As is commonly known, entry to practice standards in psychology in Canada have long varied from jurisdiction to jurisdiction. In some, the doctoral degree has long been the requirement for registration as a psychologist and in others it has always been the master’s degree. In between are those jurisdictions that have moved from the masters to doctoral standard and vice versa as well as those who register both masters and doctoral practitioners but with different titles (i.e. psychological associate and psychologist).

As is the case for other regulated health professions, the regulation of psychological practice is a provincial and territorial responsibility. Unlike other of the regulated health professions (e.g. medicine), however, there is no common academic entry to practice requirement for the practice of psychology. In psychology, we do not just have variability in degree requirements (masters versus doctoral) we also have variability in what constitutes the graduate degree itself. Some jurisdictions require completion of a psychology graduate programme but some allow the completion of a psychology graduate degree and some allow for a graduate degree, not necessarily in psychology, but which includes courses judged to be equivalent to a graduate degree in psychology. Further, although psychology is not the only profession which regulates several titles (e.g. nurse practitioner, practical nurse and registered nurse), in psychology there is commonly no differentiation between masters and doctoral level practitioners in terms of scope of practice.

With the introduction of the Agreement on Internal Trade (AIT) in 1994, and in particular with the amendments to Chapter 7 of this agreement in 2009, the pressure on regulatory bodies of psychology (and other of the health professions) to develop common standards for licensure to support mobility of professional workers became especially acute. The overriding challenge to mobility has been the variability in requirements for registered practice among the jurisdictions. Although the AIT gives the regulatory bodies the responsibility for achieving mobility, it does not confer any authority with which to resolve the variability in registration requirements. The concern noted by psychology and other of the health professions has been

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1 A full discussion of the AIT and its implications for the practice of psychology are beyond the scope and intent of this paper and the interested reader is directed to [http://cpa.ca/cpasite/userfiles/Documents/PsynopsisFall09Final(1).pdf](http://cpa.ca/cpasite/userfiles/Documents/PsynopsisFall09Final(1).pdf)
how and who gets to decide what should be the registration requirements for professional
practice in Canada. In the absence of any delegated authority to develop a common standard,
mobility gets predicated upon the least onerous of the existing standards when it should be
based on some consensus or empirically-derived set of standards designed to ensure the
competent practice of psychology.

The regulation of practice is a provincial/territorial jurisdiction. One of the criticisms of the AIT,
however, is that it circumvents this authority by earmarking a single standard that all
jurisdictions are compelled to accept. If the single standard becomes the cornerstone of
registration through mobility, it becomes the cornerstone of registration within jurisdictions as
well. One cannot uphold one standard of registration for the applicant already registered in
another jurisdiction and a different standard of registration for the “home-grown” applicant
seeking registration for the first time.

It is not difficult to make a case within and outside of the profession that all would be better
served if psychology had a consensus standard upon which to base registration. Regulatory
bodies would have an easier job in assessing the qualifications of mobility applicants. Students
would have a clearer idea about what kind of studies was necessary to ensure eligibility for
practice across Canada. The exact and necessary qualifications of psychologists would be easier
to convey to, and likely better understood by, consumers of care and other partners and
stakeholders (e.g. other health professions, government, and administrators). What has been
problematic to date is what should be the consensus standard.

Although it is not currently the case in every Canadian jurisdiction that registration as a
psychologist requires completion of a graduate degree in psychology (as opposed to an
equivalent collection of graduate courses), it is likely easy to achieve consensus among most
communities that just as physicians should have medical degrees and nurses should have
nursing degrees, psychologists should have psychology degrees. Although there is considerable
discussion among health provider communities about the core competencies for practice, these
discussions have not supplanted requirements that the core competencies be taught and
imparted in the context of a professional degree programme.

Given the need for a graduate degree programme in professional psychology as the
requirement for registration as a psychologist, should it be a masters or doctoral degree?
Addressing this question is far less simple and begs consideration of a number of factors

- What is the evidence that doctoral preparation is necessary, or that master’s
  preparation suffices, for the competent practice of psychology?
- There are currently masters and doctoral practitioners of psychology in Canada and
  their regulated scopes of practice do not typically differ. Given that both can do the
same things, do they? If there are differences in practice, what are these and are any
differences attributable to differences in academic preparation?

- Regardless of level of degree, it is important that training take place within a program
designed and organized to graduate practitioners competent for professional practice.
Do these programs exist at both degree levels and what oversight or accountability
exists to ensure that the programs teach and train to the competencies necessary for
registered practice?
- Given the educational and practice context across Canada, how would future
generations of practitioners and consumers of psychological service be best served?
What is the value-add of doctoral training to the profession and to consumers of care?
Would psychologists registered at the master’s level be sufficiently different in terms of
preparation or practice than are psychotherapists and counselors now becoming
registered in several Canadian jurisdictions?

As the national professional association of psychology, it has long been CPA’s experience that
advocacy for the profession would be greatly enhanced if there was more homogeneity in the
training, preparedness and regulatory requirements of professional psychologists across
Canada’s jurisdictions. Inquiries from the public to CPA clearly convey confusion about whether
all counselors are psychologists, whether all or any psychologist can be called “Dr.”, how
psychologists differ from psychiatrists and whether psychologist is even a licensed title. The
mental health landscape is a crowded and confusing one – other professions practice
psychotherapy, use tests to evaluate behavior and make mental health diagnoses. The less
distinctive our credentials and skill sets from those of other professions, the more amorphous
our profession and the shakier our value proposition for Canadian society.

Psychology needs to ask itself how our training enables us to make a valuable and unique
contribution to Canada’s health. Put another way, what are the health needs of Canadians and
how does our training and expertise prepare us to meet them? What do we need to know, and
what do we uniquely know, so that we can “improve the health and welfare of all Canadians”
(one of CPA’s four organizational objectives http://www.cpa.ca/aboutcpa/).

It is CPA’s position that what distinguishes the skill set of psychologists is our academic and
evidence-based training, our understanding and competencies to undertake research, and our
understanding and use of psychometric methods of assessment. Further, these foundations
distinguish the way in which psychologists practice the interventions, such as psychotherapy,
practiced by other kinds of practitioners.

Since 1984, CPA has been the national accrediting body of doctoral programmes in professional
psychology. We have developed and overseen the standards that guide the training of
professional psychologists in Canada. These standards comprise the foundations of practice in
research and psychometrics described above but also define and organize the knowledge, skills and experiences necessary for competent health practice in psychology.

In 2006, CPA reported on a survey of the Canadian Council of Departments of Psychology (CCDP) intended to collect information about terminal masters programmes in psychology in Canada. The results of this survey were reported in the fall 2006 issue of Psynopsis and again in the fall 2009 issue where AIT was discussed http://www.cpa.ca/cpasite/userfiles/Documents/PsynopsisFall09Final(1).pdf

Only twenty-six percent of respondent programmes (5 out of 19) reported having a master’s degree programme intended to graduate students with qualifications for registration as a psychologist or psychological associate in an area of professional psychology (e.g., clinical, counseling, school, neuropsychology). Thirty-seven percent offered a master’s degree in an area of psychology that graduates used to obtain registration as a psychologist or psychological associate, even though the programme was not intended to train registered practitioners.

While there are only a few master’s programmes that are intentionally training future practitioners through a comprehensively defined and articulated training model and philosophy, there are several departments of psychology that are graduating individuals with a master’s degree in an area of psychology that was not intended for professional practice, yet their graduates do go on to register as a psychologist or psychological associate. There is a difference between a degree and a programme. A programme endeavors to provide organized and comprehensive training. A degree, in the absence of a programme, may graduate students who lack certain competencies that are crucial to the practice of psychology.

From 2009 through 2011, CPA has developed an electronic practice network of psychologists. Funded by the Public Health Agency of Canada, the network was developed to collect information about the practice and demographic characteristics of psychology practitioners and of the demographic and clinical characteristics of the clients they treat. A full report of this surveillance work is beyond the scope of this discussion and the interested reader is directed to (http://cpa.ca/docs/file/MHSP/Final_Report(1).pdf) However, this work did reveal some differences in the practices of masters and doctoral prepared psychology practitioners – psychometric assessment and diagnoses were more often made by the doctoral than the masters prepared providers. Although the significance of this finding is not clear, it may suggest some shortfall in the training or practice of masters practitioners.

Given that

- the formation of a regulated health professional should take place within an organized, coherent and overseen programme of study

that the vast majority of professional psychology programmes in Canada train at the doctoral level (31 accredited doctoral programmes in professional psychology versus 5 masters psychology programmes)

- the standards that CPA has used to define and oversee the programmes that teach and train professional psychology are at the doctoral level
- the skills sets and expertise with which psychologists can distinguish their contributions to Canada's mental health are those more assuredly obtained within a doctoral-level professional psychology programme

It is CPA’s position that the doctoral degree should be the entry to practice degree for registered psychologists in Canada.

In taking this position, CPA wants to clearly assert that its impetus is the need for a consensus standard for the practice of psychology in Canada – a standard that distinguishes the profession but, more importantly, positions a valuable and unique contribution to Canada’s mental health and welfare. CPA does not in any way question the competencies of currently registered masters prepared providers. Rather, this position scopes out a way forward that will solidify and unify the identity of professional psychology and hone its contributions. It is a way forward that will best promote the psychology in psychologist, recognizing that we will and should work collegially with any number of other regulated health practitioners inclusive of masters prepared counselors and psychotherapists.

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1 Approved by the CPA Board of Directors, November 2011