Improving access to care: The impact of digital delivery on mental health services in rural communities

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Learning Objectives

(1) Participants will gain an understanding of the benefits and challenges of digital delivery for mental health services to rural communities.

(2) Participants will learn about the importance of increased accessibility to digital delivery of mental health services to rural communities.

(3) Participants will learn how to promote accessibility and use of digital delivery of mental health services to rural communities.

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Private practice focused on Children and Families for 28-years

What benefits have you experienced with digital delivery of mental health services?

What challenges have you experienced with digital delivery of mental health services?

We will come back to these topics at the end to further discuss and reflect on.

Counseling Digital Delivery

- Telehealth is commonly known as the use of the internet and other technology to provide health related services.

- This technology can be videoconference, chat, or text messaging to interact with clients.

- There is also the use of asynchronous methods to deliver services that include email or webinars.

- Although access to telehealth services in rural communities has increased, this access continues to be difficult for children and adults.

(SAMHSA, 2016)

Counseling Digital Delivery

- The use of telehealth services to meet the increased need of rural communities began in the 1960's.

- The two primary benefits of telehealth services for rural communities are the ability to connect clients to providers located at a distance and being able to further link clients to advanced or specialist care from other locations.

- The use of telehealth services expanded tremendously during the recent COVID pandemic with spending on these services increasing from $306 million to about $3.7 billion between 2019 and 2020.

(SAMHSA, 2016)

Counseling Digital Delivery

- About 20% of the US population resides in a rural community, and mental health and substance use disorders in these rural communities are at least similar or higher than urban communities.

- A survey showed that most rural adults consider mental health the fourth biggest concern and substance use was the fifth largest concern.

- Even with a similar level of need for mental health and substance use services, those in rural communities have less access to care than those in urban communities.

(SAMHSA, 2016)

Counseling Digital Delivery

- Services are often much less available in rural versus urban hospitals, and hospitals in larger rural areas are twice as likely to offer services versus smaller rural areas.
- Research shows that overall rural providers offer less care or services than larger or urban facilities.
  - For example, although research shows a much higher rate of opioid addiction in rural communities, only about 3% of treatment programs are in rural areas.
- A notable difficulty is that most often the most disadvantaged and under-resourced communities are those with the greatest need for services.
  - Research shows that most often private facilities were almost twice as likely to offer telehealth services compared to facilities that receive funding for Medicaid or Medicare.

(SAMHSA, 2016)

Counseling Digital Delivery

- Most mental health care in rural communities is provided by primary care physicians.
    - This is because 90% of psychiatrists and psychologists, and 80% of master's level providers provide service in urban communities.
    - Another reason is the stigma associated with receiving mental health care in rural areas, which is reduced by going to your PCP and not a mental health provider.

- There is a need for increased policy change to promote greater access to mental health care in rural communities while also addressing administrative and reimbursement barriers for rural providers.

(Gale et al., 2010)

Mental Health Stats in U.S. & Maine (NAMI, 2021)

- 1 in 20 U.S. adults experience serious mental illness each year.
  - In Maine, that equates to 61,000 adults.
- 1 in 6 U.S. youth aged 6-17 experience a mental health disorder each year.
  - In Maine, 14,000 youth Mainers aged 12-17 reported having depression.
- Almost 50% of Mainers aged 12-17 who had depression did not receive any care in the past year.
- On average, 1 life is lost due to suicide every 11 minutes in the U.S.
  - In Maine, 270 lives were lost to suicide; 52,000 adults had suicide thoughts in the last year.
- In 2021, 37.5% of adults in Maine reported symptoms of anxiety or depression (during COVID-19 pandemic).

Accessibility to Mental Health Services in U.S. & Maine (NAMI, 2021)

- More than half of people with a mental health condition in the U.S. did not receive any treatment in in the year prior to 2021.

- 65,000 of adults in Maine did not receive needed mental health care; almost half did not because of cost (46.1%).

- Mainers are over 11x more likely to be forced out-of-network for mental health care- making it more challenging to find care.

- 8.1% of people in Maine are uninsured.

- ***260,862 (~ 19% out of 1.372 million total population) of Mainers live in a community that do not have enough mental health professionals.***

Benefits of Digital Delivery

- Telehealth services can help fill the notable treatment gap between rural and urban communities.

- Research shows that telehealth and the use of technology provide similar levels of service satisfaction as clients receiving in-person services.

- Telehealth services have been found to promote collaboration among providers and reduce the sense of isolation among rural providers.

- Telehealth services can also provide a more convenient method to access and receive treatment. This is because of reduced cost or time away, and less missed appointments.

(Cantor, 2024)

Benefits of Digital Delivery

- Benefits to telehealth services include providing private services as residents do not need to leave their homes.

- More intense levels of treatment (i.e., home and community treatment, etc.) could be accessed from specialists located in other areas as well as telehealth can be used to train local providers.

- This can provide enhanced services by those within the same racial and cultural groups.

(Cantor, 2024)

Challenges to Digital Delivery

- Rural community access to mental health services:
    - Shortage of providers
    - Transportation challenges
    - Lack of confidentiality
    - Language challenges
    - Technology challenges

(Freske & Malczyk, 2021)

Challenges to Digital Delivery

- Providers reported numerous concerns and challenges with using telehealth services.
  - These included concern about privacy, confidentiality, and technical difficulties.
  - Other reported challenges were the different legal requirements among states and frequent difficulty getting reimbursed by insurance for telehealth services.
- Individual providers and facilities in rural communities often face similar struggle to protect privacy, and electronic communication and files.
  - This includes the need for HIPAA compliance with telehealth services.
- Rural providers also reported the challenge of often having to treat clients that were outside the scope of their competence or training.

(Cantor, 2024)

Challenges to Digital Delivery

- Less qualified service providers in rural communities.
  - For example, about 75% of US counties report a lack of mental health providers, and about 50% report no mental health providers.
- Estimates suggest a need of close to 8,000 providers to fill these gaps.
- Some of the difficulty for rural communities to recruit qualified mental health and substance use providers include:
  - low pay
  - less family or social opportunities
  - harder time adjusting to rural life

(SAMHSA, 2016)

Challenges to Digital Delivery

- Some of the barriers to mental health and substance use services in rural communities include:
  - lack of access to adequate internet
  - often a long trip to providers
  - a lack of privacy with treatment, as there can be more awareness and closeness among residence of rural communities.

- These residences report concern about being gossiped about their treatment or they are recognized when seeking care.

(SAMHSA, 2016)

Challenges to Digital Delivery

- The need to travel long distance for service is a prominent barrier for those receiving treatment from rural communities.
- Although studies found that rural families tend to have more access to cars than urban families, there are increased concerns about the long distance to travel for treatment.
- These include the longer time away and for older rural residents the concern about driving in the dark.

(SAMHSA, 2016)

Challenges to Digital Delivery

- Research suggests that rural communities tend to normalize mental health, such as depression, and substance use.
- This normalizing can make it difficult to best understand the actual need for care.
- Another factor that makes accessing treatment more difficult in rural communities is that most in these areas feel more self-reliant.

(SAMHSA, 2016)

Challenges to Digital Delivery

- Culturally appropriate care is another concern and barrier for those in rural communities to seek treatment.
- One significant reason for this problem in rural communities is due to the common diversity among race, ethnicity, and culture.
- Although data shows that around 80% of most rural residents are non-Hispanic Whites, as much as 83% of the population growth in rural communities has been from racial and ethnic minorities.
- There is also a diverse economic base in rural communities as well as the median age tends to be older.

(SAMHSA, 2016)

Challenges to Digital Delivery

- Higher rates of poverty exist among those in rural communities.
- The lack of adequate money to pay for services or transportation to services is another significant barrier for those in rural communities to access treatment.
- One connected difficulty is the report that only about 60% of US counties have facilities that accept Medicaid, which is the primary source for service payment among the poor.

(SAMHSA, 2016)

Challenges to Digital Delivery

- Challenges exist for telehealth to adequately meet the mental health and substance use treatment needs of rural communities.
- One significant challenge is the lack of adequate and reliable internet access.
  - However, even with good internet the cost is often too much for rural inhabitants.
  - Studies indicate that about 80% of rural homes had internet versus 85% of urban homes.
  - Although, almost 40% of rural homes with internet lacked enhanced broadband and 20% lacked even basic broadband.
  - This lack of adequate broadband reduces the ability for rural families to access telehealth due to the need for reliable video connection.

(Cantor, 2024)

Challenges to Digital Delivery

- Another prominent challenge for telehealth services in rural communities is the lack of insurance coverage for this type of treatment.
- Although many states are now allowing insurance coverage for telehealth services, research shows that many rural providers do not use telehealth services.
  - For example, a survey of 37 rural providers showed only 25 used telehealth to treat mental health disorders and only 18 reported using telehealth to treat substance use disorders.

(Cantor, 2024)

Challenges to Digital Delivery

- Another challenge for those seeking telehealth services, and particularly those from rural communities, was the wait time for services.
    - In a recent survey of almost 2,000 mental health facilities in the US, wait times ranged from less than 2-weeks in most southern states, to 6-weeks and sometimes longer in Maine, Massachusetts, and New Jersey.
    - In fact, Maine had the longest wait time with some reports indicating those in Maine with depression, anxiety, and OCD waited as long as 10-weeks to connect with a provider. North Carolina had the shortest wait time with four days.
    - These longer wait times came just as the rates of anxiety and depression among young people doubled since the COVID pandemic, and suicide rates increased by 30% since 2000. The survey indicated that one in every three adults in the US experience symptoms of anxiety or depression.

(SAMHSA, 2016)

Promoting Accessibility of Mental Health Digital Delivery Services in Rural Communities

- Know the specific burdens that impact rural area populations.

- Know and understand the language and cultural factors associated with rural area populations.

- Understand rural populations generally have a higher rate of mental health conditions.

- Consider providing mental health treatment in rural areas from time-to-time, if not doing so already.

- Consider researching and providing non-traditional treatment delivery modalities, such as telehealth.

(Gale et al., 2010)

Promoting Accessibility of Mental Health Digital Delivery Services in Rural Communities

If working with counseling students, provide education about the advantages and need with providing mental health services in rural areas.

Advocate for rural populations:

- Increased pay to mental health professionals who work in rural areas.

- Assistance with understanding the referral process and access to mental health services.

- Increased support with transportation to and from services.

- Access to insurances and reimbursement programs.

- Contact local, state, and national organizations, representatives, and legislators to advocate.

Reflection

What can you do to help promote digital delivery of mental health services in Maine rural communities?

Summary

- Digital delivery of mental health services to rural communities is essential to help provide treatment to underserved populations.

- Counselors should know and understand the many challenges and benefits to providing digital delivery mental health services to rural communities.

- Find ways to help promote the accessibility of digital delivery services to rural communities.

- If you can, try to provide services to rural communities to help support those who may not be able to access ongoing mental health services.

Questions?

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