



Innovation > Telecommunications > Service uses smartphone data to improve mental health treatment

SERVICE USES SMARTPHONE DATA TO IMPROVE MENTAL HEALTH TREATMENT

 TELECOMMUNICATIONS

Ginger.io has launched a grant-funded project to treat patients in Utah, the most depressed state in America .

There are four billion phones on the planet constantly communicating their users' social, physical and mental status. Developments in behavioural analytics now mean there are valuable insights to be found not only in users' direct communication, but also in their actions.

Our moods directly impact our smartphone usage, however subtly, and when someone is suffering from depression their behavioural patterns can change dramatically from day to day. **Ginger.io** is a health care start-up which uses the big data collected from users' smartphones — alongside advanced behavioral analytics — to improve mental health care.

In addition, Ginger.io enables doctors to stay connected with mental health patients in between appointments, interacting with them via their smartphones through simple questions and surveys. Care providers also monitor patients' phone usage to detect warning signs in their behaviour. Depending on the patient, this may materialise as reduced phone usage, heightened browsing or even less physical movement. The platform analyzes the data, filling in many of the gaps left by the absence of communication in between face-to-face appointments. It flags up worrying signs, so that care-givers can intervene when their patients are most in need. You can watch the video below to find out more:

<https://player.vimeo.com/video/101350667>

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The service has already seen great success across the US. It lowers costs for providers, enables better patient support and improves long-term clinical outcomes. But many underprivileged patients do not have access to the platform, which is available via partner institutions. In light of this, Ginger.io has recently launched a grant-funded project called **Utah SmartCare** to treat low-income patients from the Utah — which has the highest rate of depression and suicide in the US. The initial stage, which is funded by Cambia Healthcare Foundation, will target 500 patients with co-morbid conditions, 80 percent of whom live at or below the poverty line.

Are there other partnerships which could bring this service to communities in need?

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