

Telehealth and MOUD

“COVID-19 will continue to impact the way that technologies are integrated into...clinical care and research long after the removal of social distancing policies, making it important to begin investing in the knowledge, infrastructure, and implementation of these technologies now to be prepared for the future.”

—Sean D. Young & John Schneider, May 2020

CODAC Behavioral
Healthcare transitions
from in-person to
virtual

Partners with Brown
University to assess
how change impacts
therapeutic
relationships

Survey patients and
clinicians with Likert
scale and open-ended
questions

Methods included:
Study 1: Qualitative
thematic coding of
open-ended questions

Study 2: Concurrent mixed methods,
thematic codes used in a binary logistic
regression to predict counselor valency

| Patient experience (n=264) | Counselor experience (n=42) | Patient-identified barriers |
|--|---|---|
| 78% Positive Valency 22% Negative Valency | 69% Satisfied 19% Neutral 12% Dissatisfied | 83 patients identified one or more barriers |
| Factors that influenced positive experience Convenience, feelings of being supported by their counselor, a sense of safety | Factors that influenced positive experience Greater comfort, more convenience, increased safety, increased flexibility | Top barriers identified No privacy when taking a call (n=24), unstable Phone, computer, or tablet unavailability (n=22) Preference for traditional office visits (n=17) |
| Factors that influenced negative experience The impersonal nature of the experience, or a general dissatisfaction with their counselor. | Factors that influenced negative experience Impersonal nature of the experience, lack of client availability. | Satisfaction with counseling, perceived convenience, comfort, and beneficial effects of counseling on substance use were associated with increased odds of reporting no barriers |

What predicted greater positive counselor perceptions in binary regression? Believing it helped with substance use recovery, finding it more comfortable, finding it more convenient, and believing it improved relationships with clients

TAKEAWAYS

- ✓ Telephone counseling for MOUD may increase treatment access and engagement.
- ✓ Future efforts should integrate various telehealth approaches.
- ✓ Future research should examine, attempt to explain, and proactively mitigate negative patient experiences and potential barriers such as the impersonal nature of the experience.

Sources: Young, S. D., & Schneider, J. (2020). Clinical care, research, and telehealth services in the era of social distancing to mitigate COVID-19. *AIDS and Behavior*, 24(7), 2000-2002. Kang, A. W., Walton, M., Hoadley, A., DelaCuesta, C., Hurley, L., & Martin, R. (2021, June). Patient experiences with the transition to telephone counseling during the COVID-19 pandemic. *Healthcare* (Vol. 9, No. 6, p. 663). MDPI. Martin, R., Kang, A. W., DeBritz, A. A., Walton, M. R., Hoadley, A., DelaCuesta, C., & Hurley, L. (2021). Medication for opioid use disorder service provision and telephone counseling: A concurrent mixed-methods approach. *International Journal of Environmental Research and Public Health*, 18(11), 6163. Kang, A. W., DeBritz, A. A., Hoadley, A., DelaCuesta, C., Walton, M., Hurley, L., & Martin, R. (2022). Barriers and poor telephone counseling experiences among patients receiving medication for opioid use disorders. *Patient Education and Counseling*.