

# E-mental health in Europe: a glance into neighbouring countries

**Wolfgang Gaebel**

**Professor of Psychiatry and Psychotherapy**

**eMEN Work Package Transnational Policy Solution**  
**LVR-Institute for Healthcare Research**

**LVR-Klinikum Düsseldorf**  
**Department of Psychiatry and Psychotherapy**  
**Heinrich-Heine University Düsseldorf**

# E-mental health in Europe: a glance into neighbouring countries

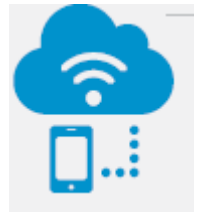
- E-mental health & eMEN
- eMH: status quo in eMEN partner countries and beyond
- Lessons learned
- Towards a Transnational Policy Solution
- Conclusion

# E-mental health in Europe: a glance into neighbouring countries

- **E-mental health & eMEN**
- eMH: status quo in eMEN partner countries and beyond
- Lessons learned
- Towards a Transnational Policy Solution
- Conclusion

# E-mental health: Definition

“E-mental health” can be understood as a generic term to describe the use of information and communication technology (ICT) [...] **to support and improve mental health conditions and mental health care**, including care for people with substance use and comorbid disorders.



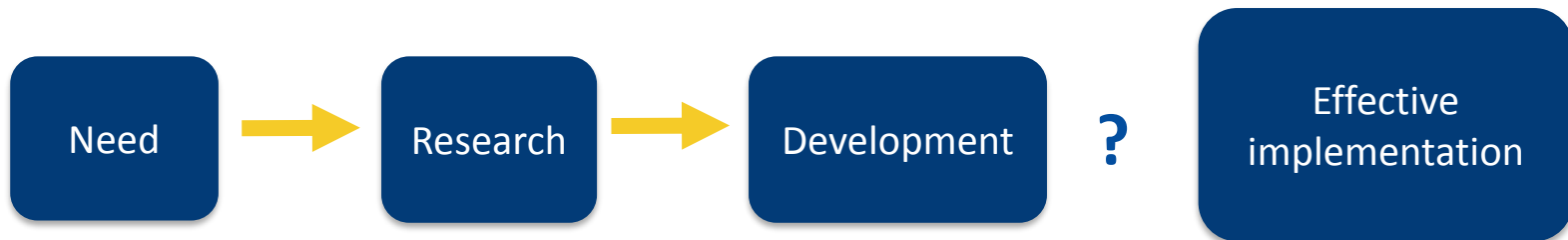
E-mental health encompasses the use of digital technologies and new media for the delivery of **screening, health promotion, prevention, early intervention, treatment, or relapse prevention** as well as for improvement of health care delivery (e.g., electronic patient files), professional education (e-learning), and online research in the field of mental health.



*Riper H, Andersson G, Christensen H, Cuijpers P, Lange A, Eysenbach G. Theme issue on e-mental health: a growing field in internet research. Journal of Medical Internet Research. 2010 Dec 19;12(5):e74.*

# E-mental health: from research to practice

- Demand for mental health care is increasing
- E-mental health (eMH) products and services can contribute to the broader availability of mental health services
- Yet, the implementation of eMH is challenging



# eMEN: e-mental health innovation and transnational implementation platform North-West-Europe



## Objective

Promoting **more affordable, accessible, effective and empowering mental health** by operationalising a transnational cooperation platform for **eMH product innovation, development, testing, implementation and exchange of implementation expertise.**

Funded by the European structural development fund  
Interreg North-West Europe

- EU funding: € 3,22 Mio.
- Total budget: € 5,36 Mio.

A project poster for the eMEN initiative. At the top, it features the "Interreg North-West Europe eMEN" logo. Below the logo, it states "European Regional Development Fund" and "THEMATIC PRIORITY INNOVATION". The main headline reads "Unlocking the power of technology to improve Europe's mental health." Below this is a photograph of three people sitting on an orange sofa, engaged in a discussion. A red circular icon labeled "PROJECT AREA" shows a map of Europe. Text below the map indicates "Amount of ERDF received from Interreg North-West Europe: €3.22 million". At the bottom, it states "Total project budget: €5.36 million" and provides the website "www.nweurope.eu/emen". The footer contains various partner logos, including Mental Health Foundation, arq, interapy, and others.

# eMEN

- 10 partners in 6 countries (Belgium, France, Germany, Ireland, the Netherlands, United Kingdom)
- May 2016 – November 2019
- 5 Work Packages (WPs)



## Activities

- Organisation of 6 transnational conferences and 18 seminars
- Development of a transnational cooperation platform
- Development and evaluation of 7 eMH products  
(EMDapp, Mindwise, MIRROR, MoodBuster, SAM screener, Pesky gNATS, STOPBLUES)
- **Development of a transnational policy solution**

# eMEN Work packages

- **WP Project Management**
- **WP Communication**
  - Organisation of 6 transnational conferences and 18 seminars
- **WP Long-Term**
  - Development of a transnational cooperation platform
- **WP Product Development**
  - Development and evaluation of 7 eMH products
  - Support of at least 15 SMEs
- **WP Policy Solution**
  - Development of a transnational policy solution
  - Conducting at least 30 stakeholder interviews (5 per partner country)



# E-mental health in Europe: a glance into neighbouring countries

- E-mental health & eMEN
- **eMH: status quo in eMEN partner countries and beyond**
- Lessons learned
- Towards a Transnational Policy Solution
- Conclusion

# eMEN - Partners

Mix of research organizations, health care providers, developers and NGOs in the field of (e-)mental health in North-Western Europe.



<b>Belgium</b>	Thomas More University of Applied Sciences
	Pulso Europe CVBA
<b>France</b>	EPSM Lille Métropole
<b>Germany</b>	DGPPN - ABSG
	LVR - Institute for Healthcare Research
<b>Ireland</b>	Mental Health Reform
<b>The Netherlands</b>	Arq Foundation
	Vrije Universiteit Amsterdam
	Interapy Nederland
<b>The United Kingdom</b>	Mental Health Foundation

# Status quo in eMEN partner countries

(preliminary results)

## E-mental health in Germany

- Some health insurances offer specific eMH programmes to their clients (e.g., Deprexis, Moodgym, Depressionscoach)
- Moodgym is freely available to the public; Deprexis costs around 300€
- eMH also available in the context of research projects



### Barriers

- Low awareness and acceptance of mental health professionals
- Lack of regulatory framework (e.g., licensing, reimbursement)
- Liability issues
- Limited options for training and education

### Facilitators

- Interest in eMH is growing in Germany; health insurances and professional bodies foster discussions (e.g. DGPPN quality criteria)
- Funding of eMH research projects (e.g., Innovation Fund)
- Digitalisation of healthcare on the political agenda:
  - eHealth law (2015)
  - Modification of the professional code for physicians, “Fernbehandlungsverbot” (2018)
  - Pflegepersonal-Stärkungsgesetz (2018/19)

# Status quo in eMEN partner countries

(preliminary results)

## E-mental health in Belgium

- Some health insurers refund online consultations and the use of blended care in specifically defined contexts
- Politicians expect that e-health and eMH will be among the major political agenda points in upcoming years

### Barriers

- Low awareness and acceptance of healthcare professionals and patients
- Limited options for training and education of professionals
- Complex state structure (different juridical responsibilities in communities and regions, three languages)
- Lack of reimbursement system for the use of eMH products and services

### Facilitators

- Federal and regional government fund and support eMH related initiatives and projects
- “best thesis on online care”-award by the Flemish Government fosters eMH research
- New platform ‘mhealthbelgium.be’ provides detailed information on validated mobile health applications (quality, safety, effectiveness and eligibility for financial support)
- Promising eMH developments in research



# Status quo in eMEN partner countries

(preliminary results)

## E-mental health in France

- Latecomer in terms of eMH development and implementation compared to other eMEN partner countries
- eMH not yet embedded as a core component of the mainstream public mental healthcare system

### Barriers

- Negative attitude and lack of acceptance by health care professionals
- Lack of trust in digital tools (privacy and data security)
- Human relationship as the perceived key in mental health care
- Lack of coordination / strategy

### Facilitators

- High research interest by universities
- Increasing number of regional and local eMH initiatives
- eMH mentioned as one priority for the future in the government's "Roadmap for mental health and psychiatry" (2018)



# Status quo in eMEN partner countries

(preliminary results)

## E-mental health in Ireland

- eMH products and services developed by public mental healthcare sector and third sector organisations (that receive funding from the public health system to provide complementary or ancillary services)
- NGO sector is already quite active in using eMH to enhance mental health services
- A variety of eMH products and services are available but so far there is not much direct deployment as part of the mainstream public mental healthcare system

### Barriers

- No overall eMH strategy
- Little opportunity for co-creation
- Preference for existing approaches and/or resistance to change by some health professionals
- Under-developed public mental healthcare system and IT infrastructure

### Facilitators

- HSE (the Irish Health Service) as well as third sector organisations clearly have a positive and receptive orientation towards eMH
- Strong interest in eMH at policy and practice levels
- University-based research as a core element for eMH development
- Current policy initiatives likely to accelerate developments (update of mental health policy with attention to eMH)



# Status quo in eMEN partner countries

(preliminary results)

## E-mental health in the Netherlands

- eMH development and related research started about ten years ago
- Due to a missing (e-health and eMH) national strategy in early days, the deployment of eMH developed fragmented (i.e., eMH available to most mental health providers but the structural use is only  $\pm 15\%$ )



### Barriers

- Limited options for training and education
- Lack of implementation research
- Inadequate reimbursement structure and remuneration model
- Privacy issues and non-transparency
- Undefined (evidence-based) added value of eMH

### Facilitators

- Growing interest and involvement on political level
- Increasing investments and coordinated approaches (e.g., adaptation of reimbursement scheme planned)
- Some universities offer voluntary eMH courses to psychology students (but courses are not yet regulated on national level)

# Status quo in eMEN partner countries

(preliminary results)

## E-mental health in the United Kingdom

- Decentralized health system (England, Northern Ireland, Scotland, Wales), i.e. pursuing differing policies, with different funding and priorities
- Developments in the area of eMH differ significantly between the four countries: in England, eMH is accelerating (>50% GPs use eMH); focus on self-management
- Commercial organisations have primarily taken the lead on the development of digital mental health innovations in the UK

### Barriers

- Limited knowledge and guidance about how to implement digital approaches
- Limited awareness
- Limited co-creation between developers, providers, end-users, researchers and clinicians
- Translation of policy announcements into action on local level

### Facilitators

- Optimism and positivity concerning the potential of eMH in the UK
- eMH as key strategic position in mental health policy in England (but comparatively lower profiles in Northern Ireland, Wales, Scotland)





# Digital solutions in the IAPT programme: an example of the NHS England



## Improving Access to Psychological Therapies (IAPT)

IAPT services provide evidence-based psychological therapies to people with anxiety and depression with the aim to increase access to mental health services

- By investigating the relatively low uptake of digital tools in IAPT services, NHS England identified a number of implementation barriers for services, managers, commissioners and therapists:
  - **Lack of knowledge** about eMH
  - Lack of knowledge and guidance about **how to implement** digital approaches,
  - **Difficulties around communication** between digital mental health developers and providers



# Status quo in eMEN partner countries and beyond



## **E-mental health in Denmark**

- Nationwide, free-of-charge provision of ICBT for people suffering from anxiety, depression, panic attacks and phobias (Internetpsykiatrien (2014))
- Development based on the National Telemedicine Action Plan 2012

## **E-mental health in Australia**

- Global frontrunner in eMH development and implementation
- Developments based on strategies and policies (e.g. *E-Mental Health 2020 Vision and Strategy for Australia (2009)*, *E-Mental Health Strategy for Australia (2012)*)

## **E-mental health in Canada**

- Very advanced in eMH development and implementation
- Developments based on target-oriented guidance documents (*E-Mental Health in Canada: Transforming the Mental Health System Using Technology (2014)*, *RE-ALMing E-Mental Health (2017)*, *Toolkit for E-Mental Health Implementation (2018)*)

# E-mental health in Europe: a glance into neighbouring countries

- E-mental health & eMEN
- eMH: status quo in eMEN partner countries and beyond
- **Lessons learned**
- Towards a Transnational Policy Solution
- Conclusion

# Lessons learned

Examples of identified barriers and facilitators for the implementation of eMH:

## Barriers

- Limited awareness and acceptance
- Lack of structured alignment, visions and guidance (incl. regulatory framework, reimbursement scheme)
- Lack of implementation research
- Lack of transparent information and standards
- Limited options for training and education

## Facilitators

- Overarching sense of optimism and interest of key stakeholders
- Support on policy level (e.g., through objectives, priority setting, investments, strategies or guidance)
- (Financial) support of and interest in research related to eMH (e.g., large-scale pilots or target group-specific research)
- Promotion of eMH and digital knowledge

# Lessons learned

- Interest in eMH research as the basis for eMH developments in all eMEN partner countries. However, the status quo of eMH development and implementation differs widely
  - Country-specific and joint challenges
- Opinion leaders or advocates of eMH can enhance and promote eMH developments
- National action plans, strategies, policies and guidance documents can foster the sustainable implementation of eMH (see UK (ENG), AUS, CAN, DK)
  - Lack of a timely strategic approach can lead to fragmentation of eMH deployment (NL)
  - Complex mental healthcare structures may impede finding coherent approaches (BE)
- Adequate structures (e.g., digital skills, quality criteria and reimbursement schemes) can facilitate the eMH development and implementation and promotes trust
- Added value of eMH must be clear and convincing (further research necessary?); support from practice is crucial for eMH implementation

# Lessons learned

- Effective eMH implementation requires a comprehensive, multidisciplinary and strategic approach that considers the wide variety of challenges



→ eMEN Transnational Policy Solution

# E-mental health in Europe: a glance into neighbouring countries

- E-mental health & eMEN
- eMH: status quo in eMEN partner countries and beyond
- Lessons learned
- **Towards a Transnational Policy Solution**
- Conclusion

# eMEN: Transnational Policy Solution



Using the findings from the **country analyses, interviews with relevant stakeholders and literature review**, the eMEN consortium develops a Transnational Policy Solution (TPS) that aims to:

- outline a European approach with priority actions, policy recommendations and a practical action plan
  - provide guidance for politicians and policy makers on European and national level on how to deal with challenges and enhance the effective and sustainable implementation of eMH
- **facilitate the use of eMH in routine mental health care of eMEN partner countries and beyond**



# Focus of the Transnational Policy Solution

The TPS provides a coherent analysis of current challenges and best practices of the eMH development and implementation, including factors such as:

- **Governance, leadership and policies** (incl. digital infrastructure, quality criteria, licensing and reimbursement)
  - e.g. Mobile health Belgium, DGPPN quality criteria
- **Awareness and acceptance**
- **Knowledge, training & education**
- **Evaluation and implementation**
- **Privacy and data security**
- **Usability**
- **Ethics, group-specific and cultural aspects**

# „Mobile health Belgium“

- Project of the Belgian government to integrate mobile health applications into the Belgian healthcare system (part of the eHealth Action Plan 2015 – 2018)
- The platform *www.mhealthbelgium.be* provides detailed information on validated health applications
  - In order to be included in the platform, applications must at least have a CE mark and comply with the General Data Protection Regulation (Level 1)
  - Level 2 applications have additionally been tested with regard to interoperability by an independent organization
  - Level 3 applications furthermore provide detailed informed on the medical and financial results (assessed by the national Institute for Health and Disability Insurance) → use of application eligible for financial support

# Quality criteria for internet-based self-management interventions for mental disorders

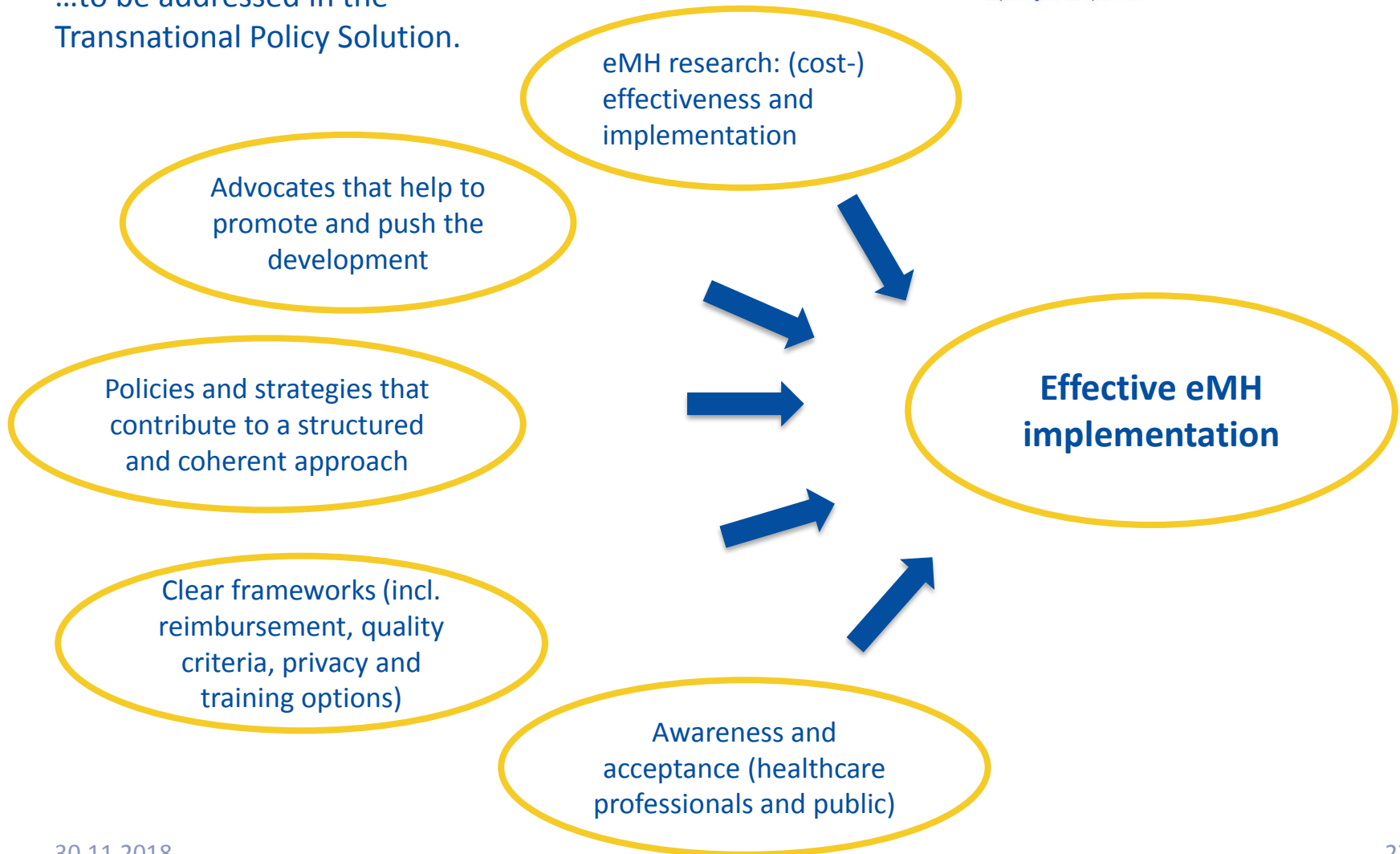


In cooperation with patients and other relevant stakeholders, the DGPPN E-Mental Health Task Force developed specific quality criteria in order to identify safe and effective interventions:

- **Indication** (transparent description of purpose)
- **Intervention** (transparent description of intervention, methods applied, procedure, developer, etc.)
- **Qualification** (involvement of mental health professionals & people with experienced mental health problems in the development process)
- **Efficacy** (at least one RCT showing safety and non-inferiority)
- **Safety** (e.g., what to do in crisis situations)
- **Data protection** (the intervention complies with valid legislation, proven by a certificate)
- **Costs** (transparent description of costs, clear cancellation policy for monthly subscriptions)
- **Integration into healthcare** (reference to further treatment options, control of treatment)

# Identified priorities for effective eMH implementation

...to be addressed in the Transnational Policy Solution.



# Transnational Policy Solution: Outlook

What happens after the TPS has been developed?

- Retrieving and incorporating feedback from relevant stakeholders
  - Presentation at the eMEN Conference at the end of 2019
  - Dissemination of the final TPS to a wide variety of institutions and organizations, such as:
    - The European Commission
    - DG Sante & DG Connect
    - Other European organizations (e.g. WHO Europe, EPA)
    - National (mental) health ministries and politicians
- **Actively promoting a change and facilitating eMH development and implementation!**

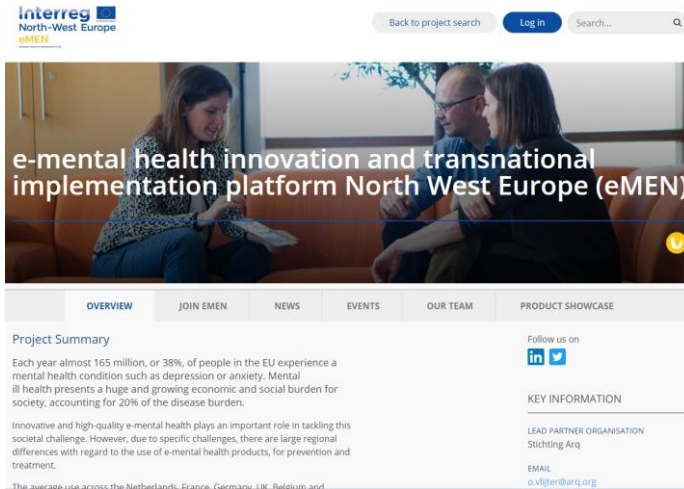
# E-mental health in Europe: a glance into neighbouring countries

- E-mental health & eMEN
- eMH: status quo in eMEN partner countries and beyond
- Lessons learned
- Towards a Transnational Policy Solution
- **Conclusion**

## Conclusion

- eMH promises good potential to provide **more affordable, accessible, effective and empowering mental health** throughout Europe
- The implementation of eMH differs widely in eMEN partner countries and remains challenging
- No comprehensive guidance available on how to foster eMH development and implementation in eMEN partner countries
- By developing a transnational policy solution, the eMEN consortium aims at advocating a structured and harmonized approach in order to:
  - champion the positive impact that eMH entails
  - enhance and facilitate a sustainable implementation process in North-West Europe countries and beyond

# Interested in getting to know more about the eMEN project?



Visit our eMEN website  
[www.nweurope.eu/emen](http://www.nweurope.eu/emen)



...or the LVR-IVF eMEN website:  
[www.emen-ivf.lvr.de](http://www.emen-ivf.lvr.de) !



# Interreg



EUROPEAN UNION

# North-West Europe

# eMEN

European Regional Development Fund

# Thank you!