

# **Evaluating the Impact of Wearable Health Devices on Mental Health Outcomes: A Collaborative Study between Psychologists, Social Workers, and Nursing Staff**

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## **ABSTRACT**

The integration of wearable health devices into mental health care presents a transformative opportunity for enhancing patient outcomes. This collaborative study examines how psychologists, social workers, and nursing staff can leverage data from these devices to monitor and improve mental health. By analyzing real-time physiological data, such as heart rate variability and sleep patterns, mental health

professionals can gain deeper insights into their clients' emotional and psychological states. These tools not only facilitate ongoing assessments but also empower patients to engage in self-management, fostering a sense of ownership over their well-being. Importantly, the collaboration among different disciplines ensures a holistic approach, addressing both clinical and social factors that influence mental health. Moreover, this study investigates the challenges and ethical considerations surrounding the use of wearable technology in a mental health context. Issues such as data privacy, accessibility, and the potential for over-reliance on technology are critical in shaping effective interventions. As professionals work together, they aim to develop guidelines that maximize the benefits of wearable devices while minimizing risks. By sharing findings across disciplines, this research seeks to establish best practices for implementing wearable health technology in mental health services, paving the way for improved patient engagement and outcomes.

**KEYWORDS:** Wearable health devices, Mental health outcomes, Collaborative study, Psychologists, Social workers, Nursing staff, Real-time data, Self-management, Holistic approach, Ethical considerations, Data privacy, Patient engagement, Best practices.

## 1. Introduction

In recent years, the integration of technology into various aspects of personal health management has experienced exponential growth, particularly in the form of wearable health devices. This burgeoning industry has been propelled by advancements in consumer electronics, heightened health awareness, and a rising interest in preventative healthcare. Wearable health devices, such as fitness trackers, smartwatches, and other biometric monitors, have transcended their original purpose of merely tracking physical activity and now offer an array of features that can provide insights into an individual's health and well-being. As mental health increasingly garners attention as a critical component of overall health, understanding the influence of these devices on mental health outcomes has emerged as a formidable area of inquiry. This study aims to investigate the impact of wearable health devices on mental health outcomes through a collaborative effort that encompasses psychologists, social workers, and nursing staff, leading to a comprehensive evaluation of their effectiveness, accessibility, and therapeutic potential [1].

Prior to delving into the evaluative aspects of wearable health devices, it is essential to outline the contemporary landscape of mental health. The World Health Organization (WHO) estimates that one in four individuals will be affected by mental health disorders at some point in their lives, highlighting an urgent need for effective intervention strategies. Traditional therapeutic pathways often include pharmacological treatment and face-to-face counseling; however, these avenues may not always be accessible or effective for all populations. As such, the potential for innovative solutions is paramount. Wearable health devices, equipped with sensors that

monitor various health metrics—including heart rate variability, sleep patterns, and physical activity—offer insights that could serve as adjuncts to traditional mental health interventions [2].

The evolution of smartphone applications that sync with wearable devices further enhances the ability to track mental health metrics such as mood, stress levels, and emotional well-being. Recent studies suggest that these devices can provide immediate feedback to users, helping them identify patterns in their mental health and adjust their behaviors accordingly. For instance, research has pointed toward a potential correlation between physical activity tracked via wearable devices and reduced symptoms of anxiety and depression. However, the relationships between technology use, mental health, and patient outcomes remain complex and multifaceted, necessitating a thorough investigation [3].

The collaborative study presented herein involves a multidisciplinary team comprising psychologists, social workers, and nursing staff. Each of these professional groups brings unique expertise and perspectives that are critically important when evaluating the mental health implications of wearable devices. Psychologists contribute a deep understanding of mental health disorders, therapeutic strategies, and evidence-based methodologies to assess the effectiveness of interventions. Social workers enhance the study by providing insights into the social determinants of health, community engagement, and resource accessibility, ensuring that findings are applicable to diverse populations. Nursing staff, who often serve as frontline healthcare providers, offer practical knowledge of patient interactions, health education, and the integration of technology into everyday medical practices [4].

This collaborative framework not only enhances the validity of the research design but also ensures a holistic approach to data collection and analysis. Engagement with multiple disciplines allows for a more thorough examination of how wearable health devices affect mental health outcomes, as it encompasses individual behavior, socioenvironmental factors, and clinical implications [4].

## **2. Research Objectives**

The primary objective of this research is to evaluate the impact of wearable health devices on various mental health outcomes, including anxiety, depression, stress, and overall psychological well-being. Specific aims include:

1. **Assessment of Mental Health Metrics:** To evaluate how specific features of wearable devices—such as monitoring daily activity levels, sleep quality, and heart rate—correlate with subjective measures of mental health.

2. **User Engagement and Behavior Changes:** To investigate the degree of user engagement with wearable devices and assess how this engagement translates into behavior changes that positively influence mental health.
3. **Access and Equity:** To evaluate the accessibility of wearable health devices across diverse populations and explore how socio-economic factors influence their adoption and efficacy.
4. **Professional Perspectives:** To gather insights from psychologists, social workers, and nursing staff about the strengths and limitations of integrating wearable devices into mental health treatment plans.

### The Role of Collaborative Healthcare Teams in Mental Health:

In the contemporary landscape of healthcare, the significance of mental health is increasingly being recognized. As awareness of mental health disorders grows, so does the understanding that these conditions cannot be treated in isolation. Instead, they require a multifaceted approach that often involves a spectrum of healthcare professionals. Collaborative healthcare teams, which are comprised of various specialized experts, play a pivotal role in delivering comprehensive and effective mental health care [5].

Collaborative healthcare teams are groups of professionals from diverse fields who come together to provide holistic care to patients. These teams may include psychiatrists, psychologists, social workers, psychiatric nurses, occupational therapists, substance abuse counselors, and other healthcare workers. The collaborative model is predicated on the idea that no single professional possesses all the requisite skills to address the complex needs of individuals experiencing mental health issues. By combining their expertise, these teams can create a thorough treatment plan that encompasses the psychological, emotional, social, and medical facets of patient care [6].

The composition of collaborative healthcare teams can vary depending on the specific needs of the patient population and the setting in which they operate. Typically, the team includes:

1. **Psychiatrists:** Medical doctors specializing in the diagnosis, treatment, and prevention of mental illnesses. They often focus on pharmacological interventions and can provide crucial insights into the biological aspects of mental health disorders [7].
2. **Psychologists:** Professionals specialized in psychological assessments and therapies. They employ therapeutic interventions such as cognitive-behavioral therapy (CBT) and psychotherapy to help patients manage their conditions [8].
3. **Social Workers:** Trained in addressing social and environmental factors affecting mental health, they can play a critical role in connecting patients with community resources, advocating for their needs, and providing case management services.

4. Nurses: Specifically, psychiatric or mental health nurses who are educated in managing care for individuals with mental health challenges. They often monitor medication compliance, provide support, and conduct therapeutic interventions.

5. Occupational Therapists: This professional group focuses on helping patients regain the skills needed for daily living and meaningful work. They contribute to therapy by creating personalized activity plans that foster recovery and independence.

6. Substance Abuse Counselors: Given the prevalence of co-occurring disorders, these professionals guide patients who are struggling with addiction, ensuring a comprehensive treatment plan that addresses both mental health and substance use [8].

The integration of these diverse professionals ensures that a patient's mental health care is well-rounded, addressing various aspects of their life and well-being [8].

### Benefits of Collaborative Healthcare Teams in Mental Health

The collaborative healthcare model brings a plethora of benefits that significantly improve patient outcomes:

1. Comprehensive Care: Patients receive a holistic approach to mental health care. By addressing psychological, physical, and social factors simultaneously, teams can provide a more thorough diagnosis and treatment plan [9].

2. Improved Communication: Team members must communicate effectively to ensure that everyone is on the same page regarding a patient's status and treatment. This flow of information reduces the risk of misunderstandings and gaps in care, which can be particularly detrimental in mental health treatment [9].

3. Enhanced Patient Engagement: Collaborative teams encourage active participation from patients in their care plans. When patients see a unified team advocating for their needs, they may be more invested and willing to participate in their treatment journey [10].

4. Reduced Stigma: By integrating various health professionals, teams can demystify mental health care. The presence of a multidisciplinary approach can help reduce stigma associated with seeking mental health treatment, making it more approachable and acceptable for patients [11].

5. Access to a Broader Range of Expertise: Patients benefit from the specialized knowledge of different professionals. For instance, a psychiatrist may prescribe medication while a psychologist provides therapy, allowing for a more detailed and individualized approach to care [11].

6. Crisis Intervention: Collaborative teams can react swiftly during mental health crises. The quick access to multiple specialties means that patients can receive

immediate support from a variety of experts, which is often crucial in preventing escalations [12].

### Challenges in Collaborative Healthcare Teams

Despite their numerous advantages, collaborative healthcare teams in the realm of mental health are not without challenges:

1. **Communication Barriers:** Miscommunication can arise from differences in professional jargon and perspectives. Ensuring effective communication requires ongoing training and awareness of each team member's role [12].
2. **Role Confusion:** In a collaborative environment, there can be overlaps in responsibilities, which may lead to role confusion. Clear delineation of each team member's duties is essential for effective functioning [13].
3. **Interpersonal Dynamics:** Team functioning largely depends on interpersonal relationships among team members. Disagreements or lack of cohesion can impede the team's ability to provide effective care [13].
4. **Resource Limitations:** Many healthcare systems face constraints regarding funding and resources, which may limit the availability of collaborative teams. In under-resourced settings, teams may struggle to offer comprehensive care.
5. **Legal and Ethical Considerations:** Mental health care often involves sensitive information and ethical considerations. Teams must navigate complex legal frameworks that govern mental health treatment while protecting patient rights and confidentiality [13].

### 3. Methodology for Evaluating Device Impact on Mental Health:

In an increasingly digital world, the proliferation of devices such as smartphones, tablets, and computers has become ubiquitous, prompting significant inquiry into their effects on mental health. The relationship between device usage and mental health is ever-complex, influenced by various mediating factors such as frequency of use, type of content consumed, and individual psychological predispositions. A robust methodology for evaluating the impact of these devices on mental health is essential to garner accurate insights and inform stakeholders, including healthcare professionals, policymakers, and educators [14].

The first step in developing a methodology is defining the scope of the impact evaluation. This includes identifying specific mental health outcomes of interest, such as anxiety, depression, attention span, and social connectedness. The focus can vary based on population groups, such as adolescents, adults, and older adults, who may experience varying effects due to their differing levels of technology integration in daily life. Additionally, researchers must clarify the types of devices in question, such

as smartphones, wearables, gaming consoles, and laptops, as different devices may yield different implications for mental health [15].

Once the scope is established, researchers can formulate hypotheses or research questions. For instance, a hypothesis could state that "Increased daily screen time correlates with higher levels of anxiety and depression in adolescents." This hypothesis reflects the need for exploratory studies to confirm or refute a presumed relationship between device usage and mental health [16].

### Method Selection

A well-rounded evaluation methodology comprises quantitative, qualitative, and mixed-method approaches that can be employed independently or in tandem.

#### 1. Quantitative Methods

Quantitative research provides the numerical data needed to identify patterns and correlations. Surveys and structured questionnaires can be administered to large samples to gather information on device usage, screen time, and mental health symptoms. Instruments such as the Generalized Anxiety Disorder 7-item scale (GAD-7) or the Patient Health Questionnaire-9 (PHQ-9) can be used to quantify mental health metrics [17].

Additionally, researchers may utilize longitudinal studies to track changes over time, assessing how variations in device use correlate with shifts in mental health outcomes. Statistical tests, such as regression analysis, can help ascertain the strength and significance of relationships, controlling for variables such as age, sex, socioeconomic status, and pre-existing mental health conditions [17].

#### 2. Qualitative Methods

Complementing quantitative findings, qualitative methods can reveal deeper insights regarding individuals' experiences and perceptions. Techniques such as in-depth interviews, focus group discussions, and ethnographic studies can help uncover how people engage with technology and the emotional and psychological responses it elicits. Themes identified in qualitative research can enrich the understanding of quantitative results, especially regarding the subjective experience of mental health and the social context of technology use [18].

#### 3. Mixed-Methods Approaches

Employing a mixed-methods approach combines the strengths of both quantitative and qualitative research, leading to a more nuanced understanding of device impact. For instance, qualitative interviews can be used to inform the development of quantitative survey tools, ensuring they capture relevant themes. In contrast, qualitative findings

can be framed around the statistical correlations noted in quantitative studies, providing a richer narrative of the effects of device use on mental health [18].

### Sampling Strategy

A carefully designed sampling strategy is critical for ensuring the representativeness and reliability of the data. Researchers can employ stratified random sampling to ensure diverse demographic representation based on age, gender, socioeconomic status, and geographical location. Additionally, it is essential to consider accessibility; online surveys can reach broader audiences, while focus groups may require a more localized approach to gather nuanced insights from specific communities [19].

Data collection tools must ensure validity and reliability. For quantitative studies, validated instruments measuring mental health parameters should be utilized, ensuring respondents understand the questions clearly. This is particularly relevant when collecting self-reported data, as biases introduced by subjective interpretation can affect the accuracy of the results. For qualitative data, semi-structured interviews should be employed to allow for flexibility while still guiding discussions toward specific topics relevant to the research questions [20].

Additionally, integrating technology into the data collection process, such as using apps to track daily device usage and mood changes, can yield real-time data that reflects participants' true experiences [20].

### Data Analysis

Data analysis methodology will depend on the nature of the collected data. For quantitative data, statistical software such as SPSS or R can be used to conduct analyses like t-tests, ANOVA, and regression analyses. Conversely, qualitative data can be analyzed using thematic analysis, grounded theory, or content analysis to identify patterns and themes across participants' responses. The combination of both analyses can provide a holistic view of how devices contribute to mental health outcomes [21].

Any evaluation methodology must rigorously adhere to ethical standards, particularly when involving vulnerable populations such as children or individuals with existing mental health issues. Gaining informed consent, assuring participant anonymity, and being transparent about the purpose of the research are crucial components of ethical research. Research protocols must also be reviewed and approved by Institutional Review Boards (IRBs) to ensure compliance with ethical guidelines [21].

### Key Mental Health Metrics Monitored by Wearable Devices:

In an era characterized by rapid technological advancement, the intersection of mental health and wearable technology has grown increasingly prominent. Wearable devices, traditionally associated with tracking physical fitness, have transcended their original



purpose, evolving into sophisticated tools capable of monitoring a wide range of mental health metrics. These devices offer unprecedented insights into mental wellness, enabling users to take a proactive approach toward understanding and managing their mental health [22].

### 1. Understanding Mental Health Metrics

Mental health metrics refer to various indicators that reflect an individual's mental state and emotional well-being. With advancements in technology, especially wearables, these metrics can now be quantified and tracked more systematically. Some of the key mental health metrics monitored by wearable devices include:

- a. **Stress Levels:** Many wearable devices can assess and quantify stress levels by monitoring physiological responses. These responses often include heart rate variability (HRV), a measure of the time variation between heartbeats. Research indicates that lower HRV is associated with higher levels of stress and anxiety [23].
- b. **Sleep Quality:** Quality of sleep is intricately linked to mental health. Wearables equipped with sleep tracking technology monitor various parameters such as sleep duration, sleep cycles, and disturbances. By analyzing these metrics, users can gain insights into how their sleep patterns correlate with their mental well-being. Improved sleep quality often leads to reduced anxiety and depression [24].
- c. **Physical Activity Levels:** Regular physical activity is known to alleviate symptoms of anxiety and depression. Wearable devices track steps taken, physical effort exerted, and overall activity levels, providing feedback that encourages users to engage in more physical activity which can directly impact their mental health [25].
- d. **Mood and Emotion Tracking:** Some advanced wearables and accompanying apps allow users to log their mood or emotional state throughout the day. By correlating mood entries with other metrics (like physical activity, sleep patterns, and heart rate), users can identify triggers or patterns that significantly impact their mental wellness [26].
- e. **Overall Well-being Indices:** Some devices provide a comprehensive analysis of mental well-being through a composite score derived from various metrics, including stress levels, sleep quality, and activity levels. These indices can help users assess their mental health at a glance [26].

## 2. Technologies Underpinning Wearable Mental Health Tracking

The effectiveness of wearables in monitoring mental health metrics is largely due to sophisticated technologies and algorithms integrated into these devices. These include:

- a. **Sensor Technology:** Sensors in wearable devices measure various physiological signals. For example, photoplethysmographic (PPG) sensors can measure heart rate and HRV, while accelerometers can track movement and sleep patterns [27].

b. **Machine Learning and Data Analytics:** The data collected by wearables are processed through machine learning algorithms that can identify patterns and make predictions about an individual's mental health state. This analytical capability is essential for providing actionable insights and recommendations [27].

c. **Mobile Applications:** Many wearables sync with mobile applications that analyze data and offer users personalized feedback. These applications often include user interface elements that allow for mood tracking, journaling, and setting mental health goals.

### 3. Impacts on Mental Well-Being

The integration of wearable technology into mental health management has the potential to significantly enhance individuals' understanding and management of their mental wellness through several avenues:

a. **Empowerment and Engagement:** Wearables put the power of mental health management into the hands of users. By providing real-time data regarding their mental health, users may feel more empowered to make informed decisions about their lifestyle choices, coping strategies, and seeking professional help when necessary [28].

b. **Prevention and Early Intervention:** By continuously monitoring mental health metrics, wearables can help identify signs of declining mental health early on. This early detection can facilitate timely interventions, potentially preventing more severe mental health crises.

c. **Tailored Mental Health Strategies:** The comprehensive data provided by wearables enable healthcare professionals to offer personalized recommendations that align with an individual's specific lifestyle, preferences, and mental health needs [28].

### 4. Ethical Considerations and Challenges

Despite the numerous benefits associated with wearable devices in mental health monitoring, there are ethical and practical challenges that must be addressed:

a. **Privacy Concerns:** The sensitive nature of mental health data necessitates stringent measures to protect user privacy. Wearables collect large amounts of personal data, raising concerns regarding data ownership, security, and the potential for misuse by third parties or employers [29].

b. **Reliability and Accuracy:** While wearables provide valuable insights, the reliability of the metrics must be considered. Variability in sensor accuracy and user adherence to tracking may lead to misleading conclusions about an individual's mental health status [30].

c. **Digital Divide:** Access to wearable technology may not be equally available to all demographic groups, leading to disparities in mental health monitoring and management. Ensuring equitable access to such technology is critical for broadening the benefits of these innovations [31].

## Patient Engagement and Self-Management through Technology:

In the contemporary healthcare landscape, the integration of technology has dramatically transformed how patients engage with their health and manage their medical conditions. The essence of patient engagement and self-management lies in empowering individuals to take an active role in their healthcare journeys [32].

Patient engagement refers to the involvement of patients in their own healthcare. It encompasses a range of activities, including understanding health information, making informed decisions about treatment options, and adhering to prescribed health regimens. Engaged patients are typically more informed, motivated, and proactive about their health outcomes. This engagement can lead to improved health outcomes, reduced hospitalization rates, and enhanced patient satisfaction [32].

The significance of patient engagement becomes particularly evident in chronic disease management. Conditions such as diabetes, hypertension, and asthma require individuals to monitor their health consistently, adhere to medication schedules, and adjust lifestyles in response to changes in their conditions. Effective selfmanagement, therefore, relies on a well-informed and engaged patient who actively collaborates with healthcare providers [33].

## The Role of Technology in Enhancing Patient Engagement

Technology has revolutionized patient engagement by providing tools and platforms that facilitate easy communication and access to information. Several technological innovations have emerged in recent years, including mobile health applications, telemedicine, wearable devices, and patient portals. Each of these innovations plays a crucial role in enhancing patient engagement and self-management [34].

1. **Mobile Health Applications:** Mobile apps provide patients with the means to track health metrics, manage medications, and access health information. For instance, diabetes management apps enable patients to log their blood glucose levels, track their diet, and receive personalized feedback. These apps often include features that allow users to set reminders for medication and appointments, fostering adherence to treatment protocols. Research has demonstrated that mobile health applications can significantly improve self-management behaviors by providing realtime feedback and support [35].

2. **Telemedicine:** The rise of telemedicine has enabled healthcare providers to maintain regular communication with patients, regardless of distance. Virtual consultations can facilitate follow-ups, monitor chronic conditions, and provide necessary education—all from the comfort of the patient's home. This accessibility not only helps in maintaining continuity of care but also empowers patients to seek medical advice more readily, thereby enhancing their engagement [36].

3. **Wearable Devices:** Wearables like smartwatches or fitness trackers allow users to monitor real-time health data such as heart rate, physical activity, sleep patterns, and more. By providing immediate feedback on lifestyle choices, these devices encourage patients to make informed decisions that align with their health goals. For example, individuals with cardiac conditions can monitor their heart rates during exercise, prompting them to adjust their activity levels accordingly [37].

4. **Patient Portals:** Healthcare facilities are increasingly adopting patient portals, which enable individuals to access their medical records, schedule appointments, communicate with providers, and receive test results online. This access fosters transparency and encourages patients to take an active interest in their health, leading to improved adherence to treatment plans [38].

### Challenges and Barriers to Technology Adoption

Despite the clear benefits of technology in promoting patient engagement and selfmanagement, several barriers persist. One major challenge is the digital divide; not all patients have equal access to digital tools or possess the requisite skills to use them effectively. Older adults, in particular, may struggle with unfamiliar technology, which can exacerbate health disparities [38].

Additionally, concerns about data privacy and security can hinder patient willingness to engage with technology. Patients may hesitate to share their health information via digital platforms due to fears of potential data breaches or misuse. Addressing these concerns is crucial in building trust and encouraging widespread adoption of health technologies [38].

Moreover, healthcare providers may also face challenges in integrating these tools into their practices. Some clinicians may be reluctant to adopt new technologies due to time constraints, lack of training, or uncertainty regarding reimbursement for remote services. It is vital for healthcare organizations to provide adequate training and support to facilitate the effective implementation of technological solutions [39].

Looking ahead, the potential for technology to transform patient engagement and self-management continues to evolve. Innovations such as artificial intelligence, machine learning, and data analytics are paving the way for personalized medicine and proactive care approaches. For instance, predictive analytics can help identify patients at risk of developing certain conditions, allowing for timely interventions that promote health and prevent complications [39].

Moreover, the increasing emphasis on social determinants of health is prompting the integration of non-clinical factors into patient engagement strategies. Technologies that address economic, environmental, and social variables will likely play a crucial role in empowering individuals to manage their health more effectively [39].

It is evident that the future of patient engagement will require a collaborative approach that involves healthcare providers, technology developers, and patients themselves. By

fostering partnerships among these stakeholders, healthcare systems can create more robust and effective solutions that cater to the diverse needs of patients [40].

### Ethical Considerations in Using Wearable Health Devices:

The advent of wearable health devices has revolutionized the way individuals monitor and manage their health. These devices, which include fitness trackers, smartwatches, and health monitoring gadgets, offer insights into various bodily metrics, such as heart rate, sleep patterns, physical activity levels, and, in some cases, even blood glucose levels. While the benefits of these technologies are significant—promoting personal health management, enhancing adherence to wellness routines, and fostering a culture of accountability—they also raise a complex array of ethical considerations [40].

One of the most pressing ethical issues associated with wearable health devices is privacy. These devices collect vast amounts of personal health data, often transmitted to various platforms for analysis and storage. The collection and potential misuse of this sensitive information pose significant risks. Users may unknowingly consent to share their data with third parties, including advertisers and insurance companies. This raises ethical questions about how the data is used, who has access to it, and whether individuals are adequately informed about the scope of data sharing. The profile created through the aggregation of data from these devices can reveal intimate details about an individual's health status, lifestyle choices, and even psychological state. Privacy violations could lead to discrimination, stigmatization, or exploitation [41].

The issue of data ownership is closely tied to privacy concerns. When individuals wear health devices, questions arise regarding who owns the data generated by the device: the user, the manufacturer, or the application provider? This dilemma is further complicated by the fact that many users may not engage critically with the terms of service agreements they accept. This disparity in understanding can lead to unintended consequences, such as relinquishing rights to data that users might consider personal. Ethically, it is crucial for manufacturers to be transparent about data ownership, ensuring that users are aware they may not have full control over the data generated by their devices, and to establish robust frameworks through which individuals can exercise their rights to delete or retrieve their data [42].

Informed consent is a foundational principle in medical ethics, emphasizing that individuals should be fully aware of what they are agreeing to. With the digitalization of health data through wearable devices, ensuring informed consent becomes more complex. Many users may not understand the implications of using such devices, including potential risks associated with data breaches or the implications of sharing data with third parties. Manufacturers and developers must take proactive steps to adequately inform users about what data is collected, how it is used, and the potential risks involved. Failing to do so undermines the ethical principle of respect for autonomy and can lead to mistrust in health technology [43].

The proliferation of wearable health devices also raises concerns about equity and access. While these devices have the potential to empower individuals and enhance health outcomes, they are not universally available or accessible. Socioeconomic disparities can significantly influence an individual's ability to access wearable technology. Many high-quality devices come with a substantial price tag, placing them out of reach for economically disadvantaged populations. This disparity can exacerbate existing health inequities, as individuals without access to wearable technology may miss out on crucial health insights that could facilitate better health management. Ethically, it is essential to address these inequities, ensuring that technological advancements benefit a broad spectrum of society rather than a privileged few [43].

The influence of wearable health devices extends beyond physical health monitoring; they also affect user behavior and mental health. On one hand, they can motivate individuals to lead healthier lifestyles and promote mindfulness regarding physical activity and well-being. On the other hand, the constant tracking of health metrics can lead to unhealthy obsessions, such as fixating on achieving specific step counts or managing caloric intake to an extreme degree. This can create anxiety or foster negative body image perceptions, particularly in vulnerable populations. The ethical implications of promoting a technology that can lead to detrimental mental health outcomes necessitate a measured approach to design and marketing by developers [44].

#### Challenges and Limitations of Wearable Technology in Mental Health Care:

In recent years, the advent of wearable technology has revolutionized various fields, stretching from fitness tracking to chronic disease management. The integration of such devices into mental health care has generated considerable excitement and optimism, offering the possibility of real-time monitoring of patients' emotional and psychological states. However, despite the promising prospects, the application of wearable technology in mental health care is fraught with challenges and limitations [45].

One of the most significant challenges in the integration of wearable technology in mental health care is technological accessibility and usability. Not all patients have the necessary technological literacy or access to devices, which can create disparities in treatment options. Many patients may struggle to navigate complex interfaces or understand how to use the technology effectively. This challenge is exacerbated in populations with lower socioeconomic status, older adults who may be less techsavvy, or those suffering from severe mental health conditions that can hinder cognitive functionality [46].

Moreover, the accuracy and reliability of wearable technology pose significant issues. While many devices can measure heart rate variability, sleep patterns, and other physiological indicators, these measurements are not always specific to mental health conditions. For instance, an increase in heart rate could be attributed to anxiety, but it

could also be due to physical exercise or stimulation. As such, health care providers may find it difficult to interpret the data collected from wearables, potentially leading to misdiagnosis or overtreatment [46].

Another critical limitation of wearable technology in mental health care is the question of data privacy and security. Wearable devices collect vast amounts of sensitive personal data, often including real-time location, biometric information, and behavioral patterns. The aggregation of such information raises significant privacy concerns, as unauthorized access or data breaches could expose patients to severe risks, including stigmatization or discrimination [47].

In addition to privacy concerns, there are also ethical considerations surrounding the ownership and usage of collected data. Patients may be unaware of how their data will be used, who has access to it, and for what purposes, generating a sense of distrust in technologies purportedly designed for their benefit. It is crucial to establish transparent policies that inform users about data management practices while ensuring compliance with legal regulations such as the Health Insurance Portability and Accountability Act (HIPAA) [48].

Wearable technology can also have unintended psychological implications for users. Although the intention is often to empower patients by providing them with insights into their mental health, this constant self-monitoring can lead to heightened anxiety or obsessive behaviors. Individuals may become fixated on the data provided by their devices, leading to a phenomenon sometimes referred to as 'quantified selfanxiety.' As they continually strive to achieve unrealistic metrics of mental wellbeing as dictated by their devices, users may inadvertently craft a negative experience rather than an improvement [49]. Furthermore, the emotional burden of receiving continuous data feedback can provoke feelings of inadequacy or failure when individuals do not meet the expectations set by their devices. The potential to overanalyze their mental health—monitoring mood fluctuations, sleep patterns, and physical activity—can create a feedback loop where patients feel worse rather than better. Instead of augmenting therapeutic efforts, wearables can sometimes exacerbate symptoms or lead to disengagement from care [50].

The integration of wearable technology into established mental health care frameworks also presents considerable challenges. The lack of clinical validation of wearable devices often leaves healthcare providers hesitant to recommend them. Rigorous studies are essential to identify which devices are effective and when they can be successfully incorporated into treatment. Without FDA approval or validation through clinical trials, there is a risk of patients using unproven devices that may not deliver on promised outcomes [51].

Additionally, integrating wearable technology into existing health care systems can prove to be cumbersome. Traditional mental health practices are often reluctant to

embrace new methodologies without clear evidence of their efficacy and reliability. With time, effort, and cost associated with implementing new technologies, many practitioners opt to prioritize established practices over the uncertainties that come with integrating wearables [52].

#### **4. Implications for Future Practice and Research Collaboration:**

The convergence of psychology, social work, and nursing into interdisciplinary collaboration holds promising potential for improving patient outcomes, particularly in the realms of mental and behavioral health. The complexities associated with patient care necessitate a holistic approach that integrates diverse perspectives and expertise. Understanding the implications of these collaborative endeavors informs future practice and research, paving the way for enhanced service delivery in multidisciplinary environments [53].

At the core of interdisciplinary collaboration among psychologists, social workers, and nursing staff is the recognition that mental wellness is a critical aspect of overall health. Psychological health impacts physical health outcomes, and vice versa. The need for a comprehensive approach to healthcare is underscored by contemporary research suggesting that psychological factors significantly influence chronic disease management, adherence to treatment, and overall health satisfaction [54].

Psychologists bring expertise in mental health assessment and therapeutic interventions, focusing on cognitive, emotional, and behavioral facets that can complicate patient recovery. Social workers add another layer by addressing the social determinants of health, including relationships, community resources, and socioeconomic factors that affect an individual's well-being. Nursing staff, acting as the frontline providers, are pivotal in executing care plans, monitoring progress, and providing patient education. The intersection of these disciplines can lead to improved health outcomes through integrative strategies that consider psychological, emotional, and social dimensions [55].

##### **Implications for Future Practice**

1. **Enhanced Care Coordination:** One of the primary implications of collaboration is the potential for enhanced care coordination. Through open communication and shared responsibilities, healthcare teams can develop and implement comprehensive treatment plans that address the multifaceted needs of patients. Regular interdisciplinary meetings can facilitate the exchange of insights and strategies, allowing for adjustments to be made in real-time based on patient feedback and progress. The emergence of shared electronic health records further supports this coordination by ensuring all team members have access to vital patient information [56].



2. **Comprehensive Training and Professional Development:** Future practice should incorporate interdisciplinary training and professional development programs to familiarize psychologists, social workers, and nursing staff with each other's roles, responsibilities, and methodologies. These programs can enhance mutual respect and understanding among the disciplines, fostering a culture of collaboration. Additionally, incorporating courses on integrated care approaches in academic curricula for each discipline can prepare future professionals for teamwork in clinical settings [57].
3. **Patient-Centered Approaches:** Focusing on patient-centeredness through collaboration can significantly enrich care delivery. When psychologists, social workers, and nursing staff work together, patients receive more comprehensive assessments that factor in psychological, emotional, and social variables. This approach can lead to more effective interventions tailored to individual patient needs. For instance, mental health interventions can be seamlessly integrated into nursing care plans, ensuring that psychological support is provided alongside physical health management [58].
4. **Addressing Stigma and Increasing Accessibility:** Collaborative practices can help address the stigma surrounding mental health support by normalizing conversations about psychological care within physical health contexts. By presenting a unified front, healthcare providers can encourage patients to seek help without fear of judgment. This collaborative visibility can reduce barriers to accessing mental health services, particularly for populations that may avoid seeking psychological help due to societal stigma [59].

#### Implications for Future Research

1. **Interdisciplinary Research Initiatives:** Future research should prioritize interdisciplinary studies that assess the efficacy of integrated approaches to care. By examining outcomes from collaborative models, researchers can identify best practices and establish evidence-based guidelines that enhance service delivery across disciplines. Collaborative research also facilitates the exploration of innovative intervention strategies tailored to diverse patient populations [60].
2. **Patient Outcomes and Satisfaction Studies:** Investigating the impact of collaborative care on patient outcomes is vital for validating interdisciplinary approaches. Future studies should focus on quantifying improvements in mental health, treatment adherence, healthcare utilization, and patient satisfaction resulting from integrated care models. By demonstrating clear benefits, such research can advocate for continued investment in collaborative practices [61].
3. **Longitudinal Studies on Health Trajectories:** To better understand the longterm effects of collaborative care on health trajectories, longitudinal studies should track patient progress over time. Such research can illuminate how sustained interdisciplinary intervention influences chronic disease management, mental

health stability, and overall quality of life. This understanding is crucial for informing policy and shaping future healthcare delivery structures [62].

4. Exploration of Technological Integration: Technology plays a pivotal role in modern healthcare, and research should explore how technological solutions can facilitate collaboration among different professions. For example, telehealth options can expand access to care, allowing psychologists, social workers, and nursing staff to collaborate virtually, thus reaching patients in diverse settings. Additionally, incorporating digital tools for shared assessments and interventions could streamline processes and improve communication [63].

## 5. Conclusion:

This study highlights the significant potential of wearable health devices to enhance mental health outcomes through a collaborative approach involving psychologists, social workers, and nursing staff. By integrating physiological data collection with therapeutic practices, mental health professionals can gain invaluable insights into patients' emotional states, leading to more personalized and timely interventions. The collaboration across disciplines fosters a comprehensive understanding of each patient's unique needs, enabling healthcare providers to address both psychological and social factors effectively.

However, it is essential to navigate the challenges associated with data privacy, accessibility, and the potential for technology dependence. Future research should focus on developing best practices for implementing wearable technology in mental health care, ensuring that these tools are used ethically and responsibly. By continuing to refine these collaborative frameworks, the healthcare sector can leverage wearable health devices to promote greater patient engagement, enhance self-management strategies, and ultimately improve mental health outcomes. The findings of this study serve as a foundation for ongoing exploration into the intersection of technology and mental health, paving the way for innovative approaches to patient care.

## References

- Radin JM, Wineinger NE, Topol EJ, Steinhubl SR. Harnessing wearable device data to improve state-level real-time surveillance of influenza-like illness in the USA: a population-based study. *Lancet Digit Health*. 2020;2(2):e85–93. doi: 10.1016/S2589-7500(19)30222-5. [DOI] [PMC free article] [PubMed] [Google Scholar]
- Hickey AM, Freedson PS. Utility of consumer physical activity trackers as an intervention tool in cardiovascular disease prevention and treatment. *Prog Cardiovasc Dis*. 2016;58(6):613–9. doi: 10.1016/j.pcad.2016.02.006. [DOI] [PubMed] [Google Scholar]
- Zapata-Lamana R, Lalanza JF, Losilla JM, Parrado E, Capdevila L. mHealth technology for ecological momentary assessment in physical activity research: a systematic review. *PeerJ*. 2020;8:e8848. doi: 10.7717/peerj.8848. [DOI] [PMC free article] [PubMed] [Google Scholar]

- Zhang Y, Weaver RG, Armstrong B, Burkart S, Zhang S, Beets MW. Validity of wrist-worn photoplethysmography devices to measure heart rate: a systematic review and metaanalysis. *J Sports Sci.* 2020;38(17):2021–34. doi: 10.1080/02640414.2020.1767348. [DOI] [PubMed] [Google Scholar]
- Worsham C, Jena AB. Why doctors shouldn't dismiss the Apple watch's new ECG app. *Harvard Business Review.* 2018. [2020-10-02].
- Fuller D, Colwell E, Low J, Orychock K, Tobin MA, Simango B, Buote R, Van Heerden D, Luan H, Cullen K, Slade L, Taylor NG. Reliability and validity of commercially available wearable devices for measuring steps, energy expenditure, and heart rate: systematic review. *JMIR Mhealth Uhealth.* 2020;8(9):e18694. doi: 10.2196/18694. [DOI] [PMC free article] [PubMed] [Google Scholar]
- Canalys. Singapore: 2014. [2020-11-12]. Wearable band shipments rocket by 684%.
- Dunn J, Runge R, Snyder M. Wearables and the medical revolution. *Per Med.* 2018;15(5):429–48. doi: 10.2217/pme-2018-0044. [DOI] [PubMed] [Google Scholar]
- Jia Y, Wang W, Wen D, Liang L, Gao L, Lei J. Perceived user preferences and usability evaluation of mainstream wearable devices for health monitoring. *PeerJ.* 2018;6:e5350. doi: 10.7717/peerj.5350. [DOI] [PMC free article] [PubMed] [Google Scholar]
- Shiffman S, Stone AA, Hufford MR. Ecological momentary assessment. *Annu Rev Clin Psychol.* 2008;4:1–32. doi: 10.1146/annurev.clinpsy.3.022806.091415. [DOI] [PubMed] [Google Scholar]
- Carpenter A, Frontera A. Smart-watches: a potential challenger to the implantable loop recorder. *Europace.* 2016;18(6):791–3. doi: 10.1093/europace/euv427. [DOI] [PubMed] [Google Scholar]
- Barajas-Carmona JG, Francisco-Aldana L, Morales-Narváez E. Wearable nanoplasmonic patch detecting Sun/UV exposure. *Anal Chem.* 2017;89(24):13589–95. doi: 10.1021/acs.analchem.7b04066. [DOI] [PubMed] [Google Scholar]
- Ball, J., Anstee, S., Couper, K., Maben, J., Blake, H., Anderson, J. E., Kelly, D., Harris, R., Conolly, A., & the full ICON Study Team. (2022). The impact of COVID-19 on nurses (ICON) survey: Nurses' accounts of what would have helped to improve their working lives. *Journal of Advanced Nursing*, 79, 343–357. 10.1111/jan.15442 [DOI] [PMC free article] [PubMed] [Google Scholar]
- Hays, R., & Daker-White, G. (2015). The care.Data consensus? A qualitative analysis of opinions expressed on twitter. *BMC Public Health*, 15, 838. 10.1186/s12889-015-2180-9 [DOI] [PMC free article] [PubMed] [Google Scholar]
- Cosoli, G., Spinsante, S., & Scalise, L. (2020). Wrist-worn and chest-strap wearable devices: Systematic review on accuracy and metrological characteristics. *Measurement*, 159, 107789. 10.1016/j.measurement.2020.107789 [DOI] [Google Scholar]
- Buabeng-Andoh, C. (2018). Predicting participants' intention to adopt mobile learning. *Journal of Research in Innovative Teaching & Learning*, 11(2), 178–191. 10.1108/JRIT03-2017-0004 [DOI] [Google Scholar]
- Bak, M. A. R., Hoyle, L. P., Mahoney, C., & Kyle, R. G. (2020). Strategies to promote nurses' health: A qualitative study with participant nurses. *Nurse Education in Practice*, 48, 1–11. 10.1016/j.nepr.2020.102860 [DOI] [PubMed] [Google Scholar]
- Gray, D. E. (2017). *Doing research in the real world* (Fourth ed.). Sage. [Google Scholar]
- Chan, A., Chan, D., Lee, H., Ng, C. C., & Yeo, A. H. L. (2022). Reporting adherence, validity and physical activity measures of wearable activity trackers in medical research: A

- systematic review. *International Journal of Medical Informatics*, 160, 104696. 10.1016/j.ijmedinf.2022.104696 [DOI] [PubMed] [Google Scholar]
- Carter, P., Laurie, G. T., & Dixon-Woods, M. (2015). The social licence for research: Why care.Data ran into trouble. *Journal of Medical Ethics*, 41, 404–409. [DOI] [PMC free article] [PubMed] [Google Scholar]
- Edward, K. L., Garvey, L., & Rahman, M. A. (2020). Wearable activity trackers and health awareness: Nursing implications. *International Journal of Nursing Sciences*, 7(2), 179–183. [DOI] [PMC free article] [PubMed] [Google Scholar]
- Evans, J. M. M., Eades, C. E., & Cameron, D. M. (2019). Health and health behaviours among a cohort of first year nursing participants in Scotland: A self-report survey. *Nurse Education in Practice*, 36, 71–75. 10.1016/j.nepr.2019.02.019 [DOI] [PubMed] [Google Scholar]
- Harrison, R., Flood, D., & Duce, D. (2013). Usability of mobile applications: Literature review and rationale for a new usability model. *Journal of Interaction Science*, 1(1), 1–16. [Google Scholar]
- Fishbein, M., & Ajzen, I. (1974). Attitudes towards objects as predictors of single and multiple behavioural criteria. *Psychological Review*, 81(1), 59–74. [Google Scholar]
- Chuttur, M. Y. (2009). Overview of the technology acceptance model: Origins, developments and future directions. *Working Papers on Information Systems*, 9(37), 9–37. [Google Scholar]
- Blake, H., Malik, S., Mo, P. K., & Pisano, C. (2011). ‘Do as I say, but not as I do’: Are next generation nurses role models for health? *Perspectives in Public Health*, 131, 231–239. 10.1177/1757913911402547 [DOI] [PubMed] [Google Scholar]
- Gray, B. J., Kyle, R. G., & Davies, A. R. (2022). Health and wellbeing of the nursing and midwifery workforce in Wales during the COVID-19 pandemic. *Public Health Wales*. Available from [DOI] [PMC free article] [PubMed] [Google Scholar]
- Couper, K., Murrells, T., Sanders, J., Anderson, J. E., Blake, H., Kelly, D., Kent, B., Maben, J., Rafferty, A. M., Taylor, R. M., & Harris, R. (2022). The impact of COVID-19 on the wellbeing of the UK nursing and midwifery workforce during the first pandemic wave: A longitudinal survey study. *International Journal of Nursing Studies*, 127, 104155. [DOI] [PMC free article] [PubMed] [Google Scholar]
- Blake, H., & Harrison, C. (2013). Health behaviours and attitudes towards being role models. *British Journal of Nursing*, 22, 2–94. 10.12968/bjon.2013.22.2.86 [DOI] [PubMed] [Google Scholar]
- Kim, J., & Park, H. A. (2012). Development of a health information technology acceptance model using consumers' health behavior intention. *Journal of Medical Internet Research*, 14(5), e133. [DOI] [PMC free article] [PubMed] [Google Scholar]
- Davis, F. D. (1989). Perceived usefulness, perceived ease of use, and user acceptance of information technology. *MIS Quarterly*, 13, 319–340. [Google Scholar]
- Health Education England. (2019). NHS Staff and Learners' Mental Wellbeing Commission. Available from [Google Scholar]
- Ben-Zeev Dror, Scherer Emily A, Wang Rui, Xie Haiyi, and Campbell Andrew T. 2015. Next-generation psychiatric assessment: Using smartphone sensors to monitor behavior and mental health. *Psychiatric rehabilitation journal* 38, 3 (2015), 218.
- Archer Janine, Bower Peter, Gilbody Simon, Lovell Karina, Richards David, Gask Linda, Dickens Chris, and Coventry Peter. 2012. Collaborative care for depression and anxiety problems. *Cochrane Database of Systematic Reviews* 10 (2012).

- Aung Min Hane, Matthews Mark, and Choudhury Tanzeem. 2017. Sensing behavioral symptoms of mental health and delivering personalized interventions using mobile technologies. *Depression and anxiety* 34, 7 (2017), 603–609.
- Berry Natalie, Bucci Sandra, Lobban Fiona, et al. 2017. Use of the internet and mobile phones for self-management of severe mental health problems: qualitative study of staff views. *JMIR mental health* 4, 4 (2017), e8311.
- Burgess Eleanor R, Ringland Kathryn E, Nicholas Jennifer, Knapp Ashley A, Eschler Jordan, Mohr David C, and Reddy Madhu C. 2019. “I think people are powerful” The Sociality of Individuals Managing Depression. *Proceedings of the ACM on Human-Computer Interaction* 3, CSCW; (2019), 1–29.
- Canzian Luca and Musolesi Mirco. 2015. Trajectories of depression: unobtrusive monitoring of depressive states by means of smartphone mobility traces analysis. In *Proceedings of the 2015 ACM international joint conference on pervasive and ubiquitous computing*. 1293–1304.
- Choe Eun Kyoung, Abdullah Saeed, Rabbi Mashfiqui, Thomaz Edison, Epstein Daniel A, Cordeiro Felicia, Kay Matthew, Abowd Gregory D, Choudhury Tanzeem, Fogarty James, et al. 2017. Semi-automated tracking: a balanced approach for self-monitoring applications. *IEEE Pervasive Computing* 16, 1 (2017), 74–84.
- Ancker Jessica S, Witteman Holly O, Hafeez Baria, Provencher Thierry, Van de Graaf Mary, and Wei Esther. 2015. “You get reminded you’re a sick person”: personal data tracking and patients with multiple chronic conditions. *Journal of medical Internet research* 17, 8 (2015), e4209.
- Burns Michelle Nicole, Begale Mark, Duffecy Jennifer, Gergle Darren, Karr Chris J, Giangrande Emily, and Mohr David C. 2011. Harnessing context sensing to develop a mobile intervention for depression. *Journal of medical Internet research* 13, 3 (2011), e1838.
- Bruns Eric J and Walker Janet S. 2010. Defining practice: Flexibility, legitimacy, and the nature of systems of care and wraparound. *Evaluation and Program Planning* 33, 1 (2010), 45–48.
- Caldeira Clara, Chen Yu, Chan Lesley, Pham Vivian, Chen Yunan, and Zheng Kai. 2017. Mobile apps for mood tracking: an analysis of features and user reviews. In *AMIA Annual Symposium Proceedings*, Vol. 2017. American Medical Informatics Association, 495.
- Agapie Elena, Colusso Lucas, Munson Sean A, and Hsieh Gary. 2016. Plansourcing: Generating behavior change plans with friends and crowds. In *Proceedings of the 19th ACM Conference on Computer-Supported Cooperative Work & Social Computing*. 119–133.
- Andersson Gerhard, Bergström Jan, Buhrman Monica, Carlbring Per, Holländare Fredrik, Kaldö Viktor, Nilsson-Ihrfelt Elisabeth, Paxling Björn, Ström Lars, and Waara Johan. 2008. Development of a new approach to guided self-help via the Internet: The Swedish experience. *Journal of Technology in Human Services* 26, 2-4 (2008), 161–181.
- Burgess Eleanor R, Reddy Madhu C, and Mohr David C. 2022. I Just Can’t Help But Smile Sometimes”: Collaborative Self-Management of Depression. *Proceedings of the ACM on Human-Computer Interaction* 6, CSCW1; (2022), 1–32.
- Aung Min Hane, Matthews Mark, and Choudhury Tanzeem. 2017. Sensing behavioral symptoms of mental health and delivering personalized interventions using mobile technologies. *Depression and anxiety* 34, 7 (2017), 603–609.
- Agapie Elena, Areán Patricia A, Hsieh Gary, and Munson Seana. 2022. A Longitudinal Goal Setting Model for Addressing Complex Personal Problems in Mental Health. (2022).

- Archer Janine, Bower Peter, Gilbody Simon, Lovell Karina, Richards David, Gask Linda, Dickens Chris, and Coventry Peter. 2012. Collaborative care for depression and anxiety problems. *Cochrane Database of Systematic Reviews* 10 (2012).
- Ancker Jessica S, Witteman Holly O, Hafeez Baria, Provencher Thierry, Van de Graaf Mary, and Wei Esther. 2015. "You get reminded you're a sick person": personal data tracking and patients with multiple chronic conditions. *Journal of medical Internet research* 17, 8 (2015), e4209.
- Berry Natalie, Bucci Sandra, Lobban Fiona, et al. 2017. Use of the internet and mobile phones for self-management of severe mental health problems: qualitative study of staff views. *JMIR mental health* 4, 4 (2017), e8311.
- Aung Min Hane, Matthews Mark, and Choudhury Tanzeem. 2017. Sensing behavioral symptoms of mental health and delivering personalized interventions using mobile technologies. *Depression and anxiety* 34, 7 (2017), 603–609.
- Mahler DA. Peak inspiratory flow rate as a criterion for dry powder inhaler use in chronic obstructive pulmonary disease. *Ann Am Thorac Soc.* 2017;14:1103–1107. doi: 10.1513/AnnalsATS.201702-156PS.
- Marcano Belisario JS, Huckvale K, Greenfield G, et al. Smartphone and tablet selfmanagement apps for asthma. *Cochrane Database Syst Rev.* 2013:Cd010013. 2013/11/28. 10.1002/14651858.CD010013.pub2.
- Liu G-Z, Guo Y-W, Zhu Q-S, Huang BY, Wang L. Estimation of respiration rate from threedimensional acceleration data based on body sensor network. *Telemed J E Health.* 2011;17:705–711. doi: 10.1089/tmj.2011.0022.
- Merchant RK, Inamdar R, Quade RC. Effectiveness of population health management using the propeller health asthma platform: a randomized clinical trial. *J Allergy Clin Immunol Pract.* 2016;4(4):455–463. doi: 10.1016/j.jaip.2015.11.022.
- Wu AC, Carpenter JF, Himes BE. Mobile health applications for asthma. *J Allergy Clin Immunol Pract.* 2015;3:446–448.e416. doi: 10.1016/j.jaip.2014.12.011.
- The INCATM (Inhaler Compliance AssessmentTM): a comparison with established measures of adherence. *Psychol Health.* 2017;32:1266–1287. doi: 10.1080/08870446.2017.1290243.
- Boner AL, Piacentini GL, Peroni DG, et al. Children with nocturnal asthma wheeze intermittently during sleep. *J Asthma.* 2010;47(3):290–294. doi: 10.3109/02770900903497188.
- Chan AHY, Stewart AW, Harrison J, et al. The effect of an electronic monitoring device with audiovisual reminder function on adherence to inhaled corticosteroids and school attendance in children with asthma: a randomised controlled trial. *Lancet Respir Med.* 2015;3:210–219. doi: 10.1016/S2213-2600(15)00008-9.
- Foster JM, Smith L, Usherwood T, Sawyer SM, Rand CS, Reddel HK. The reliability and patient acceptability of the SmartTrack device: a new electronic monitor and reminder device for metered dose inhalers. *J Asthma.* 2012;49:657–662. doi: 10.3109/02770903.2012.684253.
- Safioti G, Granovsky L, Li T, et al. A predictive model for clinical asthma exacerbations using albuterol eMDPI (ProAir Digihaler): a 12-week, open-label study. *A31 ASTHMA: CLINICAL STUDIES I.* Am Thoracic Soc. 2019:A7307–7.
- Burgess SW, Sly PD, Devadason SG. Providing feedback on adherence increases use of preventive medication by asthmatic children. *J Asthma.* 2010;47:198–201. doi: 10.3109/02770900903483840.