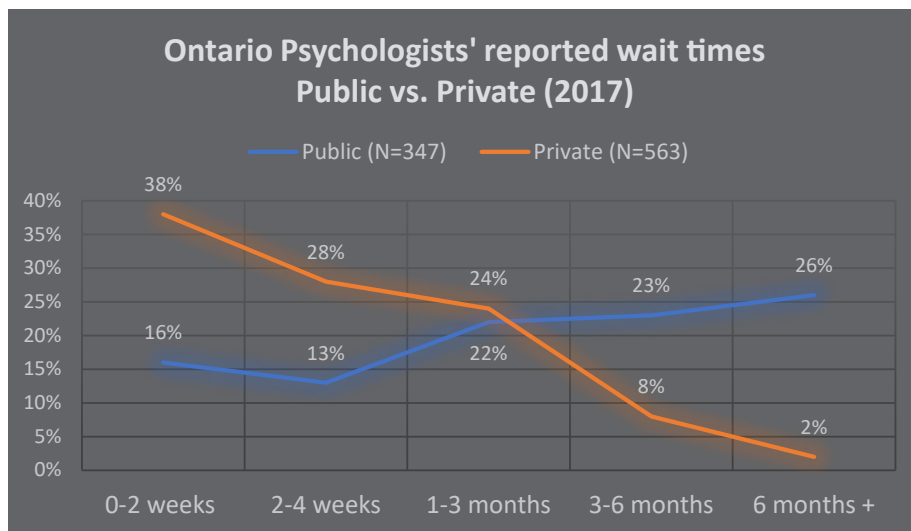


The Ontario Auditor's 2017 report¹⁰ on access to psychological services in schools was also telling:

For three of the four boards [examined], 24% or more of the students on the psychological services wait lists had been waiting for more than one year. Some students had been on the wait lists for more than two years. One school board had ten students on the psychological assessment wait list that had not received an assessment for over four years because, according to the board, other students were considered to have more need. The school boards we visited and the trustee's associations we spoke with told us that specialist assessments were not being done on a timely basis because it was difficult to recruit specialists due to the lack of specialists in the area, less competitive salaries offered by school boards, and in the case of Catholic and/or French boards, it was difficult to find specialists who meet requirements to work in those boards (i.e., French language).

In 2017, the OPA's own survey showed that 47% of psychologists working in government-funded services had a wait time of more than three months to access their services once a referral was received. This did not include the time needed to navigate the health care system before reaching the psychologist. Ontario hospitals frequently require physicians to be responsible for all patients seeing a psychologist, adding another layer to accessing needed care. Psychologists' scope of practice includes the diagnosis and treatment of mental disorders and, in the private sector, Ontarians can self-refer. The requirement in the public sector that psychologists can only see patients upon the referral of a physician creates an unnecessary barrier to receiving psychological care. This issue is further explored in a paper by the CPA on practicing to scope¹¹. Wait times for therapy in the GTA were better than the rest of the province, especially for those who were able to pay directly, or had sufficient health benefits to pay for their services. Overall, 60% of psychologists in the GTA could see clients within a month, as opposed to 38% outside the GTA. The same 2018 survey indicated that the bulk of our therapy capacity was in the private system, thus causing significant imbalance in available services.

Figure 3.

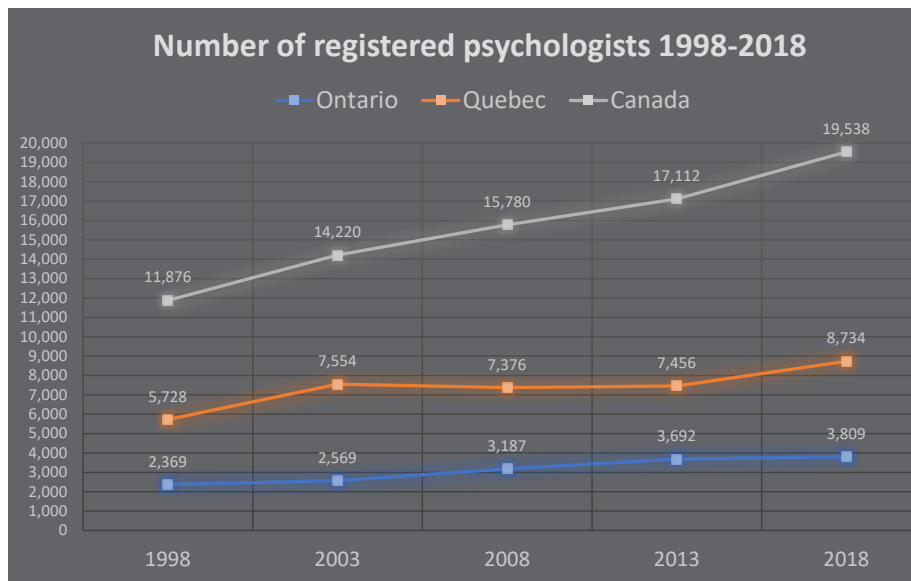


The introduction of the **Supporting Ontario’s First Responders Act** has underscored gaps in access to services.¹² First Responders now have access to diagnostic assessment and treatment for PTSD. This change gives workers such as nurses, fire fighters, police, paramedics and others faster access to the Workplace Safety and Insurance Board (WSIB)’s health care benefits. Access to service is provided through the WSIB’s Community Mental Health Program (CMHP), which began its operations in 2018. The goal of the CMHP is to speed access to quality assessment and treatment. WSIB projected that claims will rise, and as such, hundreds of additional psychologists will be needed to assess, diagnose and treat injured workers.

Ontario’s current psychologist workforce

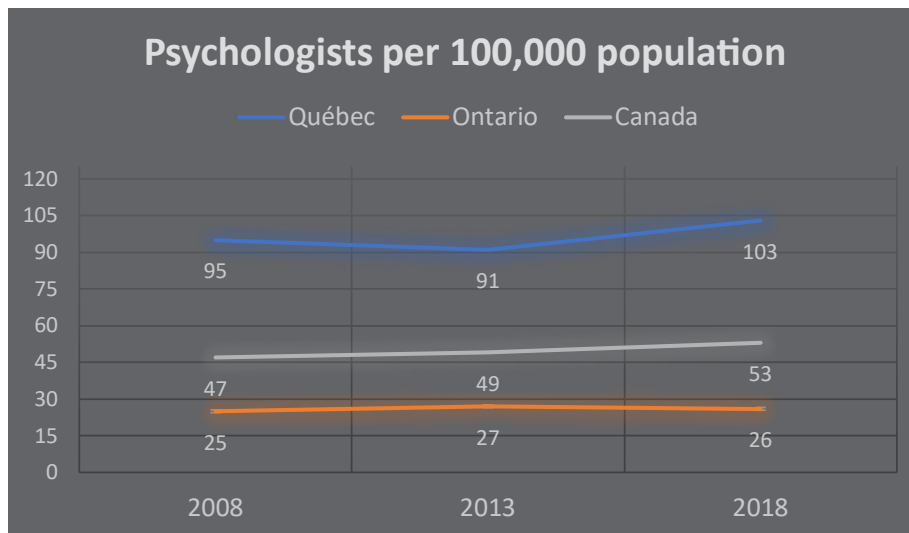
Ontario is second only to Quebec in the absolute number of registered psychologists in the province. However, of all Canadian provinces and territories, Ontario has the second lowest number of psychologists per capita (26 per 100,000). In addition, within Ontario, a significant part of the workforce resides in the GTA. This amounts to about 49 psychologists per 100,000 in the GTA and 21 psychologists per 100,000 for the rest of the province.

Figure 4.



Note. Data from 2008 and 2013 comes from the Canadian Institute for Health Information (CIHI). Data from 2018 was obtained through a survey of regulatory colleges across Canada in July 2018.

Figure 5.



Note. Data from 2008 and 2013 comes from the Canadian Institute for Health Information (CIHI). Data from 2018 was obtained through a survey of regulatory colleges across Canada in July 2018.

Doctoral psychology training programs and residencies

According to the CPA, Ontario has 24 residency programs (21 of which are accredited by the CPA) and 14 doctoral academic programs. There are, on average, 138 students accepted into Ontario's graduate programs and 92 residency positions available every year. This will likely play a role in our retention challenges as we know that students tend to stay where they complete their residency rather than where they complete their doctoral studies. By contrast, Quebec tends to admit on average 282 doctoral students.

Table 1

Information on Ontario's Accredited Doctoral Psychology Programs						
	2014-2015	2015-2016	2016-2017	2017-2018	Average	University Average
Total Enrolled	703	679	700	695	694	50
Total Accepted	142	135	141	135	138	10
Total Graduates	85	110	93	92	95	7
Residency Positions	92	94	91	90	92	7

When compared to Quebec, Ontario does poorly at getting graduates to complete their doctoral training. Quebec's doctoral program completion rate is 90%, while Ontario's is 69%. A factor underlying this might be choice. While Ontario's doctoral programs often require the completion of a master's degree in addition to the Ph.D. degree requirements, Quebec has both Psy.D. and Ph.D. options. Francophone universities in Quebec no longer offer master's programs; rather, they offer a combined Master's/doctoral program that takes four (Psy.D.) to six years (Ph.D.) to complete. While the Psy.D. (sometimes referred to as the professional psychology degree) revolves around training in evidence-based practice, it trains graduates to be consumers rather than producers of research. The Ph.D. programs, conversely, focus on both clinical and research training. Both programs train psychologists in the skills critical to program development and evaluation, and evidence-based service delivery, and provide training in assessment, diagnosis and intervention for psychological problems and disorders.

Quebec officially has eight universities, but one of the universities, l'Université du Québec, has 10 sites scattered throughout the province. Ten universities/sites offer undergraduate psychology programs and nine have doctoral academic programs leading to licensure with l'Ordre des Psychologues du Québec (OPQ).¹³ Seven of the nine sites offer more than one doctoral option (i.e., Psy.D. or Ph.D.). It is unclear how many internship or residency programs there are in Quebec, but the Government of Quebec does fund practice training requirements in return for a service agreement.¹⁴ British Columbia has the next highest number of residency positions and academic programs. They have six university programs and seven residency sites.

Conclusion

As more and more people are opting to seek help, they are turning to regulated mental health providers for their care. Psychologists outnumber psychiatrists approximately 4:1 in Canada and are a key component of Ontario's mental health human resource, meeting the mental health assessment, diagnosis and treatment needs of Ontarians. But Ontario is already lagging behind most provinces in terms of access to psychological services and, without proactive planning for the near future, gaps will visibly widen as demand naturally increases. Bold actions are required to address the shortage of psychologists and make Ontario a leader in the delivery of evidence-based psychological care.

About psychologists

The Canadian Institute for Health Information (CIHI) has released a number of reports^{15 16 17} on the status of Canada's health care providers. The CPA, and the regulatory colleges of psychologists across Canada, also house data about the practice and demographic characteristics of psychologists.

Psychologists are regulated health professionals whose foundational knowledge is the biological, cognitive, emotional, social, cultural and environmental determinants of behaviour. Psychologists provide diagnostic assessment and treat psychological problems and mental as well as cognitive disorders. Psychologists provide services, teach and/or conduct research in settings such as hospitals, community clinics, private practices, universities, schools, criminal justice settings, social welfare agencies, workplace employee assistance programs, rehabilitation programs and workers' compensation boards. Psychological services are provided across a continuum of care, which includes wellness, injury and illness prevention, diagnosis and treatment, rehabilitation and relapse prevention, chronic disease and disability management, and palliative care. Psychologists direct and lead care develop programs and treatments and evaluate program efficacy and outcomes.

In Canada, psychology has been a regulated profession for decades. Ontario has been regulating psychologists since 1960. Quality assurance for the training of psychologists has also been achieved through accreditation of doctoral and internship programs by the CPA since 1984.¹⁸ Psychologists are regulated in all 13 provinces and territories.

To practice as a psychologist in Canada, an individual must obtain a certificate of registration from one of the provincial or territorial psychology regulatory authorities. The registration requirements vary somewhat across the country. The CPA, OPA, and Canada's regulatory bodies of psychology (ACPRO) endorse the doctoral degree as the entry to practice standard for the profession. However, some provinces permit registration at the master's level. All but one jurisdiction (Quebec) requires successful completion of the North American Examination for Professional Practice in Psychology.^{19 20} Jurisdictions typically have additional requirements that include practice-related oral and jurisprudence examinations. While registration certificates are general, psychologists typically have their declared areas of competence reviewed and approved by their regulatory body which, in turn, become the basis for their authorized practice. Psychologists are obligated to practice within those areas so declared and approved (see next section). Continued registration requires ongoing professional development and participation in quality assurance programs including practice audits. In addition, the regulatory authorities have robust complaint mechanisms and the ability to impose consequences including the removal of certificates of registration. More information on the requirements of Canada's regulatory bodies in psychology can be found at: <https://cpa.ca/public/whatisapsychologist/regulatorybodies/>.

Psychologists usually focus their practice in specific areas such as: clinical psychology, counselling psychology, clinical neuropsychology, school psychology, correctional/forensic psychology, health psychology, rehabilitation psychology, and industrial/organizational psychology. Within these areas, psychologists may work with a variety of individual client populations, such as children, adolescents, adults or seniors, and they may focus their attention on families, couples or organizations. They work in a range of settings, including: schools, hospitals, industry and business, social service agencies, rehabilitation facilities and correctional facilities. Approximately half of Ontario's psychologists work outside the publicly funded system and accept referrals from third party payors such as WSIB, auto insurance accident benefits, employment benefits plans and private insurance, as well as self-payment from patients who can afford to pay the fees or for whom insurance covers only a fraction of their assessment and treatment fees.

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