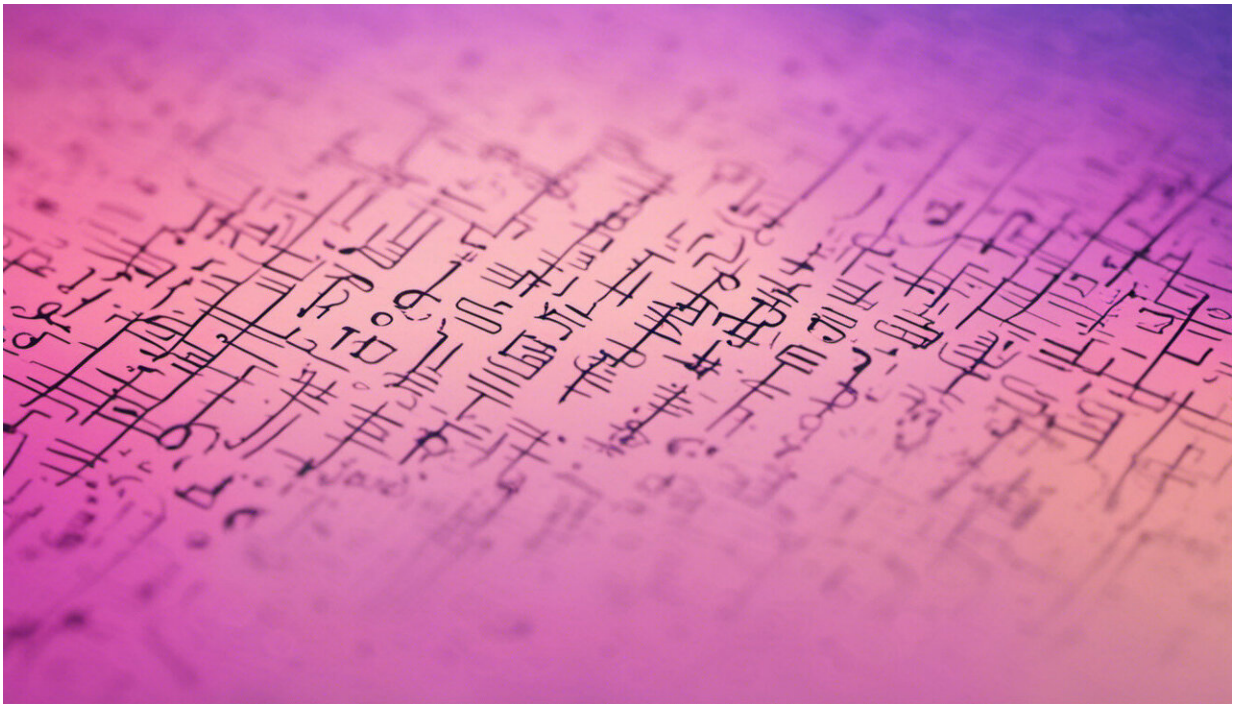


# Coronavirus has boosted telehealth care in mental health, so let's keep it up

May 6 2020, by Ian Hickie and Stephen Duckett

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Credit: AI-generated image ([disclaimer](#))

Australia's health system has [embraced telehealth](#) during the coronavirus pandemic, with patients getting care online, by video or by phone. But what happens to this post-pandemic is uncertain.

Unfortunately, the pandemic's spatial isolation converted quickly into

[social isolation](#), and this created [stress and anxiety](#) for many. All of this means that after the pandemic, there will be a surge in [demand for mental health services](#).

Read more: [How to manage your blood pressure in isolation](#)

This extra demand will put still [more pressure](#) on an already overloaded [mental health system](#).

## Digital help is on hand

It's crucial that public and private [mental health services adopt new technologies](#) now to help meet this future demand.

Compelled by the massive health services dislocation accompanying the COVID-19 pandemic, Medicare this year finally moved to support for the most basic form of [telehealth](#), supporting both telephone and video consultations.

That's 144 years since [Alexander Graham Bell](#) produced the first working telephone in 1876. Let's hope it doesn't take quite as long for our general health care system, and particularly our mental health system, to incorporate the power of 21st-century digital technologies.

Read more: [Want to Skype your GP to avoid exposure to the coronavirus](#)  
? Here's what you need to know about the new telehealth option

Australians are fortunate to have already benefited from many innovations in digital mental health care, such as [moodgym](#), [eHeadspace](#) and [Project Synergy](#), all offering online support to people in need.

This has been led by partnerships between major universities, non-government organizations and industry.

[ReachOut](#) was the world's first online service when it launched in Australia in 1996 to reduce youth suicide.

## Slow uptake of telehealth services

But telehealth systems have not been widely deployed or accessed. Of the [2.4 million visits to psychiatrists in 2018-19](#), only [66,000](#) involved [telehealth](#).

Clearly too many Australians who seek [mental health care](#) do not gain the potential benefits of what's available in telehealth innovation.

This failure is not unique to Australia. Pre-COVID-19, the World Economic Forum [highlighted](#) the massive gap in mental health service provision between developed and developing countries. It's calling for rapid deployment of smarter, digitally enhanced health services.

The [World Health Organization](#) and every other major health body is warning of the urgent need to expand mental health services in response to the economic and social dislocation caused by the pandemic.

The cruel lesson of past economic recessions is that for people hit hardest, [mental health deteriorates rapidly](#). Without a swift and targeted response, [suicide attempts and death by suicide](#) will increase.

## A boost to the system

To prevent this in Australia, we need widespread social and welfare investments and a better mental health system.

Pre-COVID-19, the Productivity Commission in its [draft report on Australian mental health care](#) highlighted a lack of sustained investment

(relative to the social and economic costs of poor mental health), poor coordination and a fundamental lack of responsiveness to the needs of those most affected.

It also called for more prevention and early intervention measures, particularly for children and young adults.

Australia has [two separate mental health systems](#). State-based systems are highly focused on emergency departments and acute and compulsory care. These benefit principally the smaller number of people with very severe and persisting illnesses.

Private hospitals provide additional hospital beds to people with private health insurance, but also support day programs that cost a lot but provide limited value.

The upshot is that Australia has a missing middle—big service gaps for the people most in need of care.

We need more specialised but outpatient care and multidisciplinary care for those in need. That means GPs, psychiatrists, psychologists, nurses and other skilled health workers, working in coordinated team structures. These services are desperately needed in outer urban, regional and rural communities.

## **A digital future, now!**

A digitally enhanced, 21st century-style mental health service may be the answer.

[Smart digital systems](#), such as smartphone apps and other technologies, can help to assess quickly the level of need and direct people to the best available clinics.

They can help our highly talented mental health professionals [provide better care](#). They also bring the world of other tools, [peer support](#) and enhanced social connections to the client, no matter where they are located.

Access to online forms of [cognitive-behavioral therapy](#), such as those offered by [Mindspot](#), [THIS WAY UP](#) and other evidence-based psychological interventions can be delivered to meet demand.

These innovations can bring real expertise to the lounge room of those in rural and regional areas who typically live most distant from quality face-to-face care.

In one of our [research trials](#), a child and adolescent psychiatrist operating in Bogota, Colombia, was able to provide same-day specialized assessments to young people in Broken Hill, New South Wales.

Mental health services in Australia have already been radically transformed during the pandemic. Video-style consultations are now central to the work of mental health professionals.

Psychologists and psychiatrists all around the country are reaching out to their clients online. Many clients find it much more convenient and far less costly than attending regular clinics.

## **Time to act**

The digital future is not just about making small changes. A digitally enhanced future for mental health involves a fundamental rethinking of models of care.

Read more: What can you use a telehealth consult for and when should you physically visit your GP?

Online or helpline-supported screening tools should be used to guide people along the best, evidence-based [treatment path for them](#).

Primary health networks—the regional health authorities funded by the commonwealth to coordinate primary care—should ensure the services they commission are using digital technology appropriately and tracking the provision of care.

These new forms of [digitally enabled care](#) will make the whole mental health system more efficient, freeing up resources to help the backlog of Australians who need more intensive clinical care.

Australia's governments must seize the opportunity that COVID-19 has created. Digital systems must now be viewed as essential health infrastructure, so that the most disadvantaged Australians move to the front of the queue.

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