Development of a Digital Program for Training Community Health Workers in the Detection and Referral of Schizophrenia in Primary Care Settings in Rural India

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Introduction

Digital technology is an important approach for training community health workers (CHWs) called ASHAs (Accredited social health activist) to deliver mental health care in primary care settings in rural India. A very limited number of studies have considered whether digital training programs could build the capacity of the frontline workforce towards improving treatment outcomes for persons living with schizophrenia in low-resource settings.

Objective

This study aimed to develop and contextualize the content for a digital program for training CHWs in the detection, referral, and follow up with patients with schizophrenia in community settings, and to assess the acceptability and feasibility of this program.

Methodology

Study context: Community health centers in Sehore district of Madhya Pradesh state, India



Iterative Design & Data Analysis Framework Approach

Development of course blueprint & review by Mental Health professionals (MHPs) including 6 Psychiatrists, 1 counsellor & 1serviceuser (SU)

Course content was developed in English for 6 modules & reviewed by 2 psychiatrists & 1 psychologist, then scripts were finalized & translated in Hindi

11 ASHAs gave feedback to contextualize the hindi content for local settings in rural India; qualitative feedback on appropriateness of language, content & terminologies.

12 ASHAs & 2 SUs provided feedback & suggestions for acceptability & feasibility of the digital training prototype in a focus group discussion.

- Purposive sampling for ASHAs & SUs
- Contextualization with ASHAs in July'21
- Design workshop with ASHAs in October'21 and SUs in November'21
- Satisfaction with language and images
- Use of case vignettes and other engagement strategies to improve understanding.
- Use of simple language over technical terms & culturally relevant words

Socio-demographic characterstics of

participants

14

Education (Mean)

SUs

MHPs

ASHAs

Duration of Work/Illness (Mean)

12

Glossary for difficult terms

16

40

Age (Mean)

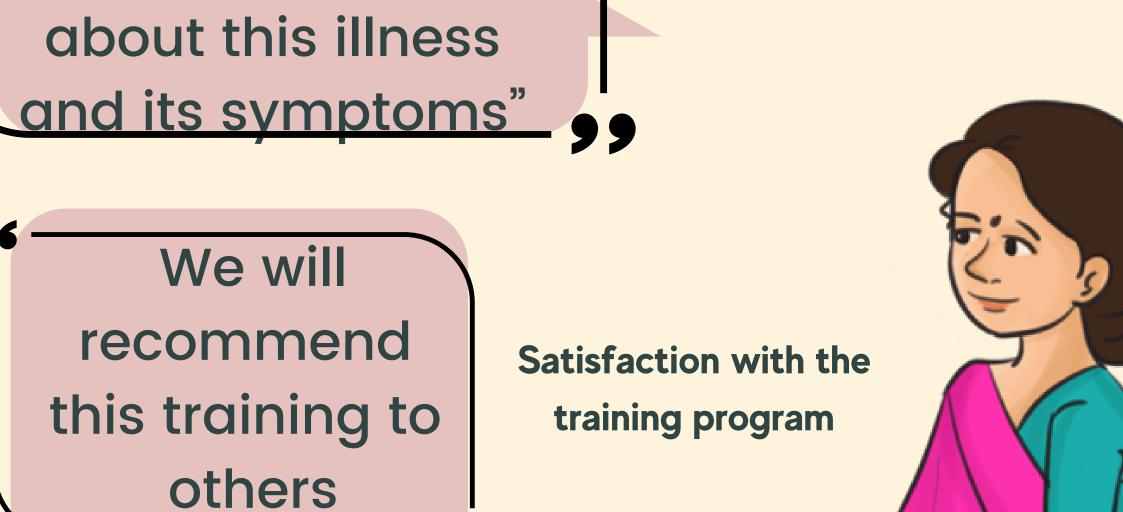
Study findings under following themes:

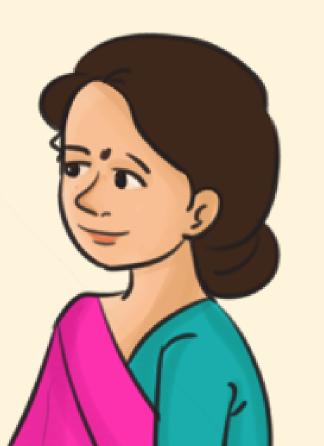
People with mental illness face discrimination we learned not to stigmatise them

"We knew that mental illness happens but today we got to know about this illness

Results

Knowledge & attitude about Severe mental illness





of Participants 8 23 ASHA SU Mental health professionals

Knowledge gained from digital training program

Feasibility of using digital technology

Saves time as can be done on mobile, able to concentrate better

Platform is good more people can get trained

Understanding about usability of the digital training program

Feedback from service-users

- The online medium has a much bigger reach, and can be accessed by thousands of people. It is more convenient as the ASHAs can do it in their free time. "It's a huge advantage", "I think it is a good idea"
- It would be helpful for ASHA workers to learn about stigma and they would benefit from understanding the symptoms.
- Having Dos and Don'ts for ASHAs in simple bullet points could be useful to orient them to not behave with patients in a negative manner.

Discussion

- This study contributes to mounting evidence on the use of digital technology for training CHWs in low-resource settings.
- Continued efforts are necessary to determine if such approaches can specifically develop their skills for identification and referral of schizophrenia.
- We anticipate CHWs beliefs and knowledge on schizophrenia can be changed and they can help in mitigating barriers to accessing treatment for Schizophrenia.

1. Merchant, R., Torous, J., Rodriguez-Villa, E., & Naslund, J.A. Digital Technology for Management of Severe Mental Disorders in Low- and Middle-Income Countries. Current Opinion in Psychiatry. 2020;5:501-507

2. Chatterjee, S., Naik, S., John, S., Dabholkar, H., Balaji, M., Koschorke, M., ... & Thornicroft, G. (2014). Effectiveness of a community-based intervention

for people with schizophrenia and their caregivers in India (COPSI): a randomised controlled trial. The Lancet, 383(9926), 1385-1394.



SARATHA