

An Evolution of Substance Use & Mental Health Treatment

The Post-Pandemic Need for Technological Change

Kristen Mitzel
June 2021



How to move forward in an age where internet access is a **necessity** to receive adequate health care

THE INSTITUTE OF
**FAMILY & COMMUNITY
IMPACT**

 An OhioGuidestone Initiative

FamilyandCommunityImpact.org
IFCI@ohioguidestone.org
440.260.8865

SUMMARY

Substance use disorder and mental health treatment via telehealth has abruptly become a necessary means of health care delivery during the COVID-19 pandemic. Meanwhile, substance use disorder is on the rise, likely due in part by the social isolation and added stress of the pandemic. Thus, in order to respond adequately to the need for substance use disorder treatment, telehealth options are a must for clients. While the technological ability for providers to reach clients remotely can potentially make an extreme impact moving forward, clients need reliable and consistent access to the internet for telehealth to work effectively.

WHO SHOULD USE THIS PAPER

- Mental health providers
- Policymakers
- Public health officials
- Insurance providers and managed care organizations
- Internet service providers and telecommunications companies
- Recovery groups and advocates

TAKEAWAYS & ACTION ITEMS

- COVID-19 has led to an abrupt increase in telehealth-delivered health care, including substance use and mental health treatment.
- Use of substances, particularly opioids and stimulants, and reported overdoses have increased during the pandemic.
- In addition, people with substance use disorders have been disproportionately impacted by COVID-19 and are at greater risk of developing severe symptoms.
- Healthcare providers have made adjustments during the pandemic to increase client accessibility to treatment, including medications, but more needs to be done to ensure all clients in recovery have adequate access to care.
- Because of its significance for health care delivery and other basic needs, internet access is no longer a luxury item, but a household necessity.
- The infrastructure of internet providers needs to expand to areas with limited or no access, and internet service should be treated as a basic utility.

THE INSTITUTE OF
**FAMILY & COMMUNITY
IMPACT**

 An Ohio Guidestone Initiative



An Evolution of Substance Use and Mental Health Treatment

The Post-Pandemic Need for Technological Change

Kristen Mitzel, *OhioGuidestone*

Introduction

The COVID-19 pandemic has taken a toll on nearly every person, industry, and country in the last 18 months and has forced several businesses and industries to quickly adapt in a time of uncertainty, to supply customers with the supplies and care they need. For the medical and mental health industry, many enterprises, organizations and offices turned to telehealth as a quicker, more efficient way to deliver care to the consumer. Telehealth, although not a new concept, faced a sharp upward trend of utility throughout the world-wide pandemic, where social distancing would have otherwise prevented citizens from receiving care from their providers. Utilizing telehealth not only can provide a wider scope of care for patients, but also can preserve important personal protection supplies, reduce disease exposure for patients and staff, and increase overall accessibility to those who otherwise might not have been able to receive their care (Koonin et.al., 2020). While the intent behind this new expanded format of healthcare delivery has been beneficial during the COVID-19 pandemic, some forms of health care have been more impacted than others.

The Impact of COVID-19 on Substance Use Disorders

Substance use disorder is on the rise due to the COVID-19 pandemic, particularly opioid and stimulant use (APA, 2021), where there is increased frequency and quantity of use, as well as an increase in reported overdoses. Social distancing and increased feelings of isolation seem to be factors helping to exacerbate frequency of illicit substance use.

Additionally, someone who has a substance use disorder is 1.5 times more likely to contract COVID-19, and are more likely to experience severe symptoms of COVID-19, according to the National Institute on Drug Abuse (2021): “While research on how substance use affects susceptibility to

COVID-19 is evolving, smoking and substance use disorders are on a list of underlying medical conditions associated with high risk for severe COVID-19 illness compiled by the Centers for Disease Control and Prevention.”

In addition to increased severity of COVID symptoms, those with a substance use disorder are also experiencing the social and economic changes the pandemic has brought about, including increased sense of isolation, difficulty with treatment ad-

herence, and access to consistent treatment. The COVID-19 pandemic has caused clients to have to wait longer to receive adequate treatments, causing the patients stress and strain as they attempt to wait out their symptoms for some additional assistance. Inpatient facilities experienced a shortage of beds, difficulty acquiring personal protection equipment for the facility staff, and potential patients have needed to obtain additional medical clearance in order to be admitted.

“While research on how substance use affects susceptibility to COVID-19 is evolving, smoking and substance use disorders are on a list of underlying medical conditions associated with high risk for severe COVID-19 illness.”

The National Institute on Drug Abuse

Along with this strain on the inpatient facilities, outpatient facilities have also faced serious repercussions of the pandemic, including closing altogether, unless the facility had the ability to transfer over to telehealth

and deliver services remotely to their clients (Pagano et. Al., 2021). With many services on hold indefinitely, the ability for substance use treatment facilities to be as effective as they were prior to the COVID-19 outbreak is exceptionally challenging, leaving many of those effected by a substance use disorder without enough treatment resources through a challenging societal time with limited employment opportunities and social engagement, effectively leading to a severe increase in substance use disorder symptoms and severity.

Telehealth: A Shift in Care Delivery

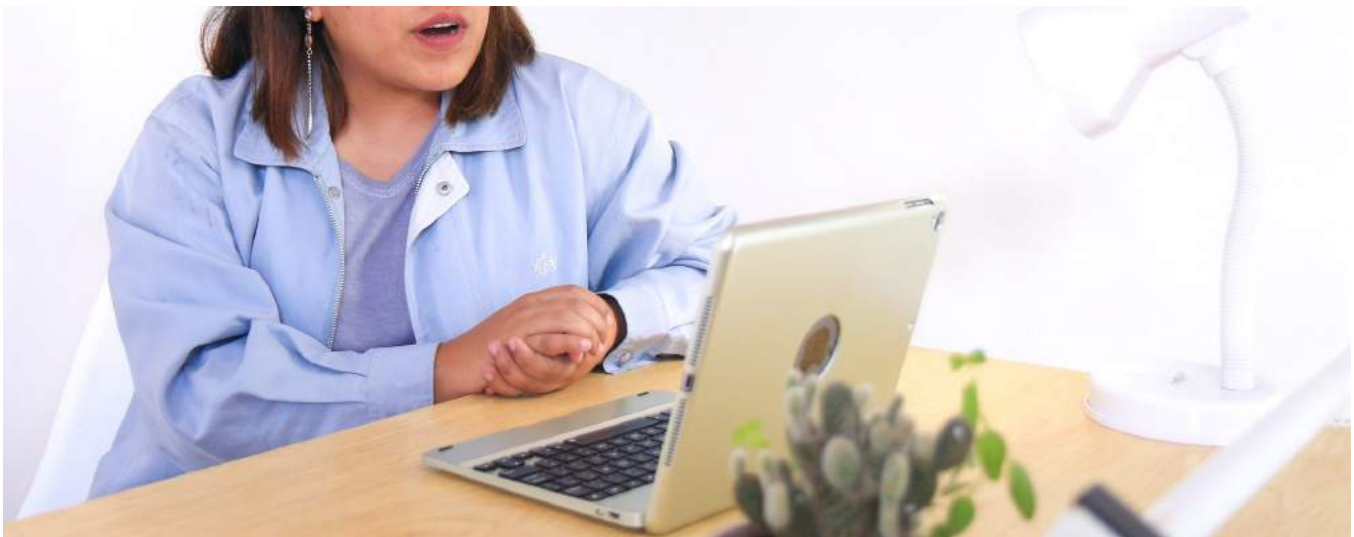
Telehealth and remotely delivered healthcare services, even beyond substance use disorder treatment regimens, have been on the rise since many countries have implemented social distancing and stay at home orders. According to the National Institute on Drug Abuse (2021), several policy changes have been implemented to increase accessibility to substance use treatment, including the ability to obtain methadone, a narcotic commonly prescribed to substance use disorder clients during medicated assisted treatment, without daily provider supervision.

Additionally, Medicare and Medicaid are more readily reimbursing for substance use disorder telemedicine consultations, thereby increasing accessibility for those who may be immunocompromised, or those who do not have the ability to obtain treatment in person locally, due to stay-at-home orders and other barriers, such as transportation and facility limitations (NIDA, 2021). Patients deemed stable are able to take home 14 or 28 days of doses of medications, such as buprenorphine, instead of repeating weekly visits. These advance-

ments are effectively aiding in some client's ability to receive treatment during this particularly difficult time, but there are still necessary actions to be taken to ensure accessibility to telehealth for many clients moving forward.

While COVID-19 was surely a catalyst in progressing telehealth forward for service delivery, it is outpacing the scientific research regarding effectiveness, optimal delivery, and client accessibility.

As the research is reviewed and providers adapt to new ways of delivering services, telehealth can be an exceptionally effective modality for service delivery and consistency for clients, and helps to break down many economic barriers to treatment, such as transportation, inability to receive time off from employment, and child care during appointments (Coughlin, Bonar & Bickel, 2020). The technological ability for providers to reach clients remotely can potentially make an extreme impact moving forward, but for telehealth to work effectively and promptly, clients need reliable and consistent access to the internet.



Need for Telehealth Accessibility: Broadband Internet Is a Basic Utility, Not a Luxury Item

As the world progresses technologically, the need for internet access is increasing to the point where it is nearly no longer a luxury item, but a necessity for a household to achieve a variety of tasks, such as children's schooling, banking, paying bills, and healthcare visits.

COVID-19 has demonstrated in a variety of ways that internet is becoming a basic necessity, not only for the aforementioned reasons, but this technology has been some citizens' only relief from social isolation over the last 18 months. A lack of internet connection prevents students from completing their school work, unemployed workers from looking for remote or in-person employment opportunities and applying, and university students from taking exams or submitting assignments. Those without adequate internet connection have been severely disadvantaged throughout the COVID-19 lockdown, and it is time for policy and infrastructure to support internet access as a utility and a basic need for households across the country.

Without internet connectivity, it is nearly impossible to participate in the economy, culture, and society, and for 30% of Americans at the beginning of the COVID-19 lockdown, lack of digital connectivity has forced this population to seek connection elsewhere, such as their mobile devices.

And if they do not own a cell phone, many have no choice but to seek out connection outside of fast food restaurants that have remained open, or other free Wi-Fi networks. This is also only an option provided that the client has access to these areas. Clients in need of telehealth options living in rural areas do not have the same accessibility to community Wi-Fi networks, further demonstrating that internet needs to be viewed as a basic need, such as water and groceries, not as a luxury item.

Because there is minimal competition between internet providers within the United States, competition does not drive down the pricing as demand remains high. Without competition, larger corporations are able to charge any amount desirable for the service, amounts that are often out of reach for many Americans.

Affordability seems to be an obstacle that is easily mitigated in order to provide this essential need for those who cannot access the internet from their homes (University of Birmingham, 2019). Especially as the technological world moves forward, cutting off marginalized and rural populations from internet access will further prevent their ability to obtain jobs, participate in the economy, receive educational opportunities, and receive essential healthcare treatment.

Conclusion

To progress from here, the infrastructure of internet providers needs to expand to areas that are currently operating on slower bandwidth, or to those who do not have access at all. Additionally, federally funded programs for providing internet access to those who are unable to afford the high costs of the monopolized providers need to become available to rural and highly populated areas alike, in order to provide the best outreach.

Recognizing that internet access is no longer a luxury item, but a basic utility is a progressive step in the right direction for delivering not only substance use disorder treatment, but healthcare of many varieties, providing an avenue for political and societal participation, economic participation, and education for those affected by the COVID-19 pandemic, and into the future, where technological advances will continue to impact societies of all types.



REFERENCES

American Psychological Association. (2021). *Substance use during the pandemic*. Monitor on Psychology. <https://www.apa.org/monitor/2021/03/substance-use-pandemic>

Coughlin, L. N., Bonar, E. E., & Bickel, W. K. (2021). Considerations for remote delivery of behavioral economic interventions for substance use disorder during COVID-19 and beyond. *Journal of Substance Abuse Treatment, 120*. <https://doi.org/10.1016/j.jsat.2020.108150>

Koonin, L., Hoots, B., Tsang, C., Leroy, Z., Farris, K., Jolly, B., Antall, P., Harris, A., Tong, I., Zelis, C., & McCabe, B. (2020). *Trends in the Use of Telehealth During the Emergence of the COVID-19 Pandemic - United States, January–March 2020*. Centers for Disease Control and Prevention. <https://www.cdc.gov/mmwr/volumes/69/wr/mm6943a3.htm>

National Institute on Drug Abuse. (2021). *COVID-19 & Substance Use*. National Institute on Drug Abuse. <https://www.drugabuse.gov/drug-topics/comorbidity/covid-19-substance-use>

Pagano, A., Hosakote, S., Kapiteni, K., Straus, E. R., Wong, J., & Guydish, J. R. (2021). Impacts of COVID-19 on residential treatment programs for substance use disorder. *Journal of Substance Abuse Treatment, 123*, 108255. <https://doi.org/10.1016/j.jsat.2020.108255>

University of Birmingham. (2019). Free Internet access should be a basic human right: Study. *ScienceDaily*. <https://www.sciencedaily.com/releases/2019/11/191111084929.htm>

Find our white papers online at familyandcommunityimpact.org/white-papers.

Joyful Together®: Addressing and Preventing Childhood Toxic Stress in Ohio

Brittany R. Pope & Rose Frech

Lived Experiences' Effects on Health: An Introduction to Social Determinants of Health for Community Mental Health

Sharmika Primm

CBT: Is Its Evidence-Base Valid for Mental Health Treatment in Community Settings?

Brittany R. Pope, Reinhild Boehme, & Isabella Hu

“Just Try Harder” Doesn’t Heal: Addressing the Therapeutic Needs of Clients in Community Mental Health Treatment with Evidence-Based Innovation

Maic D’Agostino, Brittany R. Pope, & Reinhild Boehme

Informational: Perception of Hope for Substance Use Disorder Treatment in Ohio

Kristen Mitzel

We Cannot Talk About Substance Use Without Talking About Mental Health

Kristen Mitzel

Lead Poisoning & Behavioral Health: Increased Referrals for Treatment Can Mitigate Long-term Consequences of Childhood Lead Poisoning

Brittany R. Pope, Isabella Hu, & Maic D’Agostino

Expand Insurance Coverage of the PLAY Project to Support Developmental and Relationship-based Treatment of Young Ohioans with ASD

Kristen Mitzel, Ashley Cunningham, & Maic D’Agostino

OhioGuidestone’s Impact on Ohio’s Health Value: A Response to HPIO Strategies to Improve Ohioans’ Health

Maic D’Agostino & Brittany R. Pope

Push for PROMs: Patient-Reported Outcomes Are Necessary for Evidence-Based & Client-Centered Community Mental Health Treatment

Brittany R. Pope, Isabella Hu, Maic D’Agostino, Whitney Yoder, & Emily Fagan

Statewide Demonstration of the Effectiveness of Mental Healthcare via Telehealth Required Before New Rules and Presentation of “An Algorithm of Tele-Mental Health Care”

Benjamin Kearney, Brittany R. Pope, & Maic D’Agostino

Addressing ACEs by Closing the Divide Between Community Mental Health and Primary Care Screening: Training, Innovation, and Local Primary Care Partnerships

Brittany R. Pope

Preventing Harm and Deaths from Racism and Poverty: The Need to Eradicate Sources of Toxic Stress in Our Communities to Improve Public Health

Maic D’Agostino & Brittany R. Pope

Altering the Path Our DNA Paved: Epigenetics and OhioGuidestone’s Theory of Change

Maic D’Agostino

The Danger of Misusing Prevention Data: Resisting Pathologization and Hypersurveillance in Behavioral Health Screenings Through Trauma-Informed, Community-Centered Prevention Strategies

Maic D’Agostino