

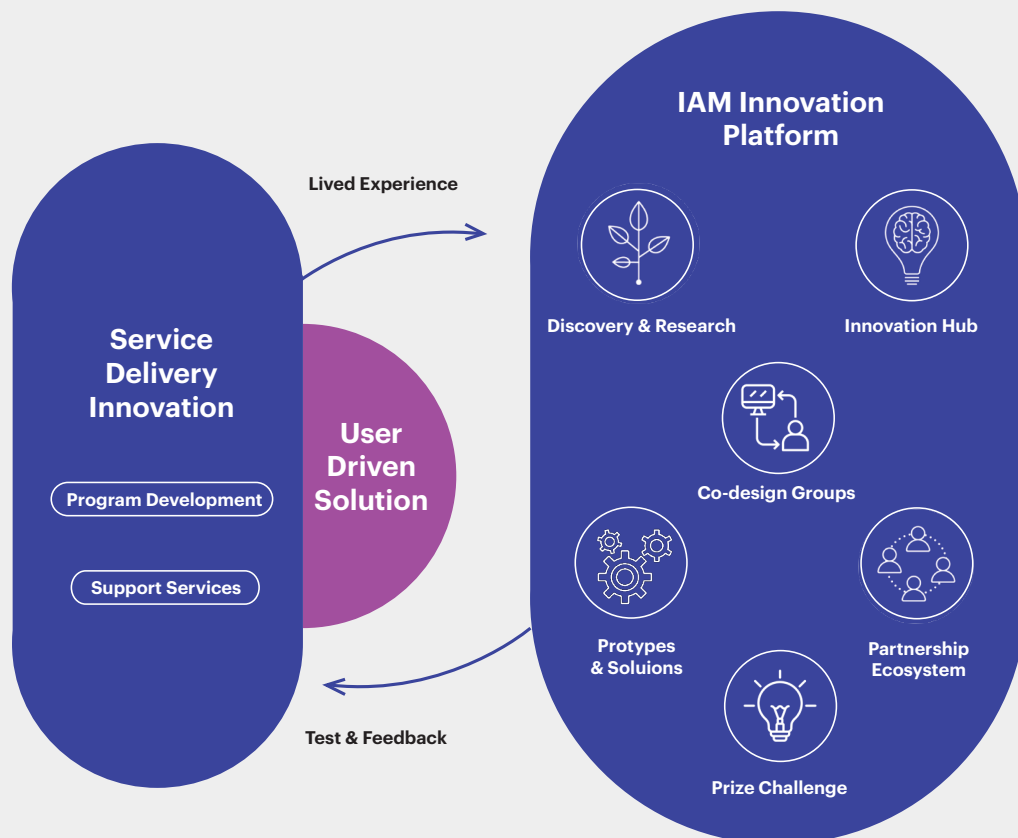
Taking a design innovation approach to mental health solutions: IAM Patient toolkit

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Context

The Institute for Advancements in Mental Health (IAM) has evolved out of four decades of mental health work, and was developed to bring viable and scalable solutions to the most urgent mental health issues affecting our society. Inspired by what innovation can do in community mental health, we created IAM to be agile and flexible in order to respond to the needs of those we serve. That means putting people — not diagnosis or illness — first.

Our team considers both lessons learned from years of frontline service delivery and stories and concerns from people living with mental health challenges. We believe that in order to sustainably build innovative solutions, we must bring together clients, caregivers, and frontline workers into the process of product and service R&D itself. Individuals with lived experience are both beneficiaries and co-creators of our solutions, which is a unique and valuable approach to service delivery and the creation of unique and valuable products and services.



"Nothing about us without us." - James I. Charlton

The Challenge

Our project group was initially given the challenge of developing a toolkit for physicians, to support them in optimizing a monitoring appointment with individuals living with psychosis, which is typically centred around medication and symptom management. Aligning with our human-centred approach to problem solving, we endeavored to understand the experiences of healthcare professionals and individuals; of the voices and stories we heard, many of them expressed a range of concerns associated with these appointments.

Our project team made up of program staff, innovation designers, service designers and clinical staff were tasked with discovering:

“How might we improve the individual’s experience at their follow-up appointment?”

In order to tackle this, we wanted to unpack:

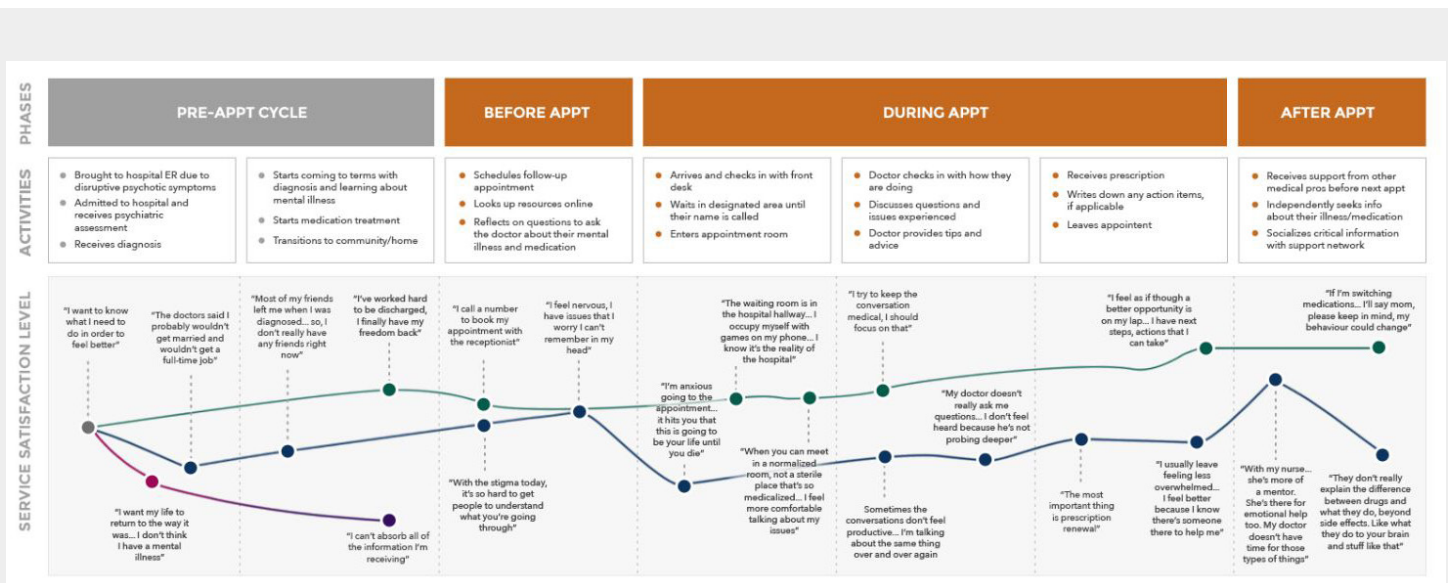
- What is currently happening before, during, and after these appointments?
- What artefacts could improve an individual’s experience at the appointment and their relationship with their healthcare professional?
- What would their “dream” experience look like, and why?

Through interviews and surveys, we discovered several pain points, including:

- Lack of time is an issue faced by most medical professionals
- Most individuals wish they had more access to resources outside of the appointment
- Some individuals reported the appointments can be repetitive
- Some individuals expressed concerns regarding remembering the issues they want to discuss during these appointments
- Most individuals experienced some type of anxiety leading up to, or the day of the appointment

As a result of this research, our team pivoted and reframed our design challenge:

“How might we better support individuals in developing agency so that they take ownership of their appointment experience?”



The Solution

In collaboration with our clients, caregivers, and frontline staff, we generated 6 prototypes that addressed various pain points across the appointment experience. All of these prototypes followed these design guidelines:

Integration

Be a supportive tool, avoiding the feeling of more work or stress; use should be second nature.

Empower

Give individuals a voice and the ability to be more independent and autonomous.

Accessible

Reach the widest range of individuals possible, regardless of technical or cognitive ability.

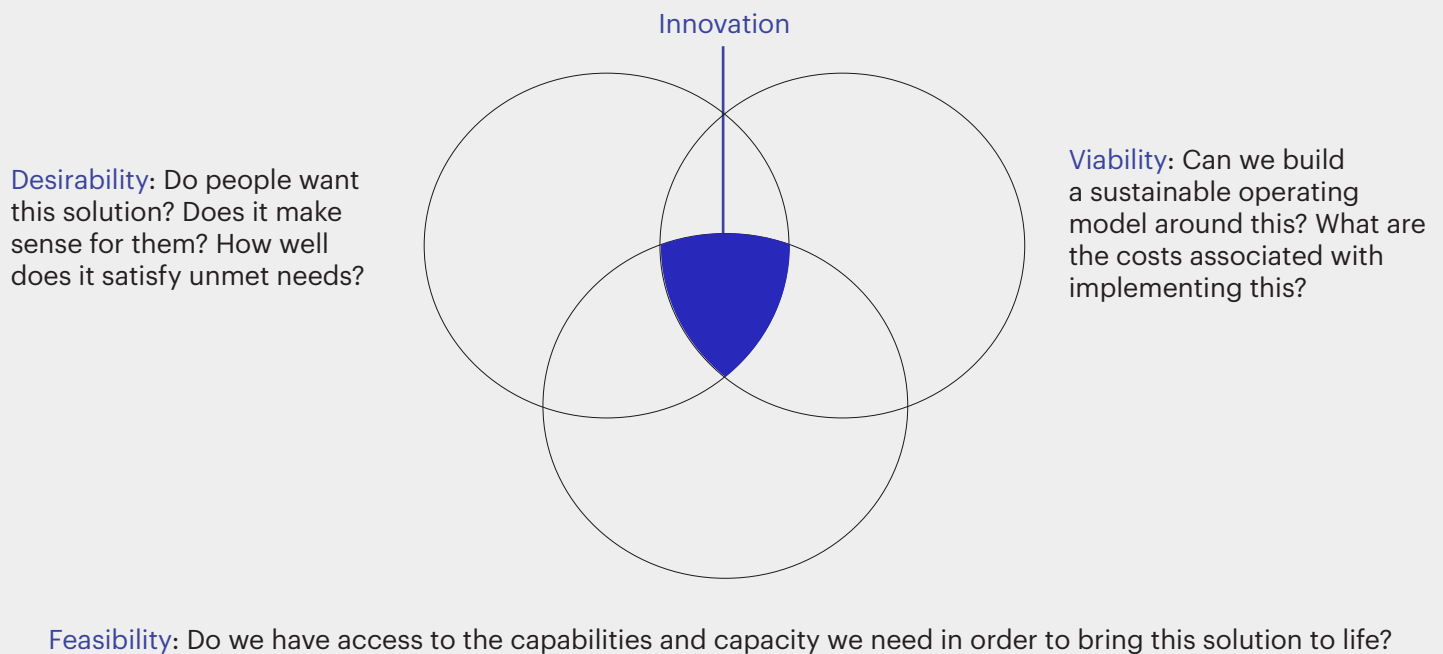
Benefit

Be a consistent, long term support that shows both immediate and long-term benefit.

Relevant

Information, methods, and resources should stay current and relevant to individuals over time.

When determining which prototype we wanted to pursue, our team considered the following:



Patient Toolkit

Individuals who have experienced psychosis see the value in having a physical collection of information, resources, and activities. They feel like it would help alleviate stress and anxiety, help them identify and focus on what they need, and ask the right questions. Some would prefer a digital tool with the same functionality, but most appreciate a combination of both. Caregivers like that this tool could give their family member more autonomy, and many were eager to use it themselves as a way to further support their loved one.

Overall, the patient toolkit seemed to tick most boxes for individuals and caregivers. They appreciate the all-in-one solution and can see its value. With proper introduction and integration, many see this tool filling the gaps in their appointment cycle and supporting them to lead their own recovery journey.



Our prototype is grounded in cognitive behavioural therapy (CBT), CBT supports individuals to identify what’s important to them and how to overcome obstacles that can get in the way. The core principle driving CBT is that the way we perceive a situation is more closely connected to our reaction(s), than the situation itself. The resources enclosed in this toolkit are intended to ease the pain points identified in our research; for example a mood tracker is intended to support individuals in understanding the impact of mood changes on their mental health or how changes in medication can lead to mood fluctuations that can impact day-to-day functioning. These tools allow them to take greater ownership of their feelings and experiences and communicate them clearly to their healthcare professionals. Individuals who experience psychosis are the guardians of their own experiences and our toolkit aspires to support them in developing personal agency, alleviate anxieties and stressors related to the appointment cycle, and support them in identifying and advocating for their holistic health needs.

Next Steps:

We’re moving our low-fidelity prototype into the build out phase this summer. In alignment with design principles, we’ll be developing and testing our content with individuals, their caregivers, and healthcare professionals; and evolving our prototype into a product for further testing, and implementation. As we synthesize testing feedback and incorporate it into our final product, we’ll be moving to pilot this in communities and scaling to reach more people in need.