Team k4

Capstone presentation

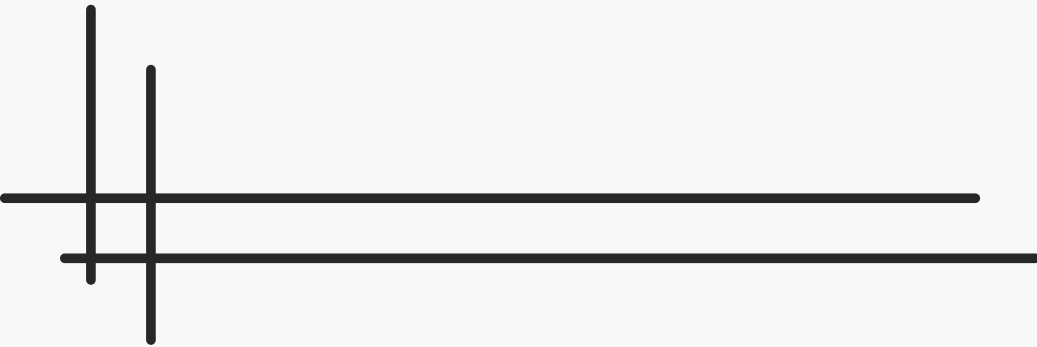## limited adoption of digital mental health solutions in India
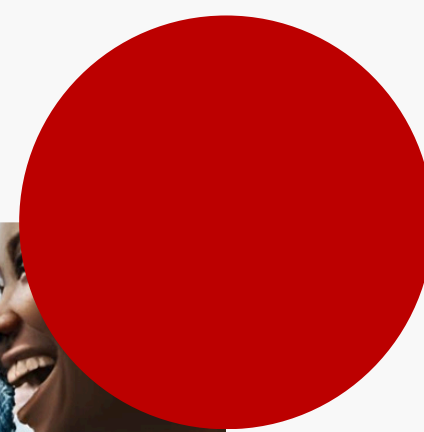
Team:
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K Satya sandatva - SM22UBBD047
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Problem Statement (TOSCA)

"Limited adoption of digital mental health solutions in India due to unclear usage trends, barriers, and readiness among organizations and corporates."

T- TROUBLE

limited adoption of digital mental health solutions

O- OWNERSHIP

Organizations and corporates, therapists

S- SCOPE

Specific to India

C - CONSTRAINTS

Stigma, Lack of awareness, Low digital literacy, Unclear ROI, Trust issues.

A- ACTORS

Digital mental health solution providers (like Avika), HR departments

Our understanding of the challenge

As students working on this capstone project, we used the TOSCA framework to break down and understand the limited adoption of digital mental health solutions in Indian corporates. This helped us identify the key stakeholders, barriers, and the scope of the issue.

To explore this further, we are conducting in-depth qualitative research through:

- Interviews with therapists
- Conversations with corporate heads/HR managers
- A focus group
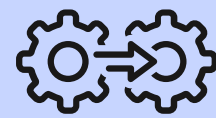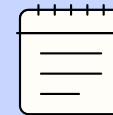
Low adoption.	Limited Access & Awareness	Barriers to Integration	Lack of India-Specific Solutions	Need for Evidence & Support

Our primary research

1. Expert interviews

To gain firsthand insights into the adoption and perception of digital mental health solutions, we conducted interviews with professionals from both the mental health and corporate/educational sectors, These interviews provided valuable perspectives on current challenges, user behavior, institutional readiness, and gaps in the digital mental health ecosystem.

Dr. Mounica
Clinical Psychologist, Arundati Institute of Mental Health

Dr. Uday Kiran
Dean, Arundati Institute of Mental Health

Dr. Sanjeev
Psychiatrist at Saveetha Hospital Chennai

Dr. Keerthi Karanam
Psychiatrist In HITEC City, Hyderabad

Some questions

01 Have you integrated any digital tools (teletherapy platforms, apps, digital CBT, etc.) into your practice? If yes, which ones?

02 Are you familiar with VR-based therapy? If yes, how would you evaluate its potential application in the Indian context?

03 What do you think are the key challenges preventing the adoption of VR therapy in India?

04 Do you believe mental health professionals themselves are hesitant or underprepared to adopt digital tools like VR? Why or why not?

05 Is there sufficient exposure or training for mental health professionals (or students) regarding digital mental health technologies during education or CPD (continuing professional development)?

06 Do you see VR therapy as a supplement to traditional therapy or a potential standalone method in certain cases?

07 Would you personally consider incorporating VR therapy in your practice if the necessary tools, training, and infrastructure were available? Why or why not?

2. focus group

In addition to expert interviews, we conducted a focus group discussion with 10 students currently pursuing their education in the field of psychology at the Arundhathi Institute of Medical Sciences And Hospital. The session was held on campus in a classroom setting and lasted approximately 60 minutes. Participants were selected based on their academic background and interest in digital mental health. The discussion was semi-structured, allowing for open-ended responses while exploring key themes such as perceptions of digital therapy, accessibility, stigma, and future readiness. Insights from this session helped us better understand the mindset of future mental health professionals and their views on integrating technology into therapy.

"Apps are good for managing stress or journaling, but for deep trauma, a human therapist is irreplaceable."

"If a friend asks me whether they should try a therapy app, my first question is always—who made it and where does your data go?"
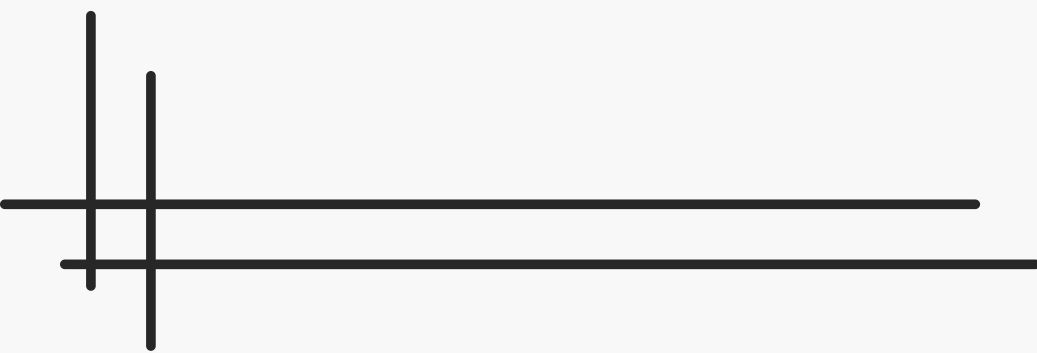
"Indian users need something that speaks their language—literally and emotionally."

"Unless there's visible value, like certified therapists or structured plans, users won't invest."

"In metros, students are more open to venting online. A lot of us would try it just to avoid stigma from going to a therapist in person."
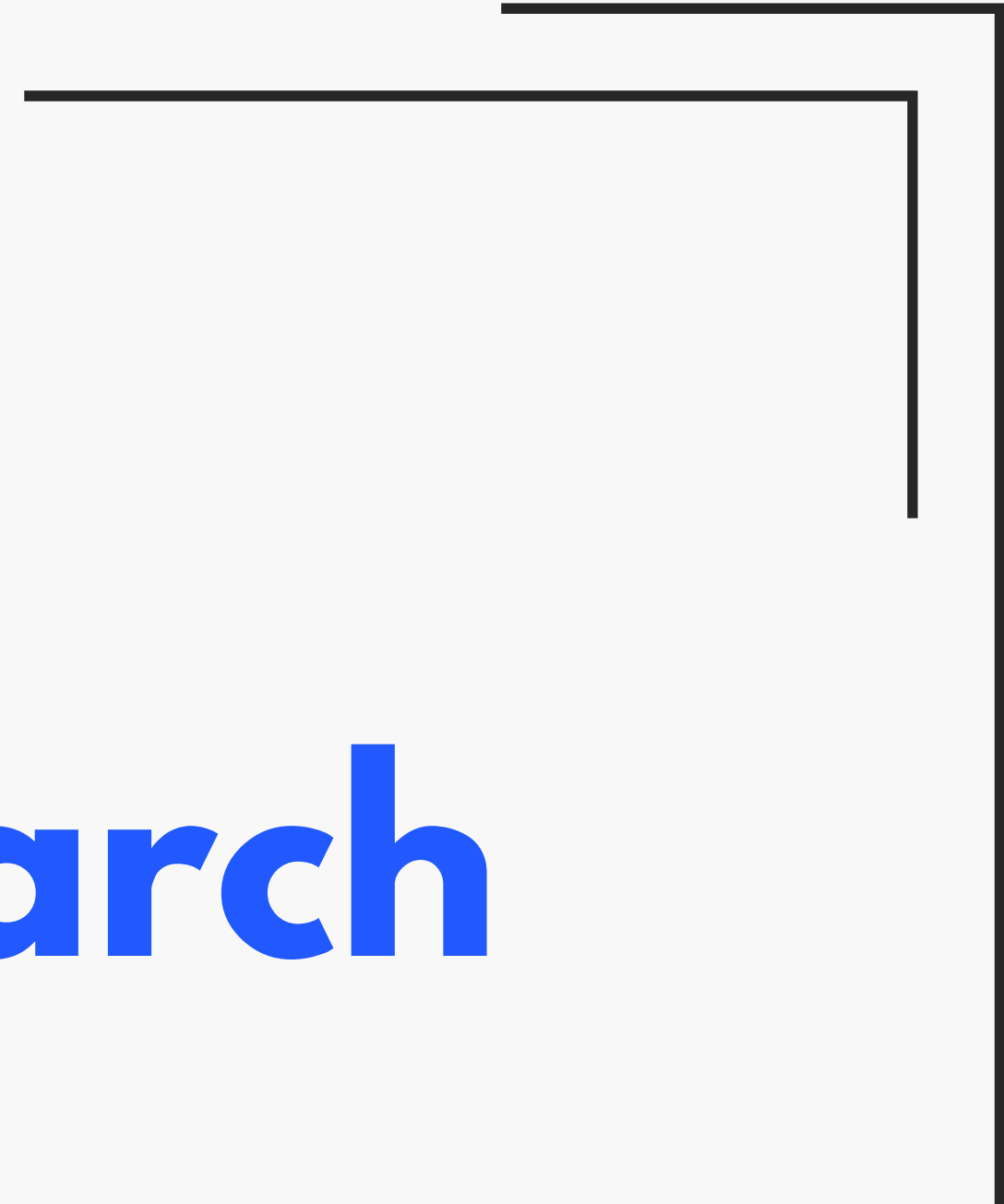
Secondary research

| Category	Subcategory	Data handling	Regulatory needs
1. Wellness apps	Meditation and mindfulness	User-generated	Low: focus on data privacy, accurate marketing.
	Stress management	User-generated	Low to moderate: efficacy claims verification.
	Sleep improvement	User-generated, Device data	Moderate: accuracy of tracking, advice quality.
2. Illness apps	Symptom tracking	User-generated, PHI	High: data security, algorithm accuracy.
	Treatment seeking	User-generated, PHI	Very high: proper referral, crisis management.
	Relapse prevention	User-generated, PHI	Very high: efficacy validation, care integration.
	Digital therapeutics	User-generated, PHI	Extremely high; clinical trials, medical device classification.
3. Combination apps	Comprehensive artificial intelligence platforms	Mixed	Extremely high: feature-dependent regulation, algorithm accuracy, data security, validation.
	Teletherapy + self-help	User-generated, PHI	Extremely high: provider credentials, data security, efficacy.

Positive Trends:
- Young, urban populations are more open to using apps for mindfulness, stress relief, and mood tracking.
- Increased smartphone penetration and affordability of internet have made these apps more accessible.
- Post-COVID, there's a noticeable shift in attitudes, with more people becoming comfortable seeking help digitally due to stigma around in-person therapy.

Concerns and Limitations:
- Many users are uncertain about the credibility of apps—they question whether the information is scientifically valid or just generic advice.
- There's low awareness about how to judge an app's quality or whether it's backed by professionals.
- For rural or non-English-speaking users, accessibility remains an issue—many apps are only available in English, and regional language support is rare.
- The lack of strong regulation means users often face inconsistent app quality and unclear data privacy policies, which can lead to distrust.

Patient Satisfaction with Telepsychiatry

The pie chart shows that around 70% of users reported satisfaction with telepsychiatry services. This indicates a positive response from users who accessed digital mental health support. However, despite this high satisfaction rate, widespread adoption is still limited, especially in organizational and corporate settings. This contrast highlights a critical gap: while the users are ready, the ecosystem—including corporates, regulatory clarity, and infrastructure—is not yet fully supportive, reinforcing our problem statement.
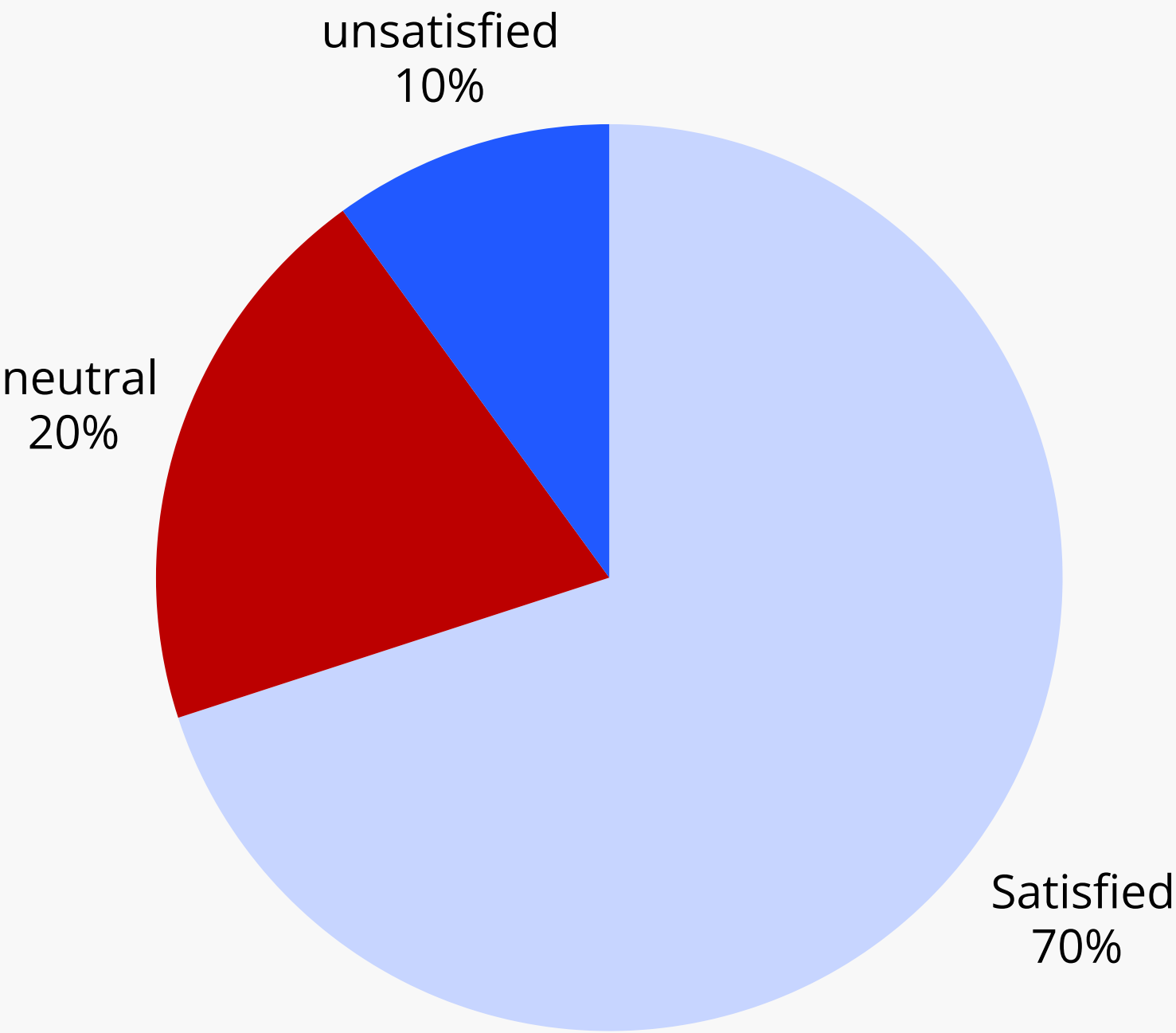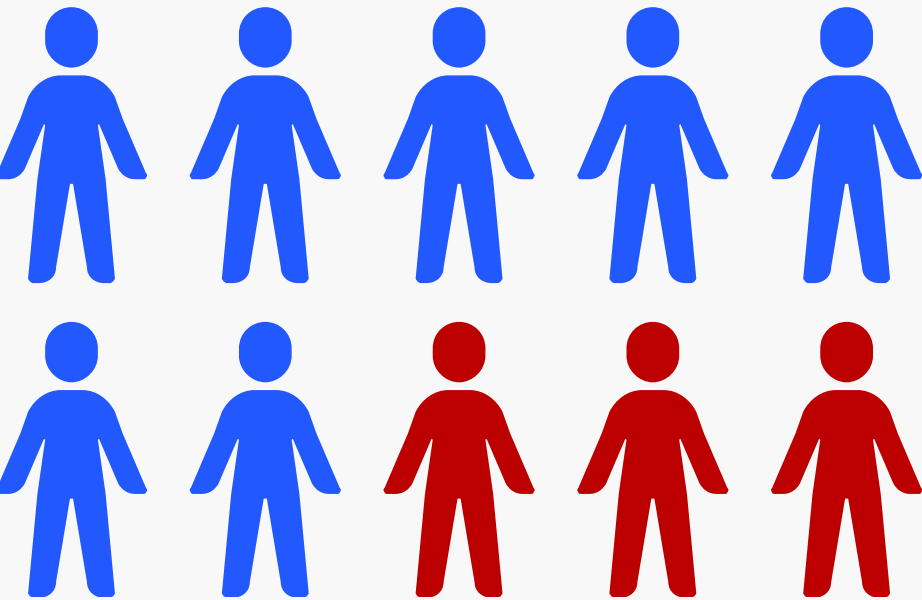
unsatisfied
10%

neutral
20%

Satisfied
70%

News articles - secondary research

THE ECONOMIC TIMES | Industry

English Edition ▾ | Today's ePaper

Business News › Industry › Healthcare/Biotech › Healthcare › India's mental health searches soar 41% in 2024, with non-metro cities driving healthcare queries: Report

ETPrime

India's mental health searches soar 41% in 2024, with non-metro cities driving healthcare queries: Report

INDIA TODAY

News / Health / New digital health program shows lower depression risk in rural India

New digital health program shows lower depression risk in rural India

A study in rural India shows that combining digital healthcare with community campaigns can reduce mental health issues such as depression and anxiety.

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India Mental Health Apps Market Size & Outlook, 2024-2030

The mental health apps market in India is expected to reach a projected revenue of US$ 1,409.3 million by 2030. A compound annual growth rate of 18.5% is expected of India mental health apps market from 2025 to 2030.

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India Mental Health Market Valuation to Reach USD 62.86 Billion By 2032 | Adults are Heavily Seeking Mood Disorder Treatments Says Astute Analytica

News articles - secondary research

Grand View Research (2024). India Mental Health Apps Market Outlook.
This report highlights that the mental health apps market in India is projected to grow at a CAGR of 18.5%, with an estimated valuation reaching approximately USD 1.4 billion by 2030. This indicates a strong upward trend and demand for digital mental health solutions, aligning with the observed rise in user adoption and interest, especially post-pandemic.
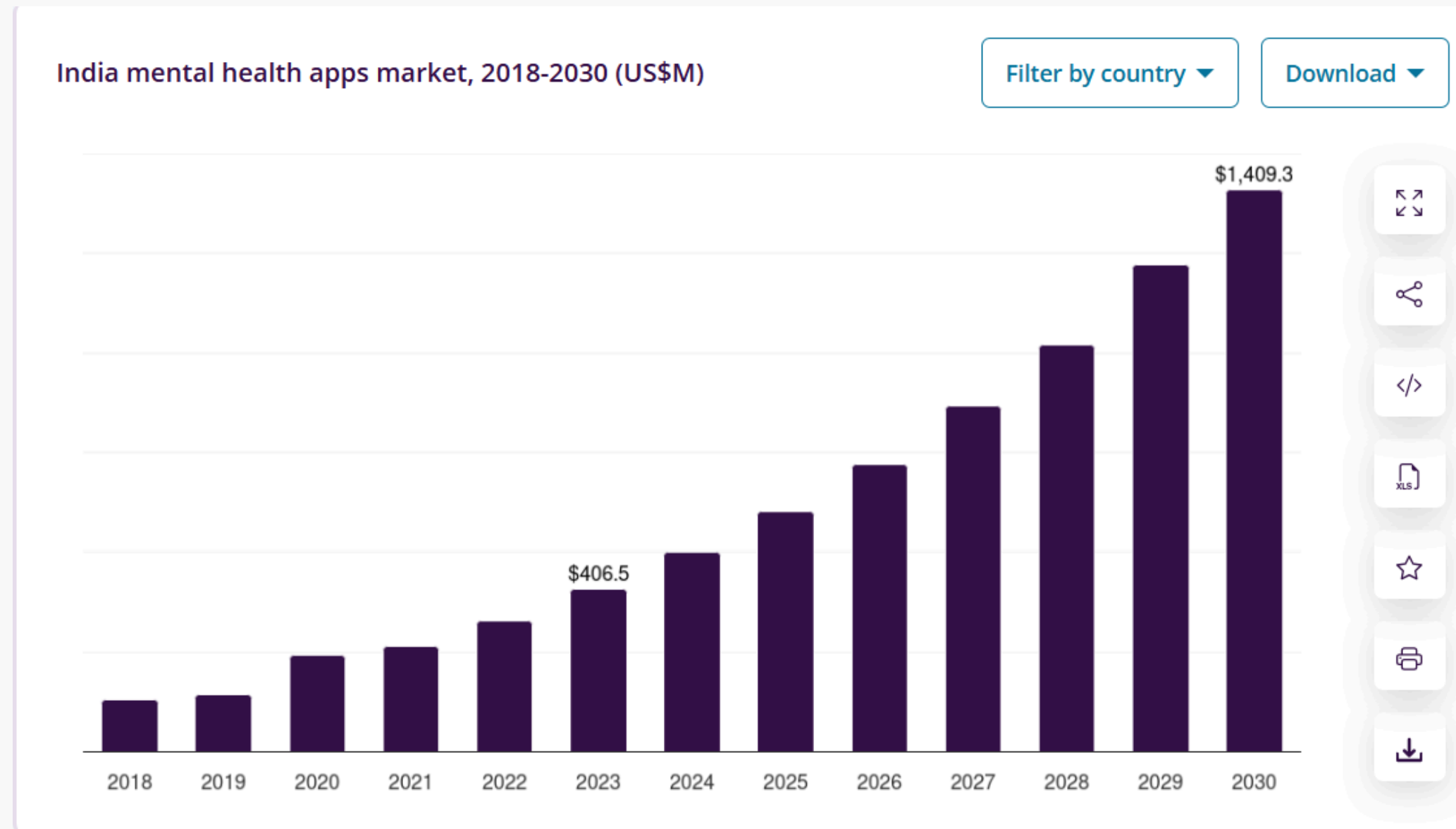
Data collection status

primary research

METHOD	DESCRIPTION
Expert interviews	4 experts (psychologists, psychiatrists)
Focus Group	10 psychology students, 60-min discussion
Corporate/HR Talks	Ongoing conversations with HR heads

Secondary research

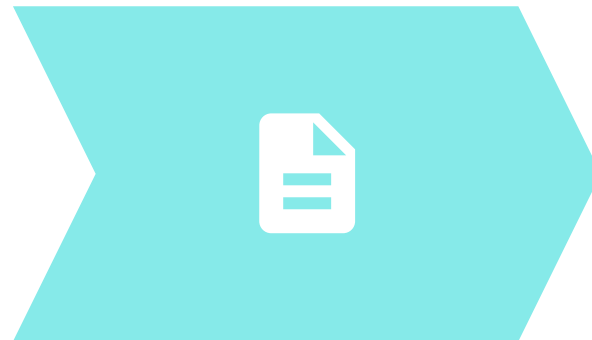**Secondary Research Summary (Pie charts, brief notes)**
Split into:
Academic Sources – Mention 2–3 key findings (e.g., BJPsych article)
News Reports – Highlight trends (e.g., market valuation, CAGR)
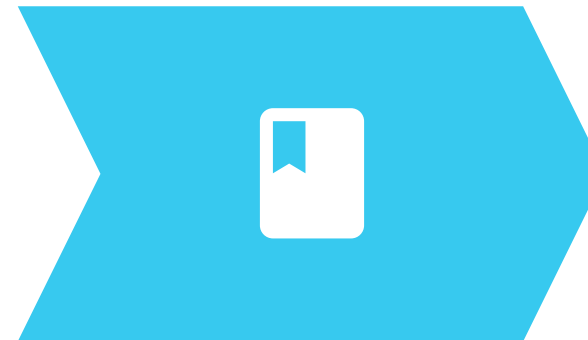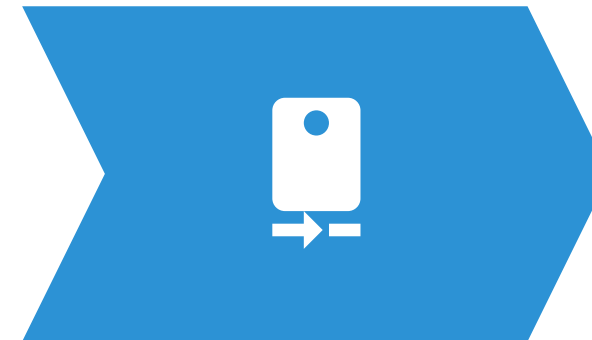
OUR NEXT STEPS

1. In-depth Meeting with Avika

2 - Extended Data Collection

3 - Insight Synthesis & Analysis

4 - Recommendations & Deliverables

5 - Final Report & Presentation

Thank You