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IN THIS ISSUE

The paper “Recent Advances in Delivering Mental Health Treatment via Video to Home,” co-authored by Terri Fletcher, et al., was published in *Current Psychiatry Reports* in August 2018. Fletcher is a clinical psychologist and health services researcher at the Center for Innovation in Quality, Effectiveness, and Safety at the Michael E. DeBakey VA Medical Center in Houston.

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## HEALTH POLICY research

Rice University's Baker Institute for Public Policy-Baylor College of Medicine  
Joint Program in Health Policy Research

### Is video-delivered mental health treatment as effective as in-person treatment?

“Yes. Using video-to-home technology platforms, patients can now access the same high-quality mental health care they would receive at an in-person clinic visit in the comfort of their own homes,” says Terri Fletcher, Ph.D., a clinical psychologist and health services researcher at the Michael E. DeBakey VA Medical Center in Houston.

Many individuals face logistic or stigma-related barriers to utilizing in-person mental health care. For others, the very symptoms they are seeking care for, such as anxiety or depression, may make it difficult to leave their home and travel to a mental health clinic. The expansion of mental health services directly to patients' homes allows mental health providers to reach patients who are unable to attend in-person appointments for any of these reasons, and extends care into rural communities facing a shortage of mental health care providers. While increased access to care is a clear benefit, patients, providers, and policymakers want assurances that the quality of video-delivered mental health treatment is comparable to in-person mental health treatment.

Fletcher and her colleagues conducted a review of the recent literature on video-to-home mental health care to examine the clinical effectiveness of this mode of delivery in comparison to in-person mental health treatment. The review also reported patient and provider satisfaction with this mode of delivery. Of the 10 studies included in

the review, nine involved video-delivered psychotherapy and one involved video-delivered psychiatric medication management services. All 10 studies reported significant decreases in symptoms following video-to-home mental health treatment for a variety of mental health conditions including depression, post-traumatic stress disorder, substance use, and obsessive-compulsive disorder. Eight of the studies were randomized controlled trials comparing the clinical effectiveness of video-to-home delivery to in-person delivery. The findings from these studies suggest that mental health treatment delivered to patients' homes by video is as effective as in-person care.

Patient satisfaction with video delivery of mental health care was high, with 77-99% of those surveyed reporting they would like to receive their care this way again. The few studies reporting on provider satisfaction found that providers with no experience delivering treatment via video-to-home were concerned the delivery option wouldn't be a good fit for their patients, whereas providers experienced in this modality viewed it as an effective method of treatment delivery comparable to in-person care.

Overall, these results suggest that video-to-home delivery of mental health treatment is safe and effective. For patients facing barriers to in-person care, video telehealth may be the only feasible option to access needed mental health care.

**HEALTH POLICY** research presents a summary of findings on current health policy issues. It is provided by **Vivian Ho, Ph.D.**, James A. Baker III Institute Chair in Health Economics and director of the Center for Health and Biosciences at Rice University's Baker Institute for Public Policy, in collaboration with **Laura Petersen, M.D., MPH**, chief of the Section of Health Services Research in the Department of Medicine at Baylor College of Medicine.

This publication aims to make research results accessible to regional and national health policymakers. The views expressed herein are those of the study authors and do not necessarily represent those of the Baker Institute or of Baylor College of Medicine.

The Baker Institute and Baylor College of Medicine's Section of Health Services Research work with scholars from across Rice University and Baylor College of Medicine to address issues of health care — access, financing, organization, delivery and outcomes. Special emphasis is given to issues of health care quality and cost.

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