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Letter to the Editor

The need for integrated primary and behavioral healthcare care in the post-pandemic era

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COVID-19 pandemic has continued to impact mental health worldwide (Tandon, 2021a,b) and brought novel mental health challenges due to social distancing and quarantine requirements. The full impact of the pandemic on mental health toll is not yet known, but recent evidence predicts a significant increase in the number of people who require mental health support in the post-pandemic era (Taylor, & Asmundson, 2020). The pandemic has also impacted practice in the mental health field (Tandon, 2021a,b). Amidst a global mental health crisis, providing mental health services through coordination and effective utilization of resources appears to be more urgent than ever before.

1. The need for interprofessional collaboration in mental healthcare

Integrated Primary and Behavioral Healthcare (IPBH) provides a framework for holistic care to improve mental health and wellbeing through effective resource utilization and interprofessional collaboration (Vanderlip et al., 2016). The research published during the COVID-19 pandemic has largely neglected the importance of IPBH as a service delivery model to deal with current and post-pandemic demand for mental health care. The purpose of this article, therefore, is to highlight the need for integrated care to address novel mental health issues in the post-pandemic era.

2. Prospective role of IPBH in the post-pandemic era

Experts suggest that novel mental health conditions might be possible due to "neuropsychiatric sequelae of COVID-19 (Troyer et al., 2020)." Targeted, coordinated, and least-resourceful interventions from an integrated care perspective are essential to combat the impact of the pandemic on public mental health. IPBH approach would have a number of potential benefits to combat the surge of complex mental health conditions in the post pandemic era.

2.1. Mental health diagnoses

Practitioners providing mental health services in non-integrated healthcare programs may particularly be challenged to identify novel

mental health conditions in the post pandemic era. A surge of novel mental health conditions that are etiologically related to COVID-19 is on the outlook. These conditions would require differential diagnosis considering biological, social and psychological causes.

2.2. Easy access to screening and on-going care

Increasing rates of suicide (Tandon, 2021a,b), substance use disorders, and neurological and psychiatric conditions (Taquet et al., 2021) are concerning in addition to novel mental health issues. Co-occurring mental and physical disorders challenge practitioners providing services in fragmented healthcare systems and often cause problems with screening and on-going care. IPBH programs embrace "no wrong door" policy for individuals with co-occurring mental and physical disorders when they seek help (Vanderlip et al., 2016).

2.3. Dealing with misinformation

Misinformation about the use of masks and vaccinations have exacerbated mental health issues among general population (Su et al., 2021). Behavioral and cognitive interventions alone may be insufficient to alleviate anxiety and confusion around misinformation. In addition, mental health providers with no medical expertise would be unable to provide factual information about disease control.

2.4. Debunking immunization myths

Thus far, COVID-19 vaccine studies can only provide evidence for the short-term efficacy of vaccines (Lin et al., 2021) and people may eventually need re-vaccinated. Vaccine hesitancy is not new but now more widespread. The most recent figures from the US Census Bureau (2021) suggest that 11.4 percent of Americans are hesitant about receiving a COVID-19 vaccine. Previous research suggests that Motivational Interviewing (MI) is a powerful tool to address vaccine hesitancy (Gagneur, 2020). MI and similar counseling interventions embedded in IPBH treatment plans would be imperative to debunk immunization myths.

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2.5. Social justice orientation

COVID-19 has affected economically-disadvantaged communities and persons of color at higher rates (Romano et al., 2021). It is imperative that mental health interventions incorporate social justice perspective, and consider systemic oppression and equity in accessing healthcare in case conceptualizations and treatment plans. Counselors in IPBH teams are capable of bringing a social justice perspective to the table due to their professional orientations (Ulupinar et al., 2021).

3. Recommendations

Public, private, and collegiate healthcare programs need to show effort in adapting IPBH models and aim for the full integration of primary and behavioral care services. IPBH programs should utilize widely accepted and reliable mental screening tools for all clients regardless of their presenting issues. Treatment algorithms and intensity, and the use of evidence-based interventions should be determined by all stakeholders in the IPBH team. On-going monitoring for mental and physical issues should be in place to assess treatment fidelity and prognosis.

4. Conclusion

The impact of COVID-19 on public mental health will continue after the pandemic is over. The role of IPBH would be crucial to combat the aftermath effect of the pandemic due to effective utilization of resources and interprofessional collaboration. IPBH is a major paradigm shift for healthcare systems with many obstacles for full integration. Despite the evidence for its efficacy, IPBH is still rare in healthcare systems. IPBH would have a number of benefits for diagnostic issues, access to on-going care, misinformation and vaccine hesitancy, and social justice-informed treatment considerations. IPBH programs need to grow across different settings and policy makers should help facilitate the growth of integrated care initiatives.

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Ethical Statement

- 1) This material is the authors' own original work, which has not been previously published elsewhere.
- 2) The paper is not currently being considered for publication elsewhere.
- 3) The paper reflects the authors' own research and analysis in a truthful and complete manner.
- 4) The paper properly credits the meaningful contributions of co-authors and co-researchers.

5) The results are appropriately placed in the context of prior and existing research.

6) All sources used are properly disclosed (correct citation). Literally copying of text must be indicated as such by using quotation marks and giving proper reference.

7) All authors have been personally and actively involved in substantial work leading to the paper, and will take public responsibility for its content.

Declaration of Competing Interest

The authors report no declarations of interest.

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Dogukan Ulupinar

Department of Counseling and Development, Long Island University, 720 Northern Blvd., Brookville, New York, 11548, United States
E-mail address: dogukanu@gmail.com.