Telehealth and Depression: An Analysis of Mental Health Outcomes (2012-2024)

Summary

This report analyzes the trends in depression diagnoses from 2012 to 2018 and the rise in telehealth adoption between 2020 and 2024. Data reveals a consistent increase in depression cases due to heightened awareness, alongside a significant yet uneven adoption of telehealth services. Although telehealth shows potential for improving access to mental health services, various barriers, such as socioeconomic factors and lack of access to technology, prevent widespread utilization. Recommendations focus on addressing these challenges through targeted interventions.

1. Vision

The objective of this report is to assess the impact of telehealth on mental health outcomes, with a specific focus on depression. The analysis examines how telehealth services have been utilized to manage mental health issues and how barriers like socioeconomic status and digital accessibility affect telehealth engagement.

2. KPIs

Key Performance Indicators (KPIs) chosen for this report:

- Percentage of the population affected by depression (2012-2018): On average, 14.79% of the population experienced depression each year, with variations across different regions and timeframes.
- Telehealth usage percentage (2020-2024): On average, 27.7% of healthcare beneficiaries used telehealth services during this period, though usage rates varied widely (0% to 81.4%).
- Correlation between telehealth usage and mental health outcomes: To assess whether increased telehealth usage corresponded with improved mental health, particularly in areas with high depression rates.

3. Chart

The following visualizations are included:
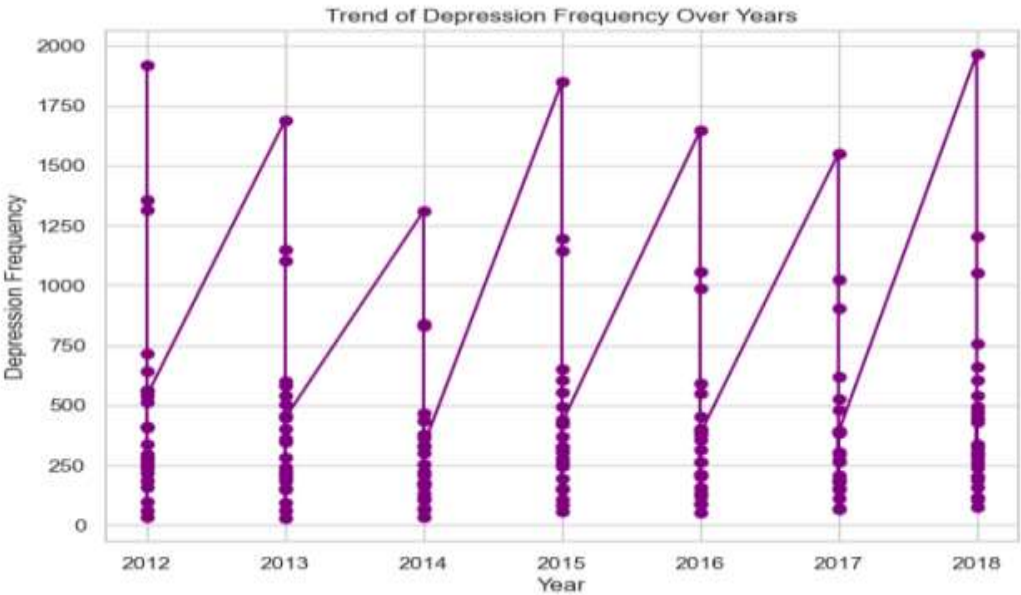
- Line chart: Depicting the increase in depression diagnoses from 2012 to 2018.

- Line chart: Showing the percentage of healthcare beneficiaries using telehealth services
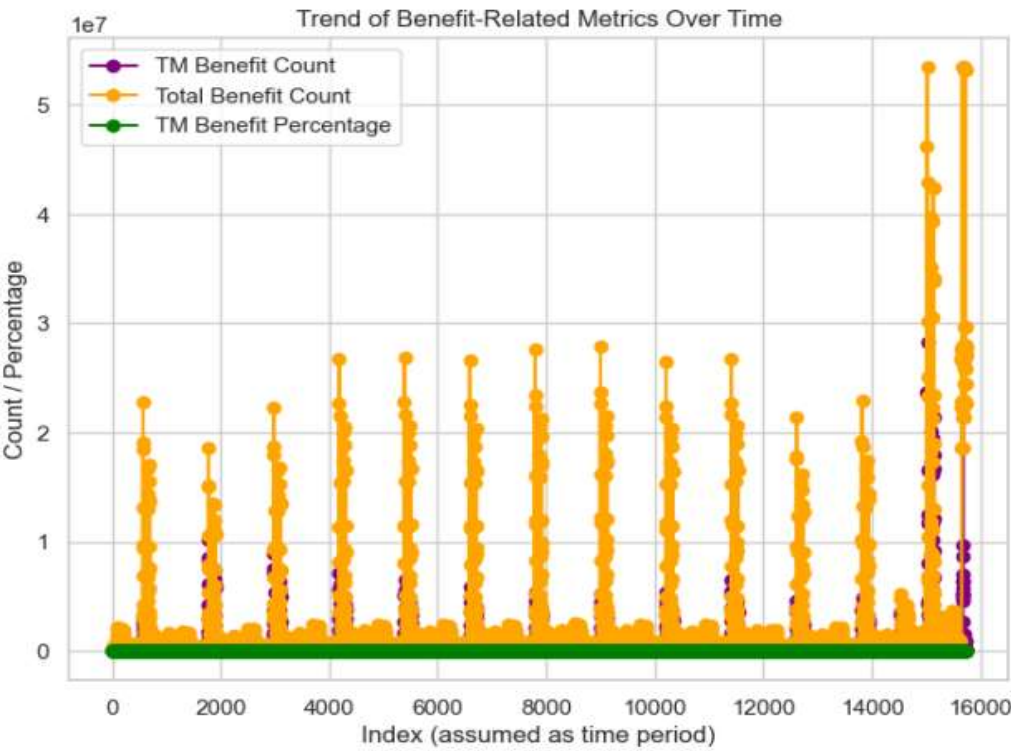
(2020-2024).

4. Situation

From 2012 to 2018, depression cases rose significantly as public awareness campaigns gained traction, reducing stigma and encouraging individuals to seek help. Despite this, mental health services struggled to meet demand, particularly in underserved areas. In 2020, telehealth services expanded rapidly in response to the COVID-19 pandemic, offering a potential solution to the accessibility gap in mental health care.

However, this analysis shows that while telehealth usage has grown, barriers remain. Technological access (e.g., lack of devices or internet) and psychological obstacles (e.g., the very symptoms of depression inhibiting engagement) have limited the reach of these services in many communities. The data highlights a clear need for targeted strategies to ensure that vulnerable populations, particularly those facing socioeconomic challenges, can benefit from telehealth.

5. Main Information

The report is structured as follows:

- Depression Trends (2012-2018): Examines the increase in depression cases over time and the effect of public awareness campaigns.

- Telehealth Usage (2020-2024): Explores the rise of telehealth services and the disparities in adoption rates across different regions.

- Barriers to Telehealth Adoption:Discusses technological and socioeconomic factors limiting access to telehealth services.

- Correlation Analysis: Evaluates the relationship between telehealth usage and depression outcomes, identifying areas where telehealth has had the most impact.

- Recommendations: Offers solutions to address the barriers identified.

6. To summarize:

− Depression rates increased consistently between 2012 and 2018, with 33.09% of the population affected in 2018 alone.

− Telehealth adoption grew between 2020 and 2024, with an average of 27.7% of healthcare beneficiaries using telehealth services. However, usage varies significantly by region, with some areas showing as little as 0% adoption.

− Barriers such as limited access to technology and socioeconomic challenges have hindered the full potential of telehealth services.

7. Recommendations

While telehealth offers great promise, particularly for underserved populations, its potential has yet to be fully realized due to existing barriers. To improve telehealth accessibility and engagement:

− Expand access to technology: Partner with charities and government programs to provide devices and internet access to underserved populations.

    – Incentivize telehealth usage: Offer rewards for consistent engagement, such as free services or assistance with educational and daily living expenses.

    – Integrate mental health charities: Collaborate with organizations like Mental Health America (MHA) to create outreach programs targeting individuals who are hesitant to use telehealth services due to depression symptoms.

<u>Indepth Recommendation</u>

Depression Data (2012-2018):

1. Increased Recognition of Depression:
   - Between 2012 and 2018, the US saw a rise in reported depression cases. This reflects increased public awareness and reduced stigma around mental health, encouraging more people to seek help and acknowledge their symptoms.

2. Impact of Public Awareness Campaigns:
   - The rise in depression diagnoses indicates the effectiveness of mental health awareness campaigns. Public education efforts made people more informed about depression symptoms and available treatments.

3. Model for Future Action:
   - The strategies from this period should be researched to create a replicable model for raising awareness and integrating telehealth solutions in mental health care. This can be adapted to address current needs in mental health services, particularly through telehealth platforms.

Telehealth (2020-2024):

1. Increase in Telehealth Usage:
   - Telehealth services have seen significant growth between 2020 and 2024, though many individuals only use these services occasionally. Possible reasons include technological barriers (lack of internet or devices) or psychological obstacles like depression itself, preventing consistent engagement.

2. Accessibility Barriers:
   - Technological barriers: Limited access to devices (phones, laptops) or the internet restricts regular telehealth usage.
   - Mental barriers: Depression and other mental health challenges can also inhibit individuals from engaging consistently with telehealth services.

3. Partnership with US Charities:
   - To address this, partnering with US-based mental health charities like Mental Health America (MHA), National Alliance on Mental Illness (NAMI), or Depression and Bipolar Support Alliance (DBSA) would help encourage those facing depression to utilize telehealth. These charities could create outreach programs to promote telehealth services among their clients, ensuring consistent use and engagement.

4. Addressing Socioeconomic Barriers:
   - Some individuals may avoid telehealth due to poverty or homelessness, limiting their access to the internet. These challenges need specific interventions to support those without reliable access to

technology.

Solutions to Increase Telehealth Usage:

1. Easy Access Program:
   - Step 1: Partner with US charities and government programs to create easy access to telehealth services for underserved populations.
   - Step 2: Establish an incentive program to encourage consistent telehealth usage for at least one year. Rewards could include:
   - Free hotel stays
   - Assistance with school fees
   - Free children's clothing
   - Free haircuts or meals at charity-run restaurants

   Those are just examples of the possibilities of action.

   These incentives would motivate individuals to consistently use telehealth services, even if they don't have personal internet access or devices.

2. Physical Access via Charities:

   - Those without internet access could be directed to visit local charities or partner organizations in person, where they can use telehealth services in a supportive environment.

3. Work Journey Model:
   - Some individuals may avoid telehealth or mental health recovery to maintain their government benefits. A work reintegration journey could address this:
     - Step 1: Homeless individuals could be offered volunteer opportunities that provide food and shelter as long as they complete their volunteer hours.
     - Step 2: After a successful volunteer period, individuals would be offered part-time positions at the charity.
     - Step 3: Housed individuals could follow a similar path, gaining 6 months of work experience and eventually transitioning to part-time roles.

   The US government would continue to offer support to these individuals, though benefits may be adjusted based on their new income from part-time work.

4. Training Programs:
   - To make this transition smoother, offer training programs during the volunteer period to develop the skills necessary for future employment or greater digital literacy, helping individuals stay connected with telehealth services.

Assessment and Reintegration:
1. Telehealth as an Assessment Tool:
   - Telehealth services should be used for one year to assess the mental health progress of individuals before moving forward with reintegration. This allows for continuous monitoring and adjustment of treatment plans.

2. Personalized Reintegration Plan:
   - After the assessment, each person would receive a tailored reintegration plan, helping them transition back into society based on their telehealth results and personal goals.

Expanding Telehealth to Undocumented Populations:

1. Inclusivity for Undocumented Individuals:

   - Telehealth services should be open to undocumented individuals as well, ensuring equal access to mental health care for all, regardless of legal status.

   - Allow them to pay for telehealth services using bank cards, with discounts for those who cannot access free services. This would provide an affordable option for undocumented individuals to receive the care they need and will allow to collect more data to further better decision-making.