

**Opening Remarks to the House of Commons Standing Committee on Health
on the Emergency Situation Facing Canadians in Light of the COVID-19 Pandemic
by Dr. Karen Cohen, CPA CEO
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Good afternoon. My name is Dr. Karen Cohen. I am a psychologist and CEO of the Canadian Psychological Association. The CPA is that national voice of researchers, practitioners, and educators in psychology.

Thank you for the invitation to appear before you today.

The psychological factors implicated in the COVID-19 global pandemic, are several.

First, successful management of health and illness depends on how people think, feel, and behave as individuals and in groups. Wearing masks, keeping socially distant, getting vaccinated - all involve making decisions and changing behaviour. Psychological science is critical to the success of public policies intended to bring about these changes. Dr. Kim Lavoie, a Canada Research Chair in Behavioural Medicine, has shown that to increase vaccine uptake, different approaches are needed, depending on why someone has resisted vaccination. Dialogue and education may work for people or are afraid of, or lack trust in vaccines whereas mobile vaccine clinics work with people who haven't gotten vaccinated because they can't leave work or get to a clinic. How health providers talk to their patients who resist vaccination, will impact whether they change their minds.

Policies affecting people will be more effective if they take into account how people think, feel, and behave.

Second, while too many Canadians have contracted the COVID-19 virus, every Canadian has lived its psychological, social, and economic impacts.

Recent surveys of the psychological impacts have shown that:

- nearly half of Ontarians said that their mental health has worsened since the pandemic began which is up from 36% when the pandemic started;¹
- More Canadians continue to report high levels of anxiety and depression (23% and 16%) now than when the pandemic began (5% and 4%);² and
- More Ontarians are accessing mental health support now (24% versus 17% in 2021 and 9% in 2020) than at any other time during the pandemic BUT 43% have said it was difficult to get help.³

¹ <https://ottawa.cmha.ca/1-in-4-ontarians-access-mental-health-help-the-highest-rate-during-the-pandemic/>

² <https://www.mhrc.ca/national-polling-covid>

³ <https://ottawa.cmha.ca/1-in-4-ontarians-access-mental-health-help-the-highest-rate-during-the-pandemic/>

While self reported mental health problems, and reaching out for professional help may have increased, timely access to psychological services has not. When asked about barriers to accessing psychological services, a 2021 CPA Nanos survey showed that more people cite financial factors (78%) than stigma (39%)⁴.

Unless the psychologist is salaried in a public institution like a hospital, their services are not covered by Medicare. As public institutions face budget pressures, there are negative impacts on the number of salaried positions and on conditions of work. Increasingly, psychologists work in the private sector, where their services are inaccessible to those who cannot afford them. Even when psychological services are covered by private health insurance plans, the median amount of coverage is \$1000 annually, which is less than a third of what it costs for the average person to have a successful treatment outcome. The CPA, in collaboration with provincial and territorial psychological associations, have just issued a paper entitled: *New Federal Investments in Mental Health: Accelerating the Integration of Psychological Services in Primary Care*.⁵ We outline ways in which some provinces have addressed this service gap and how the federal mental health transfers can reduce this gap further still.

Third, even as Canada redresses the funding barriers Canadians face in accessing psychological services, there are other barriers that need attention.

- For effective mental health human resource planning, we need to collect better data. While we have some data about the demographic and practice characteristics of health providers whose services are delivered under Medicare, we know very little about health providers, like psychologists, whose services are delivered in the private sector.
- A large class of students training to become psychologists is 10, compared to the hundreds of students in a medical or nursing class. To better meet the diverse mental health needs of Canadians, we need to train more psychologists.
- The pandemic has shown us that much health care can be delivered virtually. The regulation of Canada's health providers is done provincially and territorially. Entry to practice requirements vary from one jurisdiction to another and a health provider cannot necessarily provide services outside of their province of registration. While the Agreement on Internal Trade, and the Canadian Free Trade Agreement mandated health regulators to ensure mobility, these federal directives did not give regulators the authority to set common licensing requirements. When it comes to health care, the pandemic has underscored the limitations of systems that are provincially and territorially based, rather than nationally based.

In summary, global health crises have mental health impacts, and the successful management of any global health crisis depends on psychological factors. To address these, we must

1. develop pandemic policies that are informed by psychological science
2. redress funding barriers to accessing psychological care and
3. attend to the training and regulation of Canada's health human resources.

Canada has no health without mental health.

⁴ <https://cpa.ca/strong-majority-of-canadians-want-improved-access-to-psychologists/>

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<https://cpa.ca/docs/File/Advocacy/CPA%20CPAP%20New%20Federal%20Investments%20in%20Mental%20Health%20Final%20February%202022.pdf>