Abstract

Capitalism has taken the world by a storm where things previously considered invaluable can now be priced and sold. Capitalism is an economic system where the nation's goods and trade are under control of private owners with the sole aim of making profits whereas comodification is a process occurring under a capitalist system where monetary value gain through commercialization. What becomes commodified depends occasionally on the trend prevalent in society. In the current scenario, mental health is one of the trends that is becoming increasingly commodified. Shirts, bags, accessories with 'quirky' quotes related to serious mental health disorders and issues are marketed rampantly, trivializing mental health issues into a mere product. Social media platforms and influencers hoping onto this trend to make money have inadvertently romanticized mental health issues. More and more websites are popping up that provide half researched information as facts leading to cases of self-diagnosis and self-treatment. The digitalization of the world has given way to digital mental healthcare apps that provide a range of mental health related services on demand. The drawback of such apps, however, is that they lack any proper credentials with unlicensed individuals playing as therapists. Lax ethical guidelines surrounding said apps have further made it difficult to protect those at risk. Additionally, they also undermine therapy and its importance. All these areas have become money earning ground for big companies and private organization where individuals at their most vulnerable state are taken and marketed into this latent profit chain. Hence, this chapter covers the most

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recent trend observed in the field of mental healthcare in context of the modern world of digitalization and capitalism and hopes to outline the ethical issues surrounding Digital mental healthcare apps.

Keywords: Mental Health; Capitalism; Comodification; Digital Mental healthcare apps; Digitalization

I. INTRODUCTION

The American Psychological Association defines Mental Health as "Mental health is a state of mind characterized by emotional well-being, good behavioral adjustment, relative freedom from anxiety and disabling symptoms, and a capacity to establish constructive relationships and cope with the ordinary demands and stresses of life." (APA, n.d.)

Throughout history, mental health and related issues have undergone various phases, starting with the early eras where mental health issues were due to supernatural phenomena (witchcraft, demons, devil, possessions etc.). Mental problems were stigmatized and due to the fear of these people, they were either locked away or treated inhumanely. Over time, awareness regarding mental health grew as the field of psychology and a deeper understanding developed. Starting in the 2000s, various mental health acts were put into place across the globe to reduce stigma, provide help, support, and establish equal opportunity for all.

In current scenario, the perception towards Mental Health has undergone drastic changes, especially after the Covid-19 pandemic, mainly due to increasing knowledge and findings from various scientific studies and the rise of digital platforms and open communication. While increasing awareness is a desirable outcome, rise in support has brought forth new problems that need to be addressed. Often enough a negative outcome of destigmatization is the trivialization of the problem. With current societal state and flourish of digital platforms, mental health issues have become more of a trend than serious subject matter with fatal consequences.

This chapter focuses on how destignatization of mental health has led to uncovering of new issues in the modern world of capitalism and digitization. The issues discussed involve companies capitalizing on vulnerabilities in the name of awareness, the use of digital platforms as venting grounds, that help individuals self-diagnose the condition, or as therapeutic replacements, increasing use of mental healthcare apps (often called as "Self-care apps" or "Mental health apps") and how it all contributes and feeds into the capitalist market.

II. CAPITALISM AND COMMODIFICATION

1. What is Capitalism?: "Capitalism, as a mode of production, is an economic system of manufacture and exchange which is geared toward the production and sale of commodities within a market for profit, where the manufacture of commodities consists of the use of the formally free labor of workers in exchange for a wage to create commodities in which the manufacturer extracts surplus value from the labor of the workers in terms of the difference between the wages paid to the worker and the value of the commodity produced by him/her to generate that profit"(Jenks et al,1998)

Following the above definition, the following features are to be highlighted about capitalism –

• Capitalism involves redistribution of power on the basis of ownership of "capital" where individuals (called as capitalists) own private capitals

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- These 'capitalist' employ labour in exchange of wages
- The labour does not own the product or the process used in production. It all belongs to the "capitalists"
- The production of goods and services in a capitalist economic system depends on the demands and supply of a general market (market economy) rather than central planning (command economy) [Box 1.1]
- The decision making in economy related issues is mostly decentralised and competitive.

BOX 1.1 – WHAT IS MARKET ECONOMY AND COMMAND ECONOMY?

Market Economy: Defined as an economic system where economic decisions such as pricing of goods is guided by interactions between individual citizen's and businessmen. Supply and demand direct production of goods with no interference by any central authority. The concept can be traced back to Adam Smith. (Investopedia, 2022)

Command Economy: Defined as an economic system where economic decisions such as pricing of goods are guided by a central authority. Central government directs the permissible level of production. (Investopedia, 2019)

Capitalism involves reorganizing society into social classes based not on ownership of land, but ownership of capital (i.e., businesses). Capitalists were able to earn profits from the surplus labor of the working class, who earned only wages. Thus, the two social classes defined by capitalism are the capitalists and the laboring classes. (Investopedia, 2020)

2. What is Commodification?

Commodification is a process that occurs in a capitalist system where goods with no monetary value gain monetary value through commercialization.

For the chapter, the definition utilized by Levesque et al. is considered which states -

• "Commodification describes the process by which something without an economic value gains economic value that can replace other social values. The process changes relationships that were previously untainted by commerce into relationships that essentially become commercial in everyday use." (Levesque, 2015)

Capitalism and commodification go hand in hand. The more easily an object can be commodified, the more money it makes and the more it feeds into the capitalist system which is centered around the aim of making profit. Throughout the years, various items previously considered to have little to no monetary value have been commodified by private organizations. In today's world, everything and anything can be commodified and sold into the market for profit.

3. How is mental health capitalized in today's world?

The chapter discusses this process under two aspects-

- Mental health issues are becoming a trend in different settings leading to increased trivialization of otherwise concerning matters: focusing on Digital platforms (especially social media).
 - > Digital platforms as venting and diagnosing grounds
 - ➤ The Prevalence Inflation Hypothesis
 - ➤ Links to capitalism
- Digital mental healthcare apps and how they feed into the capitalistic culture
 - ➤ What is Digital Mental Healthcare?
 - > Ethical issues underlying Digital Mental Healthcare services
 - ➤ Links to capitalism

III. MENTAL HEALTH: THE NEW TREND OF 21ST CENTURY

A trend refers to anything that is popular at a given point of time. While it is used mostly for the fashion industry, it is not limited to that. It points to the shift in the direction or favorability towards certain topics or issues.

In current capitalistic culture, it is an intuitive understanding that anything that becomes a trend automatically gains the ability to generate revenue and that sooner or later, all trends become commodified. In today's world, mental health has become a trend with more and more people joining in to stay relevant and relatable. Talking about one's suffering is becoming one of the easiest ways to earn money and support. While this increases awareness, it simultaneously reduces sensitivity surrounding these issues. It also propagates the belief that suffering is essential for success. Mental health becoming a trend has unfortunately led to its commodification. Commodification of mental health refers to how it has been reduced to a product that can be sold and profited from.

1. Digital Platforms: Venting and Diagnosing Grounds

• Venting Grounds: The 21st century is an era marked by rapid evolution and development of technology. The world has been reduced to a digital platform where everyone with access is free to express their opinions or beliefs. With the advent of social media, sites such as YouTube, Instagram, Facebook and so on, have gained popularity. Started to connect people across the world, these platforms have now become venting grounds for private and personal problems. The open disclosure of very personal problems is dangerous, posing safety and security risks to the individual, it also poses a wider string of problems in terms of its impact.

The content prevalent on social media depends heavily on the current scenario of the world. In a flash of seconds, things go in and out of fashion. One could argue that mental health is currently in "fashion". Recent increase in awareness regarding

mental health has brought forth a huge group of people on social media openly talking about their issues. From a societal point of view, this has been considered a huge step in de-stigmatization of mental health, however it has also made it into a trend where talks about struggling with a mental health issue have become a way to appeal to the masses and gain more followers.

Campaigns encouraging individuals to label and talk openly about psychological issues contribute to increasing awareness but, they have also inadvertently led to the glamorization of mental health disorders. More and more influencers feel the need to talk about or express having a "mental disorder", essentially romanticizing them, to stay current or relevant in today's scenario.

While some research shows that using digital platforms as venting grounds prove to be a good coping mechanism (Sangeorzan et al., 2019), it can also lead to the spread of misinformation and create the image that having a mental disorder is essential to being human, especially in younger audiences. Statements such as 'everyone is a little OCD' or 'you ain't living if you ain't depressing' can create the false notion that severe forms of mental illnesses are common and normal to the living experience.

- Self-diagnosing: Another aspect of the mental health movement is the rise in incidents of self-diagnosis facilitated by the increasing number of websites and platforms that share information regarding the same. However, it mostly consists of poorly researched or highly generalized facts that end up portraying mild or normal forms of distress as extreme pathology. This leads people into believing they have certain disorders even when they are exhibiting relatively normal behavior. (Example OCD being reduced to 'wanting things to be neat and clean' instead of a crippling time-consuming disorder). It also undermines that mental disorders occur on a spectrum where the symptoms can vary in severity and instead diagnose people based on presence or absence of certain behaviors.
- 2. The Prevalence Inflation Hypothesis: Foulkes and Andrews (2023) outline the side-effects of increasing awareness in their 'The Prevalence Inflation Hypothesis'. It is a cyclical hypothesis which states that there is a bi-directional relationship between efforts to increase awareness regarding mental health and increased rates of mental health problems i.e., increase in awareness leads to increased rate and increased rate leads to increased awareness (Foulkes & Andrews, 2023). This relationship is mediated by two processes: Improved recognition and Over interpretation. Improved recognition describes how awareness efforts have provided some individuals with the ability to better identify and report previously under-reported mental health problems. Over interpretation describes how awareness efforts have led some individuals to overpathologize common psychological experiences (Foulkes & Andrews, 2023).

While improved recognition is beneficial leading to better recognition of previously ignored or unreported concerns, over interpretation adds onto the problem of overdiagnosis. Individuals pathologize normal psychological responses and end up altering their self-concepts and behaviors to match the symptoms of disorder they believe

they have. These believes lead to them showing and developing symptoms of disorder, creating a self-fulfilling prophecy.

To sum it up, The Prevalence Inflation Hypothesis states that increased awareness leads to improved recognition and over identification which then leads to increased diagnosis of mental health problems, leading to furthering of the awareness agenda and the cycle continues in a vicious pattern.

The prevalence inflation hypothesis explains very well how too much information can be a bad thing. The rampant availability of online sites, social media pages and YouTube videos that claim to diagnose individual's disorder through surface level symptoms (without a deeper understanding of the disorder or use of valid psychological tools) contribute to 'normal' individuals with 'normal' behaviors believing themselves to be disordered and taking steps (and medications in extreme cases) to deal with the self-diagnosed problems.

"These findings are relevant for understanding potential harmful consequences of awareness efforts because, almost by definition, awareness efforts educate people about potential symptoms and encourage them to notice and report them. If people are repeatedly told that mental health problems are common and that they might experience them – and this is especially true for young people who frequently receive mental health information in schools – then it makes sense that they might start to interpret any negative thoughts and feelings through this lens..." (Foulkes & Andrews, 2023).

3. Links to capitalism: how mental health becoming a trend connects to capitalism.

- Due to the current trend, any talk related to mental health receives a lot of attention. In social media platforms such as YouTube where views equate to revenue, the more views, the more money generated. So it is obvious that most youtubers or influencers hop onto the trend as a way to earn money. (Since it is given that such talks will generate revenue, and simultaneously provide them with sympathy and support of the viewers).
- Increased prescription of psychotropic medications even for mild cases and self-medication (due to self-diagnosis and overinterpretation) has led to substantial increase in the antidepressant market and the revenue generated from it. A report published by Global Market Insights in the month of July 2023 reported that the Psychotropic drugs market size which was valued at USD 20.2 billion in 2022 is anticipated to grow at a CAGR of over 6.4% from 2023 to 2032. (Global Market Insights, 2023)
- Another form of contribution happening because of mental health becoming a trend is the fashion and music industry capitalizing on these issues. T-shirts with quotes such as 'anxiety is my cardio' or 'this year I choose to be mentally unstable', trivialize mental health issues while simultaneously generating marvelous amounts of revenue. Songs with lyrics glorifying mental disorders have become increasingly trendy, generating huge loads of money causing more and more people to hop onto this train.

• Small additions are also made via social media posts, companies or groups providing "crash courses" in counseling or therapy. The customer is led to believe that after the course they will have the credentials and ability to provide therapy, which is wildly incorrect. But the fashionable ways in which these courses are marketed make them appear desirable and legitimate, attracting a hoard of consumers and making it into a source of easy money.

IV. DIGITAL MENTAL HEALTHCARE APPS AND PLATFORMS: Ethical issues and capitalism

One of the most important pieces of invention in the modern world is the smartphone. With the innovation of new apps, the smartphone is becoming an essential part in almost all the different aspects of our lives, including health. The term mHealth was given by Robert Istepanian. It is defined as the use of mobile technologies to deliver or support psychological or mental health interventions and includes mobile devices such as smartphones, tablets, Personal Digital Assistants, and wearable devices (Clough and Casey, 2015; Alyami et al., 2017).

Robert Istepanian's definition of mHealth – use of "emerging mobile communications and network technologies for healthcare" (Istepanian et al., 2007; Tucker, 2015) Definition used in 2010 mHealth Summit of the Foundation for the National Institutes of Health (FNIH) - "the delivery of healthcare services via mobile communication devices" (FNIH, 2010)

1. **Digital Mental Healthcare:** Digital mental healthcare includes a wide range of technologies across different platforms that provide diverse forms of mental health care services such as assessment, support, and treatment on demand. It can include apps, text chains, chatbots, blogging platforms etc. The current chapter focuses on the "Self-care apps" or "Mental health apps". The apps differ in the type of services they offer ranging from mindfulness to interventions based on CBT (Cognitive behavioral therapy).

The popularity of these apps skyrocketed during the pandemic due to lack of physical access to therapy plus simultaneous increase in panic and other stressors. Their appeal lies in the interactive design elements used. Other than this, these apps are also easily accessible, cheaper, and more flexible than physical mental health care. It is also an attractive option for people who cannot afford to go to therapy due to social reasons (such as fear of being judged, stereotyped, familial reasons or due to the general stigma surrounding therapy) (Marshall et al., 2020; Oliveira et al., 2021).

However, while they are useful for basic encouragement and small level interventions, the dependency on these apps in severe cases or viewing them as a viable replacement or substitute for proper therapy is a new problem that can have far reaching consequences.

Some of the problems associated with the increasing use of these digital mental healthcare apps and their portrayal as a substitute for therapy are –

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- They are not backed up by scientific data or support. There is very limited evidence that these mobile apps are beneficial to patients. In a study conducted by Donker et al. (2013), the researchers found more than 5000 abstracts that addressed mental healthcare apps. Out of all the abstracts, only 8 used scientific trials to assess the efficiency. However, the data is still inconclusive (Donker et al., 2013).
- They are neither subjective nor tailored to individual needs, rather, these apps usually analyze large sets of population data, looking for patterns and develop an action plan based on it.
- They lack the human touch that traditional therapy provides. Therapy is not just a process of providing advice or solution, the emotional aspect of therapy is just as important for effective treatment.
- Research by Parker et al. shows that mental health apps often undermine the importance of professional therapy (Parker et al, 2018). Moreover, claims of 'diagnosing' and 'curing' mental disorders are not always followed through.
- They raise a few major ethical issues that has been covered in the next section.
- **2.** Ethical issues in Digital Mental healthcare services: Digital mental healthcare apps are not bound by the same strict ethical guidelines that traditional therapy is. It is also equally difficult to monitor and regulate activities conducted by the myriad of apps that there are.

Most of these apps make use of Digital phenotyping (box 1.2) to collect user information with or without the consent of the user and there is no provision that governs this data collection and usage.

BOX 1.2 – Digital Phenotyping

Digital phenotyping is defined as the moment-by-moment quantification of individual-level human phenotype in situ using data from personal digital devices. It considers data from smartphones and other digital wearables. The data itself can be either in active (input from users) or passive (input through sensors) form. (Prakash et al., 2021) Basically, digital phenotyping focuses on how an individual interacts with their smartphones and other devices through monitoring various touch screen behavior (scrolling, clicking, tapping etc). This data is then analyzed and used to predict subsequent cognition and mood. The sum of these behaviors forms the individual's digital "biomarker". Various forms of digital biomarker are utilized in the process of digital phenotyping such as calls, messages, screen behavior, navigation etc. (Prakash et al., 2021). It has been hypothesized to be useful in assimilating information and determining intervention programs for a series of psychiatric problems such as addiction, schizophrenia, mood disorders and so on. The apps being discussed make use of this phenotyping to collect data from the user, knowingly or unknowingly.

The major ethical issues are outlined below –

• **Privacy and Confidentiality**: Huckvale et al., 2019 illustrated the mismatch between the privacy policy and behavior of such apps. They mention that most of these apps are not transparent about how they collect and use data. Review of mental health apps found that 81% of apps sent data to either Facebook or Google for use in data analysis or marketing and another 92% sent data to other third parties. (Huckvale et al., 2019).

Other researches came to similar conclusion regarding the lack of data protection including -

- ➤ Dehling et al. (2015) examined mental healthcare apps within Apple and Android platforms and found that 94.9% apps were vulnerable to manipulation of personal information (Dehling et al., 2015).
- ➤ Thurm and Kane (2010) found that 55% of the apps examined in the research collected data and sent some of the confidential information to third parties or other companies such as those in marketing or consumer (Thurm & Kane, 2010).
- Accountability: The developers and companies of such apps are rarely held accountable for potential harms that may be encountered due to ineffective or poor apps. Users are often asked to agree to 'Terms and Conditions' before using the services which hardly outline the potential risks or costs.
- **Anonymity:** One of the most important aspects of therapy is anonymity. However, this is rarely maintained in digital healthcare apps since they are required to make an account and provide other necessary details such as contact, email etc.
- Safety and Data Protection: Such apps handle sensitive information privately to vulnerable individuals. However, multiple cases of data breaches due to lax security have been observed over the years. This leads to exposure of personal information without consent, hence undermining the rights of the individual.
- Credibility: Although claims of 100% effectiveness are made, these apps lack affiliation with actual professionals. This lack of input reflects in the methods used by these apps that appear to be generalized and surface level. Text therapies are open to all where anyone (even without proper credentials or certification) can therapize individuals in need. Mostly, a crash course in counseling is provided. However, this rarely makes up for the years of experience needed to be able to deal with patients, especially ones with extreme malfunctioning.
- Lack of Disclaimers: Disclaimers are defined as statements that inform the user about all the potential and actual risks involved in using an app. In the case of mental healthcare apps, these are incredibly important, especially when the individual might have suicidal ideation. However, very few apps provide said disclaimers.
- Autonomy and Consent: These apps often use the 'One mold fit all' model where regardless of severity or specificity of the problem, the consultation provided (in

terms of encouraging quotes, journalling, advice) is the same, hence undermining the rights to autonomy of the individual.

Oftentimes, app developers provide minimal to no information about the ways in which the personal information will be used or shared with third parties. Hence, individuals cannot consent to the collection and utilization of their personal information.

• **Potential for Over Diagnosis** - In a review of 61 mental health apps, it was found that the language used is unprofessional and promotes pathologizing messages that misrepresent normal emotional responses to real life stressors as abnormal and problematic. (Parker et al., 2018)

The ethical issues surrounding these apps increased manifold during the pandemic due to relaxation of multiple regulations to facilitate and provide people with mental health support through digital platforms. For example, in March 2020, the Department of Health and Human Services Office for Civil Rights, US, changed their provisions to reduce privacy protection. They waived penalties for Health Insurance Portability and Accountability Act violations against healthcare providers using unsafe technologies such as Skype for their sessions during the pandemic. (Cosgrove et al., 2020)

- 3. Links to capitalism: how digital mental healthcare services connect to capitalism: Digital Mental healthcare apps have become another set of contributors to the commodification of mental health. With the presence of more than 10,000 publicly available mental healthcare apps, the worldwide expenditure of these apps have been estimated to be over US \$92 billion (Marshall et al., 2020). Essentially for these apps, individuals with mental health issues (being the customer)become a source of income. Other than the straightforward hypothesis of Customer equates money, the other ways in which they commodify mental health as a source of profit are -
 - Selling Data to Third Parties: Huckvale et al (2019) revealed that more than half of these apps sell the confidential data of the users to a third-partysocial networking sites. The money generated from selling of such sensitive information is unethical but profitable which results in increased interest in the activity. The lack of data protection or privacy policy makes it difficult to address or even identify this supply chain where individuals at their most vulnerable point are taken and marketed as commodities up for grabs.
 - **Subscriptions:** A good deal of these apps require the user to subscribe to gain full access or benefits. The subscriptions can range from a weekly price of \$60 to a yearly subscription of \$99. When the number of consumers is taken into consideration, the subscription itself can add up to more than millions of dollars. Given the wide range of e-mental health apps, it is easily deducible that the revenue generated from subscriptions alone is exorbitant.

V. CONCLUSION

Current state of the world and economic structure has mandated the view that everything is a commodity that can be profited from. With rising awareness about mental health and increase in prevalence of digital apps and platforms, the integration of mental health and digital application was inevitable. The world is steadily moving towards an era where people's vulnerabilities are becoming another source of income and the global market profits from lax ethical guidelines regarding use of digital platforms about mental health and disorders.

As the world progresses, new technologies and means are bound to come up. Beneficial as they are, the consequences must be analyzed before putting them to use. While research in the field has begun recently, much of the consequences and effects are still unexplored, mandating need of further investigation. Some of the steps that can be taken are increased involvement of professionals in development of mental healthcare apps, creating and implementing ethical guidelines for such applications, mandating data privacy and protection, making the subscriptions to apps cheaper and so on.

Laws related to appropriate credentialing and licensing of therapists working through digital platforms must be implemented. Moreover, the apps claiming to provide such services should be both accredited by a sanctioned institution (specializing with issues related to mental health) as well as be affiliated with said institution. Overseeing the activities performed and policies followed is one of the ways to ensure that digital mental healthcare apps act in accordance to ethical and legal guidelines.

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