

Cut off from counseling during the coronavirus pandemic? There are options

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Keeping away from one another is crucial for stopping the coronavirus.

But that distancing also risks keeping people away from vital support.

"It's a real danger," said Mike Marshall, executive director of Oregon Recovers, a coalition of addiction recovery groups. People in recovery, he said, rely on group meetings to provide community and accountability. Showing up regularly to say, "I'm Mike, I'm an alcoholic," is a way of defining his problem while asking for help from people in the same room.

"I don't have that anymore" because of the coronavirus, he said. "And then, on top of that, our whole lives changed, too," heaping financial and familial pressures on people already struggling.

The problem goes beyond 12-step groups and ranges from people being treated for depression to couples working to repair their relationship.

Matt Mishkind, deputy director of the Helen and Arthur E. Johnson Depression Center at the University of Colorado School of Medicine in Denver, is concerned about families learning to juggle work and school at home. "We're going to start to see a lot more parenting issues come out, and probably more need for family services as well," he predicted.

People in need can find several ways to reach out. Marshall said the problem facing those trying to recover from addiction is urgent.

"It's a matter of life and death," he said. "Already in Oregon we lose five people a day to alcohol-related deaths and one to two to drug overdoses. I have no doubt that that number has shot up since this has happened."

Mutual aid meetings, such as Alcoholics Anonymous, operate independently. That makes it difficult to coordinate change.

Many meetings shut down, while others moved online, Marshall said. His

organization quickly pulled together a list of online gatherings and other resources at oregonrecoverynetwork.org.

He sees them as a stopgap. "Being in a room and hearing someone's story or challenges or solutions is a very different experience than watching it online or being on a telephone," he said.

But therapy over video is hardly new. And Mishkind, who has helped develop telehealth programs, said research and clinical practice shows they can provide mental health care on par with face-to-face meetings.

In some cases, video can be an advantage, he said. The distancing effect can make some people more willing to disclose information. Especially relevant right now, he said, is it can reach people who can't get to a therapist's office.

Research shows patients tend to be initially happier with it than providers. After Mishkind's own clinic went fully online because of social distancing, a colleague said clients almost immediately started telling him, "Wait a second. I could have been done doing this the entire time?"

But he acknowledged groups can be hard to manage online. Organizers might miss those "subtle things happening out of the corner your eye." But the technology has advantages there, too. Educational materials are easy to share, for example. And organizers can use the mute function "so you don't have people talking over each other."

Julie Kubala of Superior, Wisconsin, is a fan of the type of support she's found online.

After a heart attack in 2016, she participated in various online forums and cardiac rehabilitation, which includes in-person counseling. She also

just completed an outpatient program, which included group sessions, to help with post-traumatic stress disorder after a near-fatal car accident.

She's usually tech-averse but is a fan of her online community, which she likened to a "beacon in the night" when she discovered it. And, she said, everything she got there was as good as what she got from her in-person group.

The convenience, even before social distancing, was a big factor for someone in a small community. "I could access it after work," she said. "I could access this stuff at four in the morning when I couldn't sleep at night."

For people without [internet access](#) or who aren't comfortable with computers, phone therapy is another option, Mishkind said. Research shows what's known as asynchronous therapy, such as text messaging with a licensed professional, also may help.

People who need [mental health care](#) should start by reaching out to their existing provider, if they have one, and insurance company to confirm what services are covered, he said. A clinician can decide whether the issue is something that can be handled via telehealth, he added.

An employee assistance plan also can steer people toward help.

Marshall suggested people dealing with addiction first seek help by calling someone they know in recovery. In addition, each state has an addiction helpline. Alcoholics Anonymous provides a listing of online meetings at aa-intergroup.org.

People with preexisting mental health conditions need to continue with their treatment during the crisis, according to the Centers for Disease Control and Prevention. It refers people to the Substance Abuse and

Mental Health Services Administration's Disaster Distress Helpline at 800-985-5990. And Marshall said even in the time of [social distancing](#), everyone can provide a human touch.

"If you know someone in recovery, reach out to them," he said. "Even if they seem like they have it together. These are really trying times."

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