

## WELLNESS CENTER

### Why Remote Counseling?

As providers of mental health and well-being care to students in the SAIC Counseling Service, it is our duty and responsibility to ensure the health and safety of the students we serve. For this reason, we have determined that at this time, we will be providing telemental health services due to the intimate nature of the counseling experience. Per the American Psychological Association's recommendations, we will conduct in-person visits in situations of urgent emergency or when clinically appropriate. <sup>1</sup>

Happily, we are finding that most students find telemental health works very well for them and, in some cases, feels even better than sitting face-to-face in a counseling office.

There are a number of factors related to the process of counseling itself that make in-person counseling during a pandemic risky for virus transmission to students and potentially less effective than telemental health. These include:

1. **Body language:** Reading body language is a critical component in the counseling process as it provides counselors with crucial information about a client's emotional state. If we are physically distant or if the client's face is obscured by a mask, we lose important information necessary for clinical judgment and assessment.
2. **Time:** In contrast to a typical medical visit that may last 10-15 minutes, counseling sessions typically run 50 minutes. This puts clients more at risk of exposure from a counselor and from the space.
3. **Physical space:** Counseling offices are small, confined spaces, putting students at risk as they sit with a counselor for an extended period of time. While we could shift to a larger space, as mentioned above, we would then lose the capacity to read facial cues that are critical to clinical assessment and judgment, particularly with the requirement of wearing masks.
4. **Body fluids:** Though uncomfortable to discuss, the reality is that in counseling sessions most clients experience moments of tears and nose blowing. This creates an opportunity for viral spreading if the client needs to remove a mask. This puts both the counselor and future clients who will be in the space at risk.
5. **Talking:** We know that viral spreading happens when someone sneezes or coughs. Recent research suggests that viral particles may hang in the air for up to 14 minutes from simple talking, which is the basis of counseling.<sup>2</sup>

In addition to the issues above inherent in the process of counseling that make in-person counseling during the COVID pandemic riskier, we must also consider the health of our small staff. If one person on our staff becomes sick with this virus, which may take time to resolve, our center could be down at least 1/3 of our capacity to serve student needs.

Per the APA's recent guidance on shifting from remote to in-person visits during this pandemic, we will use clinical judgment to determine if an in-person visit is necessary.<sup>1</sup> Critical questions suggested by APA for determining if in-person visits are needed are:

- Does the patient have access to a telehealth platform, and is he or she able to use it?
- If this is ongoing treatment, is the patient making progress? Is there decline?
- Is the next phase in treatment feasible for continuing remotely, or does it require face-to-face contact?

When a situation is deemed a clinical emergency and an in-person is deemed clinically necessary, students will be required to adhere to safeguards to minimize risk. These safeguards are outlined in the SAIC Make Ready Plan. We will also do our best to reduce the risk of spreading the coronavirus within the office. We are committed to keeping students and staff safe from the spread of this virus. We reserve the right to ask any student seen in an in-person emergency session to leave immediately, if we believe they may be sick or exposed. We can follow up with services by telehealth as appropriate or refer to a community provider.

The bottom line message is that a telemental health platform is the recommended modality for therapy at this time in the pandemic to ensure the health and safety of clients and staff unless the situation presents as a clinical emergency.

## References:

1. Galietti C, Wright V, Higuch SA, Bufka L. COVID-19: When is it OK to resume in-person services? American Psychological Association. <https://www.apaservices.org/practice/news/in-person-services-covid-19>. Published 2020. Accessed May 1, 2020.
2. Stadnytskyi V, Bax CE, Bax A, Anfinrud P. The airborne lifetime of small speech droplets and their potential importance in SARS-CoV-2 transmission. *Proceedings of the National Academy of Sciences*. 2020:202006874.