



Collectif pour l'accès à la psychothérapie
Coalition for Access to Psychotherapy

Commentary for *Globe and Mail* - Access to psychotherapy services

Rather than argue that government cannot afford to provide psychotherapy services, we should argue that it can't afford not to

In a few months, Québec's Institut national d'excellence en services de santé et services sociaux will submit its report on increasing access to psychotherapy services for people with common mental disorders such as anxiety and depression. INESSS's mission, like the National Institute for Health and Care Excellence in Great Britain, is to promote clinical excellence and the efficient use of healthcare resources. INESSS assesses the clinical advantages and the costs of technologies, medications and interventions used in healthcare. Its recommendations concern their adoption, use and coverage by the public healthcare programme, and it develops clinical guidelines in order to ensure best practice.

In Québec, as in other provinces, psychotherapy services are not part of publicly-insured healthcare services. So, INESSS's report is an important one for the government and, indeed, for society as a whole.

No doubt, the long-awaited report from INESSS – the government issued its mandate in December 2012 – will confirm the clinical effectiveness of psychotherapy in treating common mental disorders. It cannot do otherwise because this has already been determined through numerous studies, in a number of countries.

No doubt, INESSS's report will conclude that psychotherapy services are cost-effective. Again, it cannot conclude differently because this has already been determined elsewhere. In fact, psychotherapy services are less costly than medication in treating common mental disorders and can reduce costs related to disability insurance and absenteeism from work. England and Australia have proven this over the years with their own programs.

No doubt, INESSS's report will confirm that psychotherapy services can meet the healthcare needs of hundreds of thousands of people each year who could benefit from such services, but who lack access to them because they do not have personal insurance or the financial means to cover the costs.

So, all the arguments seem to be in favour of including psychotherapy in publicly-insured healthcare services. However, governments often argue that it cannot afford to increase access because it would be too costly.

Well, let's look at some numbers. The cost of psychotherapy services (in Québec) for an individual receiving the 5-6 sessions required for effective treatment has been estimated at about \$ 700. The cost per person for salary insurance related to absenteeism for mental health problems is more than 10 times that, at close to \$ 8,000.

Costs related to mental disorders are borne by all of us: individuals, families, employers and governments. There are of course the direct financial costs: medical services, medication, lost wages due to absenteeism, lost income tax revenues for governments given that people are not working, increased insurance rates, increased costs for sick leave benefits. There are also important indirect personal costs: the individual's suffering and the loss of self-esteem that often prevents him or her from seeking professional help.

When we know that more than 75 % of mental disorders occur before the age of 25 and that the long-term social and financial consequences can be devastating, it seems that we should be doing more to provide better access to effective interventions, early-on.

So, perhaps the argument should not be that government cannot afford to increase access to publicly-insured psychotherapy services, but that it can't afford not to.

This is the argument presented by the Coalition for Access to Psychotherapy. CAP was created by the Graham Boeckh Foundation and the Foundation for Mental Illness on the basis that people who could benefit from psychotherapy should have access to it, without consideration of their ability or inability to pay for it.

Going forward with publicly-insured psychotherapy services would reflect the kind of policy that would transform how we think about mental disorders and their financial and social impact on individuals and society as a whole and how we view mental health services.

As a society, we should be arguing for effective healthcare services, founded on equitable access, pertinent treatments and optimal use of our healthcare dollars. Access to psychotherapy services falls within this argument. Governments could reallocate funding within its healthcare budget, say from medication or other funds to psychotherapy services. Society would gain greatly from much better health outcomes that would generate other long-term savings, at no additional cost to the healthcare system.

Psychotherapy is a recognized treatment option for common mental disorders; people who could benefit from it should have access to it. There should be no doubt about this.

Spokesmen for the Coalition for Access to Psychotherapy

The image shows two handwritten signatures. The signature on the left is "David Levine" and the signature on the right is "Michael Sheehan". Both signatures are in cursive handwriting.

David Levine

Michael Sheehan

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