

# Physician psychotherapy unavailable to 97% of people with urgent mental health need

March 11 2020

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Publicly-funded physician psychotherapy is only available to a fraction of those with urgent mental health needs in Ontario, according to a joint study by the Centre for Addiction and Mental Health (CAMH) and ICES published today in *CMAJ Open*.

The study confirms that there are far too few physicians providing publicly-funded [psychotherapy](#) in Ontario to meet the demand for it, and those physicians are concentrated in [large urban areas](#) and are rarely able to take on new patients with urgent mental [health](#) needs.

"The need for innovations in mental health to improve access and quality of care is urgent," said lead author Dr. Paul Kurdyak, Director of Health Outcomes and Performance Evaluation in the Institute for Mental Health Policy Research at CAMH and lead of the Mental Health and Addictions Research Program at ICES. "But increasing the number of physicians who provide psychotherapy alone will not solve the existing problem of poor access to psychotherapy in a publicly-funded system."

The study focused on the availability of publicly-funded psychotherapy provided by physicians in Ontario. Psychotherapy is an evidence-based treatment for conditions like depression and anxiety, two of the most common psychiatric disorders. Treatment guidelines suggest that structured, evidence-based therapies like Cognitive Behavioural Therapy (CBT) should be a front-line treatment option for patients with mild to moderate depression or anxiety.

Historically, most access to publicly-funded psychotherapy in Ontario has been provided by psychiatrists or family [physician](#) psychotherapists. But there are less than 1,000 of them in Ontario (out of a total physician population of over 12,000) and they see a much smaller number of patients on average.

While access to urgent care was low in general (more than half of all patients who sought care for mental health including addictions issues at an Emergency Department did not see any physicians within a month of the visit) access to psychotherapist physicians was even lower. Only two to three per cent of patients with urgent need were able to access psychotherapist physicians.

One part of the solution according to the study is to allow psychotherapists and other clinicians who are not physicians to provide publicly-funded CBT. It points to a program initiated in England that involved training non-physicians to provide publicly-funded CBT as one model for Ontario to consider.

CAMH has been one of four [mental health](#) hospitals in Ontario taking part in a three-year pilot project based on the England model, and last week the Ontario government announced it was expanding that program under the name Mindability to provide publicly-funded CBT to an additional 80,000 patients a year. But the study estimates that more than ten times that amount of patients—up to 900,000 a year in Ontario—could benefit from psychotherapy.

"Evidence-based psychotherapy should be available to all patients suffering from the most prevalent mental disorders," said Dr. Kurdyak. "Our study suggests that there are far too few publicly-funded physician psychotherapists to meet the needs of these patients."

Provided by Centre for Addiction and Mental Health

Citation: Physician psychotherapy unavailable to 97% of people with urgent mental health need (2020, March 11) retrieved 23 April 2024 from

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