Skills training opens 'DOORS' to digital mental health for patients with serious mental illness

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Digital technologies, especially smartphone apps, have great promise for increasing access to care for patients with serious mental illness such as schizophrenia. A new training program, called DOORS, can help patients get the full benefit of innovative digital mental health tools, reports a study in the March issue of *Journal of Psychiatric Practice*.

While most patients with serious mental illness now have access to smartphones, a "second digital divide" has become apparent: patients may lack the skills needed to effectively use digital technologies to support mental health, according to the report by John Torous, MD, Director of the Division of Digital Psychiatry at the Beth Israel Deaconess Medical Center, Boston, and colleagues. They write, "The Digital Opportunities for Outcomes in Recovery Services (DOORS) program represents an evidence-based effort to formally bridge this new digital divide and deliver on the potential of digital mental health."

Training Helps Patients Choose and Effectively Use Digital Mental Health Apps

Today, there are thousands of mobile apps designed to help patients with mental illness to monitor and self-manage their symptoms, connect with care, and even predict relapse. However, experience has shown that patients need training in "core competencies, autonomy, and skills required to effectively utilize these novel tools to improve mental

health," according to the authors. "We find that people are interested and excited to use their phones towards recovery—but often not provided with the hands-on training or support to feel confident in using technology as part of care. Now with DOORS we can help people unlock the potential of digital health" notes study authors Erica Camacho.

The DOORS program was developed as a pragmatic, hands-on approach to provide training and functional education in digital mental health skills for patients with serious mental illness. Based on self-determination theory, DOORS targeted three key elements—toward the [common goal](link) of strengthening the therapeutic alliance between patients and mental health professionals:

- *Competence* - The DOORS program helped patients to develop smartphone skills, evaluate and select digital health tools, and learn how to use digital tools to gain insights into their everyday experiences. A key focus was on learning the most important factors in evaluating health apps—for example, using apps with good privacy protection and a reputable developer.
- *Autonomy* - Patients learned how to use apps to support their personal recovery and set wellness goals, using the data collected by the apps to guide behavior change. For example, using smartphone step counters and exercise apps helped patients meet goals for physical activity: an important approach to reducing symptoms.
- *Relatedness* - Group participants were able to share and learn from each other about digital health tools and strategies, and to work with clinical staff in developing their skills and using digital mental health toward enhancing their personal recovery.

Dr. Torous and colleagues share their experience using DOORS in two settings, or "clubhouses," for people with mental illness: a first episode psychosis (FEP) group and a chronic-phase schizophrenia group. A

version of DOORS for younger patients in the FEP group focused more on autonomy; a modified version for patients with the chronic schizophrenia group, who were more familiar with using smartphone apps, focused more on competency. Both groups learned to use a free and open-source app called mindLAMP ("learn, assess, manage, prevent") to monitor their mental health. "Because of continued interest and demand, the groups are still running today at these sites and many new ones as well" notes Elena Rodriguez-Villa of the Beth Israel Deaconess Medical Center team, who currently teaches two DOORS groups.

For both versions, the researchers developed manuals for clinicians leading the DOORS groups, including detailed session outlines, handouts, and references "We hope that, by sharing our facilitator manuals freely online, others will develop, expand, and customize DOORS to suit the needs of their patients," Dr. Torous and coauthors write. Both manuals, future updates, and more resources like slide sets for running groups are available at https://www.digitalpsych.org/.

"Bridging the second digital divide between people with serious mental illness and those without by offering new skills and resources to help people to take full advantage of digital health tools is becoming a global health priority," the researchers conclude.

"DOORS represents one approach toward addressing this gap and ensuring equal access, opportunity, and value of digital health tools for improving care for all patients," comments Dr. Torous. "We are excited for others to join us, expand the program, and create an evolving learning community."

  More information: "Digital Opportunities for Outcomes in Recovery Services (DOORS)" *Journal of Psychiatric Practice*, DOI: 10.1097/PRA.0000000000000450 , journals.lww.com/practicalpsyc …

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