

How Mobile Clinics Play an Important Role in Solving America's Labor Shortage

Overview

Treating and preventing substance use disorder (SUD) with trustworthy, judgment-free mobile healthcare gets people back to work and boosts local economies.

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As business leaders and communities across the U.S. continue to struggle with labor shortages, some new and unlikely allies are emerging in the nationwide effort to rebuild the American workforce. But these proactive partners aren't economists, technical schools or titans of industry. They're mobile healthcare providers on the front lines of treating and preventing substance use disorder (SUD). Here's how mobile clinics play an important role in post-pandemic recovery:

While labor shortages are partially explained by many older adults not returning to the workforce post-pandemic, there are many younger Americans who are still unemployed. New [research](#) points to SUD as a significant driver of workforce shortages. People with SUD often struggle with attendance, job performance, and have other health conditions, including mental illness, that make it hard to get or keep a job. They may also lack the reliable work history, references, and transportation needed to get hired.

Meanwhile, greater availability of buprenorphine and over-the-counter naloxone, a medication used to reverse opioid overdose, combined with new regulations allowing mobile clinics to dispense methadone have fueled the growth of mobile healthcare in substance use disorder treatment. This holds tremendous promise for communities nationwide.

Staffed by clinicians, case managers, peer recovery coaches, and other professionals, mobile clinics offer counseling, education, and medication for people who want to stop using drugs. They also provide harm-reduction services, offering clean needles, wound care, fentanyl testing supplies, and more.

What Makes Mobile Healthcare Different

Mobile clinics offer a trustworthy, private option for patients who don't feel comfortable talking to their primary care provider about their substance use. Stigma, even among health care providers, is high and a significant deterrent for those seeking help. For example, patients of [Healthcare on the Spot](#), a mobile clinic in Baltimore, Maryland, shared that the compassionate, non-judgmental attitudes of the providers along with convenience and privacy, made them feel comfortable at the mobile clinic.



And mobile clinics offer proximity to care in areas where the nearest provider offering buprenorphine or other medications to stop or reduce opioid use may otherwise be hours away. For patients in rural communities, mobile healthcare isn't just more convenient. It's a lifeline.

The accessibility offered by mobile clinics is a huge benefit for public health agencies, too. As drug users move to new neighborhoods or substance use intensifies in certain communities, mobile clinics' agile care teams can change their routes to bring services where they're needed most. And because mobile clinics treat the whole person, providers often identify other health conditions commonly observed in patients with SUD, such as depression and anxiety, and can adjust the care they deliver to meet the needs of each client they serve.

Mobile clinics also play an important role in preventing SUD. According to the [Brookings Institute](#), work-related injuries often lead to opioid prescriptions, making certain occupations more vulnerable to opioid use disorder. Mobile clinics, by offering education, counseling, and medication, can help prevent SUD and support those already at risk of developing an addiction.

Supporting Mobile Healthcare is Investing in Our Economy

While mobile healthcare offers hope for patients, communities, and state and local economies, their success depends on continued funding and innovative policy solutions that make mobile healthcare more efficient and effective.

State and city health departments should consider investing in mobile clinics as part of their public health strategy. Federal policymakers should also consider comprehensive legislation that supports and expands the reach of mobile clinics, recognizing their value in treating substance abuse and bolstering the workforce. For example, Congress passed the [MOBILE Act](#) last year making it easier for federally-funded health centers to start mobile programs. While this new law eliminates some of the red tape organizations face when starting new mobile clinics, it doesn't provide any additional funding.

MAPPING OUR DATA: The number of mobile clinics offering behavioral health services including treatment for substance use disorders has **more than doubled since Feb. 2020.**

Mobile Health Map, a program of Harvard Medical School, is leveraging data to demonstrate the impact of mobile clinics and inform future strategies. Our powerful tool provides insights into the reach and effectiveness of mobile clinics across the country, from urban centers to rural areas. By mapping clinic locations and the care they provide, we can identify gaps in service and areas of high need. These insights can guide healthcare leaders as they develop smart programs and determine resource allocation; and they can help legislators make smart policy decisions for their communities.

By investing in mobile clinics, we can address the substance abuse crisis, support individuals in their recovery, and ultimately, fill the gaps in our workforce.

Sign up for our [newsletter](#) to keep up with the latest developments and learn how you can support the vital work of mobile clinics.

Together we can build healthier communities and strengthen America's economy.

