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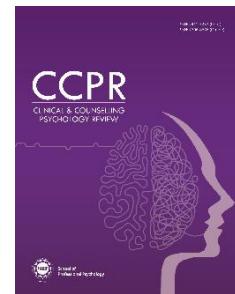
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Author(s): Robinder P. Bedi

Affiliation (s): University of British Columbia, Canada

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Provincial Differences in Counselling Psychology in Canada: An Empirical Analysis of British Columbia, Alberta, and Ontario

Robinder P. Bedi*

Department of Educational and Counselling Psychology, and Special Education,
University of British Columbia, Canada

Abstract

Counselling psychologists are vital providers of community mental health services in Canada. This quantitative descriptive study provides a more refined understanding of counselling psychology in Canada by examining similarities and differences in its manifestation across three provinces in Canada: Alberta (AB), British Columbia (BC), and Ontario (ON), based on survey with 109 Canadian counselling psychologists. This study found eight moderate size differences. This information needs to be taken into consideration by provincial boards, provincial psychological associations, graduate training programs, counselling psychologists considering relocating, and especially by the potential consumers of counselling psychology services as both the services and service provider appears to differ in some ways across Canada.

Keywords: Canadian counselling psychology, Canadian counselling psychologists, counselling psychologists, interprovincial differences

Introduction

Counselling psychologists are vital providers of mental health services in Canada (Sinacore, 2015). They are present in all Canadian provinces and territories (Bedi et al., 2016; Bedi et al., 2020; Bedi & Pradhan, 2023) and nearly all of them (over 95%) provide community mental health services, either through community mental health agencies or through independent practice (Bedi et al., 2020). In addition, over half of them (55.1%) provide clinical supervision to mental health professionals and trainees, including clinical counsellors, marriage and family therapists, psychotherapists, and clinical social workers (Bedi & Pradhan, 2023). Thus, to get a complete understanding of the mental health treatment landscape, such as the nature of mental health services available and the impact of counselling psychologists on mental health services consumers, understanding the

*Corresponding Author: Robinder.Bedi@ubc.ca

characteristics and practices of Canadian counselling psychologists is important (Young & Nicol, [2007](#)). There have been several nationwide studies focusing on counselling psychologists in Canada (Bedi et al., [2016](#); Bedi et al., [2017](#); Bedi et al., [2020](#); Bedi & Pradhan, [2023](#); Pradhan & Bedi, [2019](#)). However, results have been presented as an aggregate and no information has been provided on potential interprovincial heterogeneity.

Interprovincial heterogeneity is especially important to investigate for a number of reasons. For example, ensuring equitable services requires identifying and then attempting to remedy disparities that exist in variables like access, types of services available, types of practitioners available, personal characteristics of practitioners available, language of services available, and therapeutic outcomes. As a second example, in order for consumers of mental health services to make the most informed choice on whether to see a counselling psychologist over an alternative mental health provider and, if so, which type of counselling psychologist to select, local-sourced (i.e., provincial) information about counselling psychologists is needed given the great variability across Canada across innumerable variables that prevents nationwide generalizations. Thus, it is important that our knowledge of this common community mental health service provider and their mental health services goes beyond national portrayals, which appears to be almost entirely what is currently available.

There is almost no data available from provincial/territorial boards of Psychology and provincial/territorial psychological associations to help determine the extent of interprovincial variability. Several examples follow. The British Columbia Psychological Association does not collect specialization data on its membership survey (British Columbia Psychological Association [BCPA], [2018](#)). The College of Psychologists of British Columbia does not disaggregate their information in their annual reports by declared area of practice (D. Perry, personal communication, February 4, 2022). The latest published member survey of the Psychologists Association of Alberta (Lil et al., [2016](#)) only provided information on what percentage of members practiced counselling psychology and hours worked per week by specialization (counselling psychologists worked 33.4 hours per week on average). The College of Alberta Psychologists does not track practice specialities (I. Thompson, personal communication, June 10, 2022). The Ontario Psychological Association does not have any information about areas of practice of its members (R. Morrison, personal

communication, June 1, 2022). The latest publicly released information from the College of Psychologists of Ontario only lists the number of registrants who self-declare counselling psychology as an area of practice and no other information about counselling psychologists (College of Psychologists of Ontario, [2021](#)). Although two studies have looked at counselling psychology doctoral program differences in Canada (Bedi, [2016](#); Bedi et al., [2019](#)), finding stark differences, dissimilarities between doctoral programs across provinces do not necessarily generalize to variations in actual practices upon graduation.

In the absence of province-specific information, national and provincial associations and board of psychology (e.g., Canadian Psychological Association [CPA]), researchers, practitioners, instructors, supervisors, students, prospective students, and the general public must rely on the conclusions from research studies that assume that national results are generalizable across provinces and territories. Province-specific information is important. Without it, the CPA and its Section of Counselling Psychology (SCP) will remain unsure about the extent to which their programs, initiatives, and future plans hold relevance for counselling psychologists and their clients in different jurisdictions. Without province-specific information, provincial/territorial licensure boards and psychological associations may be relying on inaccurate, imprecise, or misleading information in their oversight of or advocacy for counselling psychologists in their specific province which could impact consumers of mental health services through the type and the quality of services available. Without it, academic programs will be less likely to prepare their graduates for maximal success in local practice, which again will adversely impact consumers of mental health services through the nature of quality of services available. In addition, counselling psychologists considering relocating to another jurisdiction should be highly interested in similarities and differences in counselling psychology across jurisdictions to better prepare them for adjustment and success upon relocation. Analogously, an individual who received counselling psychology services in one province but relocates to another province should be aware of what to expect and what may or may not be available. Finally, the lack of province-specific information becomes an important consumer issue. Informed consent for mental health services requires understanding the profession, training, and scope of practice of the practitioner. It is unlikely that many mental health consumers are aware that most provinces require a doctoral degree to

practice as a psychologist while some only require a master's degree. If the characteristics and practices of counselling psychologists significantly differ across Canada, prospective patients and clients should have access to this information.

There are at least two reasons to believe that important interprovincial differences could exist, which justifies this investigation. First, research demonstrates stark differences in curricula and program characteristics across the five CPA-accredited programs in Canada that result in some different outcomes across the programs (e.g., Bedi, [2016](#)). Based on their analyses, Bedi et al. ([2019](#)) concluded, "it appears that each program maintains distinct areas of strength as experienced by its doctoral students" (p. 301). Assuming that many graduates remain in the province of doctoral training, this could translate into different practice tendencies in each province corresponding to local programs. Second, each provincial/territorial board determines its own regulations that are not fully commensurate with those of other jurisdictions. For example, not every jurisdiction recognizes counselling psychology as a distinct specialization or area of practice and some jurisdictions provide license to psychologists with only master's degrees (Wada et al., [2020](#)).

Purpose of the Study and Research Questions

Assessing the extent of similarities and differences in the specialization and profession of counselling psychology in Canada across provinces is a testable phenomenon that has unfortunately been ignored. This has not even been mentioned in previous reviews of Canadian counselling psychology (Lalande, [2004](#); Young & Nicol, [2007](#)). There could reasonably be large interprovincial differences that impact the nature and quality of counselling psychology services available to mental health services consumers that merit awareness and potential advocacy attention, particularly those related to disparities in access and available services. The purpose of this study was to provide a more refined understanding of the specialization and profession of counselling psychology in Canada by examining if interprovincial differences exist. As per previous surveys on Canadian counselling psychologists, variables associated with personal and professional demographic information, theoretical orientation, professional activities, and training and career experiences were focused on.

As outlined further in the Method section, sufficient data on counselling psychologists was available for British Columbia (BC), Alberta (AB), and Ontario (ON) – three of the four largest provinces in Canada by population (Statistics Canada, [2022](#)) and three of the four provinces that house a doctoral program in counselling psychology (the other is Quebec). The primary research question in this study was “what are the similarities and differences in the characteristics and professional practices of Canadian counselling psychologists in BC, AB, and ON.” This was an exploratory study. It was expected that some differences between provinces would be found, but no specific hypotheses were advanced due to the lack of pre-existing research and theorizing.

Method

Participants

This investigation involved 109 Canadian counselling psychologists practicing in AB, BC, or ON¹. About 38.5% were practicing primarily in BC ($n = 42$), 36.7% in AB ($n = 40$), and 24.8% ($n = 27$) in ON. The majority of respondents sampled were cisgender women (63.3%) with 35.8% identifying as cisgender men and .9% ($n = 1$) identifying as a transgender woman. About 91.7% were heterosexual. The majority of respondents were of European heritage 70.6%, followed by Asian descent (11.9%), another ethnicity (11.0%) or being multi-ethnic (6.4%). About 46.8% identified as Christian, 45.0% had “no religious affiliation,” and 8.2% subscribed to some other religion (with no more than 1.8% to any particular religion). The average age of respondents was 46.3 years ($SD = 13.2$) and they received their highest degree in the median year of 2005.

Statistical power analysis conducted with G*Power software indicated that, for interval variables, to achieve a power of .80 to detect a large effect size (defined as $F^2 = .40$; Cohen, [1992](#)) at $\alpha = .05$, a minimum sample size of 66 (22 per group) would be needed. For categorical data, to achieve a power of .80 to detect a large effect size (defined as $w = .50$; Cohen, [1992](#)) at $\alpha = .05$ a total sample size of 39 would be required for a question with three response options and a total sample size of 74 would be required for a

¹This study is based upon secondary use of previously collected data with permission. Bedi et al. (2020) and Bedi et al., in press) administered almost the same survey to 185 counselling psychologists, the largest share of survey respondents (58.4%) was from BC ($n = 42$), AB ($n = 40$), and ON ($n = 27$).

question with 14 response options (the maximum present in any of the survey questions in the two original surveys). Therefore, this study was sufficiently powered to be able to likely detect any large differences that exist between provinces/territories.

Procedure

Institutional research ethics approval was waived for this study since it involved a re-analysis of anonymous data. This quantitative descriptive study employed 79 survey questions administered to non-overlapping samples of Canadian counselling psychologists by Bedi et al. (2020) and Bedi et al. (2016) to investigate variables/characteristics related to personal and professional demographic information, theoretical orientation, professional activities, and training and career experiences. This study thus involved 79 main statistical hypothesis tests (ANOVAs for interval variables and chi-squares for categorical variables). Participants were recruited through provincial/territorial boards of psychology across Canada through their listservs, newsletters, and social media; as well as through the alumni and faculty listservs of each of the doctoral programs in counselling psychology in Canada. Approximately four months after the original recruitment effort, a second attempt was made through the same means. Participants were offered a \$20 gift card for their participation.

To control the familywise error rate, an α level of .01 was selected in order to keep the probability of making at least one type I statistical error to less than 1 (i.e., $79 \times .01 = .79$ probability of making at least one type I error) for the main ANOVA and chi-square analyses. This is because other options (e.g., Bonferroni, Scheffe) are extremely conservative (Midway et al., 2020) and less suitable for early-stage exploratory research. To ensure that categorical variables were analyzable, Fisher's exact test was used when cell size assumptions of chi-square were violated. For the ANOVA analyses, significant F-tests indicating a difference were followed by Tukey-Kramer posthoc tests (with α set at .05), which are designed for simple pairwise comparisons with unequal sample sizes. The Tukey-Kramer method is the most widely used ANOVA posthoc comparison test for parametric data with unequal sample sizes (Midway et al., 2020).

Results

Across the 79 comparisons between practitioners in BC, AB, and ON, statistically significant differences were found for eight variables (10.1% of

all variables examined): for convenience, presented by increasing level of observed p -value): (a) Providing services in French, (b) subject area of doctoral degree, (c) provincial licensure/registration as a psychologist, (d) American Board of Professional Psychology (ABPP) Diplomate status in counselling psychology (e) religious affiliation, (f) age, (g) satisfaction with the personal counselling experience, and (h) perception of counselling psychology as distinct from clinical psychology. All eight had medium size differences (Cohen, 1992).

The sampled counselling psychologists in ON (37.0%) were more likely than those in BC (2.4%), and AB (10.0%) to provide psychological services in French: $\chi^2(2, N = 109) = 17.39, p < .01, V = 0.40$. The doctoral degrees of those self-identifying as counselling psychologists in BC (48.0%) and AB (53.8%) were more likely than those in ON (5.9%) to be in clinical psychology: two-tailed $p < .01$, Fisher's exact test, $V = 0.42$. A higher proportion of the counselling psychologists in AB (90.0%) had licensure/registration as a psychologist than those in BC (57.1%) and ON (63.0%): $\chi^2(2, N = 109) = 11.69, p < .01, V = 0.33$. Participants from ON (14.8%) had a greater proportion of practitioners with ABPP status in Counselling (two-tailed $p < .01$, Fisher's exact test), $V = 0.34$ (medium effect) than BC (0%) and AB (0%). BC (39.0%) and AB (47.5%) counselling psychologists similarly reported their primary religious affiliation as no religion, while a greater proportion of those in ON (47.5%) reported being Christian: two-tailed $p = .01$, Fisher's exact test, $V = 0.25$.

These counselling psychologists differed significantly with respect to age, $F(2, 103) = 4.56, p = .01, \eta^2 = .08$ (medium effect) with the average age of practitioners in AB ($M = 41.74, SD = 12.22$) being significantly younger than those in ON ($M = 51.00, SD = 10.57, p = .01$); BC practitioners was not significantly different from the other two groups ($M = 47.65, SD = 14.43$). While a similar proportion of practitioners in BC, AB, and ON had received their own personal counselling or psychotherapy, their satisfaction with their personal experience of counselling or psychotherapy was significantly different: $F(2, 90) = 4.55, p = .01, \eta^2 = .09$ (medium effect). Practitioners in ON ($M = 4.48, SD = 0.79$) were more satisfied with their personal counselling experience than those from AB ($M = 3.77, SD = 1.06, p = .03$); BC practitioners were not significantly different from the other two groups ($M = 3.90, SD = 0.79$). Practitioners differed significantly on ratings of the extent to which counselling psychology is distinct from

clinical psychology, $F(2, 103) = 4.42, p = .01, \eta^2 = .08$. The sampled counselling psychologists in AB ($M = 2.80, SD = 1.02$) perceived counselling psychology and clinical psychology to be more similar than those in BC ($M = 3.44, SD = 1.00$) ($p = .03$) and ON ($M = 3.44, SD = 1.25, p = .05$); BC and ON did not significantly differ from each other. There were no statistically significant differences found on the other 71 variables assessed.

Discussion

There is extremely little research available on Canadian counselling psychology so much more research is needed. This study extended past research by identifying interprovincial differences in the characteristics of counselling psychologists and their practices. The results of the current study imply that the conclusions of past national studies (Bedi et al., 2020; Bedi et al., 2016) are mostly generalizable with some exceptions (about 10% of the variables assessed). In other words, the portrait of Canadian counselling psychology metaphorically painted by these past studies (Goodyear et al., 2016) is substantial, however, not wholly accurate when applied to specific provinces. In the current study, statistically significant heterogeneity of moderate size was demonstrated, at least between AB, BC, and ON, on 10 variables.

According to the current study, sampled counselling psychologists in ON were more likely to offer psychological services in French. This mirrors general French fluency in ON, which is about double, compared to AB and BC (Government of Canada, 2019) and is therefore not surprising. Nevertheless, it indicates that these counselling psychologists in ON are more accessible to French-speaking individuals in ON than AB or BC and the value of being able to provide services in French if seeking employment in ON. The language of the available services, particularly in French, is thus an area where systematic cross-Canada differences in the practice of counselling psychologists are observable in Canada beyond those sampled in the current study. This is an important piece of information for prospective clients of counselling psychology seeking services in French.

Those in the current study who identified as counselling psychologists were more likely to have PhDs in clinical psychology if they were working in BC or AB. As discussed in Bedi et al (2020), identifying as a counselling psychologist or working in a classic counselling psychology work setting

(like a university counselling centre) with a doctoral degree in clinical psychology is largely possible because declaring areas of practice is by self-report with minimal evaluation provided by local boards or associations, and because there is no legal restriction on the use of the term counselling psychologist beyond that already associated with using the term “psychologist”. In the current study, subject area of PhD for those who identify/work as counselling psychologists appears to be a likely difference across provinces, with this appearing more common and perhaps acceptable in certain provinces. For consumers seeking or receiving the services of someone identifying as a counselling psychologist, they may be interested to know that training in counselling psychology is not necessarily required to use the professional label, particularly in BC and AB (as found in the current study). Some consumers may consider this deceptive.

In the current study, the counselling psychologists in AB were more likely to have licensure as a psychologist. This could partly be a function of accessibility because psychologists are able to receive a license with or without a doctoral degree in AB, whereas doctoral degrees are still the general expectation in BC and ON. The higher rates of licensure for psychologists in AB could also be a function of professional modeling. Past research has found that counselling psychology faculty at the University of Alberta (UA) had higher registration rates compared to faculty at the University of British Columbia (UBC) and the University of Toronto (UT) (Bedi, [2016](#)). The results of the current study indicate that percentage of counselling psychologists with psychologist licensure seems to be an area of variance across Canada with registration being less of a norm in some provinces. Therefore, consumers receiving community mental health services from someone identifying as a counselling psychologist will be more likely to see someone with a doctoral degree in BC and ON, but someone with a master’s degree if seeking services in AB. They should not assume that all psychologists have a doctoral degree. Nevertheless, based on the results of this study, the self-declared counselling psychologist will be more likely to be licensed as a psychologist in AB (alternative professional licensing or certification is more common in BC and ON, such as a counselling therapist in ON and registered clinical counsellor in BC), and this may provide some greater degree of comfort for some consumers of mental health services.

In this study, counselling psychologists in ON were more likely to have achieved American Board of Professional Psychology (ABPP) specialization status in counselling psychology than those in AB or BC. The ABPP is the primary organization for specialty certification in psychology and provides external party objective evaluation and endorsement of one's specialization. Because there is no Canadian equivalent, Canadian psychologists sometimes seek this recognition through this US-body as found in this study. It is unclear why this may be. It could represent a provincial cultural difference in the recognition and valuing of ABPP status in ON. It could also be that more counselling psychologists in ON are more motivated for whatever reason to seek the highest status verification of their specialization. It could also represent a greater proportion of counselling psychologists in ON coming from the US and bringing their APBB status with them. This latter conclusion is consistent with ON having the largest number of immigrants of any Canadian province or territory (El-Assal, [2021](#)). ABPP status appears to vary for Canadian counselling psychologists across the provinces investigated in this study. ABPP is considered the highest distinction of specialization in counselling psychology and for those mental health consumers seeking such credentials in their mental health service providers, they are most likely to find this in ON.

In this study, the counselling psychologists from ON were more likely to be Christian than those in AB or BC. This is consistent with local demographics as there is a greater proportion of Christians in ON compared to AB and BC (Statistics Canada, [2011](#)). It is not uncommon for an individual to prefer or exclusively seek out counselling or psychotherapy services from someone from the same religion, who will presumably understand them better. Based upon the results of this study, it seems that a potential mental health services consumer seeking a Christian counselling psychologist will be most likely to be able to locate one in ON than AB or BC because the religious composition of counselling psychologists appears to vary across different parts of Canada. Mental health services consumers will likely have more difficulty locating a Christian faith counselling psychologist in BC and AB.

The counselling psychologists sampled from AB were the youngest compared to BC and ON and their age was notably lower than national estimates of average age from past research (Bedi et al., [2020](#); Bedi et al., [2016](#), [2017](#)). The counselling psychology workforce seems to be aging

moderately more quickly in BC and ON than AB as indicated in this study. Also, as found in this study, impending retirements seem to be more of a concern in BC and ON than AB and the age of counselling psychologists appears to be another area of divergence across Canada. This has implications for the long-term availability of counselling psychology services with greater scarcities expected to occur in BC and ON if renewal efforts are not taken seriously.

Whereas rates of receiving their own personal counselling or psychotherapy were found in this study to be comparable across counselling psychologists in AB, BC, and ON, those in ON were significantly more satisfied with their personal counselling or psychotherapy than those in AB. Assuming that most of those in ON received these mental health services within province, this begets the speculation that perhaps counselling psychologists in ON are more effective in general, or at least with other counselling psychologists as clients, than AB. The possibility of interprovincial differences in practitioner effectiveness is not something that seems to have been previously investigated. If this finding is substantiated in future research, this opens up a novel inquiry for investigating why counselling psychologists in one jurisdiction may be more effective than those in another. It is very likely that mental health services consumers will want to know if counselling psychology service are more likely to be effective in another jurisdiction.

In the current study, the counselling psychologists in AB judged there to be more similarity between counselling psychology and clinical psychology, while those in BC and ON perceived a greater degree of difference between the specializations. Therefore, perceptions of similarities and differences between counselling psychology and clinical psychology, may not only differ by age and work setting (Bedi et al., [2020](#)), but by province of work. Issues of professional identity, rivalry, and overlap is a frequently discussed topic in Canadian counselling psychology research and scholarship (e.g., Bedi et al., [2011](#), Haverkamp et al., [2011](#)). The general consensus of the research is that Canadian counselling psychologists and counselling psychology students often feel inferior or believe they are treated as inferior compared to those with training in clinical psychology. Some have reported specific opportunities unavailable to them that would be available if they had been trained in clinical psychology (Bedi et al., [2018a](#), [2018b](#); Bedi et al., [2020](#); Pradhan & Bedi,

[2019](#)). This is partly due to the shortage of internships available for clinical psychology students (Saklofske et al., [2019](#)). There has also been steady evidence of more clinical psychologists obtaining employment in classic counselling psychology settings (like graduate counselling psychology programs and university counselling centres) and more counselling psychology students now doing internships in hospitals than counselling centres (Bedi et al., [2020](#); Bedi et al., [2016](#), [2018a](#), [2018b](#)). These shifting patterns clearly have implications for perceptions and actualities of overlap between the specializations as consumers, particularly those seeking private community mental health services can often see either a counselling psychologist or clinical psychologist for psychological services.

Implications for Advocacy, Education/Training, and Practice

With this data, the CPA and its SCP are now able to better evaluate how well their national programs, initiatives, and future plans may differentially serve counselling psychologists in AB, BC, and ON. For example, initiatives related to professional identity differentiation from clinical psychology (Beatch et al., [2009](#)) may find more receptive audiences in BC and ON. In addition, more targeted professional identity development efforts may be desirable for counselling psychologists in AB if this is a priority area for the SCP. Moreover, because this study found that counselling psychologists who belong to the CPA are relatively older, one way for the CPA/SCP to recruit younger members is to target recruitment in AB and other locations with younger counselling psychologists.

The results of this study support provincial/territorial boards, psychological associations, and graduate training programs from over-relying on national empirical characterizations of counselling psychology to guide their oversight, advocacy, or graduate preparation. For example, the profession in BC and ON should be more focused on initiatives to train or recruit more counselling psychologists to replace retiring ones compared to AB otherwise there will be limited access for mental health services consumers seeking counselling psychology services. As another example, it seems most important for the Ontario Psychological Association to be aware that they house a greater proportion of Christian counselling psychologists and consider how well they are supporting and advocating for them and their relatively unique needs. Some Christian mental health services consumers will prefer a Christian mental health professional so promoting this demographic of counselling psychologist seems important.

across all of Canada, but particularly in ON where a larger proportion of Christian individuals reside. As a third example, academic programs in BC and AB seeking greater diversity of student and faculty could consider linguistic diversity and include French language fluency in recruitment considerations, particularly as French is one of the national languages of Canada, many individuals across Canada speak French, and yet French-speaking counselling psychologists in BC and AB appear relatively rare, despite ample documented demand of French-speaking individuals seeking treatment. It becomes an issue of equity here and consistent with the inclusion and social justice aims of Canadian counselling psychology (Cohen et al., [2022](#); Ginsberg & Sinacore, [2015](#); Kennedy & Arther, [2014](#)). French-speaking Canadians deserve equal access to counselling psychologists and it begets each provincial association and academic program to ensure this. Canadian counselling psychologists now possesses more nuanced information about the profession in their country and interprovincial differences, which can be used to make more informed decisions for themselves (e.g., relocation). Finally, after reading this article, prospective mental health services consumers will be more informed about the nature and variability of counselling psychologists and counselling psychology services, and better empowered to ask the right questions in order to find the right counselling psychologist or determine if they should seek an alternative mental health services provider.

Limitations

This study has reasonable statistical power to detect large effect size differences, which are actually most practically significant in this context. It is possible and perhaps likely that small differences between counselling psychology across the three provinces were not identified by this study. However, small differences do not negate the national characterizations of the profession the way moderate and large differences do. Small differences should not require large differential efforts on the part of boards, association, graduate programs, and counselling psychologists to adapt and respond to interprovincial differences.

Participants in this study were not randomly sampled from their respective populations. There is unfortunately no way to definitely determine how representative the sampled counselling psychologists were and the impact, if any, of the self-selective nature of participation. Unfortunately, at present, this is as good as the data gets and no other

information is present about possible interprovincial differences. As mentioned earlier, provincial/territorial boards of psychology and provincial/territorial psychological associations rarely, if ever, collect information about psychology specializations/area of practice (and in the rare case that they do, usually do not share such information with the public) and some do not even recognize specializations/areas of practice (and in some that do, counselling psychology is not recognized as a specialization/area of practice). For the sake of better informing the public, we strongly recommend that these boards and associations collect and disseminate this information. But until such time that they do, there will always be notable uncertainty about the extent to which research on samples of participants can be generalized to the population of Canadian counselling psychologists or those in any particular province or territory.

However, there are at least three reasons to believe that the participants in this study may be reasonably generalizable. First, data on Canadian counselling psychologists who were members of the CPA that were extracted from Bedi et al. (2020) were previously determined to be representative of the population of CPA-member counselling psychologists, at least on the basis of geographical location and membership type. Second, in the latest Psychologists' Association of Alberta's (Lil et al., 2016) latest survey, their counselling psychology specialization members worked an average of 33.4 hours per week, which seems comparable to the average number of hours worked by counselling psychologists in AB at their primary job in the current study (34.6 hours per week). Third, the participants in this current survey reasonably resemble recent nationwide samples of counselling psychologists previously surveyed (Bedi et al., 2016; Bedi et al., 2020; Goodyear et al., 2016) with respect to gender variability, sexual orientation variability, religion variability, and average age.

Future Research

Future investigations should replicate this study with a larger sample size to confirm its findings. Replications would also serve to track provincial changes in counselling psychology over time. It is also recommended that surveys of counselling psychologists in the provinces/territories not included in this study be done.

Conclusion

Based upon the results of this study, it appears that the manifestation of counselling psychology can differ across provinces/territories by variables such as the availability of French language psychological services, licensure rates, religious background of the counselling psychologist, average age, subject area of PhD, ABPP status, satisfaction with one's own personal counselling/psychotherapy, and how distinct the specialization is judged to be from clinical psychology. This information can be acted upon to provide provincially-tailored regulatory oversight, association advocacy, and training/preparation of counselling psychologists in AB, BC, and ON. In addition, with this information, counselling psychologists considering relocating to AB, BC, or ON are now better able to make more informed decisions and preparations. Finally, potential consumers of counselling psychology services now have more province/territorial-specific information from which to inform their decision on whether to see a counselling psychologist.

Conflict of Interest

The author of the manuscript has no financial or non-financial conflict of interest in the subject matter or materials discussed in this manuscript.

Data Availability Statement

The data associated with this study will be provided by the corresponding author upon request.

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