

Ethics and Telebehavioral Health

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As behavioral health professionals and services providers, we are exploring new frontiers in the delivery of co-occurring services to include telebehavioral health (which also includes telemental health and tele-SUD/addictive behavior) services, hereinafter referred to as TBH. TBH is the delivery of addiction and co-occurring mental health services across electronic and digital platforms. TBH delivers behavioral healthcare services to individuals who are separated from their provider by space and/or time by allowing for the provision of services from a distance. There are two types of TBH delivery: synchronous and asynchronous. Synchronous services occur in real time at the same time – the provider is communicating with the client directly in a live, real-time interaction, using a landline, mobile phone, home monitoring, instant messaging or video conferencing, or other device/platform. Asynchronous services do not occur in real time; rather the provider and client interact with each other at different times

when each of them is available (e.g. email and secure messaging, secure file exchanges). TBH can be made available in a wide variety of settings, including private practice office, outpatient clinics, primary care, hospitals, corrections, colleges and universities, mobile crisis centers, homes, nursing homes, assisted living centers, and VA/military installations. Ongoing research has demonstrated the efficacy and safety of using telemedicine/TBH for behavioral health services.

Benefits and Disadvantages

There are benefits and disadvantages to the use of TBH. One primary disadvantage of TBH is the lack of face-to-face interaction that would typically allow the provider to assess the client’s verbal and nonverbal communications. Another disadvantage of TBH is the potential isolation of the client from live interactions with others. From a practice standpoint, there



may not be the same level of collaborative care and staffing amongst providers when using TBH. There are, however, numerous benefits to using TBH. TBH brings the provider and his or her services directly to the client. Expanding access to care is important in so many communities, especially in rural and frontier areas. Travel time and costs associated with travel are reduced for both the provider and the client. There is increased satisfaction with the services delivered and an increased ease of delivery once everything is set-up correctly. Lengthy waiting lists are avoided, and loss of prospective clients are significantly diminished in those practices that utilize TBH. As we know in the world of addictions-specific services, delays in engaging in treatment can result in a scenario where the client feels helpless, hopeless, and triggered to relapse. Evidence-based practices and outcome-driven data point to the need for continuity of care, which is assisted by the use of TBH. Engagement with the prospective client while he or she is feeling motivated towards change is crucial to long-term stabilization and recovery. For treatment to be effective, we as a profession have to use the latest evidence-based practices that are innovative, outcome-oriented, and engaging. TBH is flexible, creative, engaging, and affordable – which enhances the client’s overall experience with the provider and his or her agency. Finally, TBH reduces stigma by making care accessible to any person struggling with co-occurring disorders, regardless of his or her location in relation to providers.

Ethical, Legal & Clinical Considerations

While TBH brings a great deal of flexibility to a provider’s practice, it also brings up questions of ethical, legal, and clinical competence. Engaging in TBH using an electronic/digital platform requires commitment, competence, and self-management skills. While TBH can be a helpful tool for many individuals, how it is applied requires careful forethought. Providers must understand that all requirements of their profession’s Code of Ethics apply to the provision of TBH. NAADAC/NCCAP’s Code of Ethics applies to all professional services delivered by clinicians and other providers, regardless of the therapeutic modality and whether it is delivered in person, over the phone, via the internet, or through any other means. NAADAC included principles specific to the use of technology in its most recent Code of Ethics (2016) update and has partnered with the Telebehavioral Health Institute to offer discounted education, training, and resources geared towards increasing TBH competency as a new member benefit.

A provider demonstrates clinical competence by possessing the knowledge and skills needed to ensure he or she meets, and hopefully exceeds, the minimum standards required for the delivery of relevant and meaningful professional services. Before offering TBH to any client, the provider should familiarize him or herself with the relevant guidelines for each practice area he or she engages in, including those guidelines available through the Telebehavioral Health Institute. The guidelines do not contain enforceable standards; rather, the guidelines illuminate evidence-based clinical practice standards specific to TBH best practices. In addition to clinical competence, providers must be knowledgeable about the various technologies used in TBH (e.g., hardware, software, Internet connections, privacy safeguards, security protocols). Providers work diligently to protect, to the best of their ability, their clients’ rights to confidentiality and privacy. It is important that providers take the time to familiarize themselves with the technologies they are going to use so they can adjust the visual and

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sound quality of the technology as needed. Providers will have to address complications that arise, including the loss of an internet connection or other unexpected interruptions of service, and have a backup plan for contacting the client should that happen. Providers should be familiar with the strengths and weaknesses of the software programs they plan to use for clinical services. It is incumbent upon providers to research and utilize a secure video platform that is compliant with the Health Insurance Portability and Accountability Act (HIPAA). Only products that are HIPAA-compliant and meet federal requirements for protecting the clients’ privacy should be used.

Clients First

Clients take priority over platforms and technology. Providers should carefully consider the appropriateness of each TBH option for each client’s

individualized needs. Demonstrating competence requires providers to determine which TBH services and treatment modalities may be appropriate in any specific context with each client. While some clients may benefit from counseling services offered using phone or email, others will need services using videoconferencing or even in-person treatment, and still others may benefit from a combination of services. The decision regarding the technology utilized must be made after carefully screening each potential TBH client to determine the scope of his or her diagnosis, the context within which the client lives, whether the client is in crisis, the level of rapport established, and the client’s motivation for therapy. Screening should also explore whether the client has a support system, whether the client can find competent clinician services, and whether the client has access to a secure and private space for participating in the telemental health services.

We, as a profession, are witness to amazing developments within our industry. The need for innovative, evidence-based, outcome-focused tools that reach persons struggling with substance use and addictive behavior disorders is evidenced every day in every community. TBH provides access to healing relationships where access might otherwise not exist. TBH is a logical next chapter in a world that is so technology-driven. We have a professional obligation to use tools that can help our clients find healing, wellness, relationship, support, and functionality. We have an ethical obligation to reach out to the clients who have the hardest time accessing services. We also have a legal obligation to use TBH in a manner that does not cause real or perceived harm. NAADAC endorses the use of evidence-based technologies that are at the forefront of our next generation of care, and is working with its members and partners to ensure that the client is always kept in focus when considering, choosing, and adopting the use of TBH.



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