

SBH – Individual Written Assignment

Matric no: 17099601

Topic: Integrating an easily accessible e-mental healthcare system among healthcare workers in Malaysia

Introduction

Juggling between protecting the nation as frontliners and own mental health, Malaysia's healthcare workers still keep on striving to combat the Covid-19 pandemic. This continuous workload has unfortunately discovered the loopholes that existed within our mental health institutions. Healthcare workers (HCW) are often being viewed as the one who would have better understanding about psychological issues, however, a statistical report from Health, Safety and Executive Great Britain (2020) exposed that healthcare workers are among the group of professionals that suffers greatly when it comes to own mental health issues. Extreme pressure experienced by medical frontliners have the potential in increasing burnout risks, which subsequently will not only affect the personal wellbeing of healthcare workers but also the patient care and healthcare system (Blake, Birmingham and Johnson, 2020) which indicates that a healthy mental state of the HCW does influence the healthcare organization's function.

Muller, Hafstad and Himmels (2020) suggested that healthcare workers reported low interest in seeking professional aid, besides showing bigger reliance in social support and contact. Exposure to Covid-19 reported correlation of mental health problems while social support correlated with less mental health problems (ibid.) Reluctance in reaching out to professionals for mental health assistance among healthcare workers requires an alternative solution that may assist in handling the mental health issues such as anxiety and emotional exhaustion (Blake, Birmingham and Johnson, 2020). A better mental alternative form of healthcare system to support HCW holistically during these tough times should be made readily accessible and available for them. The alternative can be the e-mental health support platforms which are just a one click away approach that is proposed to tackle psychological issues promptly before it becomes severe. This is vital to facilitate our HCW in receiving better quality of life both as a person and a healthcare provider, hence eventually letting them continue to serve the public more competently.

Integrating e-mental health support platforms for the use of healthcare workers

E-mental health support platforms can be presented through different medias. These shall be the technological tools that can help in decreasing the mental health burden during pandemic. These e-mental health support platforms include telehealth (remote health care provision through telecommunications technology) and telepsychology (use of various modalities such as Zoom, Google meet, Microsoft Teams meeting to assist individual with mental health and behavioural needs), which are becoming common increasingly (Cosgrove, Karter, Morril, 2020). Mental health apps have shown effectiveness in decreasing symptoms of depression and anxiety.

Due to increasing pressure caused by Covid-19 pandemic, multiple meditation and wellness apps designed by private sector have now temporarily opened free membership to aid in easing anxiety and the majority being mindfulness. It is also crucial that mental health providers recommend apps that are backed up by evidence. Mental health apps would be the application. Numerous mental health apps (MH apps) have been developed and published for online users over the years. These apps are aimed to assist on mental health development ranging from encouraging certain habit for emotional health improvement to guiding mental illness recovery (Bakker, Kazantzis, and Rickwood, 2016). The demand for MH apps is strong, as evidenced by a recent public survey that found that 76% of 525 respondents in their research would be interested in using their mobile phone for self-management and self-monitoring of mental health if the service were free (ibid.) This is mainly because of the main feature of smartphones as individual device that are meant for personal use and easily accessible. One of the e-mental health platforms in Malaysia would be the mental health app named The Help Talk. It is another popular online counselling platform for users to easily seek therapy with licensed counsellors and clinical psychologists remotely as well as at their own flexible timing.

In addition to apps, another platform that could be leveraged to help people cope with mental health challenges evoked by Covid-19 is text-messaging. Because texts are also delivered via individual's device, they're easy to provide to many at once using automated text-messaging platforms. Text-messaging interventions have demonstrated effectiveness in behavioural health promotion and disease management. Importantly, text-messaging is an appropriate tool for low digital literacy population and undeserved group. Suggestive text

messages that offer mental health support shall be sent regularly as a reminder to the HCW that they may reach out to the mental health professionals or organizations such as Mental Health and Psychosocial Support Service (MHPSS) that was organized by Malaysian Health Ministry. Mental Health and Psychosocial Support Services is one of the solutions to curb mental health issues among Covid-19 healthcare workers. This shall be available all the time to fit into the flexible as well as extremely tight working schedules of HCW.

There is a vital role for the use of teleconferencing software for therapy sessions during the Covid-19 pandemic. Most studies of teleconferencing services showed that effectiveness is comparable to in-person services across disorders including depression, posttraumatic stress disorder, and anxiety disorders (Ralston, Andrews and Hope, 2019). China has had some success with this approach. Researchers recently wrote in a Lancet Commentary that during the worst of the outbreak in January, China successfully provided online psychological counselling and self-help was widely rolled out by mental health professionals in medical institutions, universities, and academic societies (Liu, Yang and Zhang, 2020). These telehealth and teleconferencing shall be merged into the HCW's working schedule as a daily or weekly schedule so that they may have a platform to share their emotional distress or any other mental health issues due to their crucial role as front liners of Covid-19 pandemic.

Subsequently, something that plays a complicated role in management of mental health is social media. Social media provide positive and supportive connection for healthcare workers. It is because, most of people turning to social media to share their experience at once looking for advice and information about mental health (Naslund, Aschbrenner , and McHugo, 2019). However, the results are not necessarily positive as there are no clear guidelines for health professionals, to determine how to act on social media (Figueroa and Aguilera, 2020). This is also related to posting information on social media raises the question of how health professionals should respond to the information posted by patients, and how that can impact the therapeutic relationship (ibid.).

Challenges and restrictions of integrating e-mental health support platforms for the covid-19 HCW.

Covid-19 pandemic has boosted the use of technology in telecommunication in mental health care. Provided that these mediums such as smartphones are utilized by Covid-19 HCW across different demography ranging from various age groups to various levels of digital literacy, these technologies shall be made accessible for all these groups of Covid-19 HCW. Older adults that are interested in using technology to support their mental health, and that mobile health technology is practicable and reliable for assessing cognitive and mental illness (Moussa, Mahdanian, and Yu, 2017). In the other hand, older adults and those with low digital literacy might lack prior knowledge of digital technology to fully benefit from these tools (Schreurs, Quan, and Martin, 2017). This would be one of the challenges in implementing e-mental health care platforms for Covid-19 HCW. Digital mental health care tools are challenged with usability whereby not every developer consider digital literacy, age and language proficiency in its implementation (Figueroa and Aguilera, 2020). Henceforth, integration of these e-mental health care systems for the HCW shall be specifically targeted which include specific design that provides simple user interface (UI) for easy navigation and availability in localized languages for the HCW with language limitations (ibid.).

E-mental health care platforms also may pose privacy risks for the users. Cosgrove, Karter and Morril (2020) through their analysis suggested that mental health apps may take vulnerable individuals and make them part of supply chain for the marketplace. This could happen via the shared behavioural data which would be used for targeted marketing purposes. These digital infrastructures for mental health care shall be set up ethically without any privacy violations and data breaching. Apps and text-messaging must not only be effective, but also safe, secure, and responsible, similar to how therapists are held to standards of responsible practice and confidentiality (Moussa, Mahdanian, and Yu, 2017)

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