

CANADIAN
PSYCHOLOGICAL
ASSOCIATION



SOCIÉTÉ
CANADIENNE
DE PSYCHOLOGIE

The role of psychologists in the mental health care of Veterans April 2017

The Canadian Psychological Association (CPA) is the national association of Canada's scientists and practitioners of psychology. Approximately 18,000 psychologists are registered to practise in Canada. This makes psychologists the largest group of regulated, specialized mental health care providers in the country.

Eligible Veterans typically gain access to a psychologist at an OSI clinic or through private practice. A private practice psychologist must become an approved provider by registering with Medavie Blue Cross. Once registered, the psychologist can submit claims for reimbursement and is added to a preferred provider list that is searchable using Medavie Mobile. When issues are complex and would benefit from an inter-disciplinary team, Veterans are encouraged to pursue services at an OSI clinic.

Factors critical to the success of mental health interventions for Veterans:

Effectiveness and accountability. It is imperative to deliver treatments and programs that are evidence-based and to ensure that the health providers are trained in their use. This best ensures fidelity to what we know works and maximizes the likelihood of good patient outcomes.

The roles and responsibilities of health providers also require consideration in the context of accountable delivery of care. A psychologist's scope of practice includes the assessment and diagnosis of mental disorders and cognitive functioning, the development and evaluation of treatments and programs, the delivery and supervision of treatment, and research.

Accountability must begin when an eligible Veteran first enters the system. This means ensuring a Veteran gets a mental health assessment and diagnosis by a qualified health provider, such as a psychologist or psychiatrist. The importance of assessment and diagnosis cannot be understated - not all mental health problems and disorders are the same, so they do not all respond best to the same intervention. Determining whether a Veteran has a brain injury, a substance use or abuse problem, PTSD, or depression is important when planning treatment services. Further, Veterans

often have comorbid diagnoses, often better addressed by an inter-disciplinary team than a solo practitioner. Deploying the necessary resources for effective assessment and diagnosis is critical to deploying the right treatment.

Psychological treatments and medication are both considered first line interventions for mental disorders.

Psychological treatments:

- are effective with a wide range of mental health disorders such as depression, anxiety, and substance abuse; there is also good evidence for the efficacy of cognitive behavioural therapies in reducing the negative symptoms of psychotic disorders as well as traumatic brain injury.
- are less expensive than, and at least as effective as, medication for a number of common mental health conditions;
- work better than medication for most types of anxiety;
- lead to less relapse of depression when compared to treatment with medication alone;
- lead to patients who better follow through on treatment, feel less burdened by their illness and
- have lower suicide rates when used with medication to treat bipolar disorder; help to prevent relapse when included in the services and supports for persons living with schizophrenia; and lead to savings of 20 to 30 per cent in healthcare costs.

Accountability is achieved by implementing evidence-based interventions, but also by continuing to assess their effectiveness once deployed. A number of factors can impact whether an evidence-based intervention is effective on the ground, including whether those delivering it are trained in its use and whether there is a good match between the intervention and the needs of the person seeking care.

The design and evaluation of treatment and treatment programs are core to the skill sets of psychologists. Countries that have taken a more systemic approach to the delivery of psychotherapies, such as the United Kingdom, have psychologists developing and evaluating the mental health programs they deliver. Because psychologists train in an academic model; research is also core to their skills sets. These skills can be applied to the evaluation of programs but also to advance the understanding of mental health needs, issues and services of Veterans more broadly.

Continuity of care. As mentioned, there are different doors to mental health care for eligible Veterans; the two main ones being private practitioners rostered with Medavie and OSI clinics. Some Veterans may also have received mental health care while in active military service.

Successful health outcomes require communication and collaboration across the continuum of care. It is also important to recognize that steps in mental health care are often fluid rather than only sequential. For example, a Veteran with complex mental health needs on a journey of recovery may benefit from the solo services of a mental health provider and later need the services of a collaborative care team in an OSI clinic or vice versa.

Cultural competence. Mental health providers working with members of military populations must be culturally competent. Veterans are a unique population, so an understanding of military culture, rules, processes, roles and experiences is very important to helping Veterans cope with their mental health challenges.

Issues and disorders common to military populations. Understanding the mental health issues and disorders most likely to affect members of the military is also extremely important. These include the issues most reported (e.g. PTSD, suicide), as well as those that are most common (e.g. depression, anxiety disorders, challenges faced during transition from military to civilian life). Other mental health-related issues common to Veterans for which psychological interventions can be effective include the management of health conditions like chronic pain or spinal cord injury or addressing marital and family issues and distress.

Getting the mental health resource right. To meet its need for psychological services, the government must create the employment conditions that are necessary to attract and retain psychologists. There are several factors critical to this recruitment and retention:

1. Offering competitive compensation packages.
2. Helping train the resource you want to recruit and retain. Psychologists who graduate from accredited programs leading to licensure must complete a year-long residency. It is well known that residents tend to remain where they train; however, there are no residency programs or rotations for psychologists in military settings in Canada. Were the government to invest in the training of psychologists, they would substantively augment their mental health resource, as well as the military-specific competency of that resource.
3. Creating good working conditions. Related to our earlier point, the opportunity to remain involved in teaching and training is a powerful retention tool.
4. Finally, allowing psychologists to practice to their full scope, using and growing their skills to the best of their abilities. Conditions of work that enhance the satisfaction of psychologists include opportunities to make meaningful contributions to the development and evaluation of mental health policy and programming. These can be provided by giving psychologists senior roles within the Department of National Defence and Veterans Affairs, so that they are fully engaged in the development of policy and programming.

When working as civilians for the military or with military populations, it is important that health professionals have organized opportunities for consultation and guidance on matters of professional practice to ensure that the standards and regulations of the profession, as well as the needs and policies of the employer, are met when delivering psychological care. This is usually achieved through the appointment of a Chief Psychologist whose role is to provide the guidance and oversight necessary to successful and effective service delivery. CPA made this recommendation to the Department of National Defence some years ago and was very pleased to learn that a Chief Psychologist has in fact been appointed.

Finally, we have long noted that to the best of our knowledge, there are no clinical psychologists in uniform in Canada; a stark contrast to countries like the United States and Australia. When in uniform, health professionals have more responsibility, authority, and opportunity to make decisions about program development and delivery. Our colleagues in psychiatry and social work can serve, psychologists should have similar opportunity.

Recommendations:

1. CPA has its own work to do to encourage psychologists to serve the Veteran population. We would welcome support from Veterans Affairs Canada to develop continuing education for our members on psychological work with members of the military. We believe that this will help our members have a better understanding of military culture and of the mental health issues and disorders common to this population.
2. CPA would also welcome support in developing promotional materials that we could send to our members about how the Medavie Blue Cross system works and what is involved in accepting a Veteran as a patient. There may be a misconception that the system is onerous and complex, and we would like to encourage more of our members to participate.
3. Creating a federal residency placement for doctoral level psychology students would attract young psychologists to work at Veterans Affairs Canada, National Defence, and at OSI clinics. More importantly, it would enhance their skill sets to take on this work. By participating in the training of the professional resource they need, employers help to ensure that professionals have the interest, knowledge, and skills necessary to be successful. The students could work in one department only or undertake rotations at various federal agencies.
4. Give psychologists opportunities to assume senior positions within National Defence, Veterans Affairs Canada, and within OSI clinics.

5. Deploy psychologists within your system in ways that enable them to use their full scope of practice; assessing and diagnosing clients, developing and evaluating treatments and programs, delivering and supervising treatment, and conducting research.

For more information:

K.R. Cohen Ph.D., C. Psych.

Chief Executive Officer, CPA

613-237-2144 ext. 323 or executiveoffice@cpa.ca