Web-guided self help in South African communities who have little access to mental health services

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Collaboration

- Funded by **SANPAD** (South Africa-Netherlands Research Programs on Alternatives in Development)

- *University of Cape Town (Department of Psychiatry)*
  - Prof Dan Stein (SA project leader)
  - Edith van 't Hof (PhD, project manager)
  - Winnie Gae (Research assistant)

- *Vrije Universiteit, Amsterdam (Department of Psychology)*
  - Prof Pim Cuijpers (Dutch project leader)
  - Prof Mark Isaacs (Honorary Professor VU, Amsterdam, King's College London, Institute of Psychiatry)

- *MRC (Medical Research Council)*
  - Dr. Mark Tomlinson (senior specialist researcher in health systems unit)

Mental health in South Africa

- High percentage of mental problems

  - 30% of adults DSM-IV disorder (lifetime)[1]

  - Including 16% anxiety disorder, 10% mood disorder, 13% substance use disorder

- Treatment gap; 25.1% received treatment, 74.9% no treatment [2]

- Mental ilnesses SA are under-diagnosed and under-treated due to under-resourcing:

  I Scarcity of resources

  - Shortage human, mental health and financial resources
  - 1 psychiatrist on every 100 000 inhabitants serving 20% of population in private practice

  II Inequities in access to mental health care

  - Social economic status, stigma and discrimination

  III Inefficiency in use of resources

[1] Stein DJ, Seedat S, Herman A, Moomal H, Heeringa SG, Kessler RC et al. 2008
[2] Seedat S, Stein DJ, Herman A, Kessler R, Sonnega J, Heeringa S et al.

Rationale

- Large parts of the SA population no access to mental health services

- Need to scale up mental health services

- Under-resourced situation calls for: low-cost, brief, minimal therapist contact intervention

Web-guided PS

- Structured psychotherapeutic self help method

- Efficient for common mental disorders in western countries

- Minimal therapist contact and low cost

- Efficiency never evaluated in LAMIC countries

Objective and research question

Objective

- Develop and test web-guided self help for common mental disorders in SA communities who have limited access to mental health care services

Research question

- Is web-guided PS adapted to South African conditions acceptable, feasible and effective?

Study planning

Phase 1 (completed)

- PS website translated (Afrikaans, Xhosa, English)

- Adapted to the South African context

Phase 2 (funded by SANPAD, nearly completed)

- Testing of the feasibility, acceptability and effectiveness of the SA adapted PS intervention

Phase 3

- Fine-tuning of adapted PS with results of phase 2

- Controlled randomized trail

Methodology

Subjects
- 100 volunteers with mental health problems

- Different townships around Cape Town

Study design

- 4 week web-guided intervention

- Weekly coaching during intervention (phonecalls)

- Pre-post test using screening instruments (efficiency)→ K-10, SRQ

- Diagnostic interviews 50% of subjects → MINI

- Feasibility and acceptability questionaires

Web-guided Problem Solving

- Adapted and translation of a Dutch PS website (Allesondercontrole.nl)

- Back-translation process, adapted wording and case studies to SA context

- English→   www3.psy.vu.nl/takingcontrol

  Afrikaans →   www3.psy.vu.nl/takingcontrol_afr

  Xhosa→   www3.psy.vu.nl/takingcontrol_xhosa

Taking Control
How to improve your state of mind

Introduction   Step 1   Step 2   Step 3   Finaly

What using this book entails

Reasons for NOT using this book: right reasons and wrong reasons

Abongile, Anthea and Nocawe

Lets get started

Worksheets

Introduction

What is really important to you in your life? Most people don't have an immediate answer to this question, because they are so caught up in the rush of everyday life. Those who suffer from stress, anxiety or depression are even less likely to have an answer. They become so engrossed in their problems that the question "what is really important in my life" seems very far removed from them. We fail to realise that when we find ourselves in difficult situations, it can be helpful to reflect on the things that really matter in our lives. This reflection can help us to overcome feelings of tension, depression and anxiety.

This book can teach you how to take control of your life one step at a time; how to rediscover what things are important to you; and how you can master your anxieties and devote your energy to doing things that matter.

This book is aimed at those who suffer from feelings of depression, tension or anxiety, and want to do something about it themselves. It is not intended to be a substitute for professional help. If you are seriously affected in your daily life by these problems, you should first consult your GP or a mental health professional. Likewise, if you also suffer from various other complaints, such as sleeping difficulties, concentration problems, considerable weight gain or weight loss, tiredness etc., your GP can offer treatment or refer you to the most appropriate practitioner. In these cases the book can still be helpful, but it is advisable to discuss it with your doctor first.

Content intervention

- Step 1. What is really important to you in your life?

- Step 2. Tackling your worries and problems
  - categorize problems:
    - I Problems and worries that are not important
    - II Problems and worries that are important but can be solved
    - III Problems and worries that are important but cannot be solved

  - coping with negative thoughts, trauma, problems that cannot be solved
  - solving problems in 6-steps

- Step 3. Achieving your goals

Finding eligible participants

- Pamphlets, posters in community centres, libraries, computer schools, companies and universities

- Problems encountered:

  - Difficult to recruit people (safety in the townships, language, mental health seems no priority)

  - Very little reply to pamphlets, posters → decided to work through existing NGO's, who referred people to our program

  - Only 6 people (of 101) contacting us would be able to do intervention on the internet (all 6 were students, which later dropped out)

Web-guided intervention not feasible?

- Difficult to recruit eligible participants for internet intervention
    - Content of program printed in booklet to be able to evaluate the effectiveness of the content of the intervention
        - Individual self help booklet (coaching over the phone)
        - Group sessions with booklet (coaching during meetings)

    - All participants going through the intervention were interviewed on computer/internet skills and the feasibility and acceptability of a web-guided intervention

Feasibility results

Computer/internet experience of recruited participants:

Experience	computer	internet
None at all	52.1%	75%
<1 year	27.1%	14.6%
1-5 years	4.2%	2.1%
>5 years	4.2%	8.3%

Computer/internet access:

Access	computer	internet
Nowhere	40.4%	64.4%
Home	19.1%	8.9%
Library, internet café, work, friends	40.5%	26.7%

- Of people with computer experience 54% reported feeling anxious towards using a computer

Acceptability results

- People without computer experience:
  - 70% reported to be interested in participating in an internet-based program; if they had computer/internet skills
  - 60% reported they would go to the internet café or library for the program

- People with experience:
  - 60% people reported they would be interested in partaking in an internet based program, if they were more confident about their computer and internet skills
  - 82% would take the effort to go somewhere to access internet for the program if more privacy would be provided

Efficiency of content intervention

- Preliminary results;

  - Decrease in psychological distress and mental health symptoms (K-10 and SRQ)

  - Increase in self-empowerment (BUES)

Conclusion

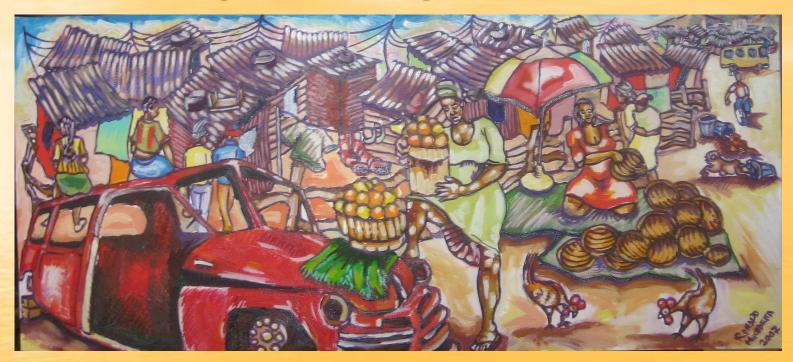Web-guided self-help is not feasible in South African townships due to:

- Lack of computer/internet skills

    - no confidence in computer/internet skills

    - don't find it pleasant/comfortable to work on computer

- Lack of computer/internet access

    - private computer/internet access

Future implications

- Internet and computer access and experience in townships is increasing→ pilot again in the future?

- Computerised intervention on computer in clinic or CD for use at home
  - easier to adapt content of program
  - collect data on computer or CD

- Cell phone intervention?
  - 87% has own cell phone
  - 95% knows how to read and write text message

Thank you for your attention!

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