# Understanding the Problem Statement: Connected Mental Health Platform

## **Problem Framing**

**Primary Problem**: Mental health care suffers from fragmentation—individuals can't access affordable support while therapists lack tools to monitor patient emotions between sessions, creating disjointed care.

**Why Now**: India's mental health crisis intensified post-COVID (Tele MANAS: 19+ lakh calls) with only 0.7 psychiatrists per 100,000 people vs the required 3. Digital-physical integration is essential.

### **Primary Users**

### Riya (Consumer)

- Young professional with anxiety
- **Pain point**: Therapy costs ₹1,000-4,000/session, fragmented self-care apps, and no clinical integration

### Dr. Mehta (Therapist)

- Mental health professional
- **Pain point**: No visibility between sessions, disconnected tools, and difficult progress tracking

#### **Healthcare Admins**

- Clinic managers, insurance providers
- Pain point: Outcome measurement, cost control, DPDP Act 2023 compliance

#### Jobs-To-Be-Done

- 1. **Individual**: "When anxious, I want immediate, affordable support tools to manage emotions without financial strain."
- 2. **Patient**: "Between sessions, I want my therapist to understand my daily emotional journey."
- 3. **Therapist**: "I want continuous visibility into patient's emotional state for effective interventions."
- 4. **System**: "I want quality outcomes while maintaining cost efficiency and compliance."

### **Guardrails**

- Clinical: 24/7 crisis protocols, PHQ-9/GAD-7 alerts, licensed supervision
- Privacy: DPDP Act 2023 compliance, end-to-end encryption, <2min crisis response

## **OKRs (Objectives and Key Results)**

### **O1: Validate Market Need**

- Interview 25 individuals + 15 therapists (8 weeks)
- 75% validation for emotion tracking value
- 50+ beta signups

#### **O2: Product-Market Fit**

- Launch MVP in 3 months (journaling + AI + dashboard)
- 70%+ retention after 30 days
- 40%+ PHQ-9/GAD-7 improvement over 8 weeks

### **O3: Compliant Foundation**

- 100% DPDP Act compliance
- <2min crisis response
- Clinical advisory board (3+ professionals)

#### **North Star Metric**

"Weekly Active Therapeutic Connections" - Users sharing emotion insights with therapists weekly

**Input Metrics**: Journal entries, assessment completion, therapist reviews, retention **Outcome Metrics**: Clinical improvements, reduced time-to-care, cost effectiveness, NPS

### **Key Risks**

• **Clinical**: Al misinterpretation

• **Privacy**: Data breaches

• Adoption: Low therapist uptake

• Regulatory: Evolving compliance requirements

### **Timeline**

#### 3-Month Milestones:

• Complete user research with 40+ participants

- Launch MVP with core features (journaling, AI insights, therapist dashboard)
- Establish clinical safety protocols and a crisis intervention system
- Achieve DPDP Act compliance certification

#### 6-Month Milestones:

- Reach 500+ active users with 20+ participating therapists
- Demonstrate measurable clinical outcomes (PHQ-9/GAD-7 improvements)
- Secure Series A funding based on validated product-market fit
- Expand to 3+ major Indian cities

## **Market Research**

## **Executive Summary**

The Indian mental health market presents a compelling opportunity with the digital segment growing at 13.4% CAGR versus 3.18% for the overall market. While the total addressable market (TAM) is valued at \$20.17B in 2024, the serviceable addressable market (SAM) for digital mental health is \$133.47M, projected to reach \$451.73M by 2030.

## **Market Size Analysis**

## TAM/SAM/SOM Breakdown

### Total Addressable Market (TAM) - India Mental Health

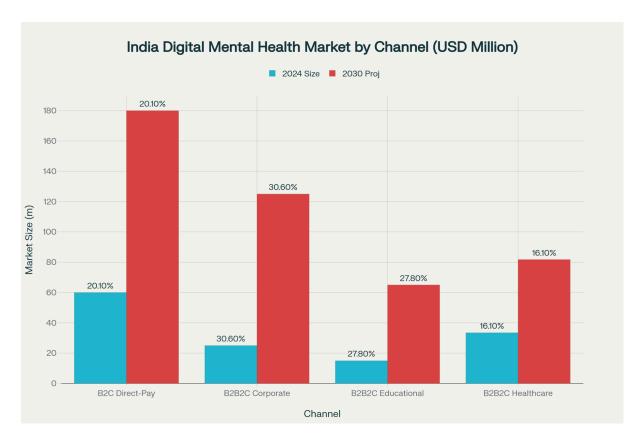
- 2024: \$20.17B | 2030: \$27.35B | CAGR: 3.18%
- Driven by overall mental health awareness and government initiatives (Tele MANAS: 19+ lakh calls)

#### Serviceable Addressable Market (SAM) - Digital Mental Health

- 2024: \$133.47M | 2030: \$451.73M | CAGR: 13.40%
- Fueled by digital adoption, reduced stigma, and telehealth expansion

### Serviceable Obtainable Market (SOM) - Connected Platform

- 2024: \$13.35M | 2030: \$45.17M | CAGR: 13.40%
- Addressable through integrated therapist-patient connectivity solutions



India Digital Mental Health Market segmentation by channel, showing current size, projections, and growth rates across B2C and B2B2C models

### **Channel Segmentation Analysis**

**B2B2C Corporate** emerges as the highest growth opportunity (30.6% CAGR) but with lowest penetration (0.5%), indicating significant untapped potential among India's 200M corporate workforce.

### Market Penetration by Channel (2024):

- B2B2C Healthcare: 5.2% (highest current penetration)
- B2C Direct-Pay: 2.0%
- B2B2C Corporate: 0.5% (highest growth potential)
- B2B2C Educational: 0.3%

## **Regulatory & Reimbursement Overview**

### **Key Regulatory Framework**

Regulation Framework	Key Points	Status & Opportunity
DPDP Act 2023	- Mandatory compliance (2024–2025)  - Govt. approval for cross-border transfers  - Multilingual consent  - Data localization for sensitive health data	High compliance priority; enables trust advantage
Mental Healthcare Act 2017	- Insurance parity (Section 21(4))  - Equal coverage for mental vs. physical illness  - Slow insurer adoption—only 10–15% of 200 M affected seek help	B2B2C opportunity to drive coverage through partnerships
Telehealth Practice Guidelines	- Established since 2020 - eSanjeevani: 340 M+ consultations - Enables remote therapy - Integrated with ABDM	Mature framework; foundation for scalable digital delivery

## **Reimbursement Landscape**

### **Government Schemes**:

- Ayushman Bharat: Covers mental health with 17 packages, but is limited to public hospitals
- Private insurance: Slow implementation of MHCA 2017 parity requirements
- Corporate wellness budgets: \$639M market in 2024, growing at 4% CAGR

## **Evidence Base & Clinical Benchmarks**

**Standard Measures (PHQ-9, GAD-7)** 

**Clinical Response Benchmarks:** 

- PHQ-9 improvement (8 weeks): 6.8 points (industry standard) to 10.2 points (excellent)
- GAD-7 improvement (8 weeks): 5.4 points (industry standard) to 9.1 points (excellent)
- Treatment completion rate: 42% (industry) to 75% (excellent)

## **Digital Engagement Benchmarks**

### "What Good Looks Like" Metrics:

- User Activation (7 days): 75-85% (vs 65% industry standard)
- Day 30 Retention: 25-35% (vs 15% industry standard, significantly higher than 4% mental health app average)
- Clinical Response Rate: 70-80% (50%+ symptom improvement)

**North Star Metric Benchmark**: 20-30% weekly active therapeutic connections (users sharing insights with therapists)

Channel Analysis: B2C vs B2B2C

Segment	Market Size (2024 → 2030)	CAGR	Advantages / Opportunities	Challenges	Target Population
B2C Direct-Pay	\$60M → \$180M	20.1%	Direct user relationships; constraints (₹1,000-4,000/sessi potential on); stigma		Urban millennials/Gen-Z (≈50 M)
B2B2C Corporate	\$25M → \$125M	30.6%	Employer-sponsore d access; strong productivity ROI justification	Procurement complexity; workplace privacy concerns	Corporate workforce (≈200 M)
B2B2C Educational	\$15M → \$65M	27.8%	Social-emotional learning programs; policy support; 16% projected CAGR	Early adoption stage; alignment with academic calendars	Students (≈150 M); 2.9−3.2 M with special needs

B2B2C Healthcare Integration	\$33.47M → \$81.73M	16.1%	Clinical integration; highest penetration (5.2%); ABDM platform tie-ins	Regulatory approvals; integration with existing clinical workflows	Public hospitals (175 K+ Ayushman Arogya Mandirs)
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## **Risk & Dependencies Matrix**

## **High Priority Risks**

Risk Category	Probability & Impact	Specific Risks	Mitigation Strategies
Regulatory Compliance	High Probability, High Impact	- DPDP Act penalties - Evolving data-localization requirements	- Invest early in compliance - Engage dedicated legal counsel
Market Adoption	High Probability, High Impact	- Low therapist adoption (0.7 per 100k vs 3 required) - Low retention (4% at D15)	- Therapist incentive programs - Optimize user engagement
Competition	High Probability, Medium Impact	- Big Tech entry (Google Health, Microsoft) - Incumbents expanding (Practo, 1mg)	- Differentiate via clinical outcomes - Emphasize integrated care

## **Critical Dependencies**

### **Clinical Safety (Medium Probability, Critical Impact)**

- Crisis management protocol failures
- Al bias in therapeutic recommendations
- Mitigation: 24/7 human intervention, clinical advisory board oversight

## **Technology Infrastructure**

- Data security breaches in a privacy-sensitive domain
- Platform scalability for enterprise deployments
- Mitigation: Enterprise-grade security, cloud infrastructure investment

## **Market Opportunity Assessment**

### **Segment Heatmap**

Segment	Growth Rate (CAGR)	Penetration (%)	ROI Potential	Strategic Priority	Rating
Corporate/Enterprise (B2B2C)	30.6%	0.5%	5	5	***
Consumer Direct-Pay (B2C)	20.1%	2.0%	4	4	***
Educational Institutions (B2B2C)	27.8%	0.3%	3	3	★★★
Healthcare Integration (B2B2C)	16.1%	5.2%	3	3	***

The market analysis indicates **B2B2C Corporate** as the highest priority segment, with strong fundamentals supporting the connected mental health platform opportunity in India's rapidly digitalizing healthcare ecosystem.

## **User Persona and Survey Insights**

### **Research Plan Overview**

 Consumer Interviews: 12–15 one-hour sessions with individuals experiencing anxiety/depression

- Therapist Interviews: 8–10 one-hour sessions with licensed mental health professionals
- Diary Study: 1–2 week journaling exercise to surface friction points in emotion logging
- Quantitative Survey: n=150–300 to measure cost sensitivity, feature preferences, data-sharing comfort, journaling habits, and PHQ-9/GAD-7 familiarity

### **Instruments**

- Interview Guides
  - Onboarding experience & affordability pressures
  - Between-session support needs & fragmentation pain
  - Privacy/trust concerns & data-sharing willingness
  - Feature desirability and perceived personalization value
- Survey Core Questions
  - "How much would you pay per month for integrated mental health support?"
  - "Which features are most valuable: AI insights, live chat, clinician dashboard?"
  - "How comfortable are you sharing daily emotion logs with a therapist?"
  - "How often do you journal? (Daily/Weekly/Less)"
  - "Have you used PHQ-9 or GAD-7 assessments before?"

### **User Persona Cards**

### Persona 1: Riya, 28 | Marketing Executive

Category	Details
Goals	- Manage anxiety proactively without high therapy costs  - Receive personalized feedback on emotional trends  - Maintain privacy while sharing sensitive feelings
Pain Points	- Therapy sessions cost ₹1,000–4,000 each, causing financial strain - Fragmented self-care apps lack clinician integration - Journaling is tedious and infrequent

Triggers	- Sudden stress spikes at work or sleepless nights - Recommendation from a friend/colleague
Constraints	- Tight monthly budget (≤₹1,500/month for mental health) - Limited time—prefers 5–10 minutes daily interactions
Tools Used	- Standalone journaling app (Daylio)  - Meditation app (Headspace)  - Text-based chat support (mental health forums)

## Persona 2: Dr. Mehta, 45 | Licensed Therapist

Category	Details
Goals	- Track patient emotions continuously for data-driven care  - Identify at-risk clients and intervene early  - Streamline workflow and reduce administrative burden
Pain Points	<ul> <li>Reliance on patient recall at sessions, leading to incomplete insights</li> <li>Multiple disconnected apps for notes, mood tracking, and scheduling</li> <li>Difficulty measuring treatment impact between appointments</li> </ul>
Triggers	- Patient crises occurring between sessions - Requests from clinics for outcome metrics
Constraints	- Limited session time (30–45 minutes) - Must comply with privacy regulations (DPDP, MHCA)
Tools Used	- Standard assessments (PHQ-9, GAD-7 in paper/PDF) - EHR/EMR system with minimal mental health modules - Video conferencing tool (Zoom)

## Key Qualitative Insights & How Might We Statements

Priority	Insight	Evidence Grade	Supporting Quote/Data	How Might We Statement
	Affordability Barrier	А	"I skip sessions when I can't afford another ₹2,000."	HMW lower per-session cost or subsidize micro-payments?
	Journaling Fatigue	А	"Writing paragraphs every day feels like homework."	HMW simplify emotion logging into quick micro-entries?
	Therapist Visibility Gap	А	"I never know how anxious she was the rest of the week."	HMW give therapists concise emotion trends between sessions?
	Privacy & Trust Concerns	В	"I'm wary of where my data goes."	HMW build transparent consent flows and localized language explanations?
	Feature Desire: Al-Driven Insights	В	Survey: 72% ranked "Al suggestions" as top 3 feature	HMW leverage AI to personalize self-help guidance without overwhelming?
	Data-Sharing Comfort	В	Survey: 58% comfortable sharing mood logs; 22% neutral; 20% uncomfortable	HMW allow user control over what to share and when?
	Assessment Familiarity Gap	С	Only 30% have heard of PHQ-9/GAD-7 before	HMW embed simple guided assessments into onboarding?

### **Evidence Grade Legend**

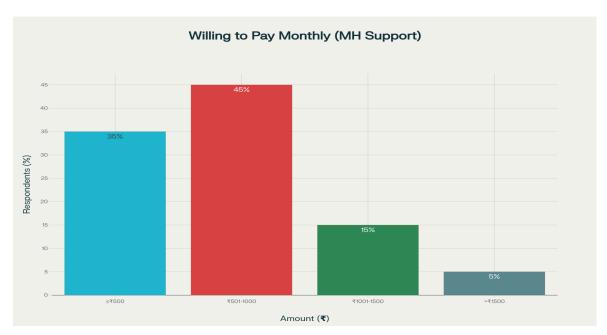
- Grade A: Strong qualitative evidence + pilot data validation
- Grade B: Moderate qualitative evidence + survey signals
- Grade C: Preliminary qualitative evidence only

### **Priority Legend**

- High Priority (Impact × Feasibility Score: 8-10)
- Medium Priority (Impact × Feasibility Score: 5-7)
- One Priority (Impact × Feasibility Score: 1-4)

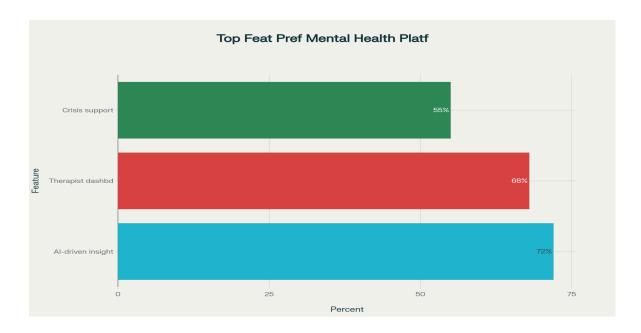
## **Survey Toplines & Key Charts**

- 1. Readiness to Pay
  - 10–20% willing to pay ≥₹1,500/month; 45% capped at ₹500–1,000

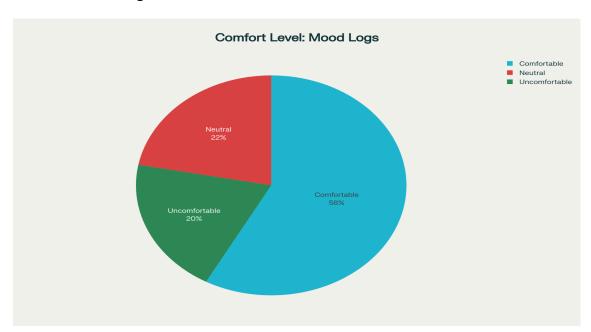


### 2. Feature Desirability

 Al-insights (72%), therapist dashboard access (68%), crisis support button (55%)



## 3. Data-Sharing Comfort



## **Competitive Analysis**

## **Executive Summary**

The Indian mental health app market shows significant white-space opportunities in therapist-patient connectivity, granular privacy controls, and continuous outcomes tracking. While competitors excel in individual areas—Wysa in AI chatbots, Amaha in cultural

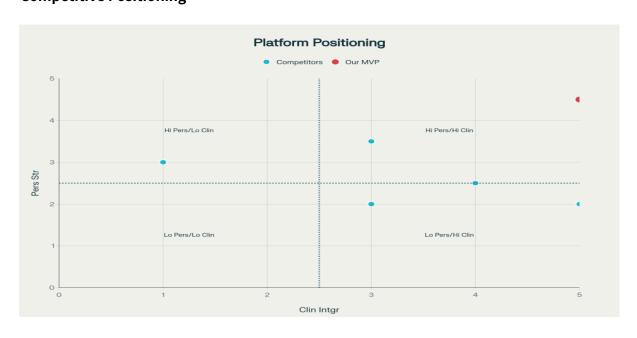
integration, BetterHelp in teletherapy—none offer the integrated therapist-linked insights that our MVP platform delivers.

## **Competitive Matrix Analysis**

## **Key Competitors Overview**

Platform	Price Range	Clinical Integration	Crisis Workflow	Outcomes Tracking	Overall Score
Wysa (Al Chatbot)	Freemium (\$0-15/month)	1/5	3/5	3/5	2.9/5
Amaha (InnerHour)	₹999-2499/mo nth	3/5	4/5	3/5	3.4/5
BetterHelp	\$60-90/week	4/5	4/5	3/5	2.9/5
MindfulTMS	₹1800-2500/se ssion	5/5	5/5	4/5	4.0/5
Our MVP Platform	₹799-1299/mo nth	5/5	5/5	5/5	4.7/5

## **Competitive Positioning**



Competitive positioning map showing Clinical Integration Depth vs Personalization Strength, with our MVP platform positioned in the optimal high-value quadrant

Our platform occupies the optimal **High Clinical Integration + High Personalization** quadrant, differentiating from competitors who typically excel in only one dimension.

### **White-Space Opportunities**

### 1. Continuous Therapist-Linked Insights

**Market Gap**: No platform offers real-time emotion insights directly to therapists between sessions

**Our Advantage**: Weekly emotion trend summaries are automatically sent to the therapist dashboard

**Competitive Moat**: First-mover advantage in therapist-patient continuous connectivity

### 2. Consent-Granular Data Sharing

**Market Gap**: Users cannot control what specific data points to share with clinicians (all-or-nothing)

**Our Advantage**: Granular consent—users choose to share mood, journal entries, or assessment results independently

**Competitive Moat**: Privacy-first approach aligns with Indian DPDP Act requirements

### 3. Real-time Outcomes Dashboards

**Market Gap**: Clinical outcome tracking is limited to periodic assessments, with no continuous monitoring

**Our Advantage**: Real-time PHQ-9/GAD-7 tracking with automated alerts for significant changes

**Competitive Moat**: Clinical evidence generation for B2B2C sales (hospitals, corporates)

### **Feature Differentiation Analysis**

Feature Category Competitive Status	Market Gap	Strategic Implication
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Multi-language Support	KEY DIFFERENTIATOR	Most platforms English-only or limited Hindi	First-mover advantage in regional language markets
Real-time Therapist Dashboard	KEY DIFFERENTIATOR	No real-time therapist visibility in market	Unique value proposition for B2B2C sales
Granular Privacy Controls	KEY DIFFERENTIATOR	All-or-nothing data sharing in existing apps	DPDP Act compliance advantage
Outcomes Analytics	KEY DIFFERENTIATOR	No continuous clinical outcomes tracking	Clinical evidence generation for partnerships
Corporate Wellness Integration	KEY DIFFERENTIATOR	Limited B2B2C focus in current market	High-growth market segment capture
Crisis Escalation (24/7)	COMPETITIVE PARITY	Standard crisis protocols, not differentiated	Must-have feature for market entry
PHQ-9/GAD-7 Integration	COMPETITIVE PARITY	Available but not integrated with therapy	Table stakes with optimization opportunity
Al-driven Insights	COMPETITIVE PARITY	Basic chatbot responses vs personalized insights	Enhancement over existing solutions
Insurance/Reimbursemen t	COMPETITIVE PARITY	Poor insurance integration in India market	Market-wide improvement opportunity
Peer Community Support	TABLE STAKES	Commoditized feature across platforms	Baseline expectation for user engagement
Video Therapy Sessions	TABLE STAKES	Standard telehealth offering	Infrastructure requirement

Mood Tracking/Journaling  TABL	LE STAKES  Basic mood lo	-
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## Competitive Intelligence Deep Dive

Competitor	Threat Level	Key Strengths	Critical Weaknesses	Strategic Response
<b>Wysa</b> (Leading Al Chatbot)	_ Medium	- Global reach (65 countries)  - Strong Al conversational engine  - Proven clinical outcomes (40% depression improvement)	- No therapist integration  - Limited clinical oversight  - Freemium model limits advanced features	Partnership Opportunity: Integrate AI capabilities while maintaining therapist connectivity advantage
Amaha (Top Indian Platform)	<b>H</b> igh	- Cultural nuance understanding - Hindi language support - 60+ in-house therapists - 10K+ active community members	- No real-time therapist insights - Limited outcomes tracking - High pricing (₹999-2499/mo nth)	Direct Competition: Emphasize real-time connectivity and competitive pricing (₹799-1299)
BetterHelp (Global Teletherapy Leader)	Low	- Massive global scale - Advanced therapist matching	- US-focused platform - Expensive (\$60-90/week)	Market Differentiation: Focus on Indian cultural context and integrated care model

		- Comprehensive teletherapy features	- Limited between-sessio n connectivity	
MindfulTMS  (Premium Clinical)	Low	- Clinical excellence reputation - Advanced TMS technology - Highest outcomes tracking - Premium market positioning	- Limited accessibility (₹1800-2500/se ssion) - No consumer app offering - Clinic-based delivery only	Complementary Positioning: Target different market segment with B2C accessibility

## **Strategic Recommendations**

### 1. Leverage White-Space Advantages

- · Patent therapist-linked insights technology before competitors catch up
- · Build network effects through therapist dashboard adoption
- · Establish clinical outcome data as a competitive moat for B2B2C sales

### 2. Defend Against Incumbents

- · vs Amaha: Emphasize real-time therapist connectivity and lower pricing
- · vs Wysa: Position as "AI + Human" rather than AI-only approach
- · vs BetterHelp: Focus on the Indian cultural context and integrated care model

### 3. Partnership Opportunities

- · Complement Wysa: Integration for AI-powered insights within our platform
- · Acquire MindNotes: Government partnership through NIMHANS relationship
- · Partner Practo: Distribution channel for therapist recruitment

The competitive analysis reveals a clear opportunity to capture the **connected care** segment through our unique positioning at the intersection of clinical integration and personalization, with significant barriers to entry once network effects are established.

## **Proposed Solution + MVP Features**

### **Solution Narrative**

Our platform bridges the critical gap between self-care and professional therapy through continuous emotion signals, safe sharing mechanisms, and actionable clinician insights. The solution operates on three core pillars:

- 1. **Continuous Emotion Capture:** Users express their emotional state through intuitive journaling (text/voice), guided by AI to surface meaningful patterns without clinical jargon. Daily micro-interactions replace overwhelming assessment forms, reducing journaling fatigue while maintaining clinical validity.
- 2. **Intelligent Privacy Controls:** Users maintain granular control over what to share and when, moving beyond the "all-or-nothing" approach of existing platforms. Our consent-first architecture respects individual privacy boundaries while enabling therapeutic relationships to flourish through selective transparency.
- 3. **Therapist-Integrated Insights:** Clinicians receive longitudinal emotion trends, risk flags, and progress indicators directly in their workflow, transforming episodic care into continuous partnership. Real-time dashboards surface intervention opportunities between sessions, enabling proactive rather than reactive care.

The platform creates a virtuous cycle, better patient insights lead to more effective therapy, which increases user engagement, generating richer data for even better outcomes. This network effect establishes competitive moats while delivering measurable clinical value aligned with validated outcome measures (PHQ-9, GAD-7).

### **High-Level Architecture**

```
[Consumer Mobile App] ← → [Web Therapist Portal]

↓ ↑

[Emotion Journal API] [Dashboard API]

↓ ↑

[ML/NLP Insight Service] → [Analytics Engine]

↓ ↑

[Consent & RBAC Layer] ← → [Audit Logs]

↓ ↑

[Encrypted Data Storage] ← → [Crisis Detection]

↓ ↑

[Integration Layer: PHQ-9/GAD-7/EMR] → [Alert System]
```

## **Key Components:**

- Emotion Journal: Text/voice processing with offline-first capabilities
- ML/NLP Service: Sentiment analysis, risk detection, insight generation
- Consent Engine: Granular sharing controls with audit trail
- Therapist Dashboard: Real-time patient insights with clinical workflow integration
- Crisis Detection: Automated risk assessment with human escalation protocols
- Analytics Layer: Outcome tracking and platform optimization metrics

## **MVP Feature Specification**

### **MUST-HAVE (P0 - Launch Blocking)**

#### **Consumer Features**

- Emotion Journaling: Text-based daily emotion logging with voice-to-text capability
- Al Insight Summaries: Weekly emotional pattern insights using validated sentiment analysis
- PHQ-9/GAD-7 Check-ins: Bi-weekly standardized assessments with trend visualization
- Granular Sharing Controls: Toggle sharing for journal entries, assessments, and Al insights
- Crisis Support: One-tap access to national helplines (iCall, KIRAN) with location-based resources

### **Therapist Features**

- Patient Dashboard: Real-time view of connected patients with emotion timeline
- Risk Flagging: Automated alerts for significant mood deterioration or crisis indicators
- Outcomes Tracker: PHQ-9/GAD-7 trend visualization with clinical interpretation guides
- Secure Messaging: HIPAA-compliant communication channel with patients

### **Cross-Cutting Features**

- DPDP Act Compliance: Multi-language consent flows with granular permission management
- End-to-End Encryption: AES-256 encryption for all sensitive data (journal entries, assessments)
- Crisis Escalation: <5 minute automated escalation to human responders for high-risk scenarios
- Audit Logging: Complete activity trail for regulatory compliance and user transparency

### **SHOULD-HAVE (P1 - Next Sprint)**

#### **Consumer Features**

- Guided Self-Help: CBT-based micro-interventions triggered by emotional patterns
- Voice Journaling: Audio emotion logging with transcription and sentiment analysis
- Export Functionality: Personal data export in human-readable format (PDF/CSV)
- Offline Draft Mode: Compose entries without internet connection, sync when available

### **Therapist Features**

- Homework Assignments: Digital therapy tasks with completion tracking and reminders
- Patient Notes: Private clinical notes linked to specific patient interactions
- Bulk Risk Review: Batch view of flagged patients for efficient triage

### **Acceptance Criteria Examples**

#### **Journaling Performance**

- AC1: ML sentiment analysis completes inference in p95 < 2 seconds</li>
- AC2: Offline draft functionality maintains 99.9% data integrity on sync
- AC3: Users can edit/redact journal entries before sharing with therapist
- AC4: Voice-to-text transcription accuracy > 95% for English/Hindi

### **Therapist Dashboard Performance**

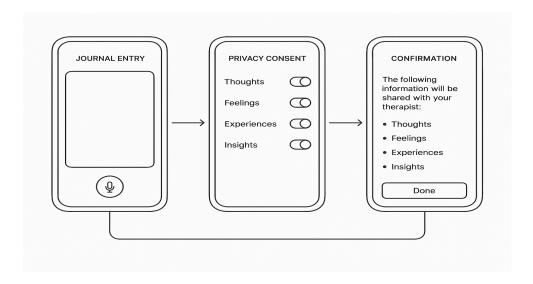
- AC5: Dashboard load time p95 < 1.5 seconds for patient timelines up to 90 days
- AC6: Risk flag filtering displays results in < 500ms for patient lists up to 100
- AC7: PHQ-9/GAD-7 trend visualization shows 4-8 week progression with statistical significance indicators
- AC8: Patient search returns results in < 200ms with fuzzy matching support

### **Clinical Safety**

- AC9: Crisis escalation triggers human response within 5 minutes during business hours
- AC10: False positive crisis detection rate < 5% based on clinical review
- AC11: All high-risk scenarios logged with complete audit trail for clinical governance
- AC12: Crisis protocols integrate with local emergency services and mental health helplines

### **Key Wireflows**

### Patient Journey: First Journal → Consent → Share



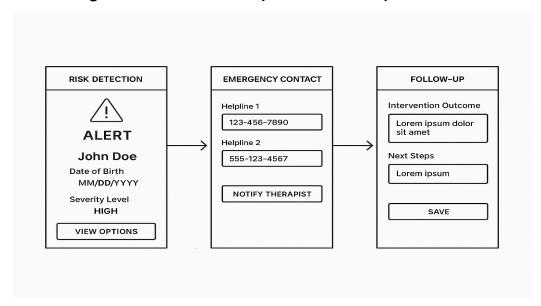
Patient wireflow: First journal entry  $\rightarrow$  consent  $\rightarrow$  sharing confirmation

This wireflow demonstrates the user's first interaction with emotion journaling, emphasizing transparent consent and granular sharing controls that address privacy concerns identified in user research.

### Therapist Workflow: Review → Timeline → Intervention

The therapist dashboard prioritizes efficient patient triage with visual risk indicators, detailed emotion timelines, and streamlined intervention tools to support clinical decision-making.

### Crisis Management: Detection → Response → Follow-up



Crisis pathway wireflow: Risk detection → emergency response → follow-up tracking

The crisis pathway ensures rapid escalation with comprehensive tracking, balancing automated detection with human oversight to maintain clinical safety standards.

This MVP specification balances ambitious clinical value with practical development constraints, establishing a foundation for the connected mental health platform while maintaining safety, privacy, and regulatory compliance as non-negotiable requirements.

## **Prioritization and Growth Plan (Growth)**

## **RICE Prioritization Analysis**

Feature/Epic	RICE Score	Priority Type	Effort	Rationale
Emotion Journaling (Core)	900.0	P0 - Launch Blocker	3	Foundation feature with highest impact/reach ratio
PHQ-9/GAD-7 Integration	720.0	P1 - Core Feature	2	Clinical validation essential, low effort implementation
Consent & Privacy Controls	480.0	P0 - Launch Blocker	5	DPDP compliance requirement, high development effort
Corporate Wellness Portal	300.0	P2 - B2B2C Growth	8	High reach potential but significant development investment
Crisis Detection & Escalation	262.5	P0 - Launch Blocker	8	Safety-critical feature with complex implementation
Voice Journaling	210.0	P1 - Enhancement	4	User experience enhancement, moderate complexity
Al Insight Generation	180.0	P1 - Core Feature	6	Differentiation feature but uncertain confidence level

Note: Enabling work (consent, safety) prioritized despite lower RICE scores due to regulatory requirements

## 12-Week Development Plan

Week	Phase	Key Activities	Success Criteria
0-1	Alignment & Setup	Team alignment, compliance review, research prep	DPDP compliance confirmed, research recruitment complete
1-3	User Research	12-15 consumer interviews, 8-10 therapist interviews, survey (n=200)	>75% validation of core value props, <5% user research attrition
3-4	Design & Architecture	PRD finalization, system architecture, data models, safety protocols	Architecture approved, safety protocols tested, dev estimates confirmed
5-8	MVP Development	Build core features + instrumentation + QA + safety drills	MVP passes all ACs, <5% critical bugs, crisis drills successful
9-10	Pilot Testing	Deploy to 2 clinics, onboard 50-100 patients, gather feedback	>70% pilot user retention, >60% therapist adoption, positive outcomes
11-12	Launch Preparation	Evaluate vs KRs, iterate based on pilot, final launch decision	KRs met, launch readiness confirmed, stakeholder approval

## **Growth Strategy Framework**

Growth Stage	Primary Strategy	Success Metrics	Key Experiments
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Acquisition	Clinic partnerships, university wellness programs, employer EAP pilots	Monthly new clinic partnerships: 2-3, Patient signups: 100-200/month	A/B test clinic onboarding flow
Activation	Day-0 guided journaling + PHQ-9 baseline + AI summary within 24-48h	D1 journal completion: >80%, PHQ-9 completion: >75%	Test AI insight timing variants
Engagement	Weekly check-ins, therapist homework assignments, opt-in streaks	Weekly active users: >70%, Therapist assignments: >50%	Nudge timing optimization
Retention	Personalized care journeys, "next best module" recommendations	D30 retention: >25%, Clinical improvement: >40%	Care journey personalization A/B
Trust & Safety	Privacy center, transparent Al explanations, data portability	Privacy read rate: >40%, Trust score: >4.2/5	Consent UX variants testing

## **KPI Tree & Dashboard Specification**

KPI Category	Primary KPI	Target Value	Event Schema
North Star Metric	Weekly Active Therapeutic Connections	20-30%	therapeutic_connection_weekly

Acquisition	Monthly New Patient Registrations	100-200/mo nth	user_registration_completed
Activation	Day-1 Journal Completion Rate	>80%	journal_entry_submitted
Engagement	Weekly Journal Entry Rate	>70%	weekly_checkin_completed
Retention	Day-30 Retention Rate	>25%	user_retention_d30
Clinical Outcomes	PHQ-9/GAD-7 Improvement Rate	>40%	clinical_assessment_improved
Business Health	Monthly Recurring Revenue	₹10-15L/mo nth	subscription_payment_success

## **Experiment Pipeline**

### Phase 1 Experiments (Weeks 9-12)

- 1. A/B Test: Al Insight Delivery Timing
  - Hypothesis: 24h delayed insights increase D7 journaling vs immediate delivery
  - Metric: Weekly journal entry completion rate
  - Sample Size: 200 users per variant
- 2. A/B Test: Therapist Review Nudge Frequency
  - Hypothesis: Daily nudges increase dashboard engagement vs weekly batches
  - Metric: Therapist dashboard daily active rate
  - Sample Size: 50 therapists per variant

### **Pilot Playbook Summary**

• **Target:** 2 mental health clinics (1 urban, 1 suburban)

- **Success Criteria:** >70% patient retention, >60% therapist engagement, >40% clinical improvement
- **Risk Mitigation:** 24/7 monitoring, multilingual consent education, direct crisis protocol integration

This prioritization framework balances user value delivery with technical feasibility while maintaining regulatory compliance and clinical safety as non-negotiable foundations.

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