Public Views on E-Mental Health Services: A systematic Review of the Current Evidence.

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BACKGROUND

- Common mental health problems are a burden for European healthcare systems.
- However, individuals with mental health problems face different barriers to access mental healthcare, such as waiting time, lacking health literacy or stigmatised beliefs.
- Given both "Dr. Google" as common informal health advisor and limited capacities of (low-treshold) traditional face-to-face services in healthcare, e-mental health services are suggested as viable option to inform the access to professional help.

- To overcome barriers to care on a large-scale via innovative technologies, thought, knowledge about the public acceptability of e-mental health is required.

OBJECTIVE:

- To explore the current evidence base on both public views and attitudes toward e-mental-health

RESULTS

- Of 63 screened abstracts, n = 4 papers were included in this review.
- Sample sizes ranged from n = 217 to 2,411 persons, aged between 14 and 95 years. Data stem from England [5], Australia (2.3) and Germany (4).
- Methodology varied across studies: all used self-developed surveys (n = 3 online surveys 2.3; 2.1 = 1 CAPI panel (4)) One study applied mixed methods to measure development [5]

KEY FINDINGS:

- Results indicated type-specific differences in preferences to mental health services: Preference to seek help traditional face-to-face services over eHealth and mHealth services in case of emotional distress was shown.
- Lowest acceptability was identified for mHealth and unguided online therapy.
- Despite neutral to negative views on (unguided) e-mental health services reported across studies, e-health literacy and e-awareness tended to be associated with improved acceptability in terms of willingness to future use online self-help.

METHODS

- Systematic review: Literature search through electronic databases (e.g. Medline)
- Inclusion criteria: Surveys targeting acceptability, expectations, preferences and/or attitudes toward e-mental health treatments in the general population, published in peer-reviewed English journals between 2010 and 2015.
- Exclusion criteria: Clinical trials or surveys with narrowed scope (e.g. specific target groups or e-mental health services)
- Search terms: incl. e-mental health; attitude; preference; online self-help; CGBT

CONCLUSIONS

- Currently, the evidence base on public acceptability of e-mental health is very small.
- Perceived helpfulness and likelihood of future use were indicators of IT acceptance.

Limitations:

- Lack of theory-lead rationales in self-developed surveys (e.g. defining attitudes)
- Low e-mental health literacy and e-awareness in surveyed (selective) samples.

Implications:

- Future studies should consider applying the UTAUT [1] framework to inform the comparability of self-report measures on public e-mental health acceptance.

Table 1. Literature Review on Public Views on E-Mental Health: Summary of Study Characteristics, Outcomes, and Main Findings

<table>
<thead>
<tr>
<th>Study</th>
<th>Design</th>
<th>Sample</th>
<th>Method and Measures</th>
<th>Main Finding</th>
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<tbody>
<tr>
<td>Atta &amp; Gedu (2010)</td>
<td>Cross-sectional online survey</td>
<td>To identify differences between &quot;e-preferers&quot; and &quot;non-e-preferers&quot; regarding the perceived helpfulness and likelihood of future using mental health services</td>
<td>Self-developed online survey and validated personality measures</td>
<td>Preference to traditional over a mental health services (77.3 %).</td>
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<td>Gogol &amp; Olujić (2013)</td>
<td>Cross-sectional online CAPI</td>
<td>To determine the impact of information on attitudes toward different e-mental health services</td>
<td>Self-developed online survey (validated measure) (27)</td>
<td>Preference to using e-mental health services with therapeutic assistance</td>
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<tr>
<td>Böckh &amp; Willich (2013)</td>
<td>Cross-sectional online CAPI</td>
<td>To explore public readiness, perceived impact of informal information sources, and willingness to use e-mental health services</td>
<td>Self-developed survey (generic measure) (27)</td>
<td>Preference toward using traditional to e-mental health services</td>
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<tr>
<td>Maziotis, collins &amp; Parlier (2014)</td>
<td>Cross-sectional online survey</td>
<td>To explore the acceptability of e-mental health services in comparison to traditional services</td>
<td>Self-developed survey (generic measure) (27)</td>
<td>Preference toward using traditional to e-mental health services</td>
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Note: 1. e-mental health; CAPI = computer assisted personal interview; mental health = electronic mental health; m-health apps = mobile mental health applications; RCT = randomized controlled trial.

References:
