

ESTOCMA, AN APP DEVELOPED TO DISMISS SELF-STIGMA AND INCREASE MENTAL HEALTH LITERACY ABOUT OBSESSIVE-COMPULSIVE DISORDER: HOW DOES IT PERFORM IN A CLINICAL SAMPLE?

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INTRODUCTION

Obsessive-compulsive disorder (OCD) is a disabling condition that can be treated successfully. However, individuals with OCD often fail to seek or delay seeking treatment. In order to overcome this gap and increase the intention to seek for help, a gamified mental health mobile application (app) called esTOCma has been developed with a focus on offering information about OCD and on discussing stigmatizing attitudes toward the disease.

OBJECTIVES OF THE STUDY:

To analyze if the **intervention changes** the following variables in a clinical OCD sample:

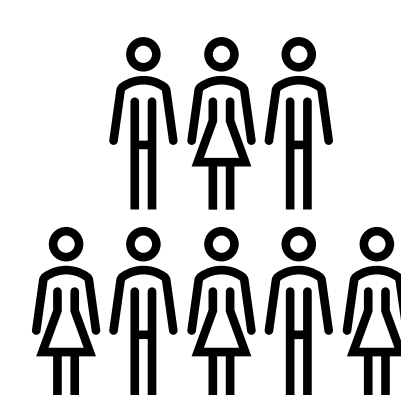
- (1) knowledge about OCD
- (2) internalized stigma
- (3) guilt
- (4) obsessive-compulsive symptoms

To explore **satisfaction** with the app



METHOD

126 participants diagnosed with OCD



Mean age was 39.31 years (SD= 39.31); range (18-66)

Half were women (51.6%)

Duration of the disorder M= 11.56 years; SD=9.73; range 1-45 years)

35.3% belonged to an OCD association.

Pre-Intervention measures:

- (1) Mental health literacy about OCD (MHL)
- (2) Internalized Stigma of Mental Illness (ISMI)
- (3) Guilt about having OCD (1 item)
- (4) Obsessive-Compulsive Inventory-Revised (OCI-R)
- (5) Satisfaction with the app

Intervention:



Post-Intervention measures:

- (1) MHL
- (2) ISMI
- (3) Guilt
- (4) OCI-R
- (5) Satisfaction

Participants are asked to fight the "OCD stigma monster" called "esTOCma" in order to **liberate 10 characters on 8-10 days**. The app is organized in **10 missions** with three levels that involve different contents and methodological approaches: psychoeducation, contact, and cognitive restructuring.

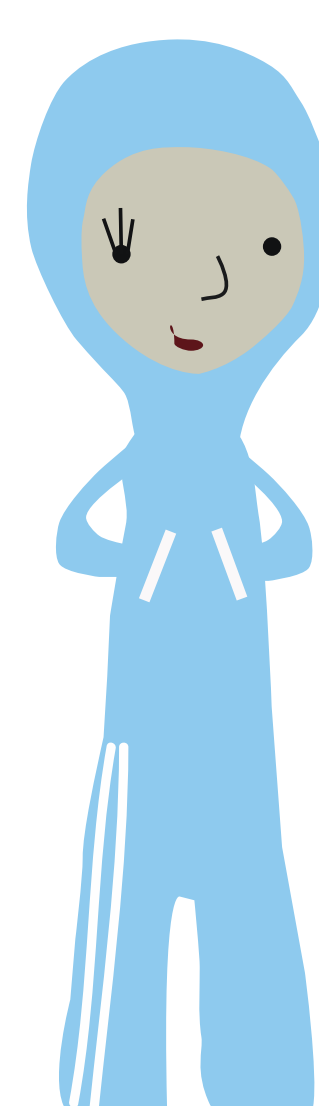
RESULTS

As a mean it took 19.35 days (SD=13.35; range 0-65 days) to complete the app.

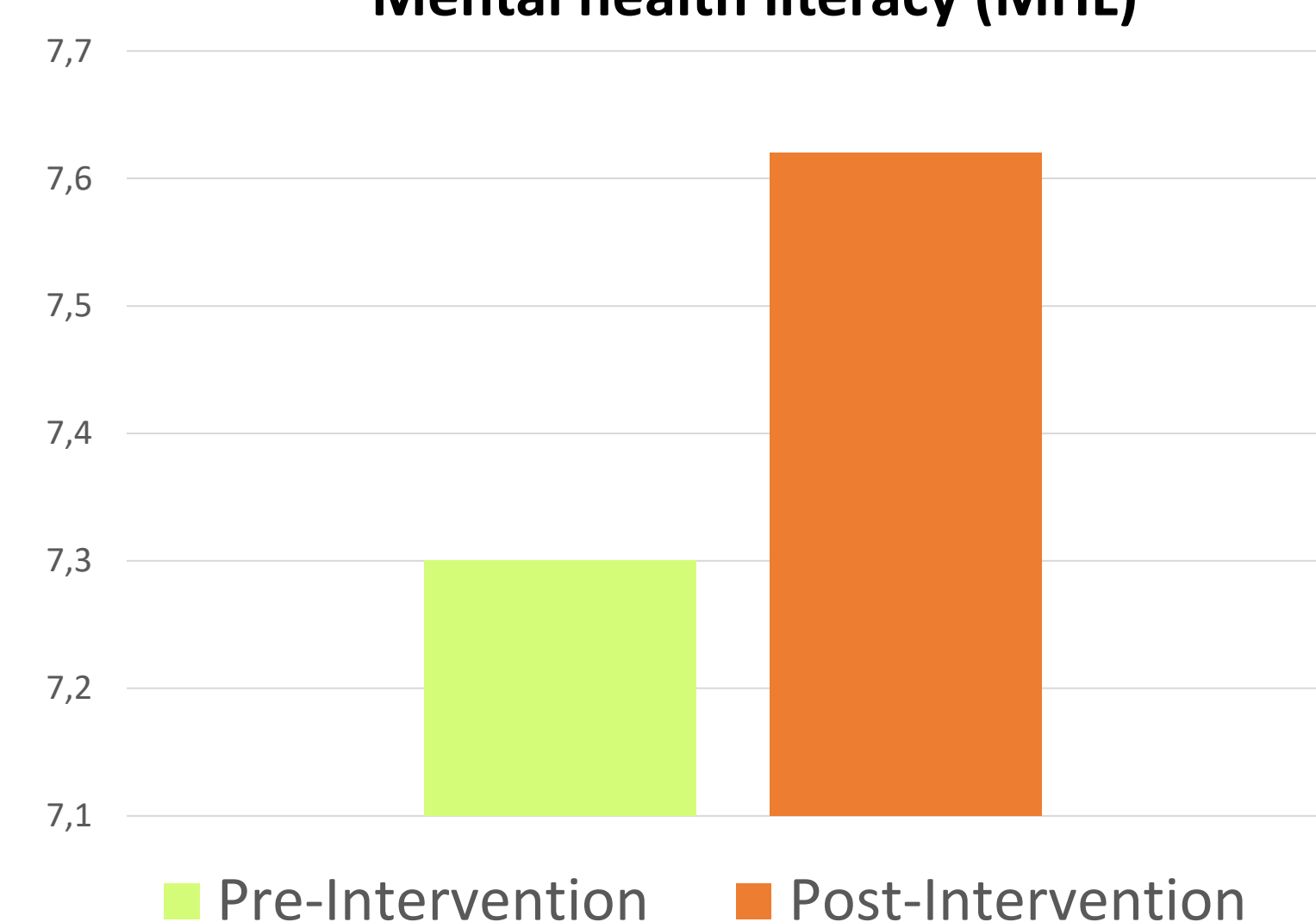
The intervention produced significant but small effect size changes on the measured variables:

- patients showed higher **mental health literacy (MHL)** ($t(125) = -3.998, p < .0001; \text{Cohen's } d = .398$)
- **lower internalized stigma or self-stigma (ISMI)** (Total score: $t(125) = 3.517, p \leq 0.001, \text{Cohen's } d = 0.167$)
- **less guilt associated with OCD (1 item)** ($t(125) = 3.592, p < .0001; \text{Cohen's } d = 0.265$)
- **less distress associated with obsessive-compulsive symptoms (OCI-R)** ($t(125) = 3.110, p = .002, \text{Cohen's } d = 0.122$).

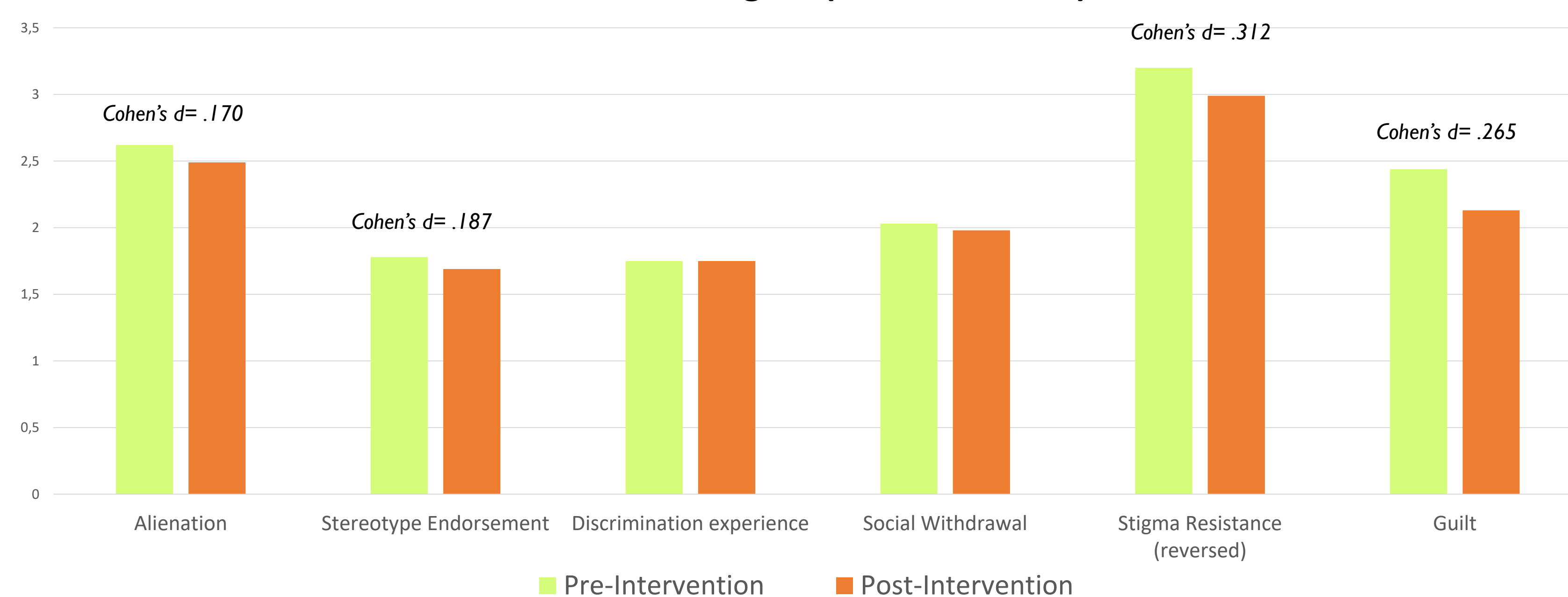
Regarding OCD patients' satisfaction with the app: 91.3% (n=115) found the app helpful, and 84.9% (n=107) would recommend it to a friend.



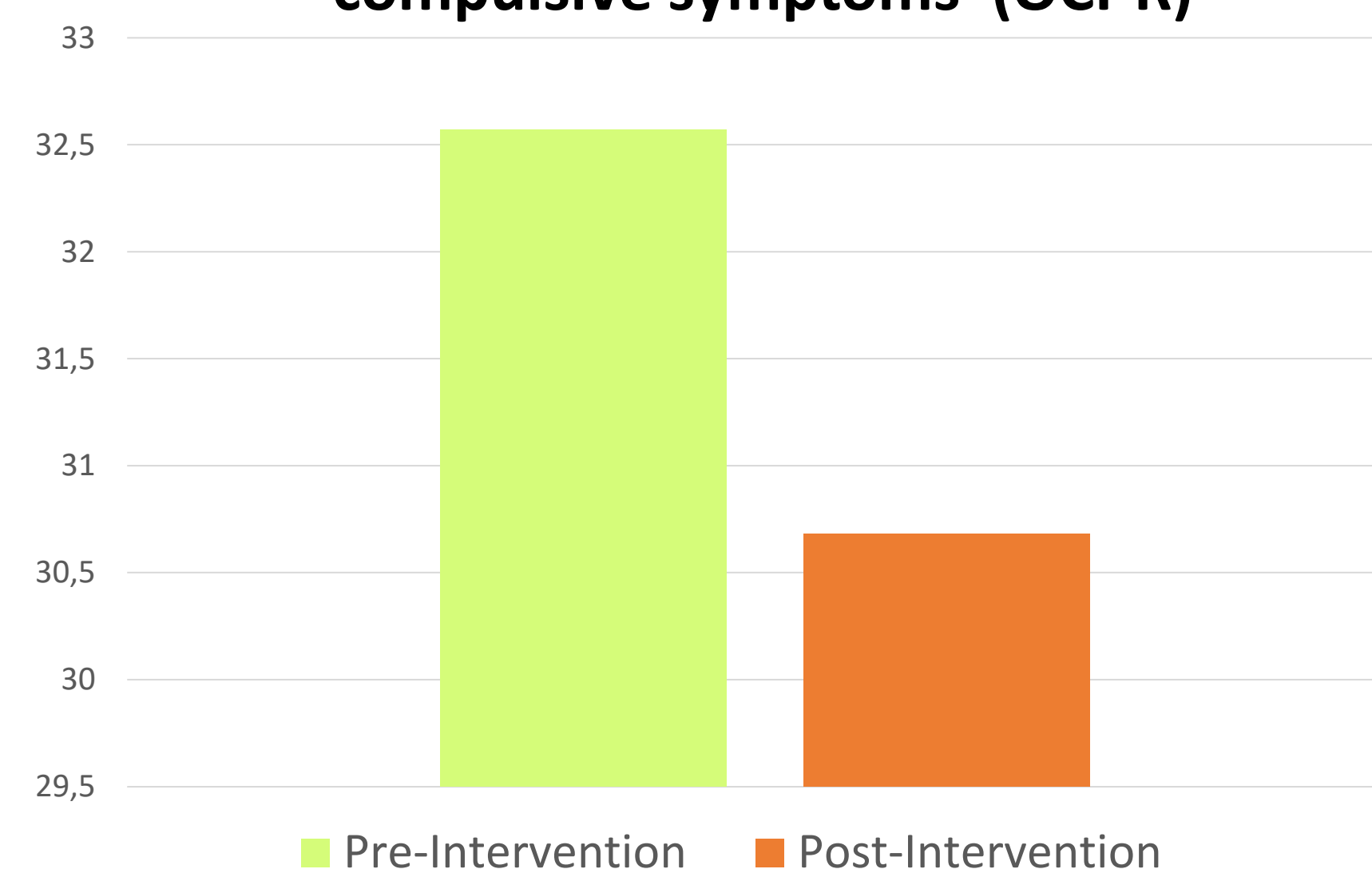
Mental health literacy (MHL)



Internalized stigma (ISMI subscales)



Distress associated with obsessive-compulsive symptoms (OCI-R)



DISCUSSION

Results show that the intervention produced **significant changes** on the variables of interest and that most patients were **satisfied** with the app. Effect sizes were small, probably due to the fact that patients had already asked for help and had been or were undergoing treatment. Furthermore, a high percentage belonged to OCD associations. Thus, it is expected that participants with these characteristics had prior basic knowledge of OCD and lower stigma than people who have had no prior contact with mental health services.

ACKNOWLEDGMENTS

Grant RTI2018-098349-B-I00 funded by MCIN/AEI/10.13039/501100011033 and by ERDF A way of making Europe.

