

Introduction

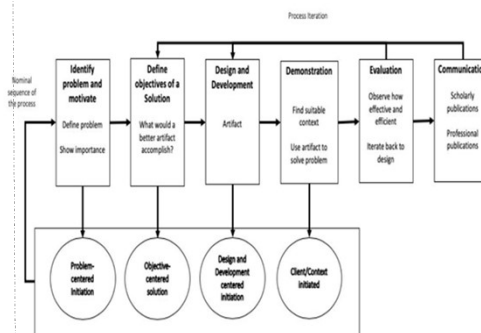
The objective of the thesis is to come up with a solution for the deteriorating mental health of people during the pandemic. Since it is causing widespread dread, worry, and concern among the general public, as well as specific groups such as older persons, caregivers, those with underlying health concerns and of course the general population. Thus, it is important to raise awareness and maintain the mental health of people to avoid the stage of physical pain or even suicid.

Literature Review

Mobile phone applications for mental health patients today cater to them and offer them a variety of applications linked to monitoring, evaluation, education, and therapy. Clinicians have resorted adopting portable and mobile applications as tools to help in the treatment of patients as the frequency of mental diseases such as depression and anxiety continues to rise. Patients who are reluctant or unable to attend face-to-face treatment may benefit from mobile phone applications, according to research (Atallaha, Khalifa, Metwally and Househa, 2017:2).

Methodology

The tool used in the research methodology is design science the iterative approach allows for the refinement of artifacts and models, as well as the creation of theories. concentrating on the development and validation of the application. Thus using the peffers model since it divides the process into six main steps that need to be carried out (Peffers et al., 2007).



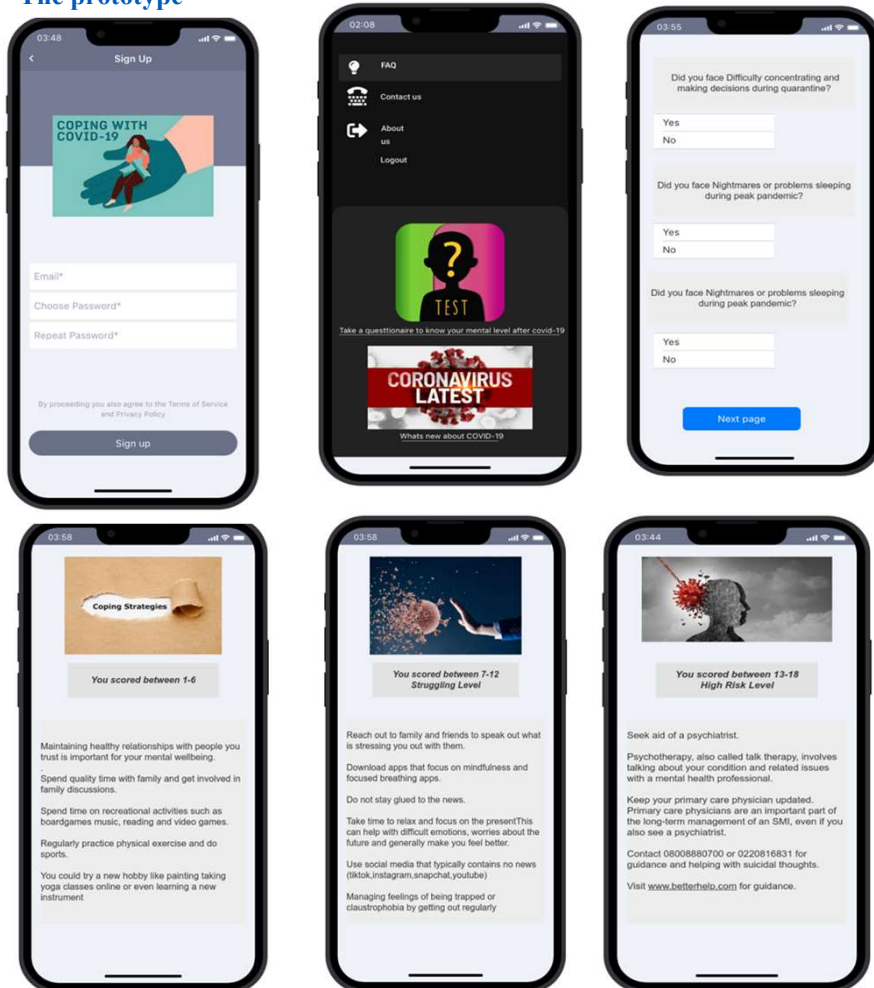
Conclusion

Such a problem could be solved by developing an application that states the level of mental health of users using forward to the point questions that measure the mental health level of the user and accordingly provide tips and advice that helps get over the crisis of covid. which is exactly what the application does by providing especially tips for each mental level according to the score in the quiz. There are three mental health levels defined in the application (Coping, Struggling and At High Risk). Summing up the score of the user from a scale upto 18 the application checks the score (1-6) is coping, (7-12) is struggling and (13-18) is at high risk. Then the application redirects each user to the page containing the tips that are designed for his/her level. Tips differ from each level to the other according to the severity of mental health of each user.

Results

After an interview with a psychiatrist some modifications are needed for better effectiveness of the application. He mentioned that a likert scale with a score from 1 to 4 would be more elaborative. In addition, questions should not be extracted from articles and websites however they should be taken as is from online screening tools for the application to be of a professional level. Not to mention questions need to be standardized with refraining from yes or no to avoid false positive and true negative cases. He also mentioned that specifying weights for questions is not a must. However the psychiatrist confirmed the validity of the prototype and stated that the application evaluates mental health situation during pandemics on a 3-degree recommendation system to support general well-being and providing support to individuals requiring psychological attention.

The prototype



References

- Atallah, N., Khalifa, M., El Metwally, A., & Househ, M. (2018). The prevalence and usage of mobile health applications among mental health patients in Saudi Arabia. *Computer methods and programs in biomedicine*, 156, 163-168.
- Peffers, K., Tuunanen, T., Rothenberger, M. A., & Chatterjee, S. (2007). A design science research methodology for information systems research. *Journal of management information systems*, 24(3), 45-77.