

Making Change: Advocacy for Psychology in Canada 2021

Karen R. Cohen, Ph.D., C.Psych.
Chief Executive Officer
Canadian Psychological Association

May 7, 2021

Canadian Council of Professional Psychology Programs
Virtual Seminar

Change Message 1:

There is rarely one way to view
a problem or its solution

The issues psychologists address via research, practice or teaching are complex and multi-faceted.

Successful change, for a clinician, researcher, advocate, administrator, leader, policy maker means:

- seeing and hearing them all
- using the complexity to inform a solution rather than confirm one, ignore one or become paralyzed by it

Professional associations' mandates are about making change (or not) for the profession...



Canadian Psychological Association (CPA)

Vision: A society where understanding of diverse human needs, behaviours and aspirations drive legislation, policies and programs for individuals, organizations and communities.

Mission: Advancing research, knowledge and the application of psychology in the service of society through advocacy, support and collaboration.

Which are achieved by...

- Promoting the science, practice and education of psychology
- Bringing the science, practice and education of psychology to serve the public good

Change Message 2...

The study and practice of how people think, feel and behave is relevant to virtually any human policy, regulation, legislation, programme, problem as well as to individuals, families, workplaces, and communities and across all sectors!

CPA's Guiding Principles

- Evidence-based practice, policy and decision-making
- Respect our organizational mission in all things: support and promote the development of the discipline and profession and its contributions to the people and society in which we live and work.
- Deliver value to members and affiliates
- Respect, integrity, diversity and inclusion guides all our activity.
- Model the principles of the CPA Canadian Code of Ethics in all we do
- Collaborate meaningfully and constructively with the CPA's and psychology's partners and stakeholders.

CPA's Operating Principles

- **A commitment to best practice in the governance and management of the association.**
- **Organizational effectiveness.** Our strategic goals reflect and respond to the needs and views of our membership and stakeholders. We align operations to strategic goals. We balance the need for continuity of policy and programming with the need to respond to changes in the organization's climate and context. We walk the talk of respect and collaboration among Board, management, staff, members, affiliates, partners and stakeholders.
- **Provide psychology across Canada a professional home.** We can do this by being a convenor and by supporting networks and communication among scientists, practitioners and educators in psychology.
- **Have an opinion, lend a voice, make change for the good.** We engage members and their expertise in making contributions to public policy.
- **See, hear, and consider a diversity of perspectives** from among members, affiliates, partners and stakeholders when addressing issues, problems, policies and initiatives facing psychology or the organization.

Strategic Plan



Goal one activities: Supports and Promotes Psychological Science

- Annual convention
- Three peer reviewed journals
- Chair Canadian Consortium of Research
- Lobby government and granting councils for funding across basic and applied areas

Goal two activities: Meets Needs and Supports Growth and Impact of Discipline and Profession

- Communication and Knowledge Mobilization (convention, journals, Psynopsis, CPA News)
- Promote members and their work – media, podcasts, other social media
- Science and practice training summits
- Offer training in advocacy (VIP/R programme, Advocacy Guide)

Goal two activities: Meets Needs and Supports Growth and Impact of Discipline and Profession

- Membership benefits – professional liability and other insurance programs, other membership benefits and perks (e.g. travel, devices, office supplies, hotels, communications, publishers, practice management)

Goal three activities: Advocacy for psychological services and research in parity with physical health

Partnerships, collaboration and contribution with: funders, decision-makers, other health and science partnerships

Current Practice Collaborations

HEAL: Organizations for Health Action

- Seniors
- Mental Health
- COVID-19 subcommittee
- Past co-Chair and current Management

Beyond COVID-19:

HEAL's recommendations for a healthier nation



Current Practice Collaborations

Canadian Alliance of Mental Illness and Mental Health

Mental Illness Awareness Week (MIAW), Call for Federal Parity Legislation, Champions of Mental Illness Awards

CPA longstanding member and secretariat
Chair Policy Committee

Current Practice Collaborations

Mental Health Commission of Canada

- 2019 to present. Psychotherapy Policy Implementation Network, CPA co-chairs: access to psychotherapy, outcome measurement, declaration of principles, mental health and COVID-19
- 2017 Backgrounder on cost and clinically effective psychological services
- 2016 ongoing Suicide Collaborative. CPA represented
- Informing the Future: Mental Health Indicators for Canada 2015
- E-Mental Health in Canada: Transforming the Mental Health System Using Technology 2014, 2016 to present. CPA and other psychologists represented.
- Psychological Health and Safety in the Workplace 2013
- Mental Health Strategy for Canada 2012

Current Practice Collaborations

- **Veteran's Affairs Canada**
Mental Health Advisory group provides advice to Minister of Veteran's Affairs about gaps in mental health support and services for veterans and their families.
Submission to VAC HoC Committee on mental health
- **Corrections Roundtable**
National Associations Active in Criminal Justice (NAACJ)

Current Practice Collaborations

- Canadian Life and Health Insurance Association (CLHIA)
Guidance document for private sector health providers
- Extended Health Providers Coalition – come together around private sector services, working group with CLHIA focused on guidance for health providers in private sector

Current Practice Collaborations

- CPA resources CPAP (Provincial/Territorial Associations of Psychology)
- Canada Revenue Agency: Disability Advisory Committee

Goal four activities: Education, Training and Career Development

- Accreditation
- CE credit to providers
- CPD workshops and webinars developed internally and through collaboration (APA)
- Partnerships with other education partners (CCDP, CCPPP)

Goal five activities: Equity, Diversity and Inclusion...

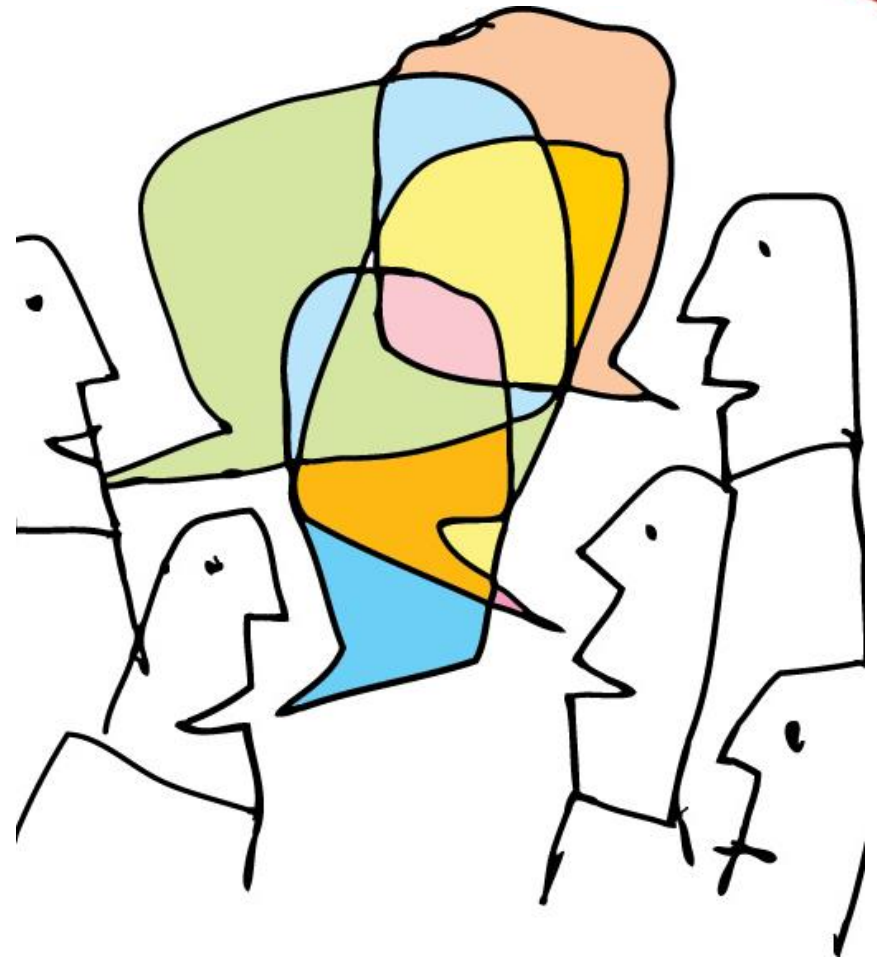
- Human Rights and Social Justice in Psychology Committee and its advisory groups
- Internal review CPA policy and procedure: training workshop for staff with Diversipro
- Address equity gaps and explore opportunities through the range of CPA operations: convention, accreditation, support for students from under-represented groups
- Collaborate with other psychology organization partners (e.g. CCPPP)

Goal six activities: CPA's response to Truth and Reconciliation Commission of Canada's Report

- Knowledge Sharing Group
- Convention registration waivers Indigenous students and members
- Continuing professional development offerings for members with range of offerings.
- Indigenous student bursary
- Accreditation standard review and consultation with Indigenous Section
- Collaborate with other psychology organization partners

The association's advocacy goal: Why talk and partner so much to make change?

Advocacy happens in institutions, across organizations, with all levels of government, within and across professions, with other stakeholders



Change Message 3...

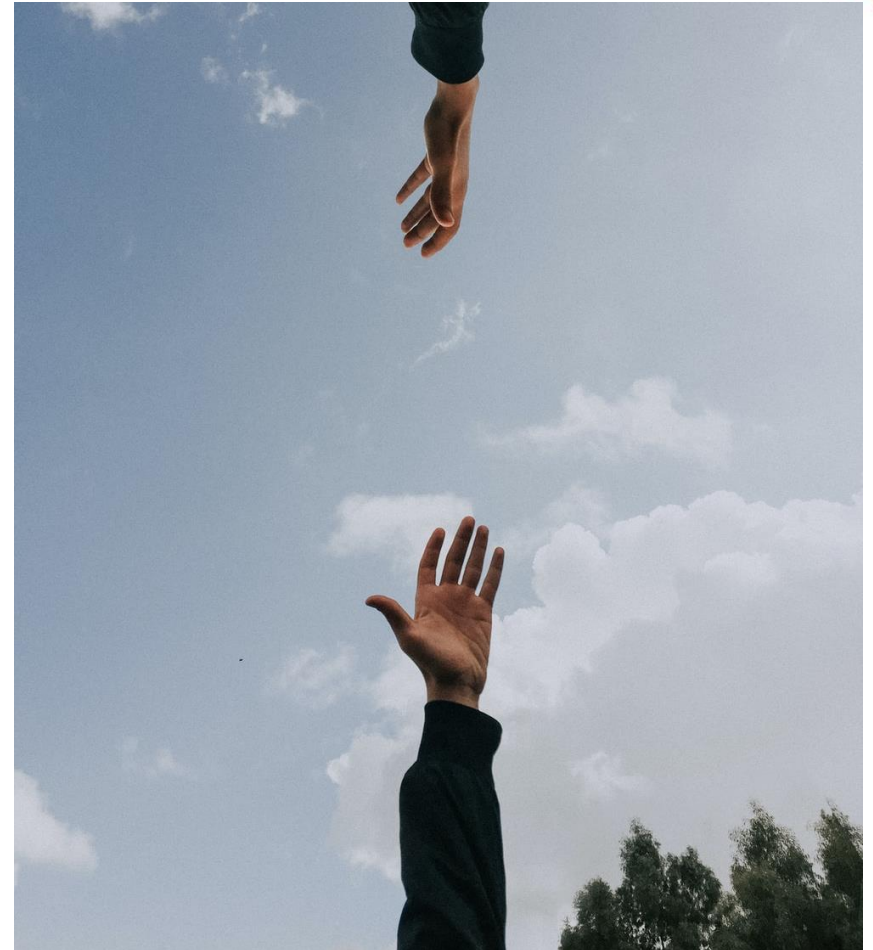
Change is more likely to happen when more people and stakeholders want it too.

Who are psychology's advocacy partners?

See Goal three!

- Other health providers, researchers, consumer/patient groups and their families and caregivers
- Private insurance industry, employers, as well as public institutions and governments

And how do we reach them?



Talking to decision-makers



Talking to the public...



Joining alliances and forging partnerships...

See goal three again...

HEAL, CCR, CCPH21, MHCC,
CAMIMH, EHPC, CCC, PHAC,
CCPPP, CPAP, CSBBCS,
CFHI, CLHIA

Why so many relationships and conversations to make change?

Change Message 4...

Because

- it must matter to more than you - *champions*
- ideas need to spread and take root – *hard to predict where, when and who*
- change depends on *many minds agreeing* to do something different and...

Change Message 5: You will need to say it more than once



Finding champions, spreading and growing ideas, and changing minds takes time, resource and many, many (often repetitive) conversations...

press all the buttons!

Gear up for the challenges of
advocacy...



Advocacy Do's and Don'ts

Change Message 6:

Be your best self

- *Know who you are...don't define yourself in relation to others or by diminishing others.*



Advocacy Do's and Don'ts

- *Know who you are talking to* and what they and other stakeholders think about your issue



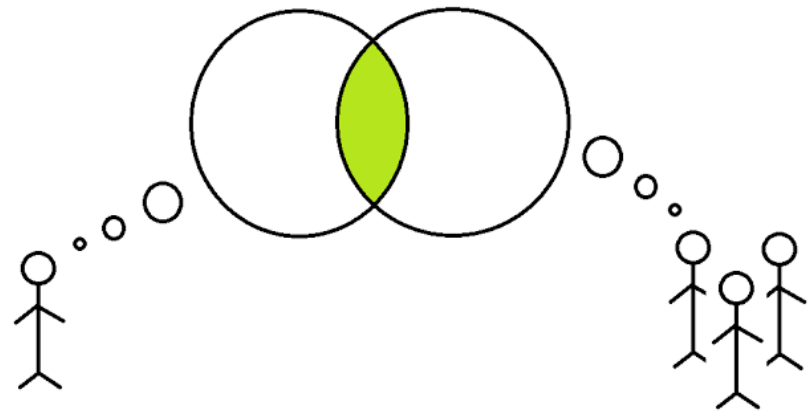
Advocacy Do's and Don'ts

- Getting the *right message delivered right*
- Understanding *context* – e.g. policy, legislation, regulation within which government and other stakeholders (insurers, other health professions, universities, schools, hospitals) work
- Understanding *climate* – what is keeping stakeholders up at night?

Advocacy Do's and Don'ts

Change Message 7: Its not just about you

- It is not just what is important to you that matters



Advocacy Do's and Don'ts

Change Message 8:

You/psychology may need to change too!

- Learn to be *nimble*
- *Talk to people* – and not just other psychologists!
- *Listen to be heard.* Being heard often depends on talking about what matters to others.



Advocacy Do's and Don'ts

Change Message 9: Critical thinking doesn't mean being critical

- *Speak out when something is right*, not only when it is wrong



Advocacy Do's and Don'ts

Change Message 10:

Offer solutions, don't just identify problems. Find a way to say yes.



Advocacy Do's and Don'ts

Be *persistent* - follow up and follow through

Advocacy Do's and Don'ts



- *Don't go alone*, in principal or practice. Find out what your colleagues and associations think.

Advocacy Do's and Don'ts

- Implementing and sustaining a lobby takes time, resource, patience and a tolerance for repetition but...

Change Message 11: *Change is fast and slow*



Why advocacy, leadership
and championing change
matters to you as an individual
student/emerging scientist
practitioner/psychologist ...



- If you opt for public practice – eventually you will be asked to lead or manage something.
- This requires the application of our skills to management, leadership, collaboration, and to a corporate, rather than client purpose.
- What you do in these roles impacts those with you and who come after you.

Challenges to taking on these roles...

Graduate school may not fully prepare
psychologists to:

Lead

Manage

Advocate

Make system change

How come?

- We have adapted an academic model of training to a practice purpose rather than started with a practitioner model of training that includes the full range of roles that service providers assume across public and private sectors



How to get involved in advocacy?



- Join something – an association, a movement, a task force, a committee
- Speak to your candidates and your elected representatives (MPs, MPPs, city counsellors)
- Join CPA's VIP/VIPR program

Leadership Resources

- Canadian Society of Association Executives
<https://csae.com/>
- Canadian College of Health Leaders <https://www.cchl-ccls.ca/>
- Society of Psychologists in Management
<https://www.spim.org/>
- Canadian Psychological Association – VIP/VIPR
<https://cpa.ca/advocacy/vip-vipr/>

Psychology as a discipline and profession – what has changed over the past years and what should we be thinking about now?



- Alignment of training to practice
- Training doesn't stop at licensure – putting your mind to the task and stepping up your skills
- Practice market place – more is being done by many with less
- Practice changes
 - public versus private sector
 - our most unique clinical skill set is practiced less

- How as a discipline we define success – remuneration, accessibility, collaboration, impact on policy, individual versus the discipline
- Pros and cons of becoming more of a private sector profession
- Health practice has become more collaborative and inter-dependent – does psychology need to catch up and how do we do that from the private sector?

Over to you, some questions to think about...



What are the issues facing the profession Group 1 ...

Alignment of training to practice – are we graduating with, and applying the skills we need to meet the demands we face?

- What are the key training gaps, if any?
- Training doesn't stop at licensure: putting your mind to the task and stepping up your skills
- Practice market place – more is being done by many with less
- Emergence of other regulated mental health professions
- Our unique and overlapping scope – is our most unique skill practiced less?
- Mental health problems, their interventions, and providers are often seen as interchangeable or one size fits all

Group 1 feedback

Training gaps in

1. equity, diversity and inclusion; social justice and human rights, anti-racism. While students get some didactic training, there is less or no training in these areas during residency.
2. Systems-based approaches to treatment or ecological practice
3. Understanding psychology's unique and overlapping skills with other professions and how to promote these on teams where other professions seem to jump in quicker with their contributions.

What are the issues facing the profession...

Group 2

The mental health care provider landscape...

- Emergence of other regulated mental health professions
- Our unique and overlapping scope – is our most unique skill practiced less?
- Mental health problems, their interventions, and providers are often seen as interchangeable or one size fits all

Group 2 feedback

1. The value of other professions and their unique training, lesser cost and better accessibility. Psychotherapy is not always created equally across professions and may lead to negative outcomes.
2. Helping the public better understand which health professionals do what – sometimes a negative client experience becomes generalized across professions.
3. The role psychologists can play as trainers of other professions.

What are the issues facing the profession...

Group 3

Accessibility of psychological services

What is the consensus of the profession when it comes to public and/or private insurance coverage?

- What are the concerns or must haves' for public coverage
- How does the profession envision integration into primary care (or does it)?
- What are the concerns or problems to be solved with current private insurance coverage?

Group 3 feedback

1. Supportive of situating psychological service in primary care – enhances access and decreases stigma.
2. Offer unique skills within primary care – assessment, research, outcome monitoring.
3. Unlikely that provinces and territories will support fee for service psychological care.
4. Training programs should also address integrating psychological services into primary care inclusive of new roles and scopes of practice.
5. System challenges – other mental health providers are taking the place of psychologists.

What are the issues facing the profession...

Group 4

How as a profession do we define success?

- how much and how many people we help
- remuneration
- accessibility
- collaborating and integrating into health system
- impact on policy

Group 4 feedback

1. A more cohesive or comprehensive professional identity that goes beyond practice and includes advocacy, policy work. Need to assume fuller roles and activities
2. All of the listed parameters are of value to psychologists' identity – psychologists need more professional confidence in themselves and their roles.

What are the issues facing the profession...

Group 5

The practice environment

- Health practice has become more collaborative and interdependent – Does psychology need to catch up?
- Pros and cons of becoming more of a private sector profession
- When collaborating and working within systems, are we trying too hard to solve psychology's problems rather than lending psychology to solve client and system problems

Group 5 feedback

1. Are pros and cons of working in the private sector.
2. Want remuneration and full scope of practice but services not sufficiently accessible.
3. Psychologists are collaborating effectively and in many ways have caught up with this kind of practice.
4. Need to better understand scope of practice of other health professions.
5. Some inequity across psychologist cohorts and the realities facing students and emerging psychologists are not the same as they once were and need to be better addressed (e.g. student debt, psychologists' salaries in the public sector).

Welcome Back...





Some recommendations about how to think about or act on these issues...

- Establish our value: lend psychology to solve individual and organizational problems or expect decision-makers to solve psychology's problems.
- Engage organizations and causes we believe in and we can advance
- Sit at more tables – better at leveraging the profession for the public good

- Different doesn't mean unequal
- It takes a village
- We are trained to identify problems – to be impactful, we must identify solutions for individuals, organizations and societies
- Step up – put your mind to the task, share what you know, take an informed risk

- The discipline won't advance unless you invest and engage in it – membership in professional associations
- Hone the skills that are more unique to our training – assessment and diagnosis, program development and evaluation, supervision and delivery of complex care

What we do, must respond to the health and mental health needs people have ...

- Aging
- Chronic illness
- Rural and northern issues
- Special populations: children and youth, seniors, Indigenous persons, refugees
- Culturally relevant practice
- Health needs of Indigenous persons

Cohen et.al, 2012; Dyck & Hard, 2013; Dobson, 2016; Goodwin, MacNaughton-Doucet, Allan, 2016; Karesa & McBride, 2016, Votta-Bleeker, Tiessen, & Murdoch, 2016

What we do must respond to the health and mental health needs people have ...

- Leadership, advocacy, administration, policy development
- Collaborative practice – professionals, peers and paras, patients and families
- Medical assistance in dying
- Tele-practice

Cohen et.al, 2012; Dyck & Hard, 2013; Dobson, 2016; Goodwin, MacNaughton-Doucet, Allan, 2016; Karesa & McBride, 2016, Votta-Bleeker, Tiessen, & Murdoch, 2016

What we do must respond to the health and mental health needs people have ...

Population health...

Graduate training is more about the identification and treatment of illness than it is about health.

We don't typically teach graduate students about

- Determinants of health
- Health promotion and illness prevention
- Recovery and living well along the continuum of health

Population health is its own field of study, often pursued post-gradually by some professions (nursing, medicine)

<https://www.canada.ca/en/public-health/services/public-health-practice/plan-your-career-public-health.html> and
<https://www.canada.ca/en/public-health/services/public-health-practice/educational-programs-public-health.html>

Factors and challenges to consider when aiming for system-wide mental health change

Homogenization of mental health problems and interventions

Understanding (about mental disorders, treatment and services and mental health service providers) is broad but not always deep

All stakeholders not always engaged and need to be

Spending now sacrificed to spending later

Canada Health Act but no single authority

And for the profession's part...

need to focus on solving a mental health problem, not
psychology's problem

And some good change news...

Recent highlights of initiatives and achievements...

Federal 2021 pre-budget submission

https://cpa.ca/docs/File/Government%20Relations/CPA_SCOF_Final_Submission_5August2020_FINAL_English.pdf and response

<https://cpa.ca/docs/File/Advocacy/CPA%20News%20Release%202021%20Federal%20Budget%20April%202021%202021.pdf>

Medical Assistance in Dying:

- House of Commons Committee on Justice
- Position paper on role of psychologists in MAiD
- Guidelines for psychologists working at end of life
- Letter to Minister advocating for psychologist membership on committee to look at mental disorders as sole condition for MAiD

Recent highlights of initiatives and achievements...

2019 CPO proposal to give title and scope to masters practitioners <https://cpa.ca/cpa-opa-and-capda-send-letter-to-college-of-psychologists-of-ontario/>

2021 Submission to New Brunswick government about teacher testers
https://cpa.ca/docs/File/Government%20Relations/Members%20of%20the%20Legislative%20Assembly%20of%20New-Brunswick_March2021_eng.pdf

2021 Inappropriate Test Use
https://cpa.ca/docs/File/Position/PositionPaper_PsychologicalTestSafety_BoardApproved_May2019.pdf

Recent initiatives and achievements...

2019 CPA joined international collaboration among psychology organizations signed climate change declaration <https://cpa.ca/international-summit-on-psychology-and-global-health/>

2021 Section on Environmental Psychology paper on climate change
https://cpa.ca/docs/File/Position/ClimateChange_TASKFORCE_POSITIONPAPER_FINAL%20FEB%204%202021.pdf

Recent initiatives and achievements...

Outcomes and Progress Monitoring in Psychotherapy

https://cpa.ca/docs/File/Task_Forces/Treatment%20Progress%20and%20Outcome%20Monitoring%20Task%20Force%20Report_Final.pdf

Psychology in primary care <https://cpa.ca/canadas-psychologists-contributing-to-primary-health-care-an-updated-version-of-our-resource-for-practitioners-on-strengthening-primary-care-is-now-available/>

Legalization of cannabis https://cpa.ca/wp-content/uploads/2017/10/Position_Paper_Recommendations_for_the_Legalization_of_Cannabis_in_Canada-September_2017.pdf

Science and Professional Training Summits 2019

Recent initiatives and achievements

Psychology's Response to Truth and Reconciliation

https://cpa.ca/docs/File/Task_Forces/TRC%20Task%20Force%20Report_FINAL.pdf

Position paper on reparative/conversion therapy developed by the CPA's Section on Gender Orientation and Identity (SOGII)

<https://cpa.ca/docs/File/Position/SOGII%20Policy%20Statement%20-%20LGB%20Conversion%20Therapy%20FINALAPPROVED2015.pdf>

Position paper on third party payment neuropsychological services [https://cpa.ca/docs/File/Position/A-](https://cpa.ca/docs/File/Position/A-3.1%20(b)%20Position%20Statement%20on%20Neuropsychological%20Services%20in%20CanadaFINALJAN2016ENGLISH.pdf)

[3.1%20\(b\)%20Position%20Statement%20on%20Neuropsychological%20Services%20in%20CanadaFINALJAN2016ENGLISH.pdf](https://cpa.ca/docs/File/Position/A-3.1%20(b)%20Position%20Statement%20on%20Neuropsychological%20Services%20in%20CanadaFINALJAN2016ENGLISH.pdf)

Recent initiatives and achievements

Disability Tax Credit: budget 2021 accepts Disability Advisory Committee (CPA CEO co-chairs) recommendations on redefinition of eligibility criteria for those with mental disorders <https://www.canada.ca/en/revenue-agency/corporate/about-canada-revenue-agency-cra/disability-advisory-committee.html>

Pandemic 2020/21: Resources for psychologists and the public, advocacy with government, podcasts, media, pro bono service for front line providers, coping and resilience webinars for staff of partner organizations <https://cpa.ca/corona-virus/>

Recent initiatives and achievements

With CPAP, completed survey of Canadians on access to psychologists <https://cpa.ca/strong-majority-of-canadians-want-improved-access-to-psychologists/> and on needs during COVID-19 <https://cpa.ca/covid-19-worsening-canadians-access-to-psychologists/>

Some Access Survey Highlights...

- **78%** of Canadians report that psychological services costing too much for them to pay for themselves is a very significant (52%) or somewhat significant (26%) barrier.
- Almost **9 out of 10** Canadians (57%) support or somewhat support (31%) improving access to psychologists through the publicly-funded health care system.

Some Access Survey Highlights...

- **83%** of Canadians say psychologists working collaboratively with other health professionals, such as a family physician in primary care teams, is a very good idea (50%) or good idea (33%).
- **76%** of Canadians think that better access (more funded mental health care services and higher financial caps) to psychologists through their employer health benefit plan is a very good idea (42%) or good idea (34%).

Some COVID survey highlights...

- **56%** of Canadians report that COVID-19 has had a negative (33%) or somewhat negative (23%) impact on the ability of Canadians to access mental health care provided by psychologists.
- At **73%**, the majority of Canadians prefer to receive psychological services face-to-face. Although older Canadians (55+) are more likely to say they would prefer to receive services face-to-face (**80%**) than those 35 to 54 (**70%**), and 18 to 34 (**65%**).

Some COVID survey highlights...

- With physical/social distancing rules in place, **71%** of Canadians say they are willing (36%) or somewhat willing (35%) to use technology – like telemedicine – to receive mental health care provided by psychologists.
- Of the **29%** of Canadians who had concerns using technology to receive care provided by psychologists, they identified the following issues: (1) privacy/confidentiality (**8%**); (2) barriers to establishing good communication (**5%**); (3) security/ hackers (**4%**); (4) prefer face-to-face (**3%**); (5) impersonal (**2%**); and (6) challenges using technology (**2%**).

CPA and COVID-19

<https://cpa.ca/corona-virus/>

- *Fact sheets*: coping, children and teens, working at home, psychological practice
- *Guidance and webinars* on telepsychology practice, practice continuity, insurance coverage – business disruption, COVID-19 transmission
- *Psychological response* with front line health providers
- *Webinars* for staff of health-related associations

CPA and COVID-19

<https://cpa.ca/corona-virus/>

- *CPA audio updates*
- *Media* – Hill Times, Global, Serius FM, medical podcast
- Advocacy on access and federal financial relief for psychology practitioners – Insurers, Ministers of Health, Minister of Finance

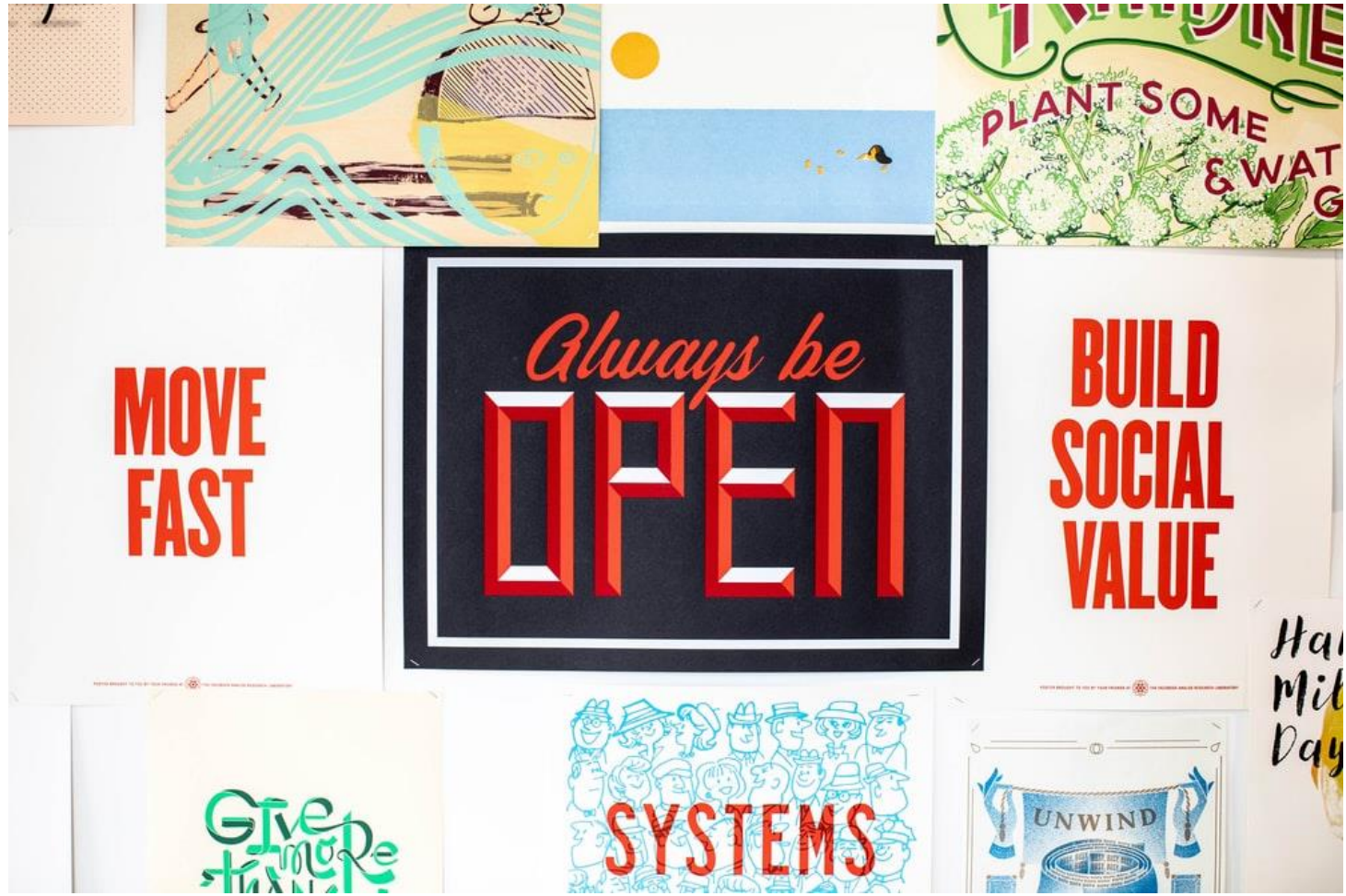
Change Message 12

The future of the profession doesn't rest with CPA, your p/t or municipal psychological association, your university or hospital. It rests with you...

Step up

Join something

Make change for the good



12 Change Messages...

Change Message 1:

See the mountain from all sides.

Change Message 2:

Psychology impacts everything.

Change Message 3

Change needs company.

12 Change Messages...

Change Message 4.

Change needs breadth and depth.

Change Message 5: Repeat yourself.

Change Message 6: Be your best self.

12 Change Messages...

Change Message 7: Its not just about you.

Change Message 8: You/psychology may need to change too!

Change Message 9: Critical thinking doesn't mean being critical

Change Message 10: Find a way to say yes.

12 Change Messages...

Change Message 11: Change is fast and slow

Change Message 12: Step up, join something, make change for the good