

Towards a Companion App Supporting Psychotherapy and Counseling of Refugees: Results from Expert Interviews

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Why Technical Support of Psychotherapy of Refugees?

- too few specialized treatment places for high rate of mental disorders in refugees (BAiF)
- PTSD impacts neuropsychological and verbal tasks, school grades and lowers performance in language schools (Yasik 2007, Elbert 2009, Söndergaard 2004)
- considering the smartphone as "an essential piece of kit for millions as they travel" (ICT4refugees)
- most available applications focusing on veterans or other target groups, e.g. PTSD Coach, Coach PTBS, AOK Health Navigator

Why Expert Interviews?

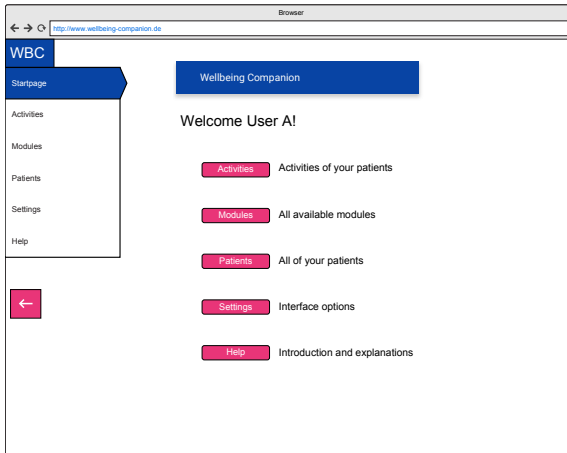
What is an application that supports psychotherapy and psychotherapeutical counseling of refugees supposed to look like?

- support psychotherapy to facilitate mental health specialists
- identify problems in therapy to develop technical support
- identify potential difficulties with technical support early on
- informal talks with therapists: idea for prototype
- collect ideas and wishes from experts

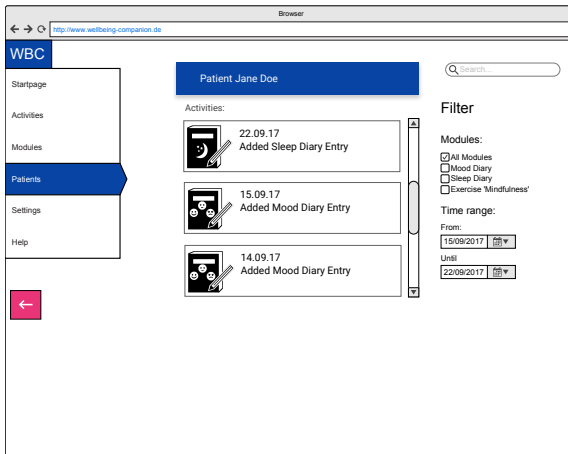
General Approach – 'Wellbeing Companion'

- two interlinked applications: web-application for therapists, smartphone application for patients
 - therapists can register patients in web-application
 - patients can share data with their therapist
- modular structure: smartphone application for patients can be individually composed by therapists via web-application
- modules will follow common therapy manuals for typical disorders
- in the web-application therapist will be able to examine pre-analysed data of the patients

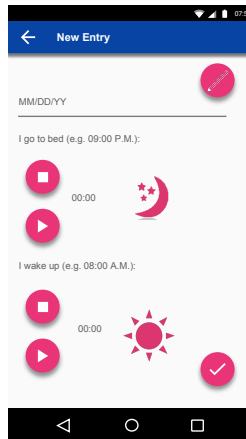
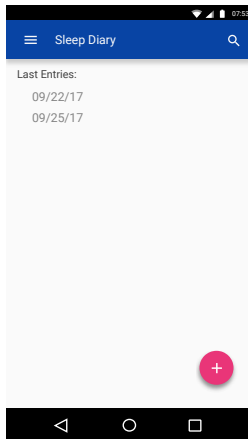
Paper Prototype: 'Wellbeing Companion' for Therapists



Paper Prototype: 'Wellbeing Companion' for Therapists



Paper Prototype: 'Wellbeing Companion' for Patients



Expert Interviews: Guidelines

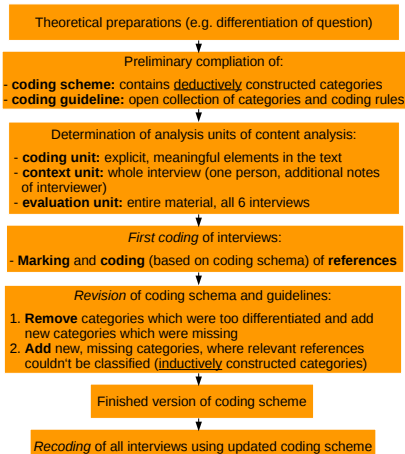
- initial contact and maintenance of contact
- barriers within therapy or consultation
- possible (technical) solutions, current workarounds
- key properties to ensure acceptance of supporting applications by therapists/consultants as well as refugees
- evaluation of a paper prototype of a support application
- ideas and wishes towards a support application

Expert Interviews: 5 interviews with 6 experts

- 6 female mental health specialists
- professional background: 4 psychotherapists (2 in training, 2 trained), 1 systemic counselor (in training), 1 psychiatrist (trained)
- therapeutic methods: cognitive behavioral therapy, narrative exposure therapy, systemic counseling
- age: 28 - 40 years
- therapy experience: 1 - 14 years
- therapy experience with refugees: 6 month - 10 years

Expert Interviews: Evaluation Procedure

- qualitative content analysis by Philipp Mayring (Mayring, 2015)
- mix of deductively and inductively constructed categories
- deductive categories: based on interview guideline
- inductive categories: constructed during first coding



Expert Interviews: Evaluation Categories

- initial contact & maintenance of contact
- elements of therapy
- barriers within therapy
- therapy homework
- problems with therapy homework
- usage of technology
- wishes/ideas technology
- acceptance of technology (refugees)
- acceptance of technology (therapists)
- characteristics of a technical system
- potential problems prototype (refugees)
- potential problems prototype (therapists)
- positive remarks prototype
- feature ideas prototype

Expert Interviews: Results

	overall frequency of occurrence	interview appearances		overall frequency of occurrence	interview appearances
problems with therapy & homework			acceptance of technology (refugees)		
compliance	11	5	familiarity of device	8	4
asylum status	8	5	smartphone acceptance	7	4
language barrier	18	4	age	7	4
missing trust/support	6	4	sensitive data	8	3
availability of homework	6	4	unfamiliar context	6	3
acceptance/understanding of therapy	8	3			
obligation of therapy participation	3	3	acceptance of technology (therapists)		
long chain of communication	2	2	additional work	10	4
			age	6	4
therapy homework & technology			usefulness	4	4
usage of therapy homework	5	5	sensitive data	6	3
documentation	8	4	unfamiliarity with technology	4	3
exercises	7	4	accuracy of mapping	4	3
self-reflexion	6	4	fear of "getting replaced"	2	2
homework review during session	4	4			
audio files	3	3	wishes/ideas technology		
smartphone camera	3	3	query to release data	8	5
messaging service	13	2	reminder	11	4
			digital information material	8	3
Important characteristics			smartphone camera	7	3
data security	7	4	digital documentation	4	3
support, not replacement of therapy	4	3	digital questionnaires	5	2
precise limits of system	4	3	printability of data	4	2
usability	5	2	audio files	3	2
accuracy of mapping	3	2	digital exercises	3	2
transparency of data	2	1	data combination/pre-analysis	2	2

Expert Interviews: Implications (1)

- digital support of homework could be useful to facilitate therapy
- should rely on text as little as possible
- needs to be trustworthy (and convey that image)
- reminder functions for different aspects (e.g. homework, appointments)
- make use of known concepts (audio files, camera, etc.) in a new context

Expert Interviews: Implications (2)

- data regarding acceptance by refugees not significant
- control over data needs to lie with the patients at all times
- purpose of application, including it's limits, need to be clear
- rely on common therapy manuals for modules
- evaluate different mappings
- usefulness needs to outweigh additional work

Next Steps

- collect data regarding acceptance by refugees
- specification of modules
- development of functional prototype
- user tests with functional prototype
⇒ development in small cycles, always inducing user feedback
- long-term study to examine e.g. effectiveness, user satisfaction
- app might need to include more than just therapy

Contact Information

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