



Spark

Digital mental health care needs to be more accessible

Hundreds of thousands of apps aren't reaching the people who need it most

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Can technological fixes really address mental health care gaps? (mrmohock/stock.adobe.com)

From guided meditation, to binaural sounds designed to decrease anxiety, to bedtime stories read by Matthew McConaughey, there are now thousands and thousands of apps whose purpose is to help manage stress, depression and other mental health issues.

"What we know is that prior to the pandemic, there were unprecedented levels of anxiety, depression, subclinical mental distress, mental disorders increasing globally," said Emma Bedor Hiland, who teaches communications studies at Texas Tech University.

"But the research and the data that we have now also tells us that, largely due to the pandemic, and isolation and fears about coronavirus itself, we're now seeing even higher levels of depression and anxiety and other mental illnesses and disorders," she told Spark host Nora Young.

Bedor Hiland's most recent book is called *Therapy Tech: The Digital Transformation of Mental Healthcare*. It's about the emerging technologies that are being marketed as mental health tools, and how they often fall short of offering true access to mental health services.

"We haven't totally remedied disparities in the accessibility of various technologies. So when we rely upon technology to provide health and healthcare-related interventions, we're still seeing some problems there, and some incongruity between the amount of care, especially mental health care services, that we would like people to have," she said.





Emma Bedor Hiland (University of Minnesota Press/Twitter)

One of the problems is that the field of mental health apps—of which there may be upwards of 200,000 available—aren't regulated in any meaningful way. "And so they can label them and make largely whatever claims they want about them and say that they should be housed and marketed as health apps."

Bedor Hiland said there's a real issue of accessibility, where often people who may need guidance most urgently don't have the ability to pay for what are often quite expensive apps. This creates a vicious circle, she pointed out: the people most likely to use them are young, largely white women, which means that's who they're marketed to, and designed for. Moreover, they are profit-driven enterprises, so they naturally focus on the issues faced by people who can afford to pay the most for the apps, she said.

While it's true that some of the apps may be better than no therapy at all, they are not better than face-to-face therapies that, she argues, should be made more accessible in public health care.

The issue of lack of access to these technologies is also troubling to Caroline Figueroa, especially when it comes to languages other than English. Figueroa is a psychiatry resident at the University Medical Center in Utrecht, the Netherlands and a researcher at UC Berkeley's Digital Health Equity and Access Lab.

She's been involved in a study where people are sent daily motivational text messages, in part because it doesn't require a special app and uses a medium most people are comfortable with. "Because they're already familiar with it, it's also something that is easier to use," she told Young.





Caroline Figueroa (Berkeley Digital Health Equity and Access Lab)

Moreover, many of the apps assume a level of technological familiarity—or even literacy—that people often don't possess. More broadly, she said, there's also a lack of engagement (people stop using the apps after a short period of time) and a lack of evidence-based therapies within the apps.

Figueroa said health and therapy apps show their greatest potential when they are supporting regular, professional care. "For example, it could be a way to help people manage their own health data to self-monitor their symptoms. Some of the work that I've done also focused on asking people to monitor their mood in between sessions of therapy."

Figueroa said that there needs to be a bigger overall public investment in digital mental health, ensuring equity and accessibility, "making sure that everyone can use them, that they're designed for the people who need them the most.

"But we really need to focus more on how to help providers use these apps together with patients so that we can improve mental health care."

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