

# Psychology: A closer look at what psychologists bring to the table

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## Abstract

While it is clear that psychologists are an important component of the mental health field in Canada, there is often confusion as to what exactly makes the services provided by psychologists distinctive to those provided by other mental health care professionals. This paper aims to explore some of the contributing factors that make the field of clinical psychology unique and essential in the provision and treatment of mental health problems. This discussion will investigate differences between psychologists and psychiatrists, with particular emphasis on the exclusive benefits provided by clinical psychologists. Furthermore, the following discourse will outline the various advantages associated with psychotherapy and the ways in which clinical psychologists in particular utilize this tool in providing treatment and services to clients. This paper will also focus on the costs of mental health provision in the Canadian health care system and how one particular form of psychotherapy has proved to be extremely cost-effective in relation to other types of treatment. Additionally, this paper will challenge the current lack of financial coverage afforded to individuals seeking treatment from clinical psychologists in Canada and how this is problematic. Finally, this paper will identify the specific role psychologists maintain in providing preventative approaches to mental illness and the value of such approaches.

**Keywords:** *clinical psychology, advocacy, psychotherapy*

The purpose of this discussion is to advocate for the profession of psychology and to identify the value of this profession in terms of the skill sets and roles that psychologists, specifically clinical psychologists, maintain in society. As the great Carl Rogers (1961) once said, “When I look at the world I am pessimistic, but when I look at people I am optimistic”; the essence of psychology is helping people. With psychology’s vast

allegiances in areas such as hospitals, universities, courtrooms, clinics, prisons, and schools there is truly no other mental health profession with such a degree of career diversity. With a smorgasbord of career options, the face of psychology is never stagnant; ultimately this is one part of what makes psychologists unique, while at the same time contributes to the public confusion about the roles that psychologists

uphold in our society. The following discourse will dive head first into the world as seen by psychologists, to uncover the unique and vital contributions that the field of psychology has to offer in the present day. Specifically, this paper will explore the unique role that clinical psychologists maintain in our society with a focus on what they have to offer that is exceptionally different from psychiatrists, such as extensive training in psychotherapy. This paper will examine the advantages that psychotherapy alone can offer, and in particular, the benefits that can be derived from cognitive behavioral therapy (CBT). There will also be a focus on the cost-effectiveness of psychotherapy in regard to its ability to treat mental illness and the cost-benefits this can have for the Canadian health care system. Furthermore, there will be an emphasis on the reasons why clinical psychology is an ideal candidate to be considered for Medicare coverage in Canada, comparing and contrasting the benefits resulting from psychiatric treatment vs. psychological treatment. Finally, this discussion will examine the significant role psychologists play in the promotion of the treatment and prevention of mental health issues. Each of these points serves to illuminate one general theme: the immense overall worth of psychology.

To begin this discussion, it is imperative to understand what psychology is and its importance. According to the British Columbia Psychological Association (BCPA; 2009) psychology is “the study of behavior, including the biological, cognitive, emotional, social and cultural determinants of behavior, that is, how we think, feel and behave in our social and physical environments”. In an era in which the intricacies and overlap between mental health and physical health are continually

being uncovered, psychology plays a fundamental role in advocating the importance of mental health issues. Clinical psychology in particular is concerned with human functioning and the assessment and treatment of mental health concerns (Canadian Psychological Association, n.d.). Not only do clinical psychologists deal with human psychological problems and their solutions, but they also are an intricate part of health promotion in terms of physical, mental, and social well-being (Canadian Psychological Association, n.d.). The problems and concerns treated by clinical psychologists include, but are not limited to, depression, learning disabilities, anxiety, stress, substance abuse, addiction issues, relationship problems, issues surrounding coping, problems related to physical or sexual abuse, developmental and behavioral issues, lifestyle management, criminal behavior and crime prevention, and facilitating adherence to health interventions (Canadian Psychological Association, n.d.). With such a diversity of responsibilities and roles, it is easy to see how the general public can maintain uncertainties about what the field of clinical psychology encompasses. Psychology in general remains one of the few disciplines with such a wide-ranging scope of scientific concerns, which ultimately adds to its uniqueness (British Columbia Psychological Association, 2009).

There is often public confusion regarding the field of mental health professionals, specifically on what the difference is between a psychologist and a psychiatrist. There is indeed much overlap between the two professions; however they are also both distinctive in their own right (Lea, 2011). In terms of education, psychiatrists attend medical school and receive an M.D. degree with a specialization

in psychiatry. As noted by Hunsley and Lee (2010), a “fundamental difference between training in clinical psychology and psychiatry is that psychiatric training generally emphasizes psychopharmacological treatment over psychological treatment”. Typically, psychiatrists rely more heavily on the use of medication for the treatment of individuals suffering from mental health issues and generally incorporate less psychotherapy as a part of a treatment plan, as compared to clinical psychologists. In Canada, most registered psychologists have completed a Ph.D in psychology, which involves extensive coursework, research and practical clinical training (Canadian Psychological Association, n.d.). The intense research aspect of psychology is often considered one of the main distinguishing features between psychiatry and psychology. Research psychology is a branch of psychology devoted to conducting research studies and contributing to the growing body of psychological research, which is not a characteristic feature found in many other training programs for mental health professions. This inclusion of research is a large part of psychologists’ role in academia, as well as a foundational part of clinical psychology training programs. Another important distinctive aspect of psychologists and of clinical psychologists in particular, is that they rely on different methods of treatment for mental illnesses than psychiatrists, such as psychotherapy rather than drug treatment. Though psychologists are certainly able to see a role for drugs in the treatment of mental illness, psychologists in Canada do not currently have prescription privileges to administer drugs to patients (Hunsley & Lee, 2010). There are currently psychologists who advocate for prescription rights in Canada, while other psychologists oppose the

movement (Hunsley & Lee, 2010). As it stands currently, clinical psychologists in Canada use various forms of psychotherapy rather than drugs to treat mental illness.

As stated above, clinical psychologists do not depend on medication for treating their patients, but instead use various forms of psychotherapy. According to Nordqvist (2009), psychotherapy is the “treatment of emotional, behavioral, personality, and psychiatric disorders based primarily on verbal or nonverbal communication and interventions with the patient, in contrast to treatments using chemical and physical measures”. Psychotherapy can take many forms including behavioral therapy, cognitive therapy, group therapy, interpersonal therapy, and psychodynamic therapy to name a few. One of the most widely used and most intensely researched form of psychotherapy is Cognitive Behavioural Therapy (CBT) (Butler, Chapman, Forman, & Beck, 2005). A core theoretical underpinning of CBT is the belief that the symptoms and dysfunctional behaviors that characterize mental illness are often cognitively mediated, suggesting that improvement can be created by modifying dysfunctional thoughts and beliefs (Dobson & Dozois, 2001). In a meta-analysis completed by Butler et al. (2005), it was found that CBT is extremely effective in the treatment of adult unipolar depression, adolescent unipolar depression, generalized anxiety disorder, panic disorder, social phobia, PTSD, and childhood depressive and anxiety disorders. Furthermore the meta-analysis strongly suggested that across many of these disorders, the effects of CBT are maintained for a considerable amount of time beyond the cessation of treatment (Butler et al., 2005). In some cases, psychotherapy has been found to result in greater alleviation of symptoms compared

to the results of drug treatment. To further illustrate this point, a study done by Gloaguen, Cottraux, Cucherat, and Blackburn (1998) found that CBT was significantly more successful in the treatment of depression than was medication. In other studies, it has been suggested that the combination of CBT and pharmacotherapy (medication) for depression can actually yield a slight advantage over CBT administered alone (Hollon, Thase, & Markowitz, 2002). On a separate note, CBT provided by clinical psychologists may also be preferable over medication because it is considered a less intrusive way of treating patients compared to drug administration (Associated Psychological Health Services, 2006). Indeed, the side effects of some drugs can be severe and the benefits can disappear when the medication is no longer being taken. Additionally, studies have found that pharmacotherapy has considerably larger drop-out rates than psychological intervention (Hunsley, 2003). And finally, psychotherapy is less costly than drug treatments in the long run (Associated Psychological Health Services, 2006). It is clear that, psychotherapy provided by clinical psychologists is vital in the treatment of mental illness and psychiatric disorders and is effective in its own right.

The unique advantages of psychotherapy are clearly evident in the discussion above, yet the question remains: why is treatment administered by psychiatrists, and not psychologists, covered under the Canadian health care system? In Canada, the direct and indirect cost of mental illness has been estimated to be \$14.4 billion dollars and mental illness alone accounts for more than 50% of physician billing (Myhr & Payne, 2006). Because psychiatry and general practitioner services are covered under the Canadian health care

system, the bulk of individuals suffering from mental illness receive treatment through these avenues. This is problematic because, although these mental health professionals are helpful in some areas and receive some training in psychotherapy, they are not as extensively trained in psychotherapy nor do they necessarily and consistently implement treatment with an emphasis on psychotherapy. It is suggested that this leads to a heavier reliance on and increased use of medication because it is considered the first-line, mainstay treatment for mental health disorders. Consequently it has been suggested that this over-medicalization of psychological concerns greatly contributes to the rising health care costs in Canada (Romanow & Marchildon, 2003). As Myhr and Payne (2006) point out, publicly funded CBT for mental disorders is scarce in Canada, regardless of its proven efficacy and the health guidelines endorsing its use. This is troubling, considering the plethora of studies that have demonstrated the positive effects that CBT can have on relieving many mental illnesses. Additionally, from a financial perspective, psychological interventions are thought to be very cost-effective. A recent meta-analysis of 92 research studies found that the average health care savings attributed to psychological interventions as opposed to drug treatments was between 20-30% (Chiles, Lambert, & Hatch, 2006). Of the studies included in this analysis, approximately 90% of them showed a medical cost offset, that is, the reductions in health care costs resulting from psychological interventions were large enough to completely cover the costs of the psychological interventions themselves (Hunsley, 2003). Hunsley (2003) stated that there has been considerable evidence of this phenomenon, as evidence in dozens of

research studies. Additionally, the BCPA (2009) suggests that “psychological services should be an integral component of the Canadian health care system”. The BCPA (2009) goes further to illustrate the need for psychological intervention by highlighting the fact that psychological intervention has been estimated to cost 10%-50% less than drug treatments. The BCPA (2009) claims that for every \$1 spent on psychology services, \$5 are saved on medical costs. Considering the plethora of potential societal benefits that can arise from the field of clinical psychology, the question is how can Canadians afford not to have these services covered?

Finally, the last area of psychological contributions that this paper will touch on deals with the role of psychologists in mental health promotion and mental illness prevention. As Kenkel, Deleon, Mantell, and Steep (2005) state, “as health professionals, psychologists have many opportunities to use mental health promotion and early detection skills in the health arena”. Since many of the visits to primary health practitioners concern mental health, a preventative approach would be optimal for decreasing health care costs and visits (Kenkel et al., 2005). This would be in the best interest of practitioners as well as the public. Furthermore, despite overwhelming evidence and education about the benefits that come from living a healthy lifestyle, many people are disinclined to make major lifestyle changes. Psychologists, who are extremely experienced in behavior change, can attempt to tackle these sorts of problems in society, with outcomes that could potentially benefit the overall health of the country’s population (Kenkel et al., 2005). The bigger picture is that psychologists play an important role in mental health promotion and mental illness

prevention, which is something that should not be taken lightly.

This paper has outlined the contributions and benefits stemming from psychology as a field and has attempted to illustrate the essential services that many psychologists provide. Through the unique role maintained by clinical psychologists, the proven benefits of CBT and other forms of psychotherapy, the provision of different treatment approaches rather than pharmacotherapy, and the overall cost-effectiveness of psychological interventions and the role psychologists can play in health prevention and promotion, it is clear that the field of psychology adds tremendously to the overall mental health and well being of humanity. Though there is an array of mental health professionals, such as psychiatrists, social workers, and counselors that have similar goals to psychologists, the treatment approaches to dealing with mental health concerns are fundamentally different and should be recognized for their uniqueness and individual contributions. Psychology is clearly a constantly evolving field and it is suggested that the evidence-based services provided by psychologists will become even more valuable in the future (Hunsley & Lee, 2010). With the prevalence of many mental health issues and health care costs on the rise (Sheppard, 2011), it is likely that the services provided by psychologists will continue to increase in value. Furthermore, Hunsley and Lee (2010) suggest that the future face of clinical psychology will be active in providing psychological services to an assortment of health problems, and not focusing as strictly on mental health. For example, the future of clinical psychology will involve developing along with changing health care needs aimed at facilitating Canada’s aging population. Furthermore, clinical psychology

as a discipline will continue to ensure that treatments, psychological assessments, and programs geared at prevention are evidence-based and well suited for the wide range of people who are seeking these services. Psychology is certainly a multifaceted field, and the services it provides toward improving the overall status quo of mental health services in Canada are palpable and distinguishing.

### Declaration of Conflicting Interests

The author declared they have no conflicts of interests with respect to their authorship or the publication of this article.

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