Effectiveness of teleconsultation use in access to mental health services during the coronavirus disease 2019 pandemic in the Dominican Republic

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ABSTRACT

Background: The unique aspects of the global situation with respect to the 2019 novel coronavirus disease (COVID-19) pandemic places a significant burden on health and mental health services. During this period, there has been an increased demand in mental health-care services, whose prepandemic access was lower than necessary in many developing countries and is currently limited by international social distancing recommendations and protocols.

Aim: This study aims to determine the effectiveness of teleconsultation use to increase access to mental health services, provided by volunteer staff during the quarantine of the COVID-19 pandemic in the Dominican Republic.

Materials and Methods: A special telephone service was enabled, organized by different governmental and private entities, in addition, it was published a list of telephone numbers of a team of volunteers consisting of 598 psychologists and seventy psychiatrists, who interacted from March 25 to May 17 with people who needed their help using calls, video calls, and electronic messaging services. After providing mental healthcare, each volunteer completed an online form to record relevant consultation data provided with a total of 6800 interventions to date.

Results: Nearly 67.3% of the interventions were requested by women. About 77.8% were adults between the ages of 18 and 59. 27.1% of the interventions were requested by people who worked as health personnel. Forty-six percent of the interventions were requested by people living in the province of Santo Domingo and 4.8% by people living outside the country. Of the interventions, 43% reported anxiety, 26%, sleep problems, 15%, depression, and 2% reported behaviors related to suicide. Of all the interventions, 5.3% required referral to a crisis intervention unit for face-to-face follow-up.

Conclusions: The enablement of this teleconsultation model and the number of interventions made during this period of the COVID-19 pandemic, suggests that access to mental healthcare in the Dominican Republic has increased. Problems with anxiety, sleep, and depression are common during the COVID-19 pandemic. Only a small group of patients have needed to be referred for face-to-face care, demonstrating that teleconsultation has been an effective tool.

Key words: Coronavirus disease 2019, mental health services, public health surveillance, telemedicine
INTRODUCTION

The coronavirus disease 2019 (COVID-19) pandemic represents one of the most impactful global health situations of this century. At the time of its discovery at the end of 2019 and in the 1st month of its spread, the COVID-19 outbreak was a situation totally alien to the health systems of Latin America and the Caribbean. Despite this, their high impact on various aspects of health services in Europe, Asia, and Australia was already known worldwide. By its nature, pandemic stress negatively affects the mental health of the world’s population.[1]

In Europe, countries severely affected by the COVID-19 pandemic have struggled with the spread of infection, having to make rapid changes to their health system and service implementation structure, including mental health services. In Italy, one of the highly affected countries, efforts have been made to restrict the number of health personnel working at the same time and take other measures such as social distancing protocols on a regular basis with mental health patients, in addition to this, the use of online videoconferences has been implemented for both health staff meetings and for consultations and visits of family members where physical presence is not necessary.[2]

In China, measures taken around mental health services not only focus on changes in the organization of services but also efforts have been made for emergency psychological crisis interventions in response to the immeasurable stress burden of changes in personal care measures, social distancing, confinement, and labor and economic consequences represented by the COVID-19 pandemic for medical staff and the general population. This situation has led to an increase in psychological problems, including anxiety, fear, depression, and sleep problems. The National Health Commission of China has considered the inclusion of psychological interventions in the general population as part of disease prevention during quarantine to be important, but appropriate access to these interventions in the context of quarantine transit constraints has been widely adopted.[3]

In view of the impossibility of maintaining access to mental health services and continuing social distancing protocols, international measures have taken a shared direction toward increasing the availability of care through telemedicine. In Australia, the use of text messages, calls, and E-mails to meet the physical and psychological needs of the population has proven to be a perfectly adequate route for the current situation of the COVID-19 pandemic.[4]

A few days after confirmation of the first case of COVID-19 in the Dominican Republic on March 1, 2020, the authorities of the Mental Health Division of the Ministry of Public Health in collaboration with the Pan American Health Organization, the Dominican Psychiatry Society, the Dominican College of Psychology, and the National Health Service enabled a special telephone service with the help of a team of volunteer psychiatrists and psychologists to increase access to mental health services during the quarantine.

Aim of the study
This study aims to determine the effectiveness of teleconsultation use to increase access to mental health services, provided by volunteer staff during the quarantine of the COVID-19 pandemic in the Dominican Republic. Secondarily, to describe psychological problems among the population receiving mental health services through teleconsultation in the Dominican Republic.

MATERIALS AND METHODS

The Ministry of Public Health of the Dominican Republic has a Division of Mental Health, which, in collaboration with the Pan American Health Organization, the Dominican Society of Psychiatry, the Dominican College of Psychology, and the National Health Service enabled a special telephone service with the help of a team of clinical psychiatrists and psychologists to increase access to Mental health services during the quarantine. This phone service uses an exclusive line that the general population could call without requiring a specific contract with a telephone carrier, so it was free of charge using the 462 emergency operations center option.

On this platform and through social networks, the telephone number of 598 psychologists and seventy psychiatrists was provided along with their respective schedules in which they could be contacted to offer free mental health care through calls, video calls, or text messages. This teleconsultation service began its services on March 25, 2020. After each intervention, the mental health professional filled out an online form using the Google forms platform where he provided anonymous information about the patient’s psychological needs and intervention. If necessary, he could refer the patient to a Mental Health Care unit for face-to-face evaluation.

Our study conducted an analysis of a database generated with information collected from patients who received care through teleconsultation services enabled by this multiinstitutional effort from March 25, 2020 to May 17, 2020 (secondary source data usage). The database managed in our study did not include any identifier or personal data that could be related to the identity of the patients. Statistical analysis was conducted using SPSS version 23 (SPSS Inc., Chicago, IL, USA). The descriptive statistic is presented as percentages.

RESULTS

From March 25, 2020 to May 17, 2020, the team of mental health professionals carried out a total of 6800 interventions.
Of these, a total of 4,578 were aimed at women (67.3%). Five thousand two hundred and ninety-one (77.8%) interventions were for patients between 18 and 59 years of age, whereas 596 (8.7%) were requested by legal minors. Despite the availability of this service to the general population, 27.1% of the interventions were requested by health personnel. Nearly half of interventions (46%) were received by patients living in the province of Santo Domingo, where the capital of the Dominican Republic is located, and 4.8%, were requested by patients living outside the country.

Problems reported during interventions were anxiety (43%), sleep pattern alteration (26%), stress disorder (10.2%), adaptive disorders (6.1%), and suicide-related behavior (2%). Of all the interventions, 5.3% required referral to a crisis intervention unit for face-to-face follow-up.

**DISCUSSION**

In a period of <2 months, a multidisciplinary and multinstitutional team managed to facilitate access to mental health services to carry out a large number of interventions that would not otherwise have been possible because of the situation of the Dominican Republic’s health systems during the COVID-19 pandemic. In this mode of teleconsultation, most patients were in adulthood, but despite this, the ease of this platform gave an opportunity for minors to seek timely help.

The large number of health professionals who are applying for mental health help points out the stress burden of this health situation for those who must look after their health and the health care of others. Teleconsultation services not only facilitate access for those who choose to reduce the risk of exposure and respect social distancing protocols but also facilitate access for those who are geographically unavailable to move to a hospital.

**CONCLUSIONS**

Psychological problems are common during quarantine in the Dominican Republic, including anxiety and sleep problems. However, most of these problems can be solved through telemedicine interventions without the need to increase the risk of population exposure by demonstrating that the impact of social media and other electronic media can be used for the benefit of mental health contrary to the negative use it has frequently received to misinform about the COVID-19 pandemic. Undoubtedly, access to mental health services in a virtual approach facilitates timely care so its implementation is recommended on a large scale and permanently when face-to-face care is not guaranteed or necessary for the entire population.

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**Conflicts of interest**

There are no conflicts of interest.

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