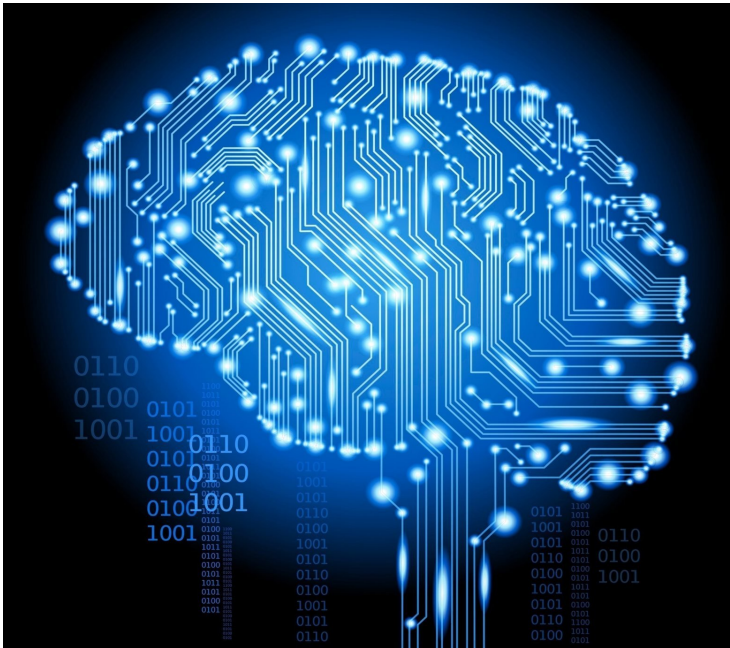# Technology enabled mental health care service crucial for depression: Study

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George Institute of Global Health recently came out with the study entitled 'Technology enabled Systematic Medical Appraisal Referral and treatment Mental Health services in rural India' highlighting fact that technology-enabled mental health services can help mitigate risks posed by corona scare.

Even as the nation battles the novel corona virus pandemic and the mental health challenges it poses including escalation of anxiety and panic in both urban and rural areas of the country, a new study by the George Institute suggests that technology enabled mental health care service delivery improves depression and anxiety symptoms especially in low and middle-income countries like India.

This is important in the light of the fact that both during the current COVID 19 crisis and following that, one is likely to see an increase of stress, depression and anxiety. While the immediate need is to address the respiratory infections due to the viral illness, an unaddressed need is the stress both in the community and among health workers. Following the immediate crises, we would need systems in place to quickly assess and treat individuals over large areas and contexts, who need mental health care using technology enabled evidence-based solutions, which are easy to administer and monitor. Findings from The George Institute India's new study entitled "Technology enabled Systematic Medical Appraisal Referral and treatment (SMART) Mental Health services in rural India" corroborates the fact that technology-enabled mental health services can help mitigate the risks posed by the corona scare.

"Technology was deployed as an enabler to deliver mental health services for screening, diagnosing and managing common mental disorders (CMD) such as stress, depression and suicidal risk in 12 intervention villages in West Godavari district of Andhra Pradesh. The findings are very encouraging and with some training, mental health workforce can be expanded to

tackle challenges posed by situations such as the corona virus scare in the coming weeks and months", says Pallab Maulik, Deputy Director and Director of Research, The George Institute India.

The study was targeted to increase the utilization and uptake of mental health services by ascertaining its acceptability, feasibility and effectiveness. Primary health workers used tablet-based applications to screen individuals and streamline their work, which also enabled easier and faster knowledge sharing and management among ASHA workers and doctors resulting in better quality treatment.

Additionally, the study has shown the way to realise the objective enshrined in the Mental Health Action Plan and National Mental Health Policy which are to deliver mental health care through primary health workers and to increase treatment uptake amongst those in need. Prior to this intervention only 3 out of every 100 individuals at risk of common mental disorders sought help from a doctor, however with this intervention that frequency went up considerably to more than 80 out of every 100 individuals with common mental disorders seeking a doctor, says Dr Maulik.

"Further, there were major improvements in knowledge, attitude and behaviour related to mental health. It also led to reduced stigma perceptions to seeking care for mental illness," adds Siddhardha Devarapalli, Research Fellow, The George Institute India

The village health workers (ASHAs) used the tablet-based applications to screen the community across all 12 villages (~23000 adults) for symptoms of stress, depression, anxiety and increased suicide risk. Those who scored more than a cut-off score were considered at higher risk of suffering from these conditions and were referred to the primary care doctors in the three designated primary health centres that catered to these villages. The primary health care centre doctors were trained to clinically diagnose and provide treatment as per World Health Organization's guidelines, which was also made available on a tablet-based application. Complicated cases were referred to the district hospital where trained mental health professionals were available. An electronic medical record system allowed data to be shared between the ASHAs and doctors, which enabled better follow-up of the individuals and allowed treatment adherence.

To overcome the high level of stigma and lack of awareness on mental health an anti-stigma campaign was implemented in the community. "The campaign had face-to-face interactions, meetings, and multimedia approaches to promote knowledge about mental illness and stigma," Sudha Kallakuri, Research Fellow, The George Institute India.

In low- and middle-income countries where individuals do not receive mental health services, where trained professionals are limited, and that too mostly concentrated in urban areas, many individuals with mental health problems are unable to seek care or receive any good advice, which results in huge numbers of undiagnosed and untreated cases. Additionally, lack of awareness about mental health and associated stigma play a crucial role in seeking care for one's mental health problems. "The study has paved the way for exploring a community-based solution which can help in situations when the healthcare system is stressed like the one we face today," says Pallab.

Lessons from these could possibly be expanded to identify cases, more quickly and effectively in the community, arising out of complications due to the current Corona virus situation, and beyond.