



**CRHSP RCPOSS**

Canadian Register of  
Health Service Providers  
in Psychology

Répertoire canadien des  
psychologues offrant  
des services de santé

Improving lives  
through excellence

Miser sur l'excellence pour  
améliorer la vie des gens

## **Mobility and Free Trade: Why do they matter to health care psychologists?**

*Dr. Pierre L.J. Ritchie, Executive Director*

Mobility has reemerged as a major issue for Canadian psychology. The primary impetus is the domestic, continental and international movement toward greater levels of free trade. Historically, free trade focussed on commodities and manufactured products. The new element is the inclusion of professional services in free trade agreements and treaties.

The original Canada-USA Free Trade Agreement began the process which has increasingly occupied the attention and resources of Psychology and other health professions. It was soon replaced by the North American Free Trade Agreement (NAFTA) which dramatically increased the stakes. Psychology was a major contributor to the advocacy which resulted in a formal trilateral ministerial declaration earlier this year. This document appears to confirm that NAFTA, at least in the short-term, cannot compel commercial challenges to Canada's publicly funded health care system. How well this reassurance will hold up over time remains to be seen.

The addition of "Services" to the most important international free trade undertaking, the newly renamed General Agreement on Tariffs, Trade and Services (GATTS) underscores that the intention to make professional services subject to trade liberalization is not a regional phenomenon. While the actual pace is uncertain, the globalization of health care services is likely to accelerate in the decade ahead. The real uncertainties are in anticipating the specific pressures for regulatory and service delivery reform this movement will generate.

The Agreement on Internal Trade (AIT) signed by the federal government and all provinces/territories in 1995 provides some clues. That the two levels of government were able to reach such an historic commitment in the midst of profound discord on other matters, speaks to the magnitude of the economic forces at work. At a time of increased global competitiveness and the concurrent reduction of international barriers to the free flow of goods and services, Canada's internal domestic barriers not only appeared increasingly absurd, they placed Canadians at substantially increased economic risk. At a time when governments find themselves retrenching from their role as direct funders of many services, the viability of the private sector as a vehicle not only for general economic prosperity but also for the assumption of additional social responsibilities becomes paramount. The removal of many barriers to the domestic free

flow of goods and services is regarded by our governments as an essential element to sustaining the country's international competitiveness.

Why is any of this important to Canadian professional psychology and, more specifically, to health service psychologists? Simply put, it is about our ability to compete successfully in a rapidly changing global economy which will increasingly affect how business gets done, including the business of publicly and privately funded health care. It is also going to have a substantial influence on shaping the rules by which we shall have to abide in marketing and offering our services.

CRHSPP's involvement in the inter-professional advocacy effort on NAFTA was motivated by two factors. We believe it to be essential that Canadian psychologists be at least at a level playing field with those from NAFTA partner countries (currently Mexico and the USA). This interest was entirely congruent with the objective of Psychology's provincial/territorial regulatory bodies to prevent the functional crippling and potential dismantlement of a system of public protection slowly built over the past four decades.

At no point was CRHSPP or its partners acting from a narrow protectionist orientation. We were and have again been vigorous in asserting important conditions which are necessary to secure the ability of Canada's health care psychologists to offer their services. Meaningful consumer accessibility to our health services remains a key feature of advocacy efforts whether in the context of working with public and private funders, or in the context of trade liberalization.

The freer flow of services inevitably involves the movement of persons. However, Canada's constitutional regime and system of professional regulation has spawned a high level of variability in provincial/territorial admission to practice requirements for psychologists. The AIT mandate to move quickly to the reduction of barriers by means of mutual recognition is a major challenge to the profession.

Since this matter is a central priority for psychology's provincial/territorial regulatory bodies, it is not surprising that the Council of Provincial Associations of Psychologists (CPAP) has taken a lead role in developing a process to enable this to occur. CPA serves as the primary link with the federal government on AIT. CRHSPP will provide important secondary collaboration to CPAP and CPA on this matter. As the only credentialing mechanism the profession has ever created to recognize psychologists nationally in a manner which respects the variabilities found provincially/territorially, CRHSPP's experience clearly has a potential contribution to make. It could also be part of solutions focussed on health service psychologists who are the largest segment of Canadian psychology's professional service providers.

With the withdrawal of CPA from the former National Professional Psychology Consortium, the profession's national organizations have returned to a system of ad hoc collaboration. To ensure optimal and cost-efficient use of the profession's energies, CRHSPP recently proposed to CPA and CPAP the development of a national action plan to reposition Canadian professional psychology in the context of the down-sizing of the public sector, increased privatization and the potential emergence of a North American managed care system for private sector health services.

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In the President's column elsewhere in this issue, Dr. John MacDonald has discussed the plan to focus the Canadian Register's advocacy and marketing efforts on securing a strong place for health service psychologists in a reconstituted Canadian health care system. Notwithstanding the importance of the mobility issue, especially in the context of the AIT, CRHSPP expects to devote most of its efforts to the other elements related to the liberalization of trade in professional services. In particular, we shall concentrate on the funding of psychological health services and factors related to patterns, constraints and opportunities for enhanced service delivery; for example, the emergence in Canada of continentally driven managed care. We believe this is consistent with the best use of CRHSPP's limited resources as well as with your expectations and those of its corporate members.