

# Mental Health: Improving Resilience Outcomes with Peer Specialists and Technology

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## Rationale

Even after recovering symptomatically with medications, many people with chronic mental health conditions are unable to recover functionally nor take on their former roles as a family member, friend and employee – often due to a lack of support and skills training in self-management. A convenient yet comprehensive peer-supported digital platform, **Healthy Mind Online**, was created for patients to access integrated psychosocial rehabilitation support. The platform also enables people in recovery from chronic mental health issues to take ownership of their recovery and resilience journey in an inexpensive, non-stigmatising and user-friendly manner.

## The Project Team

The team comprised 1 Senior Consultant, 4 Peer Support Specialists with lived experience of mental health conditions, and Healthy Mind Online Pte Ltd (HMO) - a digital platform and social enterprise registered with raISE. Senior Consultant, Dr Joseph Leong, was the mental health expert providing overall guidance and co-producing training content. Mr. Julius Chan was the lead Peer Support Specialist (PSS) in the video training sessions and text support sessions. Mr. Himanshu Dayal was the host and technology provider for the video events. HMO employees were involved in the preparation of promotional materials and supporting video events. The solution focused on IMH outpatients and was voluntary.

## Target Population

The project targeted patients in IMH's outpatient setting. Participation was voluntary and involved live video and text-support sessions.

## Assessment and analysis of causes

The causes of the problem were assessed through a combination of clinical experience and lived PSS experience.

### System Dysfunction:

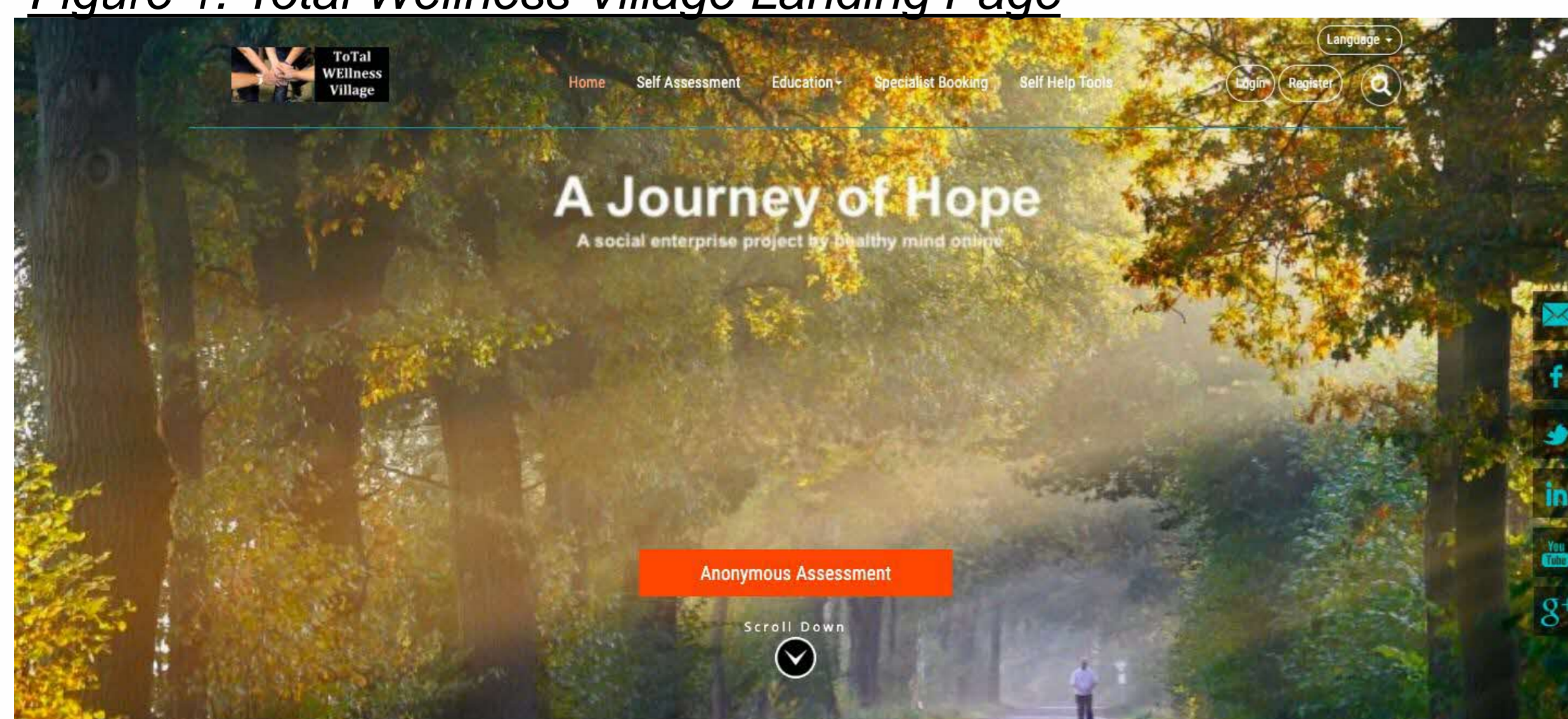
- Patients meet psychiatrists for a monthly 10-minute consultation focused mainly on medication (symptomatic recovery), but the consultation was not focused on functional recovery;
- Patient have a lack of practical knowledge and skills on psychopharmacology, psychotherapy and psycho-social rehabilitation for holistic recovery.

### Effect on Patients:

- Patients frequently report feelings of loneliness and helplessness. They find their mental condition scary, inconvenient, time-consuming, and costly for travel.
- Patients also have poor self-management skills related to medication, managing stress, maintaining good nutrition, exercise regularly, and maintaining social relationships.

The project thus involved Senior Consultant working closely with Patient Support Specialists to understand patients' pain points and help participants to open up. HMO also recruited a Person with Different ability (PWD) and a PSS to further enhance the project.

Figure 1. Total Wellness Village Landing Page



## Interventions

The responsive digital platform, Healthy Mind Online, was leveraged on – a sub-domain titled 'Total Wellness Village (TWV)' was created on the HMO platform to provide educational content, a community forum for exchange of ideas, event registration, and video and text-based PSS/Counsellor support. Interested outpatients could register for an account on their mobile phones to access to the content. In addition, two 1.5 hourly live video weekly events were created on the platform, called 'Recovery and Wellness Sustenance (RWS)' (basic) and 'Recovery to Resilience (R2R)' (advanced) for 9 weeks (the first RWS session was conducted face-to-face to facilitate bonding among participants). Two consecutive sessions of the programme were run in 2018, totalling 35 events. Each run had a text-based support group which was self-managed by persons in recovery under the guidance of an IMH PSS. Finally, CBT-based Video and text-based sessions was also provided by a counsellor employed by HMO for addressing deeper issues at individual participant level. A text-based support group was also established for participants to remain in touch with each other after the session. Text-based CBT intervention session was also provided for participants who had never undergone therapy sessions. It consisted of 3 1-hour sessions provided by a counsellor, over 2 weeks. Feedback was taken after each event and at the end of each session run.

## Results

Data collected were in the form of verbatim quotes from attendees and from Net Promoter Scores (NPS- quantitative) before and after self-assessment. The NPS measures the willingness of participants to recommend the service to others, gauging patient satisfaction.

The feedback from participants were positive, such as:

- Event saved my life
- Event provides confidence in one-self
- Did not know many medication's side effects
- Picked up tips and ideas on how to cope

Net promoter score (NPS) was 80, and pre- and post- self-assessment scores showed significant improvement in resilience. In addition, the project also provided employment opportunities for 2 Peer Support Specialists and 1 Person with Different Ability, allowing them to even move on to higher-grade employment and find self-fulfilment.

Participants also reported reduced feelings of loneliness and helplessness, an increased awareness of how to help oneself, a reduced need to travel for education and support events, minimizing inconvenience and time spent and cost for travel; and improved self-management skills relating to medication, managing stress, nutrition, exercise, maintaining social relationships.

## Sustainability

The project was self-sustaining even beyond 1 year, with participants who graduated from the Live Video Training continuing to support each other and share community resources until today.

## Lessons Learnt

Implementation of change requires a disciplined process and focus on measurements. Contributions from people with different backgrounds and skillsets are critical; and lived experiences of PSS' are instrumental in helping participants feel connected, motivated and open to new interventions.