

Association of Psychologists of Nova Scotia (APNS)

A voluntary professional organization established in 1965 to represent psychology in Nova Scotia, APNS is the only provincial association devoted to representing the needs of psychologists, professors of psychology and psychology students in the province. APNS promotes psychology as a profession, as a science, and as a means of promoting human welfare.

APNS **advocates for the public** through representations to government and employers on matters affecting public mental health and wellness.

APNS **advocates for psychology** through representations to government, employers and the public at large.

APNS **educates** by organizing and facilitating training workshops and conferences.

APNS **builds** psychological collegiality by fostering a sense of community among all who identify with psychology.

APNS monitors contemporary social issues and speaks out in the interest of the public good. Briefs and position statements have addressed on-going matters such as the administration and interpretation of psychological tests, access to psychological services, the establishment of a university Ph.D. program in clinical psychology, hiring psychologists within school boards, the role of psychologists in interdisciplinary primary healthcare, “Homes for Special Care,” input into the Nova Scotia Mental Health Act, child care, and human rights.

APNS was instrumental in obtaining exemption of health-care psychological services from the GST. APNS submits briefs regarding proposed legislation that may have impact on the practice of psychology. APNS also makes formal presentations to government commissions, such as the N.S. Royal Commission on Health Care.

APNS was pivotal in promoting passage of The Psychologists’ Act in 1982 that created the Nova Scotia Board of Examiners in Psychology (NSBEP), which administers the Act and has participated in recent changes to the Act. APNS coordinates nominations and appointments of NSBEP members.

APNS is affiliated with the Council of Provincial Associations of Psychology (CPAP), has regular liaison with the Canadian Psychological Association, and attends the Canadian Register of Health Service Providers in Psychology Annual General Meeting and semiannual CPAP meetings. APNS is also an affiliate member of the American Psychological Association.

Nova Scotia Board of Examiners in Psychology (NSBEP)

Psychologists are required by law to deliver competent, ethical and professional services. They are accountable to the public, through the NSBEP.

Psychologists meet rigorous professional requirements and adhere to prescribed standards, guidelines and ethical principles. Psychologists must adhere to the Canadian Code of Ethics for Psychologists and Standards for Service and Conduct, established by the NSBEP. The NSBEP investigates and addresses complaints against psychologists.

Only those individuals who meet specific requirements for education, examinations, and supervision are entitled to use the term, “Psychologist”, or to provide “psychological services,” by virtue of *The Psychologists Act of Nova Scotia*. Psychologists must have at least these qualifications:

A Doctoral or Masters degree in psychology
Two years of supervised experience, in the case of a Doctoral degree, or four years, in the case of a Masters degree, and
Have passed a standardized, written examination and an ethics oral examination.

Psychologists (Candidate Register) have the same educational qualifications and are in the process of completing their supervised experience.

“As of December 31, 2007 there were 435 registered and candidate register psychologists in Nova Scotia.”

Psychology Education in Nova Scotia

To be registered as a psychologist in NS one must have a graduate degree in psychology from a program that requires an undergraduate degree in psychology (or equivalent courses in psychology) as part of the entrance requirement.

- Dalhousie University: 5-year PhD Clinical Psychology
- Saint Mary’s University: 2-year Masters, Industrial/Organizational Psychology
- Mount St. Vincent University: 2 year Masters, School Psychology
- Acadia University: 2-year Masters, Clinical Psychology

In Nova Scotia, there have been approximately 5 graduates per year from Dalhousie University in recent years. According to officials at Dalhousie, there are typically 90 interested applicants to the graduate program each year.

Preventable Health Care Costs in Nova Scotia

Estimates suggest that about 40% of chronic illness can be prevented as 25% of all medical costs are due to a few risk factors.

1. Smoking: Nova Scotia has among the worst smoking rates in Canada

- 22% of Nova Scotians smoked daily (2006); only 31.9% have *never* smoked (2002).
- Direct health cost attributed to tobacco use in Nova Scotia estimated at \$171.3 million (2005)
- Smoking is estimated to cost Nova Scotians close to \$1 billion annually.
- It is estimated that 1,753 Nova Scotian died in 2005 as a result of smoking. *"Cost of Tobacco Use in Nova Scotia," GPI Atlantic, Stats Canada, 1998/99.*

2. Obesity: Obesity increases risk for hypertension, Type 2 diabetes, coronary artery disease, gall bladder disease, stroke, cancer.

- Cost \$120 million/yr to NS health care system. *GPI Atlantic, 2000.*
- 38% of Nova Scotians are overweight (29% in Canada overall).

3. Physical Inactivity: Only 24% of Nova Scotians are physically active but 50% are physically inactive. *Stats Canada, 2004.*

4. Life Stress: Nova Scotians experience the 2nd highest life stress in Canada. (25.4%)

Chronic Disease

Nova Scotia ranks 1st in Canada for people with arthritis and rheumatism, for deaths from cancer and respiratory disease. N.S. ranks 2nd in Canada for psychiatric hospitalization, deaths due to diabetes and circulatory

- problems. *GPI Atlantic, October, 2002.*

36% of all deaths in NS result from cardiovascular disease. (2,800/yr)

- 30% of all deaths in NS result from cancer. (2,400/yr)

Highest rates of new cancer cases and cancer deaths in Canada. More than 28,000 are living with cancer; 5,300 new cases| are diagnosed each year. *Cdn Cancer Society*

- Leads Canada in use of disability days, rates of death from cancer & respiratory disease, rates of arthritis and rheumatism.

2nd highest rates of circulatory disease, diabetes, psychiatric hospitalization.

- Highest incidence of diagnosed asthma in Canada; 9.3% of Nova Scotia aged 12 and up compared with 8.8% of all Canadians. *Asthma Health Report, 2004.*

Costs of chronic disease in Nova Scotia

- *GPI Atlantic, October, 2002.*

60% of medical care expenditures or \$1.2 billion/yr.

- Productivity costs from premature cancer death costs economy \$427 million/yr.

Musculoskeletal disorder (arthritis, osteoporosis) costs economy \$307 million/yr due to disability.

Combining direct medical cost and indirect productivity losses (\$1.79 billion), the total economic cost of 7 types of chronic illness (cardiovascular diseases, cancer, respiratory ailments, diabetes, musculoskeletal disorders, conditions of the nervous system and sense organs, and mental illness), exceeds \$3 billion/yr.

How Psychology makes a difference?

Psychology is the study of biological, cognitive, affective, social and cultural aspects of **behaviour**. What we think, feel and chose to do dramatically affects whether we keep healthy and prevent disease and injury, get well quickly, rehabilitate effectively, prevent relapses, manage chronic illness or permanent disability and die with security and dignity.

What role can Psychologists play in Nova Scotia's health care?

The most extensive review of cost-offset studies was provided by Chiles et al (1999) who culled and analyzed results from 91 studies. The average savings to the health care system that was attributable to the addition of outpatient psychotherapy services was 20%. Note that these savings do not include likely gains to the economy or to the patients' quality of life.

Meta-analysis of 58 controlled studies on cost-offset phenomena in psychotherapy consistently revealed a favourable cost offset. *Mumford et al. 1984*

A review of 35 studies on psychotherapy and its cost implications showed that in 90% of published studies the therapy cost was more than offset by other system expenditure savings. *Gabbard et al. 1997*

These findings consistently conclude that the cost of psychological interventions is more than offset by gains in other costly aspects of health care itself. Even the most conservative results indicate that the cost of psychological treatment leads to an additional 20% reduction in other health care costs once its own cost is accounted for. This figure does not include the likely gains to employers and the economy that may arise via reduced absenteeism, lowered frequency of workplace

accidents or reduction in disability payouts.

Psychologists & Psychiatrists

Many psychologists have a Doctoral level degree in Psychology, after having obtained a Bachelors degree & Master's degree in Psychology. This is up to 10 years of university education and training. Psychiatrists have a general medical degree, then advanced training in psychiatry (4 years residency after the M.D. degree).

Both psychologists and psychiatrists provide psychotherapy services. Many times, Psychologists favour environmental theories while many psychiatrists favour biological theories.

Psychologists and psychiatrists provide different types of service. Psychologists do psychological testing with well-researched tests. Psychiatrists typically do not. Psychiatrists can prescribe medication, Psychologists cannot.