

Reductions in Access to Psychological Services in Ontario

Psychological Services are Effective and Efficient

Psychological assessments and interventions have been repeatedly shown in controlled trials to be effective in the identification and treatment of psychological disorders in both children and adults including eating disorders, depression, and disabling anxiety disorders.

Similar research has also found Psychological interventions to be effective as adjunctive treatments for medical disorders including heart disease, cancer, and diabetes.

Psychology has been shown to play an important role in the assessment and diagnosis of impairments for adults and children with brain injuries, dementia, and other neurological disorders.

Numerous studies in Canada, the US, and Great Britain have found that the addition of Psychological services in health care results in a “*cost-offset effect*” where there are significant reductions in the use of higher-cost medical services (e.g., emergency room visits, physician visits, medication use, length of hospitalizations).

Psychology in Ontario Hospitals – A Recent History of Substantially Decreased Accessibility

The attempt in 1995 by the Ontario government to reduce hospital operating expenditures by 18% between 1995 and 1998 led to dramatic changes in Ontario’s acute care hospitals, including a number of downsizings, reengineeringings, and restructurings in the way hospital services are delivered.

A 1999 survey by the Hospital Psychology Association of Ontario demonstrated a 14% reduction in the availability of Psychological services in Ontario hospitals over this period.

A subsequent 2000 survey found that, while the government included access to Psychological services in many individual hospital programs funded in 1999 (e.g., Paediatric Oncology), the increase in accessible services through these programs was offset by cuts to accessible Psychological services in other Ontario hospitals.

These dramatic reductions in the availability of Psychological services occurred in many major centres (e.g., University Health Network – Toronto, Sunnybrook and Women’s College Health Sciences Centre, St. Joseph’s Health Centre – London, Centenary Health Centre – now Rouge Valley Health System).

Furthermore, accredited doctoral Psychology internship programs in many academic hospitals were eliminated (e.g., Credit Valley Hospital, University Health Network – Toronto), forcing many Ontario graduate students to leave the province to complete their training.

This substantially decreased accessibility to Psychological services repeatedly has usually been the result of expediencies due to rapid cuts in general hospital funding. These dramatic institutional reductions have not been made in consideration of the long-term consequences, but are the result of institutional attempts to meet short-term financial pressures.

These cuts lead to marked decreases in the accessibility of Psychological services in Ontario. While some Ontario residents can access Psychological services through private insurance, the dollar amounts and the services funded through such insurance plans have never been adequate to cover the services required. Some affluent residents can access Psychological services by paying directly for them, but the unemployed, seniors and less affluent do not have this option, creating a two-tiered health system for Psychology in Ontario. **As a result of these cuts, access to Psychological services are becoming virtually inaccessible to the less fortunate citizens of Ontario.**

These cuts to Psychology services in hospitals are also resulting in increased problems in the retention and recruitment of Psychology staff. The recent National Psychology Working Conditions Project (co-sponsored by the Hospital Psychology Association of Ontario and the Canadian Psychological Association) found senior Psychology staff were leaving hospital practice for more secure private practice opportunities. It also found that new graduates were being advised by senior colleagues to enter private practice, rather than hospital practice, because of the lack of support for Psychology services by hospital administrations.