

# **DIGITAL INCLUSION**

**MENTAL HEALTH**

**1ST**

**MARCH**

**STAKEHOLDER EVENT**

**SUMMARY**



## Digital Inclusion in Mental Health

### What we learned from our engagement with stakeholders across the mental health context

#### Understanding Digital Inclusion in Mental Health

The Scottish Government's Digital Health and Care Directorate are working on a new programme, delivered in partnership with the Scottish Council for Voluntary Organisations and Connecting Scotland, that will focus on digital inclusion in mental health and housing.

As part of the programme development, we held a stakeholder engagement event on 1st March to bring together people and organisations working across different areas of mental health. The aim of the event was to share more information about the programme, identify existing digital inclusion work across the mental health context, and hear people's perspectives on the challenges and priorities to inform the programme development.

We also shared an outline framework – 'Pillars for digital inclusion' - that we have developed as part of our discovery work and invited stakeholders to share their expertise and experiences to gain a deeper insight into the pillars and their potential in mental health practice.

We have synthesised what we heard during the event and share the key themes and insights from the stakeholders who took part about the landscape of digital inclusion in mental health.



## Stakeholder participation

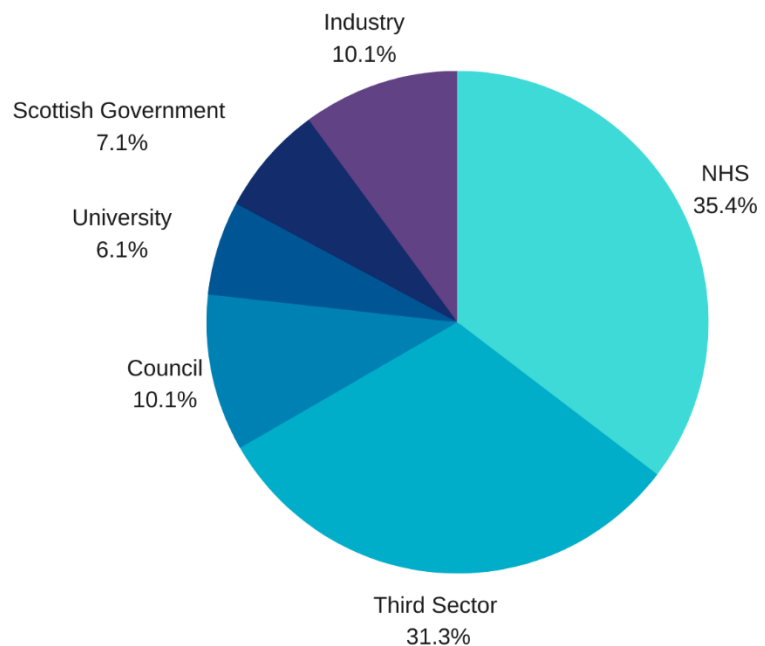
Where you joined us from:



## DIGITAL INCLUSION STAKEHOLDER EVENT: MENTAL HEALTH

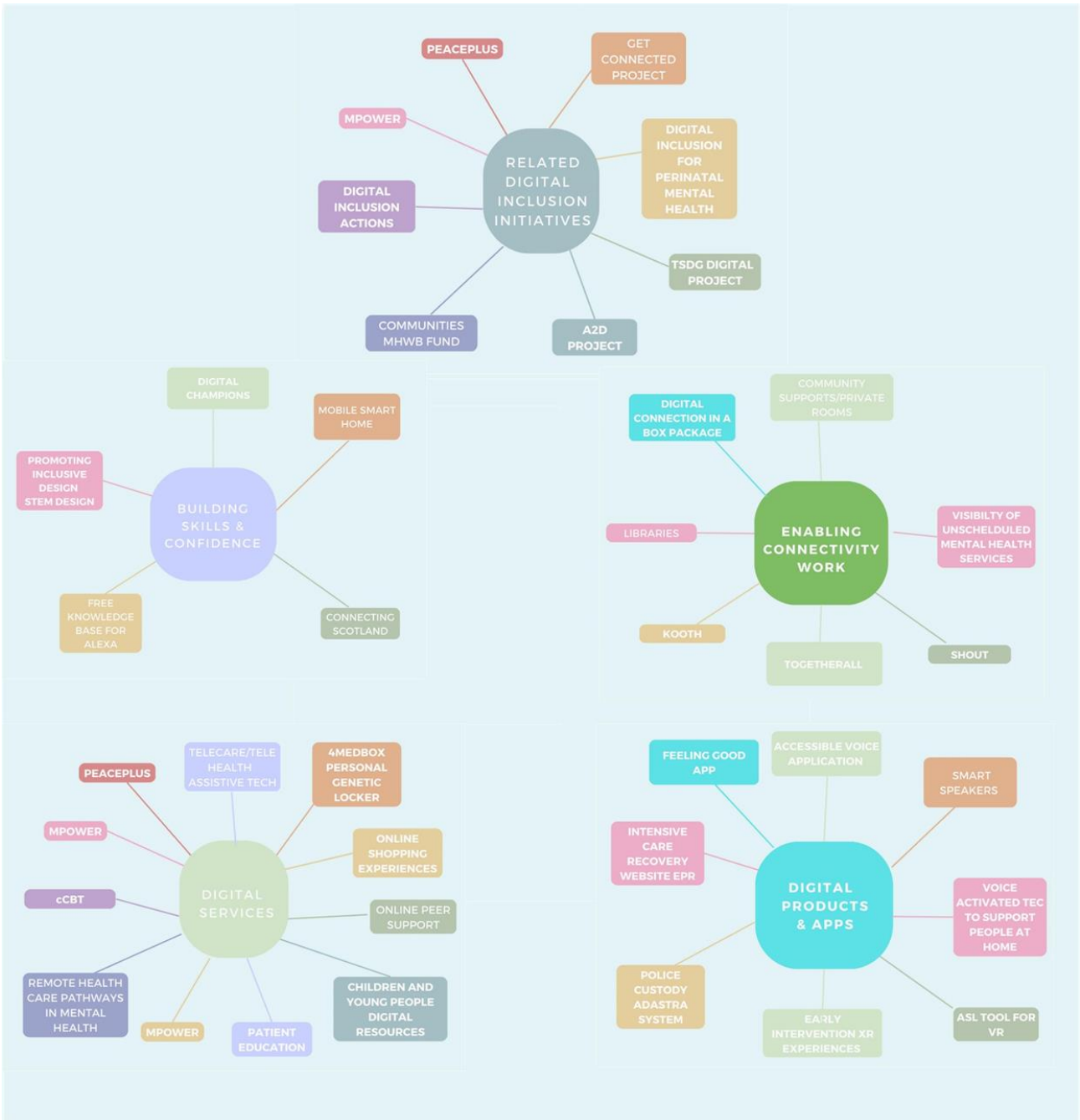
Organisations involved during the session:

- Scottish Government
- University
- Council
- Third Sector
- The NHS
- Industry



## Existing Digital Inclusion Work: Mental Health

Prior to attending the event, stakeholders were invited to share any existing work or projects they were aware of or involved in that are focusing on digital inclusion in mental health. These were mapped across areas of digital inclusion initiatives, skills and confidence, connectivity, digital services and products/apps.



## Setting the scene

We were delighted to be joined by Shannon McNee, Digital Inclusion Researcher at Carr Gomm who provided an overview and key learnings of the digital inclusion research project which aims to learn more about the digital needs of the people they support and staff.



Carr Gomm-Digital  
Inclusion in Mental He

Presentation link:

## What we heard about digital inclusion in mental health: challenges, potential and priorities

Stakeholders were invited to share their experience in small groups of what is currently working well to improve digital inclusion for people living with mental health conditions. Key points from the conversations included:

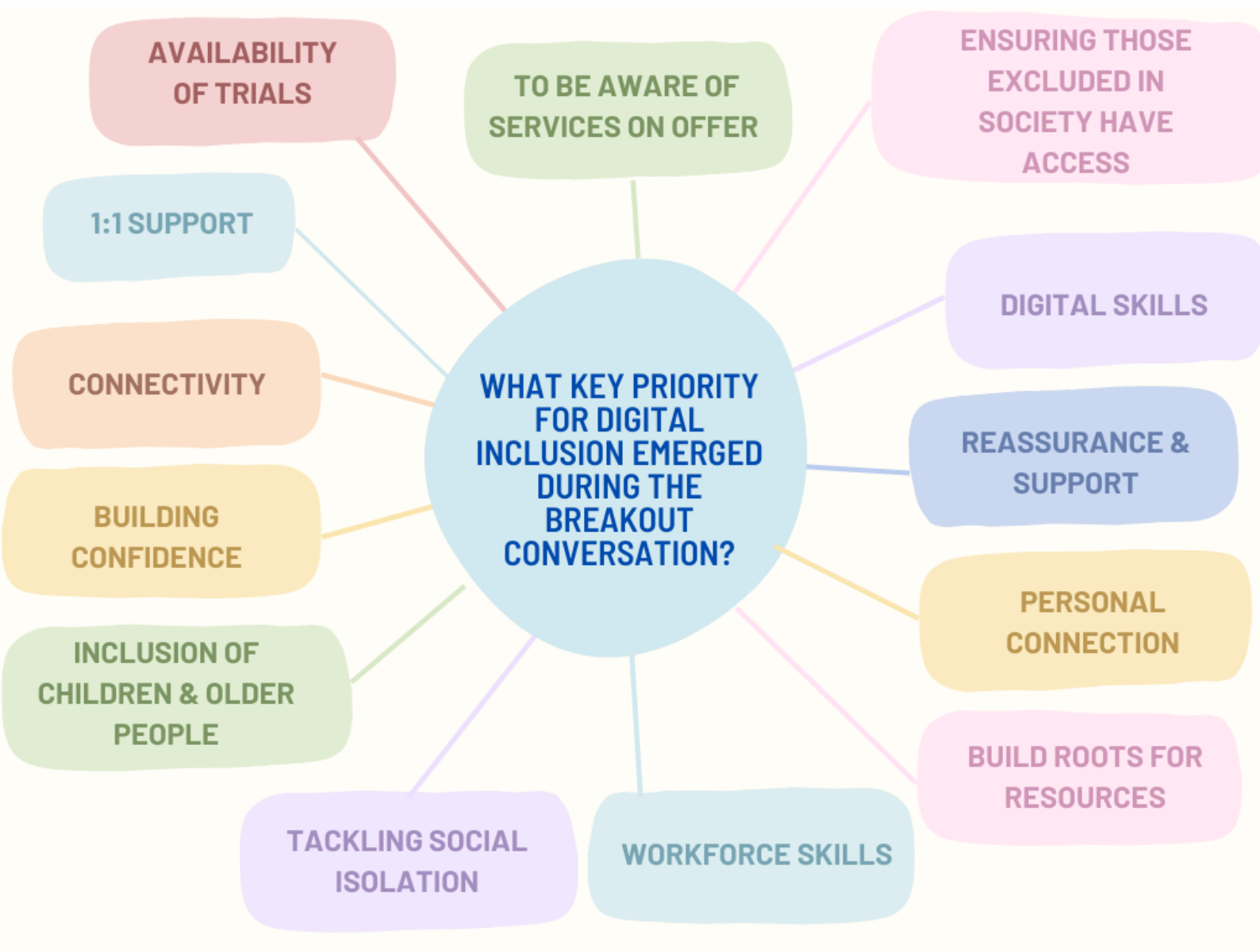
- Promoting digital services and providing training in a tailored way based on the individual's needs. Also being aware that these needs may change over time.
- Giving people the element of choice about how they engage in services and whether they want to use digital services based on their personal preference and circumstances.
- Providing the infrastructure so people can get online, including device and connectivity. A key example highlighted was the Connecting Scotland programme.
- Establishing trusted and familiar relationships so people feel confident to use digital services, for example, peer support and building on family relationships.
- Online services work well for younger people, particularly if there is anonymity for example, online chat, online counselling, gamification.

A number of challenges and barriers were identified which impact digital access for people living with a mental health condition including:

- Preferences to access services in-person and fear digital will replace these services.
- Personal circumstances can impact their ability to use digital services, for example learning disabilities, substance use, and other complex needs.
- Privacy concerns about how personal information is being used and fears of being scammed online.
- Poverty and the cost of being online, including the purchasing of a device and connectivity.
- Connectivity issues, particularly in rural areas and assisted living.
- Clinician/staff lack the knowledge of digital and can be reluctant to offer digital services.

- The lack of a central source for digital resources. There is so much information and many services it is hard to know how to navigate.

Key priority areas for the Digital Inclusion Programme to focus on were identified, including older people, people in secure environments or people who are transitioning/being discharged (i.e. prison, hospital, care home), people with low income or living in deprived areas, children and young people, people with additional needs such as disabilities and specific mental health conditions (i.e. autism and bipolar).



## Pillars for digital inclusion

Aaron Slater, Digital Participation Manager at SCVO, presented an overview of the Pillars for Digital Inclusion. Most models articulate digital inclusion as having access to a device, connectivity and the skills and confidence to navigate the online world. Digital inclusion therefore has a financial implication, as well as a skills requirement. These are the things a person needs to become digitally included and enjoy the benefits that many of us take for granted. But the benefits of digital inclusion do not only exist at an individual level. Everyone benefits from a digitally inclusive society. It is therefore important to consider how responsibility for digital inclusion can be shared beyond individuals to wider services and organisations. How can services across health and social care consciously design for digital inclusion? Pillars for Digital Inclusion is an evolving framework that will shape work across the programme. The pillars include:



**Motivation:** Motivation is the first step on the journey to digital inclusion. If you the benefits of being online are not clear, people will be less likely to take that first step. Motivation can be best understood by the ‘hook’ - tapping into personal interests to help someone understand the benefits of being online. It is unlikely that the hook will be a specific public service like completing a Universal Credit journal. Therefore, how do services accommodate the digital inclusion journey in a person-centred way? The other side of motivation relates to fears and barriers. One of the most common fears for people who are not online is data privacy. How can services be transparent and clear about how they capture and use data? How is this incorporated into digital services and platforms in a way that does not overwhelm or create barriers to people using it?



**Devices:** Devices can be a significant one-off cost. Different people will have different requirements for devices e.g. smartphones, tablets or laptops. The device needs to meet the people’s individual needs of both the purpose for use and any accessibility requirements. Do services know what devices, if any, their users/patients/tenants have access to?



**Connectivity:** A device will have limited use without connection to the internet. This involves cost and can exclude people on lower incomes. For anyone with unlimited data or home broadband, thinking about data usage isn't likely to be a problem. For anyone using pay-as-you-go data, everything you do online can be a financial decision as to how you use your limited resources. How do services ensure that digital delivery does not disadvantage people on limited data packages? How are digital services designed to minimise unnecessary data consumption? This can be further exacerbated in remote and rural areas where there are infrastructure deficits, creating 'not-spots' where connectivity isn't available.



**Skills & confidence:** The [Lloyds Consumer Digital Index](#) estimates that 15% of people in Scotland do not have Foundation Digital Skills e.g. turning on a device, using basic controls, connecting to the internet. Informal, frequent support is the best way to help build digital skills, often through a 'Digital Champion'. A lack of digital skills can feel stigmatising and embarrassing for many people. How do services support people to build their digital skills? Do services have a digitally confident workforce to enable this?



**Inclusive design:** How do services incorporate the first 4 pillars to consciously design digital inclusion in their work? This could be thinking about how they handle data privacy concerns, understanding what types of devices people might need to access their digital support, optimising websites and apps for accessibility and minimal data usage, supporting a digitally confident workforce, embedding Digital Champions in frontline services or working in partnership in communities to provide digital skills support. Involving people in the design of services and support (digital and non-digital) is critical to ensuring people can access, interact with and experience services which meet their needs.



## What we heard about the pillars for digital inclusion through the lens of mental health

In small groups, stakeholders were invited to share their perspectives on, and/or experiences related to the pillars for digital inclusion.

### Motivation



The key motivators for people living with a mental health condition to become digitally included vary and depend on the individual and their circumstances. A significant motivator to accessing digital was through entertainment around areas of personal interest, including music, television and YouTube videos. Other motivations included living well, the convenience of not having to travel -especially for those living in rural and remote areas and those working - and connecting with friends, family and people experiencing similar challenges.

During the conversation, stakeholders also highlighted a number of reasons people living with mental health conditions may not be motivated to access digital, these included:

- Not feeling safe to go online due to fear of their personal information being shared and being victim to online scams.
- The impact of their mental health condition makes it difficult to use digital. It was also highlighted that people who are experiencing mental health impacts may avoid online spaces due to the adverse effects it can have on their mental health.
- Not knowing how to use digital and the fear of getting it wrong.
- The perception that digital is not as good as in-person services.

When helping someone understand that being online can make their life easier, it is important to build a trusted relationship with that person over time. This trust is vital for the person take the leap into using digital and knowing they are not alone in their journey online. Other ways to demonstrate that digital can help make life better is by making going online fun through exploring hobbies such as sport, watching movies, listening to music. Also sharing other users' experiences with digital and how it benefited them can motivate an individual to give digital a try.

### Device



The types of devices that are most appropriate to support access to mental health supports will depend on individual needs. Stakeholders highlighted that there should be a range of devices for the person to choose from so they can select the device that they feel most comfortable using.

Offering a pilot scheme to allow the person to try a range of different options e.g., laptop, tablet, iOS or android, would be helpful and opportunities to review and

feedback on how people are finding the device will ensure the device is meeting their needs.

Ongoing support is important to ensure digital inclusion needs are maintained through both access to a device and data connectivity.

## Connectivity



Conversations on connectivity focused on cost responsibility for people to access Wi-Fi, as well confidentiality considerations with spaces that offer free Wi-Fi. It was also noted that access to Wi-Fi/data is an individual choice therefore a degree of flexibility is required to tailor to needs and preferences.

For people who do not have access to fast broadband options, there is a need to consider alternative options for connectivity in areas which do not have good data coverage. It was suggested that providing unlimited data would be the best option as it would remove the anxiety for people of what to do when their data runs out.

Stakeholders shared examples of how digital inclusion is being enabled. One example provided referred to supporting digital inclusion for older people which included access to free Wi-Fi in a safe, supportive environment with other people who were looking to develop and learn about digital. This created an opportunity to make social connections, whilst also offering a 'Warm Hub' to those who were developing their digital skills. With the cost-of-living pressures, offering 'warm hubs' or foodbanks alongside opportunities to become digitally connected is an important consideration.

Another example highlighted work to provide connectivity in police custody settings and for staff training in prisons. Connectivity considerations should be included for police and prison settings.

An example of working with young people leaving home and looking to secure employment was also shared, highlighting that many young people do not have access to a mobile phone. Data is a key barrier for digital inclusion, as many people are excluded due to digital poverty. Having unlimited data or digital poverty packages/funding should be considered to ensure digital connectivity for people at all times. Stakeholders emphasised the need to work in a responsible way and ensure that ongoing support and access to devices is maintained beyond the duration of projects and programmes.

A number of actions were suggested to help people stay connected at the end of projects and maintain social networks. Raising awareness of the availability of social tariffs would be helpful to individuals and organisations, however there is often stigma around applying for social tariffs and access speeds may not be high enough for certain services. Signposting to services and areas that offer free Wi-Fi, and access to devices should be well communicated.

## Skills and Confidence

Building a person's confidence in any forum is a major part that gives people the capacity to deal with challenges. Relationship building and engagement are key elements to boost peoples' confidence as well as making personal support available to guide them through digital and connect them with peers that have similar experiences. Having supports available such as digital champions can help individuals to access health support services and care or signpost to local communities and resources.

It is important to increase people's awareness of online options that could enable them to feel confident to find the support they need and access shared learning experiences. Examples shared included long-term service users accessing online support networks or talking to their families online and this had an enormous positive impact on their life.

Learning and support needs to be a continuous process tailored to how long people need support. It is important to identify training needs for people and make sure that the essential skills are covered. When working with people with multiple complex issues this can be a long journey unless digital support is identified that is not effective.

Specific considerations were suggested to support digital skills for people living with a mental health condition such as ensuring people have access to a safe space in order to have conversations. Considerations for group or 1-2-1 support was also highlighted which can impact people's journey with digital. Factors such as the approach to delivery and evaluation were also discussed including the investment and resources available to deliver targeted services, and to assess peoples' needs throughout a programme of support. Peoples needs change, for example people living with dementia, and therefore digital support needs to be able to adapt to changing needs.

Access to tools is equally important as this would help people to increase their skills/confidence to do their day-to-day jobs. Making connectivity affordable for people is also important and developing opportunities such as central hubs or community places can also provide connection opportunities that can enable people to access support.

Developing a coordinated effort between the Scottish Government and partner organisations around engagement campaigns and having a flexible funding process for community projects in order to make equipment and services easily available to support people was also suggested as ways to enable digital inclusion.

## Inclusive Design



It is important that inclusive design is understood holistically, not only in relation to any digital part of mental health services, but that services as a whole support inclusion and support socially inclusive practice.

Inclusive practice is also about enabling choice and ensuring people have a suite of options for how they interact with mental health services. It is important that this is considered particularly in relation to the growing use of self-referral through digital as this can make the digital divide even bigger with people at the extreme end of exclusion. Services, resources and information available needs to be trauma-informed.

Relationships and reassurance are important to ensure people feel safe going online. For example, for people living with psychosis or paranoia there may be impacts on their online experience related to ideas of surveillance or more generally when people are searching for information online it is important that there are evidence based, trusted and reliable sources of information. If people are feeling vulnerable or anxious, having support to navigate the online world is even more important, e.g., a digital navigator role. Alongside this, it is important that people know their concerns are valid regarding online safety and this is why it is vital that people are involved in co-design.

Designing with and working with people with lived experience can show where assumptions are made in relation to digital and what people find helpful or unhelpful – *‘how can you assume to have the knowledge if you haven’t got experience.’* It is important to learn from people’s experiences and understand the challenges from their perspective. This has to be an iterative process to work with people across the design journey.

The design of online information was also discussed in relation to accessibility such as colours, shapes, images and to support online spaces to be safe environments. Online information needs to be easy to navigate and give clear options.

When collecting feedback on digital products and services examples were shared on ways to do this through action bubbles/feedback buttons on pages that enable people to provide feedback quickly and anonymously or through reaction buttons with boxes for optional comments.

Near Me was referred to as an example of a national platform that people are gaining confidence in using that has all the information governance agree and is one of the few systems that people working across different sectors can use. There is a need to have more options that work in this way given that there are so many ‘pockets’ of good examples of digital services but they are not transferrable across different contexts.

## Acknowledgements

We are very grateful to all the stakeholders who took part in the event for sharing their expertise, experience and insights on digital inclusion in mental health. Thank you to Shannon McNee and Aaron Slater for presenting and sharing their work. We also thank all colleagues who supported the event to help us facilitate and capture the conversations.

For more information about the programme or to be kept up to date on programme activities please contact:

[nss.digitalinclusion@nhs.scot](mailto:nss.digitalinclusion@nhs.scot)

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