



CANADIAN
PSYCHOLOGICAL
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DE PSYCHOLOGIE

**Standing Senate Committee on Official Languages -
Comité sénatorial permanent des langues officielles**

c/o Catlin Seibel-Kamél. Legislative Clerk | Committees Directorate
Senate of Canada Chambers Building, room 1051
2 Rideau St
Ottawa, ON K1A 0A4

Dear Senator Cormier and members of the Standing Senate Committee on Official Languages,

**RE: Follow-up to testimony provided on mental health service provision in minority languages
by Dr. Anita Gupta and Dr. Stewart Madon, Canadian Psychological Association (Sept. 23, 2024)**

Thank you once again for inviting the Canadian Psychological Association (CPA) to speak to the issue of mental health service provision in minority languages. As you know, the CPA is the national association for the practice, science, and education of psychology in Canada. With more than 7,000 members and affiliates, the CPA is Canada's largest association for psychology and represents psychologists in public and private practice, private industry, academia, and research, as well as students.

While we are hopeful that the testimonies of Drs. Gupta and Madon shed some light on the current state of mental health service provision in minority languages in Canada, we would also like to offer the following additional information for the Committee's consideration.

As the Committee is likely keenly aware, there is a lack of accessible, licensed mental health care providers in Canada, including a lack of psychologists. This lack of accessible, publicly-funded psychologists is most felt by equity-deserving groups, including linguistic minorities and Canadians in remote and rural areas. To combat this shortage, the CPA has advocated for the creation of a separate envelope of funding for mental health care services embedded within new legislation called the **Mental Health and Substance Use Health Care For All Parity Act**. We also continue to advocate for increased funding for current training programs in professional psychology and for the creation of professional schools of psychology (like schools of medicine or nursing) dedicated to the training of psychologists. Together, these would increase both the supply of – and access to – publicly-funded psychologists, including those able to provide services to minority language populations. For more information on both these recommendations, please find the CPA's Pre-Budget Submission to the Standing Committee on Finance appended.

In line with the above, some psychologists provide services to populations that are funded by federal agencies, such as Indigenous communities through the Non-Insured Health Benefits plan (NIHB), refugees and newcomers to Canada through the Interim Federal Health Program (IFHP), military personnel through the Department of National Defense, and persons in the federal correctional system. While a myriad of concerns were cited during our testimony (e.g., reliable internet infrastructure) in providing services to these populations – which include linguistic minorities – these programs would also benefit from an increased psychologist workforce.

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Additionally, the provision of services to linguistic minorities in Canada could be facilitated by increased training opportunities for the existing mental healthcare workforce. To this end, we propose three separate but interrelated solutions:

- 1) the creation of both interdisciplinary and discipline specific training modules to teach healthcare providers to partner and work with professional interpreters and interpretation technology (in person and virtually), including best practice standards for this type of work,
- 2) the creation of accessible and affordable language training courses designed for health care professionals and trainees seeking to provide services in minority languages, and
- 3) the creation of accessible and affordable cultural/linguistic training modules for service provision to linguistic minority populations.

Virtual care is one way to connect individuals with psychologists who speak their language. However, inequities in access to internet connectivity exist. As you are undoubtedly aware, the United Nations has identified internet access as a critical enabler of human rights and access to internet connectivity and digital tools have been recognized as social determinants of health. Minority language populations are already at risk of not having access to health care in their own language, and lack of internet access creates an extra barrier to accessing care in minority languages virtually. We propose that federal initiatives aimed at increasing access to internet connectivity prioritize equity-deserving groups, including minority language populations.

While the aforementioned recommendations do not replace the need for an increased psychological workforce, they could provide a temporary solution by increasing the availability of service providers for minority language groups while longer-term solutions are implemented.

Finally, Senator Aucoin requested a copy of our position statement on the harmonization of entry-to-practice credential for psychologists across Canada. The position paper is not currently finalized, though we would be happy to share it with Senator Aucoin and the rest of the Committee as soon as it is ready for release.

In closing, we thank the Committee again for inviting us to speak on such an important topic. Should the Committee desire further information on any of the points presented herein, we would welcome the opportunity to discuss further.

Sincerely,



Anita Gupta, R. Psych., C.Psych.
President (2024/2025)
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Encl.: 2024 Pre-Budget Submission to Standing Committee on Finance