

# PAGNY The Impact of Telehealth on Mental Health Treatment Engagement in Urban Settings

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## INTRODUCTION BACKGROUND

During the COVID-19 Pandemic, children and adolescents with previous psychiatric diagnoses presented with exacerbated symptomatology given increases in psychosocial stressors. Health inequality was most paramount during the height of the pandemic, with disparities in technology and privacy. Few studies looked at the current effects of telehealth on patient engagement or whether it has impacted in-person service delivery, particularly in urban settings. Participants of the study are current and former patients of the Child and Adolescent Psychiatric Services Department (CAPS) aged 5 to 18. The patient population treated at CAPS is representative of the diverse community of the South Bronx, an urban city in New York where a high percentage of the patients are recent immigrants and families living below the poverty line.

## OBJECTIVE/HYPOTHESIS

Did COVID-19 increased the need for mental health care in underserved populations? Given structural and cultural barriers to mental health treatment, will there be a relationship between patient show rates and type of service delivery among child and adolescent patients in an urban setting?

## METHODS

Participants were eligible for the study if they previously or currently receive mental health services through CAPS. Correlation analyses were conducted to determine the relationships between show rates, type of service delivery, race/ethnic, sex, age, and financial class. An ANOVA was conducted to determine whether there is a difference between show rates, pre, during, and post the height of COVID-19 and whether there is a difference between show rates based on service delivery type.

## RESULTS

- A one-way ANOVA was conducted to compare the effects of show rates for pre, during, and post the height of COVID-19. A statistically significant difference was found among show rates across the three time periods,  $F(2, 22940) = 242.11, p = .001$
- A one-way ANOVA was conducted to compare the effects of appointment type (in-person vs. virtual) on show rates. There was a statistically significant difference among show rates and appointment type,  $F(1, 22941) = 565.633, p = .001$
- Correlations were conducted to examine the relationship between show rate, age, and financial class. Show rates were significantly negatively related to age  $r(22940) = -.027, p < .001$ . Show rates were significantly positively related to financial class  $r(685) = .087, p = .024$

## TABLES

Table 1: Show Rate Based on Appointment Type

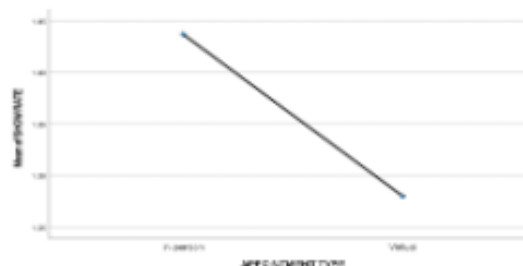
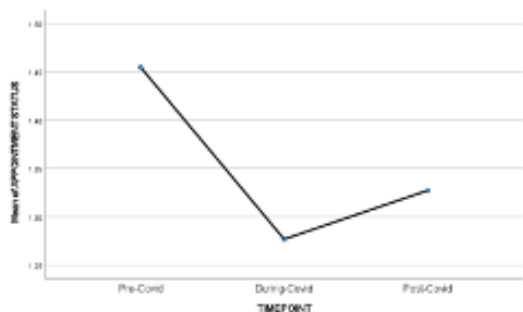


Table 2: Show Rates Across Time



## DISCUSSION

Results indicate that patients were more likely to present to their mental health appointments when the sessions were conducted by telehealth, either by phone or video. Study finding also found that patients were also more engaged in mental health treatment during the height of the pandemic, which supports previous research that reports exacerbated symptomatology in children with prior psychiatric diagnoses during the pandemic. Additional correlational analyses found that teens are more likely to show for telehealth sessions. Patients using public insurance (medicaid) were also more likely to show for virtual visits than in-person visits. Some limitations of the study include patient demographics, availability of video sessions during the height of the pandemic, and type of service provided.

## CONCLUSIONS

Research shows that poor access and utilization of healthcare in racial and ethnic minority populations is significantly influenced by structural factors, such as transportation, costs of visits, lack of insurance, inability to take off work, and childcare needs. Our study finding suggest that access to telehealth (telephone or video) sessions for mental health needs in urban settings, decreases structural barriers towards treatment and increases utilization of mental health services.

## REFERENCES

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