

Development and User Engagements of *i-ACT For Life* Mobile Application for Prevention and Management of Psychological Distress

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Introduction

The COVID-19 has challenged the ways of modern healthcare delivery.

- Remote methods of delivering evidence-based mental healthcare are more important now.¹
- Digital mental health interventions are able to reduce cost, transcend physical limits, and increase flexibility and autonomy of users.²
- Rates of mental disorders are expected to increase post-pandemic³.
- Novel methods to introduce preventative and management of mental health issues are needed to reduce the strain on Malaysia's already overburdened mental healthcare system.⁴

Method

i-ACT For Life mobile application (*i-ACT for Life_{MA}*) was developed based on the same program previously conducted on cloud-based instant messaging (*i-ACT for Life_{IM}*).

Originally developed based on WHO *Doing What Matters in Times of Stress: An Illustrated Guide*.

i-ACT for Life_{IM} has been tested its effectiveness through RCT.⁵

Comprises five weekly modules corresponding to an ACT core process (refer Table 1).

Supplemented with *Qur'ānic* verses, *Hadīth* (sayings, practices, and silent approval of Prophet Muhammad), religious/spiritual activities and poems.

Designed in micro-contents format (infographics, 7 interactive exercises/quizzes, 11 audio exercises, and 7 psychoeducation videos).

The major improvements from the *i-ACT for Life_{IM}* are translation into the Malay language and in mobile application.

Measure used is Depression, Anxiety, and Stress Scale-21 items (DASS-21), before and after the completion of program.

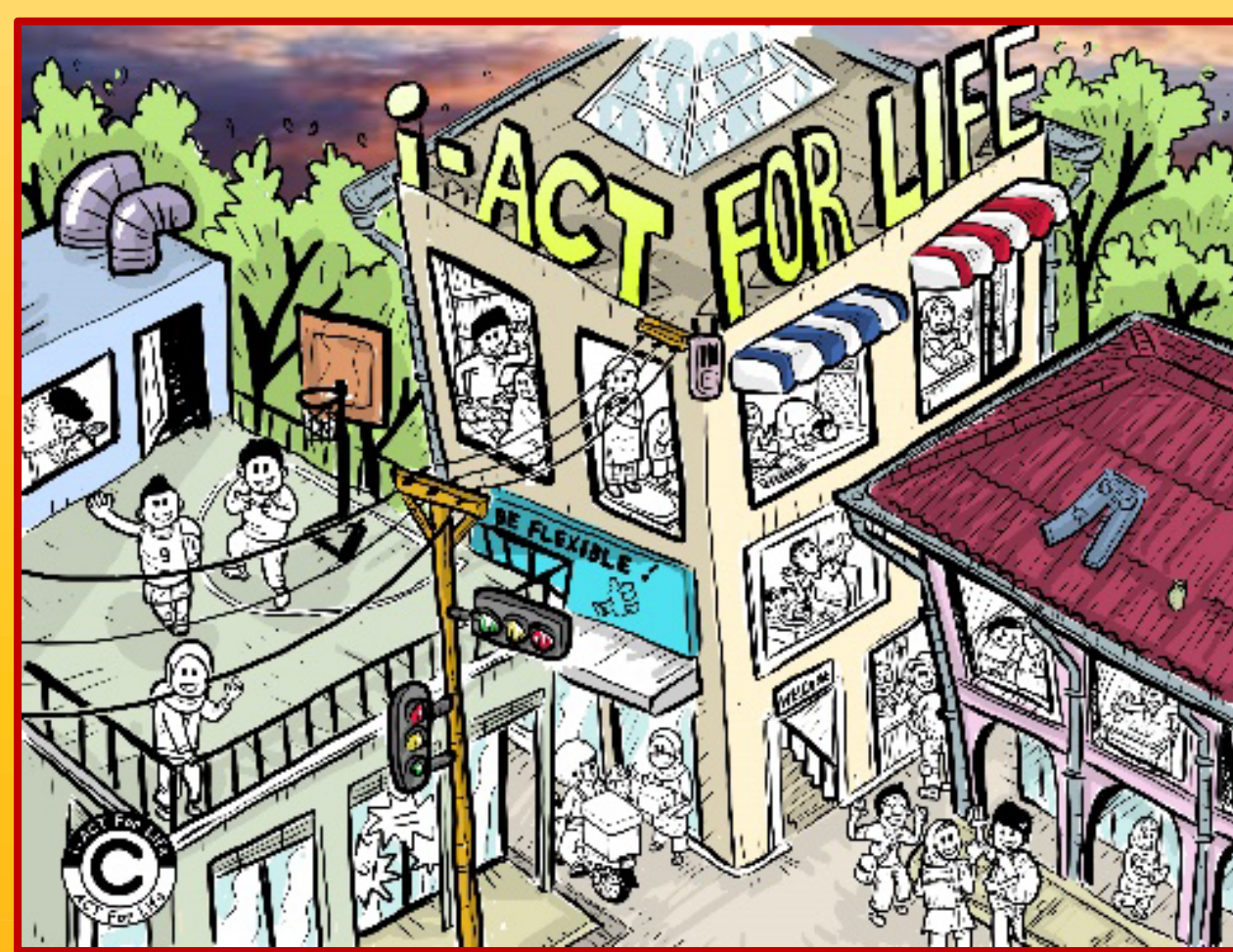
Objective

The development and user engagements of *i-ACT for Life*.



i-ACT for Life

A mobile application of Acceptance and Commitment Therapy (ACT)-integrated with Islamic spiritual strategies for prevention and management of psychological distress for Malaysian.

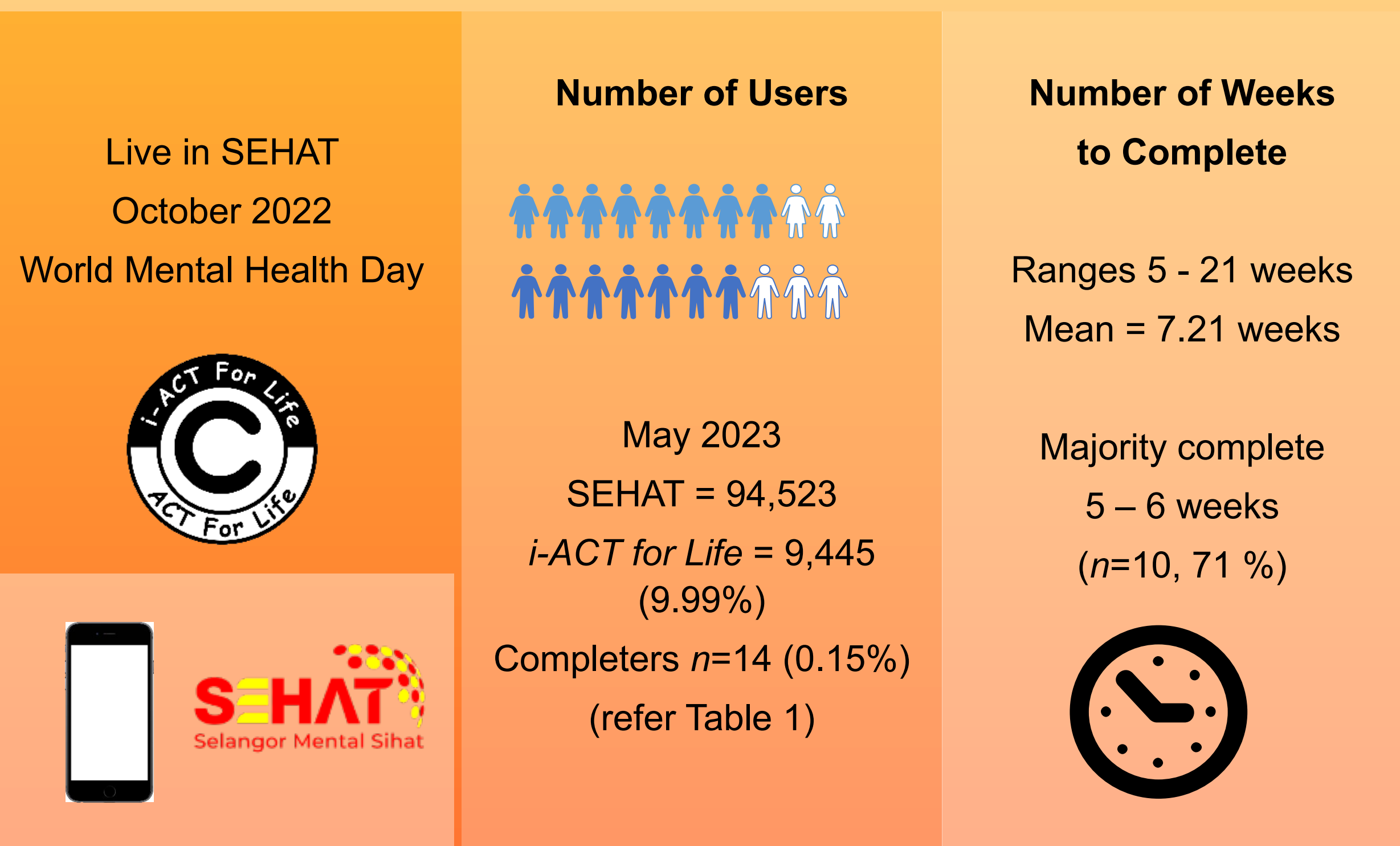


i-ACT for Life is integrated as part of Selangor Mental Sihat (SEHAT).

A comprehensive mental health application involving mental health awareness, literacy, screening, early intervention, and subsidized psychiatric intervention sponsored and managed by one of the state governments in Malaysia.



Results



User Engagements

Table 1. Total number of user engagements

Week (Approximate)	Module	User Engagements	Total (%)
Week 1	Opening	3856	40.83
	Grounding	1968	20.84
Week 2	Unhooking	80	0.85
Week 3	Acting on Values	48	0.51
Week 4	Being Kind	33	0.35
	Making Room	14	0.15
Week 5	Closing	14	0.15

Conclusions

i-ACT for Life mobile application is accessible for the users.

Further study on :

- Suitability of users for the program
- Sustainability of user engagements
- Minimal number of completers
- Effectiveness of *i-ACT for Life*

Improvements on :

- Increase promotion of the program
- Continuous reminders to the users
- Therapist-assisted initiative
- Using *i-ACT for Life* as an adjunct intervention

Pre and Post DASS-21 Scores

Four out of 14 users (i.e., completers) completed both the pre- and post-DASS-21

Table 2. DASS-21 scores for the completers of *i-ACT for Life*

DASS-21	Pre-score (N=14)	Pre-score (n=4)	Post-score (n=4)
Depression	14.29 (moderate)	13 (moderate)	12 (mild)
Anxiety	9.71 (mild)	9 (mild)	10.5 (moderate)
Stress	13.71 (mild)	12 (mild)	12.75 (mild)



Experiencing *i-ACT for Life* by downloading SELANGKAH Apps



Download our Abstract



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