**Abstract**

InstaHelp is a website that acts as a platform for helping people who require counseling. Any certified mental health counselor can register themselves with this platform and put themselves in the website as a provider of mental health counseling as a service. The Main objective of this website is to provide end to end communication between a patient and their medical counselor. User can choose stay anonymous if they desire to and schedule a meeting from anywhere. As it is a website-based platform, user can avail the services from any device which has web-support and from any location. User can register themselves and search the market place for a medical counselor, they can search for the appropriate counselor based on their problems and avail the services from counselors that are specialized in the particular field of expertise in which they are facing their problem. Field such as types of addictions, bi-polar disorders, marital counseling and such. They can read the reviews/ratings, charges and decide from which counselor they should seek help. If they find a counselor they like, they can book an appointment with the medical doctor. The user can leave a review after the counseling for other users. If the user is not comfortable in showing their face, they can also opt-in for text or voice call method of communication. Afterall the ultimate objective of this website is to provide certified mental health counseling to people who seek help while wanting to be in their safe comfort zone. The website’s front-end will be developed with React framework using JS ES6, Babel and many other frameworks such as bootstrap. The back-end of the server will be developed using Node.js with Express as the library for providing RESTful API. The website will use MongoDB which is a NOSQL type of database.

**Introduction**

Mental health is one of the most prominent yet neglected issues that is faced by people around the world. According to mental health statistic for England, a research study by House of Commons Library states an estimation that 1 in 6 adults have experienced a ‘common mental disorder’ like depression or anxiety in the past week. It also states that 1 in 8 children from age 5 to 19 are estimated to have at least one mental health problem. This is just one study that provides a miniscule information on a very vast problem that society is facing right now. On top of this, we are facing a pandemic which is causing an economic crisis in every country. Most of the individuals that face mental disorder, strays away from the society. Most often never getting a chance to get back and normalize. It ultimately leads to bad health, homelessness, violence/crime, poverty, addiction, substance abuse and many more such problems.

The biggest issue regarding mental health right now is not that it happens to many people, rather it is due not being identified as a mental disorder so that it can be viewed as a problem. If it is not seen as a problem, no-one tries to correct the issue until it is too late to be corrected. All of this happens because of the stigma that is attached to mental disorder. According to a study by department of psychiatry of Leipzig University, there is proof of a particular stigma attached to seeking help for mental problems. Which further leads the victims of mental disorder to never seek help. The paper also suggests that de-stigmatization of this particular problem will result in more people attempting to seek help for themselves. This is what we hope to achieve by building this platform. We want to address the issue that is neglected because it is considered as weakness to show that a person requires help. We want to directly reach these people, who are unable to reach out for help. We believe that it is possible to solve this problem in a unique way instead of tradition method of counseling. If we get rid of the discomfort or the association of weakness with mental disorder by completely removing the step of getting out of comfort zone and going to a medical institution, more and more people will realize that they are facing a problem which requires a help of a professional and there is nothing wrong with seeking help. This is what we hope to achieve, where a patient can stay completely anonymous if they desire to do so, and get help from professional doctors from their homes. Our platform will act as tool for facilitating the communication between such people in need and the ones who can provide help.

**Technologies used.**

* Node.js with Express library to provide a RESTful API.
* Using MongoDB as a database for the application. The NoSQL based storage is flexible and the flexibility it allows to change the storage structure of the documents is very well suited for the project in development. MongoDB will not be directly used inside Node.js, instead mongoose library will be used for cleaner and readable code.
* The website will use React.js to develop its front end.
* Many other libraries such socket.io and more will be used for adding functionalities into the website once the basic structure is built.

**Process overview.**

Briefly there are two major processes involved in the website. First is the registration sub-process which will admit the new users into the system and login sub-process which will authenticate the user. The second process is where the main operation of the website will take place. Where, the user can browse the page where they can find an appropriate doctor according to their wishes, needs and requirements in general. The user will be able to set an appointment and pay the doctor online. The website will create and maintain sessions automatically on the set and agreed date time by both the parties. In the end user can leave a review of the doctor for other users regarding the degree of helpfulness the counseling provided. On the other hand, the doctors will leave a remark regarding the patient, the data can be used for further research and development of software.

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**Literature review**

The major elements before we dive into the development of this website are scientifical reason and requirement of such website to exist in the first place. Another element is estimating and anticipating the effectiveness of such type of online counseling and how likely it is to genuinely provide help to such patients. We need to understand the effects of mental disorders on society and economy and the barriers, that stops such people to correct and normalize themselves. We need to ensure that the solution we are opting for is actually impacting such people in positive way.

**The Stigma and the negative impacts of people seeking help for mental health.**

There are vast types of mental health issues and in some cases the patient themselves does not know that they have a problem. However, there are also cases where the patient starts to realize that there may be a disorder or abnormality they might have. Not every one of these cases require medical care from a professional but some of them do. The paper by (Schomerus & Angermeyer, 2008) in University of Leipzig came to a conclusion that there were roughly 3 levels of discrimination of help seekers. Adding to it, they also stated that de-stigmatization can heavily increase the readiness of the patients in seeking help from professionals. It emphasized that increasing the awareness and basic knowledge about mental health and its impacts can also be helpful and that it is at the core of seeking intentions. The mental health issue is very complex and there are many variables that are needed to be carefully observed to find correlation among them. This makes this study highly open for further development. Although we cannot discard the conclusions directly, we also have to consider the possibility that these are not entirely the causes. It is also to note that most of the case studies in the research were based on a specific type of mental illness which is depression. There are many good incentives to investigate and inference based on this disorder but we want to focus on cause and effect about all types of disorders as our website has broad and generalized target. Paper heavily assumes that in most cases depression is self-diagnosable. It is safe to assume that these problems of stigmatization affect other disorders too at least to a certain degree if not more in cases such as substance abuse or schizophrenia. Major improvement seems to be possible in this area and more research can be done. What we learn from this especially for our own use case is that by eliminating the whole problem of stigmatization can definitely boost the morale and incentive to seek of help of such patients. By making it available/accessible at home and the element of anonymity both work in the favor of improvements in general.

Another paper (Barney, Griffiths, Jorm, & Christensen, 2006) also pointed out the same issues in 2006. They conducted a study with 1300 adults randomly sampled from Australian community. The sample was given a questionnaire consisting of questions like depression vignette and, demographics, depression experiences, and symptoms. If the person was facing any symptoms currently. One of the most important question was focused on how they perceived themselves in contrast to earlier paper where it was mainly focused people around the subject. The study concluded by stating that in general many people thought that they felt embarrassed from seeking help. They believed that the action of seeking help will change the way people would think about them and refused to take action. Although the responses did vary, they key factors were self-embarrassment and expectations that it will negatively affect views of people around them. In many cases people also believed that this type of thinking impacted the subjects in the sample more negatively adding more problems. There are abundant amounts of sources available that re-enforces this for us. Referencing more papers will add other minor factors but in general the core statement stays the same.

# References

Barney, L. J., Griffiths, K. M., Jorm, A. F., & Christensen, H. (2006). Stigma about Depression and its Impact on Help-Seeking Intentions. 54.

Schomerus, G., & Angermeyer, M. C. (2008). Stigma and its impact on help-seeking for mental disorders:. 37.