

Barriers and Facilitators with Virtual Delivery of Trauma-Focused Care and Treatment to Individuals Experiencing or at-Risk of Domestic Violence and Sexual Assault during COVID-19



HEALTH SYSTEM BARRIERS

Interview participants identified several gaps within the Albertan health system which posed barriers to successfully implementing virtual care. These include: *no reimbursement regulations, security and privacy concerns, policy and law/legislations issues, limitations on scalability, delivering compassionate and patient-centred care virtually.*



ORGANIZATIONAL LEVEL CHALLENGES TO IMPLEMENTING VIRTUAL CARE SOLUTIONS

Organizational changes were required to support the fast-paced adoption of virtual care delivery of services in response to quarantine and stay-at-home restrictions imposed in Alberta during the pandemic. As a first step, most organizations had to ensure their employees were situated safely to work from home; this included providing them with stable internet, equipment and the technology access that they needed.

Additional changes include *implementing new organizational policies and procedures, providing employees with training on the use of virtual care platforms, providing important guidelines and tutorials to clients, and adapting services to a secure online platform.*



CHALLENGES FACED BY PRACTITIONERS IN DELIVERING SERVICES VIRTUALLY

Stakeholders shared their experiences and challenges in using virtual care technology to deliver trauma-informed interventions during the COVID-19 pandemic. These include the *practitioners' inability to assess safety in the clients' environment; challenges in making connection with new clients in virtual settings; and the loss of human connection in virtual settings that is vital in healing trauma.* ►

ABOUT OUR STUDY

The COVID-19 pandemic has had a profound impact on the psychological and mental well-being of individuals and families, and the incidence of domestic violence and sexual assault has increased since the start of the pandemic. In response to this, our team conducted a rapid evidence review and interviewed 24 stakeholders within the gender-based violence sector and primary care in Alberta. One of the objectives of our project was to understand the particular barriers and challenges with virtual care delivery among providers and clients. Our findings indicate, the rapid shift to remote delivery of care due to COVID-19 related restrictions was challenging to practitioners and organizations. However, these practitioners and organizations quickly adapted and provided their clients with virtual support.



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Practitioners had to undertake additional work to conduct virtual counseling and safety assessment, which was described to be demanding and strenuous. Practitioners were also personally affected by the pandemic context thus their mental health was also impacted.



CHALLENGES FACED BY CLIENTS IN RECEIVING VIRTUAL CARE SERVICES AND INTERVENTIONS

Practitioners also highlighted challenges their clients faced in receiving trauma-focused or mental health interventions virtually, such as lack of safe and private space to attend virtual session; and barriers with access to technology or reliable internet connection. Respondents provided further insight and understanding on the role that digital divide and social inequity (e.g. low socio-economic status and language barrier) play in accessing virtual care by a range of population groups. ■

OPPORTUNITIES IN VIRTUAL DELIVERY OF CARE

Several opportunities to delivering virtual services to domestic violence and sexual assault populations during this pandemic were identified. The opportunities include:

- (1) the ability to provide access to care for remote communities who may not otherwise be able to receive these services;
- (2) the convenience it provides in terms of saving time, removing transportation barriers; and maintaining connection with their care provider during the pandemic;
- (3) improving client attendance rates; and
- (4) giving clients the choice to receive in-person or virtual care.

For further information about this study please contact:

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