



FACTORS INFLUENCING TELEHEALTH UTILIZATION IN MENTAL HEALTH SERVICES: SYSTEMATIC LITERATURE REVIEW
Faktor yang Mempengaruhi Pemanfaatan Telehealth dalam Pelayanan Kesehatan Mental: Systematic Literature Review

Khansa Fatimah Muhammad¹, **Anhari Achadi**^{2*}
Faculty of Public Health, Universitas Indonesia, Indonesia
Corresponding Author : khansafatihahm@gmail.com

ARTICLE INFO

Article History:

Received: August 06th, 2024

Review:

From August 12th, 2024

Accepted: September 23rd, 2024

This work is licensed under a Creative Commons Attribution 4.0 International License

ABSTRACT

Background: Mental health is an increasing concern in public policy, demanding better services and support. Consultations and treatments for mental health can be accessed through online services via telehealth. While telehealth offers advantages for mental health services, it also presents challenges, necessitating improvements in quality to enhance service delivery. **Purpose:** This journal aims to explore factors influencing the use of telehealth for mental health services, focusing on technology, telehealth quality, and other relevant aspects. **Methods:** A systematic literature review was conducted using articles sourced from Google Scholar, Garuda, and ProQuest. **Results:** Telemedicine, as a component of telehealth, has emerged as a vital alternative to in-person mental health care. Despite challenges such as limited technological access and privacy concerns, electronic and telephone-based platforms have demonstrated the potential to empower patients and enhance care accessibility. **Conclusion:** The increasing importance of mental health has raised demand for efficient digital solutions like telehealth, which can lower costs and improve service access. However, expanding telehealth requires addressing challenges such as technological limitations, privacy issues, and the need for supportive policies. Tackling these issues is essential for integrating telehealth into mainstream mental health services and ensuring sustainable growth.

Keywords: mental health, telehealth, telemedicine

ABSTRAK

Latar Belakang: Kesehatan mental menjadi perhatian yang semakin meningkat dalam kebijakan publik, menuntut layanan dan dukungan yang lebih baik. Konsultasi dan pengobatan kesehatan mental dapat diakses melalui layanan online dengan telehealth. Meskipun telehealth menawarkan berbagai keuntungan untuk layanan kesehatan mental, ada juga tantangan yang memerlukan peningkatan kualitas untuk memperbaiki penyampaian layanan. **Tujuan:** untuk mengeksplorasi faktor-faktor yang memengaruhi penggunaan telekesehatan untuk layanan kesehatan mental, dengan fokus pada teknologi, kualitas telekesehatan, dan aspek-aspek relevan lainnya. **Metode:** Tinjauan literatur sistematis dilakukan dengan menggunakan artikel yang bersumber dari Google Scholar, Garuda, dan ProQuest. **Hasil:** Telemedicine, sebagai bagian dari telehealth, telah muncul sebagai alternatif penting untuk perawatan kesehatan mental secara langsung. Meskipun terdapat tantangan seperti keterbatasan akses teknologi dan masalah privasi, platform berbasis elektronik dan telepon menunjukkan potensi untuk memberdayakan pasien dan meningkatkan akses perawatan. **Kesimpulan:** Peningkatan kepentingan kesehatan mental telah meningkatkan permintaan terhadap solusi digital yang efisien seperti telehealth, yang dapat menurunkan biaya dan meningkatkan akses layanan. Namun, perluasan telehealth memerlukan penanganan tantangan seperti keterbatasan teknologi, masalah privasi, dan kebutuhan akan kebijakan yang mendukung. Mengatasi tantangan ini penting untuk mengintegrasikan telehealth dalam layanan kesehatan mental utama dan memastikan pertumbuhan yang berkelanjutan.

Kata Kunci: mental health, telehealth, telemedicine

INTRODUCTION

Mental health is becoming an increasing societal and political concern. As it is rising in public policy agenda, people becoming more demanding for a better service and support (UNICEF, 2023). Within a brief period, most mental health services that could be provided remotely began to be delivered through telehealth (Molfenter *et al.*, 2021). People can consult and receive treatment offline (face-to-face) and online (through telehealth). Telehealth has a broader scope. It is sometimes also referred to as telemedicine is the use of electronic information and telecommunications technologies to extend care when a health provider and patient are not available at the same time and place. Telehealth is also a new term referring to remote health care that includes clinical and social services provided using telemedicine (Chiang *et al.*, 2021). These days, people are showing more interest in digital health technologies and broadly in favor of their health data being used to develop new knowledge for improved treatments and management within health systems, with a note that their privacy is protected (Hashiguchi, 2020).

Telemedicine services represent advancements in both technological and service innovations (UNICEF, 2023). By using electronic communications and information technologies to provide clinical services, telemedicine encourages greater consumer involvement in decision-making and offers new approaches to maintaining a healthy lifestyle (WHO, 2006). It has been proven effective in improving mental health and significantly enhancing the accessibility of mental health services (Hashiguchi, 2020; Sairam *et al.*, 2023). Telehealth utilizes telecommunication technologies and electronic information to provide care and facilitate interactions between clients and provider. There are two forms of telehealth.

The first one is the two ways, synchronous, which has an interactive client-provider communication through audio and video equipment, which also referred to as telemedicine. The second one is the asynchronous client-provider interactions using various forms of technology (SAMHSA, 2021).

Telemedicine as a part of telehealth for mental health services reduces barriers and increases mental health care and awareness. Video conferencing in psychiatric mental health services is a validated and effective practice that enhances access to care (Schroeder, 2022). Telemedicine can be just as effective as face-to-face interventions in addressing depression, anxiety, symptoms of obsessive-compulsive disorder (OCD), insomnia, and excessive alcohol consumption (Hashiguchi, 2020). However, there is inadequate research addressing the use of telemedicine and their association factors, including variations in consultation methods and the implications of receiving mental health services through telehealth compared to offline services. Therefore, the aim of this study is to understand and explore the factors that affect the use of telehealth for mental health services.

METHOD

Literature Search Strategy

This study utilized a literature review design, analyzing 25 journal articles. Articles were sourced from Google Scholar, Garuda, and ProQuest using the keywords, “Mental Health”, “Telehealth”, “Telemedicine”. The selected journal articles were published between 2018 and 2024 and were accessible in full text. The study was conducted through a review of scientific articles published in indexed national and international journals.

This study is a systematic literature review. Articles were sourced from Google

Scholar, Garuda, and ProQuest using the keywords "Mental Health," "Telehealth," and "Telemedicine" The scope of the research is limited using the PICO framework

(Population/Problem, Intervention, Comparison, Outcome). The cope limitations of the research are presented in Table 1.

Tabel 1. Summary of PICO

Component	Description
<i>Population/Problem</i>	An increased demand for mental health services through telehealth
<i>Intervention</i>	Telehealth
<i>Comparison</i>	n/a
<i>Outcome</i>	Utilization of telehealth for mental health services

Research steps include formulating the research question, searching the literature, selecting studies based on eligibility criteria and quality assessment, and conducting data extraction. The research question in this study is what are the factors influencing the utilization of telehealth in mental health services. The literature search was conducted using databases such as Google, Google Scholar, and Garuda. The search for articles was carried out using keywords, including "Mental Health", "Telehealth", "Telemedicine".

Process of selecting scientific articles:

1. Identification
 Identification of literature using keywords through Google, Google Scholar, and Garuda.
2. Screening
 Number of scientific articles collected. n = 412
 Number of duplicate articles removed. n = 205
3. Eligibility
 Number of scientific articles after removing duplicates. n = 95

- Number of scientific articles not meeting inclusion and exclusion criteria. n =70
- Number of scientific articles selected using inclusion and exclusion criteria. n = 39
- Number of scientific articles not aligned with the research objectives. n = 30
- 4. Included
 Number of scientific articles used in the literature review. n = 21

Inclusion criteria:

1. Articles published between 2018 and 2024.
2. Scientific articles written in Indonesian or English
3. Literature in the form of scientific articles published in journals or proceedings
4. Discussion of scientific articles related to telehealth that provides insights into into the factors influencing its utilization for mental health services.

Exclusion criteria:

1. Scientific articles that are not accessible in full text.
2. Articles that are literature reviews.

RESULT

Table 2. Systematic Literature Review

No	Title	Author	Year	Location	Output
1	Acceptability of Telemedicine to Help African American Women Manage Anxiety and Depression	McCall <i>et al</i>	2019	United States	Telehealth is also viewed as a solution to avoid inconveniences such as long wait times, travel, and traffic congestion, which can hinder in-person doctor visits
2	Acceptability of Telemedicine Features to Promote Its Uptake in Practice: A Survey of Community Telemental Health Providers	Bunnell <i>et al</i>	2020	United States	The majority of community telemental health providers view the ability to see patients anywhere (72.3%) and reach those who otherwise wouldn't receive care (67.2%) as key benefits of telemedicine. However, over half (65.5%) reported technological problems as a significant barrier, while fewer (29.4%) identified patient satisfaction as a barrier.
3	Adaptation or Revolution: Telemental Health and Advanced Practice Psychiatric Nursing During COVID-19	Schroeder	2022	Worldwide	Recommendations for enhancing telemedicine utilization include protecting autonomy, confidentiality, and privacy when using telehealth as part of a mental health delivery system.
4	Analyzing The Effectiveness Of Telemedicine In Delivering Mental Health Services To Rural Communities	Sairam <i>et al</i>	2023	Srikakulam, India	Adherence to mental health treatment via telemedicine was 92%, indicating that most patients consistently attended their scheduled telemedicine sessions.
5	An Innovative Approach to Care: Integrating Mental Health Services Through Telemedicine in Rural School-Based Health Centers	Pradhan <i>et al</i>	2019	West Virginia, United States	Telehealth has proven to be an effective and cost-efficient model for screening and providing specialty services to children in rural areas, improving compliance
6	Association Between Telemedicine Use in Nonmetropolitan Counties and Quality of Care Received by Medicare Beneficiaries with Serious Mental Illness.	Wang <i>et al</i>	2022	2916 counties	There is a significant shift towards the use of telemedicine, where it could reduce the need for face-to-face consultation. One of the reasons was the increased unmet need for specialty mental health care professionals, especially in rural and less urbanized areas.
7	Best Practices in Videoconferencing-Based Telemental Health	Shore <i>et al</i>	2018	United States	Interactive videoconferencing has become essential to deliver mental health care, as it has the ability to increase access and quality of care, also in some settings it could be more effective than a treatment delivered face-to-face.
8	Bringing health care to the patient: An overview of the use of telemedicine in OECD countries	Hashiguchi	2020	OECD Countries	Telemedicine services should also focus on improving healthcare quality, providing clear benefits for patients, and meeting patient needs. Collecting data on patient experiences is crucial for understanding if telemedicine services are meeting patient needs and preferences

Continuation of Table 2. Systematic Literature Review

No	Title	Author	Year	Location	Output
9	Children and Telehealth in Mental Healthcare: What We Have Learned From COVID-19 and 40.000+ Sessions	Hoffnung <i>et al</i>	2021	Worldwide	There are significant differences between children and adults in the use of mental health services through telehealth and face-to-face. Children tend to prefer face-to-face, as indicated by the study results showing a decrease in mental health service sessions for children and mental health services via phone, and an increase in service discharges during the switch from face-to-face to telehealth.
10	Community Mental Health Clinicians' Perspectives on Telehealth During the COVID-19 Pandemic: Mixed Methods Study	Schriger <i>et al</i>	2022	Philadelphia	This study showed that community mental health clinicians emphasize the need for more support and resources for telehealth, including training, supervision, and consultation, telehealth compatible equipment, financial incentives, material for clients.
11	Countdown Global Mental Health 2030: Making Mental Health Count.	UNICEF	2023	Worldwide	Successful telemedicine interventions often arise from healthcare providers seeking to improve care quality and meet patient and community needs and preferences. For telemedicine innovations to spread, a supportive policy environment is necessary. Countries with the most developed telemedicine services have clear regulations, reliable funding, and strong leadership. These countries actively encourage the growth of telemedicine, facilitating knowledge transfer and dissemination of best practices
12	Effects of a Mobile and Web App (Thought Spot) on Mental Health Help-Seeking Among College and University Students: Randomized Controlled Trial.	Wiljer <i>et al</i>	2020	Canada	The result of this research indicates a necessity to delve deeper into evaluating the effectiveness of mHealth technologies in addressing the mental health help-seeking behaviors of transition-aged youth. It is also crucial to assess the cost-effectiveness of Thought Spot (mental health seeking help application), versus traditional information pamphlets to better understand the feasibility and long-term viability of mHealth tools in comparison to current methods.
13	Expansion of Telehealth Availability for Mental Health Care After State-Level Policy Changes From 2019 to 2022	McBain <i>et al</i>	2023	United States	The percentage of mental health treatment facilities providing telehealth services increased significantly, from 39.4% in the second quarter of 2019 to 88.1% in the third quarter of 2022. The study highlighted the crucial role of state policies in the rapid growth of telehealth services for mental health care.
14	Factors Affecting Adoption of Telemedicine for Virtual Healthcare Services in Indonesia	Alviani <i>et al</i>	2023	Indonesia	Patients are more likely to consider using digital health services if they trust that their personal information is protected by healthcare providers. Trust becomes one way to encourage the adoption of digital health technology, including telemedicine, so that users feel comfortable and confident in using the service.
15	Mental Health Service User and Worker Experiences of Psychosocial Support Via Telehealth Through the COVID-19	Venville <i>et al</i>	2021	Australia	Clinicians who are providing psychosocial support via telehealth need to be flexible, build technological skills, develop supportive relationships, and be responsive to user needs while learning the telehealth platform

Continuation of Table 2. Systematic Literature Review

No	Title	Author	Year	Location	Output
16	Pandemics: Qualitative Study. Patients' experiences with tele-mental health services during COVID-19 in Pakistan	Asad <i>et al</i>	2024	Pakistan	This research stated that the stigma about mental illness in Pakistani is huge, some participants on their research said that telehealth is effective in countering the stigma associated with mental health.
17	Perceptions and Use of Telehealth Among Mental Health, Primary, and Specialty Care Clinicians During the COVID-19 Pandemic	Connolly <i>et al</i>	2022	United Kingdom	Clinicians stated that without financial incentives, the important role in the care modalities that were ultimately used with patients are the quality and ease of telehealth use.
18	Telehealth-based creative arts therapy: Transforming mental health and rehabilitation care for rural veterans	Levy <i>et al</i>	2018	Worldwide	Telehealth practices extend beyond virtual interactions, integrating tools like digital art to enhance therapeutic engagement. This study also found that veterans prefer sharing high-quality photos of their artwork with providers, facilitating better communication, collaboration, and involvement in their treatment process.
19	Telehealth For Providers: What You Need to Know.	Centers for Medicare & Medicaid Services (CMS).	2023	Worldwide	Teletherapy through telehealth has been shown to give benefits to both health providers and patients including improving the accessibility to mental health treatment.
20	The Effects of Telemedicine on the Treatment of Mental Illness: Evidence from Changes in Health Plan Benefits. SSRN Electronic Journal.	Rabideau & Eisenberg	2022	United States	The study found that the cost-sharing waiver led to an 18% increase in telemedicine use and a 14% increase in telemental health utilization. Among those with prior mental illness treatment, telemental health use increased by 13%. Significant increases were observed for specific disorders: 28% for depression, 29% for ADHD, and 82% for serious mental illness.
21	Use of Telehealth in Mental Health (MH) Services During and After COVID-19.	Molfenter <i>et al</i>	2021	United States	Telephone services are acknowledged as being more affordable, user-friendly, and accessible for clients. The perceived usefulness of telephone and video services as a mediator between the perceived ease of use and the intent to use telehealth in the future

Table 2 showed that telehealth has some advantages which is to avoid inconveniences from the long waits from face-to-face consultation, in which the telemental health provider highlight that one of the key benefits of telemedicine is its capacity to expand access to mental health care (Bunnel *et al.*, 2020), as there is an increased unmet need for specialty mental health care professionals, especially in rural areas (Wang *et al.*, 2022). Telehealth has also proven to be effective and cost efficient. As

seen on the Table 2, research by Asad *et al.*, (2024) also showed that telehealth is effective in countering the stigma about mental illness in Pakistan.

Based on the Table 2, it is found that telehealth services encompass various modalities, including telephone consultations (Molfenter *et al.*, 2021), interactive videoconferencing (Shore *et al.*, 2018), digital art that can provide better communication and involvement in the treatment process of mental health for rural

veterans (Levy *et al.*, 2018). Some things that need to put more attention on telehealth is to protect autonomy, confidentiality and privacy (Schroeder, 2022). Based on Table 2, it is found that patients need to have the trust, and feel comfortable, confident in using the telehealth services (Alviani *et al.*, 2023).

To further improve telemedicine quality, it is crucial to collect data on patient experiences (Hashiguchi, 2020). Table 2 shows that UNICEF (2023) found successful telemedicine interventions often align with patient and community needs and preferences. Adequate support and resources for mental health clinicians, such as compatible equipment, financial incentives, and client-relevant materials, are also necessary (Schriger *et al.*, 2022). Training for clinicians and healthcare workers on optimizing telehealth use can help improve flexibility, technological proficiency, and responsiveness to user needs, thereby enhancing the quality of care provided. Additionally, supportive policies with clear regulations are vital for ensuring reliable funding, strong leadership, and fostering the growth of telemedicine services.

DISCUSSION

The use of telehealth largely substitutes in-person visits due to an increased unmet need for specialty mental health care professionals, especially in rural and less urbanized areas (Wang *et al.*, 2022). In a study conducted in the United Kingdom, none of the participants expressed a desire to return to a completely face-to-face model for mental health treatment; they preferred a hybrid model combining face-to-face and telehealth services (Nelson *et al.*, 2023). Participants in another study agreed that telehealth provided convenience that in-person support often couldn't match, facilitating quick medication prescriptions, brief consultations, and emotional support.

Additionally, some users felt that telehealth offered a safer environment for psychosocial support (Venville *et al.*, 2021).

A study conducted in Aotearoa, New Zealand by Officer *et al.*, (2023) showed that mental health services provided via telehealth differed from those delivered in person, leading some participants to take a more active role in managing their own care. Factors influencing participants' telehealth experiences include the importance of maintaining and building relationships with clinicians, creating safe spaces within both client and clinician home environments, and clinician readiness in facilitating care for clients and their support networks. The study also demonstrated successful implementation in establishing strong relationships between clients and clinicians. To maintain minimum standards in telehealth-based care, health professionals must ensure that the intent behind telehealth appointments is clearly articulated and documented for everyone. Health professionals should also guarantee access to training and professional guidance to deliver effective telehealth consultations.

A study conducted by Dimitropoulos *et al.*, (2024) about a school in Alberta, Canada that has an electronic mental health platform for youth and young adults found that barriers to its use include limited access to technology and internet services among youth, high caseloads leading to change fatigue, and concerns about confidentiality and privacy. Despite these barriers, the platform has the potential to empower youth, foster therapeutic relationships with school personnel, and enhance access to needed resources.

Al-Mahrouqi T *et al.*, (2024) on their study in Oman found that telephone-based appointments were convenient and flexible, allowing psychiatrists to manage their schedules more easily for non-clinical duties like administrative work without

compromising patient care. Psychiatrists also noted that in-person clinics were often overbooked, making telephone consultations a good alternative that could be more precise, focused, and flexible. But the utilization of telephone-based consultations still has some limitations, one of them is telephone-based consultations are not suitable for patients with hearing impairments, mutism, or mental retardation. Psychiatrists also reported that they sometimes received outdated patient records with incorrect contact information. A patient with two years of telepsychiatry experience suggested that adding videoconference tools would improve the experience, as it would make them feel more engaged with their psychiatrist. Therefore, investigating patients' perspectives and assessing various implementation strategies is crucial for understanding telepsychiatry's full potential, highlighting the need for further research. The regulation, financing, and provision of telehealth services ultimately affect their use and development. Factors include funding and payment schemes, distance requirements between participants, eligibility of health workers and patients, patient consent, and integration with traditional face-to-face healthcare services (Hashiguchi, 2020).

The limitation of this journal is the lack of specific discussion on the use of telehealth for mental health, particularly in terms of detailing the different types of consultations available for mental health care. Most of the journals found tend to focus on comparisons between periods during and after COVID-19, when face-to-face consultations were indeed more restricted.

CONCLUSION AND SUGGESTION

Mental health is increasingly recognized as a societal and political concern. With its rising prominence in public policy, there is an increased demand for better mental

health services and support. People are increasingly turning to digital health technologies for consultations and treatments. Telehealth, which is a broader range of healthcare services than telemedicine, can reduce long wait times and travel, and it can be more cost-efficient for mental health screening and services. However, to sustain and expand these programs, several challenges such as technological limitations, privacy concerns, and many more must be addressed. Successful telemedicine requires supportive policy environments and clear regulations. Addressing these challenges will be essential for the long-term, large-scale expansion of telehealth programs.

Validation studies of telehealth across various clinical domains have shown high diagnostic accuracy, reliability, and patient satisfaction. Consequently, numerous telehealth programs have been successfully implemented globally. However, the long-term, large-scale expansion of these programs will necessitate addressing the identified challenges. To improve the use of telehealth for mental health services, it is essential to address the lack of legislation and reimbursement mechanisms, protect patient autonomy, confidentiality, and privacy, and ensure secure online transactions. Workers also need to develop their technological skills, be more responsive in communication service, provide clear client guidance, and many more. Additionally, integrating telehealth into mainstream mental health services and setting standards is crucial.

ACKNOWLEDGMENT

Researchers expressed their gratitude to their family and friends for their support to complete this study.

FUNDING SOURCE

This study was conducted without receiving financial support from any funding sources.

AUTHOR CONTRIBUTION

Khansa Fatihah Muhammad is responsible for data collection, data analysis, manuscript writing, literature review, and reference. Anhari Achadi is responsible for manuscript revision.

CONFLICT OF INTEREST

The authors declare there is no conflict of interest in this article.

REFERENCES

- Al-Mahrouqi T., Al-Alawi K., Al-Sabahi F., Al-Harrasi A., Al-Sinawi H., Al-Balushi N., Al-Shekaili M., & Al-Alawi M. (2024). Telephone-based telepsychiatry consultations: a qualitative exploration of psychiatrists' experiences in Oman. *BMJ Open*, *14*(3), e079033. <https://doi.org/10.1136/bmjopen-2023-079033>
- Alviani, R., Purwandari, B., Eitiveni, I., & Purwaningsih, M. (2023). Factors Affecting Adoption of Telemedicine for Virtual Healthcare Services in Indonesia. *Journal of Information Systems Engineering and Business Intelligence*, *9*(1), 47–69. <https://doi.org/10.20473/jisebi.9.1.47-69>
- Asad, N., Pirani, S., Osama, K., & Nadeem, T. (2024). Patients' experiences with tele-mental health services during COVID-19 in Pakistan. *Eastern Mediterranean Health Journal*, *30*(4), 283–391. <https://doi.org/10.26719/2024.30.4.283>
- Bulkes, N. Z., Davis, K., Kay, B., & Riemann, B. C. (2022). Comparing efficacy of telehealth to in-person mental health care in intensive-treatment-seeking adults. *Journal of Psychiatric Research*, *145*, 347–352. <https://doi.org/10.1016/j.jpsychires.2021.11.003>
- Bunnell, B. E., Barrera, J. F., Paige, S. R., Turner, D., & Welch, B. M. (2020). Acceptability of Telemedicine Features to Promote Its Uptake in Practice: A Survey of Community Telemental Health Providers. *International Journal of Environmental Research and Public Health*, *17*(22), 8525. <https://doi.org/10.3390/ijerph17228525>
- Busch, A. B., Sugarman, D. E., Horvitz, L. E., & Greenfield, S. F. (2021). Telemedicine for treating mental health and substance use disorders: Reflections since the pandemic. *Neuropsychopharmacology*, *46*(6), 1068–1070. <https://doi.org/10.1038/s41386-021-00960-4>
- Centers for Medicare & Medicaid Services (CMS). (2023). *Telehealth For Providers: What You Need to Know*. <https://www.cms.gov/files/document/telehealth-toolkit-providers.pdf>
- Chaet, D., Clearfield, R., Sabin, J. E., & Skimming, K. (2017). Ethical practice in Telehealth and Telemedicine. *Journal of General Internal Medicine*, *32*(10), 1136–1140. <https://doi.org/10.1007/s11606-017-4082-2>
- Chiang, M. F., Starren, J. B., & Demiris, G. (2021). *Telemedicine and Telehealth*. In E. H. Shortliffe & J. J. Cimino (Eds.), *Biomedical Informatics*. Springer International Publishing. https://doi.org/10.1007/978-3-030-58721-5_20
- Connolly, S. L., Miller, C. J., Gifford, A. L., & Charness, M. E. (2022). Perceptions

- and Use of Telehealth Among Mental Health, Primary, and Specialty Care Clinicians During the COVID-19 Pandemic. *JAMA Network Open*, 5(6), e2216401.
<https://doi.org/10.1001/jamanetworkopen.2022.16401>
- Dimitropoulos, G., Bassi, E. M., Bright, K. S., Gondziola, J., Bradley, J., Fersovitch, M., Stamp, L., LaMonica, H. M., Iorfino, F., Gaskell, T., Tomlinson, S., & Johnson, D. W. (2024). Implementation of an electronic mental health platform for youth and young adults in a school context across Alberta, Canada: Thematic analysis of the perspectives of stakeholders. *JMIR Mental Health*, 11, e49099.
<https://doi.org/10.2196/2F49099>
- Gibbons, O. (2021). *Conceptualizations of Public Mental Health: The Role of Primary Prevention and the Social Determinants of Mental Health*. (Thesis University of East London).
<https://repository.uel.ac.uk/item/89z9q>
- Hashiguchi. (2020). Bringing health care to the patient: An overview of the use of telemedicine in OECD countries. *OECD Health Working Papers*, 116(116).
<https://doi.org/10.1787/8e56ede7-en>
- Helmuth, C. M., Slagle, M., & Abraham, S. P. (2023). The Effects of Telehealth on Mental Well-Being Compared with In-Office Treatment for Clients with Depression. *International Journal of Science and Research Methodology*, 26(2), 43-57.
- Hoffnung, G., Feigenbaum, E., Schechter, A., Guttman, D., Zemon, V., & Schechter, I. (2021). Children and Telehealth in Mental Healthcare: What We Have Learned From COVID-19 and 40,000+ Sessions. *Psychiatric Research and Clinical Practice*, 3(3), 106–114.
<https://doi.org/10.1176/appi.prcp.2020.0035>
- Ikumapayi, O. M., Kayode, J. F., Afolalu, S. A., Nnochiri, E. S., Olowe, K. O., & Bodunde, O. P. (2022). Telehealth and Telemedicine – An Overview. *Proceedings of the International Conference on Industrial Engineering and Operations Management*, 1–12.
<https://doi.org/10.46254/AF03.20220258>
- Lee, H., Palmer, J., Mullick, P., & Kiely, C. (2023). Patient experience with telehealth service in a mental health setting. *Archives of Psychiatric Nursing*, 43, 150–152.
<https://doi.org/10.1016/j.apnu.2023.03.001>
- Levy, C. E., Spooner, H., Lee, J. B., Sonke, J., Myers, K., & Snow, E. (2018). Telehealth-based creative arts therapy: Transforming mental health and rehabilitation care for rural veterans. *The Arts in Psychotherapy*, 57, 20–26.
<https://doi.org/10.1016/j.aip.2017.08.010>
- Mace Shannon., Adriano Boccanelli., Megan Dormond. (2018). *The Use of Telehealth Within Behavioral Health Settings: Utilization, Opportunities, and Challenges*. (University of Michigan).
- McBain, R. K., Schuler, M. S., Qureshi, N., Matthews, S., Kofner, A., Breslau, J., & Cantor, J. H. (2023). Expansion of Telehealth Availability for Mental Health Care After State-Level Policy Changes From 2019 to 2022. *JAMA Network Open*, 6(6), e2318045.
<https://doi.org/10.1001/jamanetworkopen.2023.18045>
- McCall, T., Schwartz, T., & Khairat, S. (2019). Acceptability of Telemedicine to Help African American Women Manage Anxiety and Depression. *Studies in health technology and*

- informatics*, 264, 699-703.
<https://doi.org/10.3233/shti190313>
- Nelson, D., Inghels, M., Kenny, A., Skinner, S., McCranor, T., Wyatt, S., Phull, J., Nanyonjo, A., Yusuff, O., & Gussy, M. (2023). Mental health professionals and telehealth in a rural setting: A cross-sectional survey. *BMC Health Services Research*, 23(1), 200.
<https://doi.org/10.1186/s12913-023-09083-6>
- Molfenter, T., Heitkamp, T., Murphy, A. A., Tapscott, S., Behlman, S., & Cody, O. J. (2021). Use of Telehealth in Mental Health (MH) Services During and After COVID-19. *Community Mental Health Journal*, 57(7), 1244–1251.
<https://doi.org/10.1007/s10597-021-00861-2>
- NSW Agency for Clinical Innovation. 2020. *Telehealth: Using videoconferencing for mental health consultations*. Sydney: ACI.
https://aci.health.nsw.gov.au/__data/assets/pdf_file/0006/736503/ACI-Using-video-conferencing-for-mental-health-consultations.pdf
- Officer, T. N., Tait, M., McBride-Henry, K., Burnet, L., & Werkmeister, B. J. (2023). Mental Health Client Experiences of Telehealth in Aotearoa New Zealand During the COVID-19 Pandemic: Lessons and Implications. *JMIR Formative Research*, 7, e47008.
<https://doi.org/10.2196/47008>
- Pradhan, T., Six-Workman, E. A., & Law, K.-B. (2019). An Innovative Approach to Care: Integrating Mental Health Services Through Telemedicine in Rural School-Based Health Centers. *Psychiatric Services*, 70(3), 239–242.
<https://doi.org/10.1176/appi.ps.201800252>
- Putri, A. F. A. P., Marsetyo, F. A., Atmaja, U. S. K., & Fuad, A. (2022). Mental Health Teleconsultation Patterns on the Most Popular mHealth Platforms in Indonesia. *Studies in Health Technology and Informatics*, 295, 246-248.
<https://doi.org/10.3233/SHTI220708>
- Rabideau, B., & Eisenberg, M. D. (2022). The Effects of Telemedicine on the Treatment of Mental Illness: Evidence from Changes in Health Plan Benefits. *SSRN Electronic Journal*.
<https://doi.org/10.2139/ssrn.4065120>
- UNICEF. (2023). *Countdown Global Mental Health 2030: Making Mental Health Count*. <https://data.unicef.org/wp-content/uploads/2023/09/Countdown-Mental-Health-Report-2030-FINAL.pdf>
- Schroeder, R. A. (2022). Adaptation or Revolution: Telemental Health and Advanced Practice Psychiatric Nursing During COVID-19. *Journal of the American Psychiatric Nurses Association*, 28(3), 241–248.
<https://doi.org/10.1177/1078390320970638>
- Schriger, S. H., Klein, M. R., Last, B. S., Fernandez-Marcote, S., Dallard, N., Jones, B., & Beidas, R. S. (2022). Community Mental Health Clinicians' Perspectives on Telehealth During the COVID-19 Pandemic: Mixed Methods Study. *JMIR Pediatrics and Parenting*, 5(1), e29250.
<https://doi.org/10.2196/29250>
- Shore, J. H., Yellowlees, P., Caudill, R., Johnston, B., Turvey, C., Mishkind, M., Krupinski, E., Myers, K., Shore, P., Kaftarian, E., & Hilty, D. (2018). Best Practices in Videoconferencing-Based Telemental Health April 2018. *Telemedicine and E-Health*, 24(11), 827–832.
<https://doi.org/10.1089/tmj.2018.0237>
- Substance Abuse and Mental Health Services Administration. SAMHSA. (2021). *Telehealth for the Treatment of Serious*

Mental Illness and Substance Use Disorders.

<https://store.samhsa.gov/sites/default/files/pep21-06-02-001.pdf>

Venville, A., O'Connor, S., Roeschlein, H., Ennals, P., McLoughlan, G., & Thomas, N. (2021). Mental Health Service User and Worker Experiences of Psychosocial Support Via Telehealth Through the COVID-19 Pandemic: Qualitative Study. *JMIR Mental Health*, 8(8), e29671. <https://doi.org/10.2196/29671>

Wang, B., Huskamp, H. A., Rose, S., Busch, A. B., Uscher-Pines, L., Raja, P., & Mehrotra, A. (2022). Association Between Telemedicine Use in Nonmetropolitan Counties and Quality of Care Received by Medicare Beneficiaries with Serious Mental Illness. *JAMA Network Open*, 5(6), e2218730. <https://doi.org/10.1001/jamanetworkopen.2022.18730>

Webb, R., Ayers, S., & Shakespeare, J. (2022). Improving access to perinatal mental health care. *Journal of Reproductive and Infant Psychology*, 40(5), 435–438. <https://doi.org/10.1080/02646838.2022.2121993>

WHO. 2006. *Telemedicine, Telehealth, and Health Information Technology*. https://cdn.who.int/media/docs/default-source/digital-health-documents/global-observatory-on-digital-health/usa_support_tele.pdf?sfvrsn=1c0a523b_3

Wiljer, D., Shi, J., Lo, B., Sanches, M., Hollenberg, E., Johnson, A., Abi-Jaoudé, A., Chaim, G., Cleverley, K., Henderson, J., Isaranuwachai, W., Levinson, A., Robb, J., Wong, H. W., & Voineskos, A. (2020). Effects of a Mobile and Web App (Thought Spot) on Mental Health Help-Seeking Among College and University Students: Randomized Controlled Trial. *Journal of Medical Internet Research*, 22(10), e20790. <https://doi.org/10.2196/20790>