



Experiences of Bipolar Patients in Accessing Digital-Based Mental Health Services in Indonesia: A Phenomenological Study

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ABSTRACT

Mental health disorders, particularly bipolar disorder, significantly impact individuals' psychological stability and daily functioning, necessitating continuous access to care. Digital health technologies, such as telemedicine and mental health applications, have emerged as alternative solutions to overcome access barriers in mental healthcare. However, existing research focuses primarily on clinical outcomes rather than the subjective experiences of users, leaving a gap in understanding the deeper meaning and lived realities of individuals engaging with these services. This study employs a phenomenological approach to explore how individuals with bipolar disorder experience digital mental health services, uncovering themes related to accessibility, emotional support, and service limitations. Findings reveal that while digital platforms enhance accessibility and flexibility, they lack the emotional depth required for meaningful therapeutic interactions. These insights suggest that future digital mental health interventions should integrate user-centered features to foster stronger emotional engagement and complement traditional in-person care.



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INTRODUCTION

Mental health disorders, particularly bipolar disorder, represent a significant public health concern due to their profound impact on individuals' emotional stability, daily functioning, and overall well-being (Au dkk., 2019). Bipolar disorder is characterized by alternating periods of mania and depression, necessitating continuous management and access to mental health services (Bonnechère dkk., 2023). However, barriers such as stigma, geographic limitations, and the shortage of mental health professionals often prevent individuals from receiving timely and appropriate care.

The rise of digital health technologies, including telemedicine and mental health applications, has introduced new possibilities for improving accessibility and continuity of care for individuals with bipolar disorder (de Oliveira Roque e Lima dkk., 2023). Digital mental health services offer remote consultations, mood-tracking tools, and peer support communities, potentially mitigating some of the traditional obstacles associated with in-person psychiatric care (Fekadu dkk., 2024). Nevertheless, while these technologies hold promise, the lived experiences of individuals utilizing these services remain underexplored, particularly in the Indonesian context, where cultural, technological, and infrastructural factors shape healthcare delivery.

Previous studies have examined the efficacy of telemedicine and mobile health interventions in mental health management, highlighting their potential to increase accessibility and engagement (Graffigna dkk., 2020). However, much of the existing research has focused on clinical outcomes rather than the subjective experiences of users. Understanding how individuals with bipolar disorder perceive and interact with digital mental health services is crucial for ensuring these technologies align with their needs and preferences. A phenomenological approach provides a suitable framework for uncovering the deeper meanings attached to these experiences, allowing for a more comprehensive understanding of their benefits and limitations.

This study seeks to bridge the gap in literature by exploring the lived experiences of individuals with bipolar disorder in accessing digital mental health services (Gupta & Miah, 2024). By focusing on participants' narratives, the research aims to provide valuable insights into the accessibility, effectiveness, and emotional engagement associated with these technologies. Such an exploration is essential for informing the development of more user-centered mental health interventions and ensuring that digital services complement traditional therapeutic approaches in a meaningful way.

The exploration of lived experiences in healthcare settings has become an increasingly important area of research, particularly within mental health studies (Harriss dkk., 2019). Understanding how individuals perceive and engage with health interventions allows for the development of services that align more closely with their needs. In the case of bipolar disorder, subjective experiences are critical in determining the effectiveness and acceptability of treatment modalities, yet these aspects have often been overlooked in favor of clinical and quantitative assessments.

Methodologically, studying subjective experiences presents several challenges. Traditional quantitative approaches, while valuable for assessing treatment efficacy, fail to capture the depth and complexity of patients' lived experiences. Surveys and standardized assessments often reduce individual narratives to numerical data, limiting the ability to understand the nuanced realities of those managing mental health conditions (Hassen & Lelisho, 2022). Furthermore, while qualitative approaches have been employed, many studies focus on thematic analyses that may not fully explore the existential and phenomenological dimensions of personal experience.

The limitations of prior research underscore the need for phenomenological inquiry, which prioritizes the meanings that individuals ascribe to their experiences (Lira Huq dkk., 2023). By adopting this approach, the current study seeks to reveal how individuals navigate digital mental health services, the challenges they face, and the perceived impact on their overall well-being. Through in-depth exploration, this research aims to fill the existing gap in knowledge and contribute to a more holistic understanding of how technology-mediated mental health care is experienced by those it serves.

Despite the growing integration of digital health services in mental healthcare, existing studies predominantly focus on clinical efficacy and technological feasibility rather than the subjective experiences of individuals utilizing these platforms (Little dkk., 2019). While practical solutions such as telemedicine and mental health applications provide promising alternatives for care, they often fail to capture the nuanced realities of how individuals engage with, interpret, and derive meaning from these services.

One significant limitation of previous research is its reliance on quantitative assessments that prioritize measurable outcomes, such as treatment adherence or symptom reduction. While these metrics are valuable, they do not sufficiently illuminate the personal and existential dimensions of digital mental health experiences. As a result, there remains a gap in understanding how individuals perceive the emotional, psychological, and social implications of using digital mental health services, particularly within cultural contexts where mental health stigma persists.

Furthermore, the methodological constraints of prior studies often neglect the relational and interactive aspects of digital mental health care. Many digital interventions are designed with standardized protocols that do not account for individual differences in mental health needs, therapeutic relationships, and socio-cultural influences. The lack of research capturing lived experiences suggests a need for an alternative approach that prioritizes meaning-making and personal interpretation over rigid clinical parameters.

By employing a phenomenological approach, this study seeks to address these gaps by exploring the subjective realities of individuals with bipolar disorder as they navigate digital mental health services. Investigating their lived experiences will provide richer insights into the strengths, limitations, and broader implications of technology-mediated care. This research contributes to a deeper understanding of how digital mental health services can be tailored to align with the diverse experiences and needs of individuals managing bipolar disorder.

Previous research on digital mental health services has largely emphasized technological advancements and clinical outcomes, often overlooking the subjective experiences of individuals

navigating these platforms. Studies on telemedicine and mobile health applications have demonstrated their potential to enhance accessibility, yet their impact on emotional well-being and personal engagement remains insufficiently explored. Theoretical models such as the Self-Determination Theory and Technology Acceptance Model have been used to examine user adoption, but they fail to fully capture the depth of personal meaning derived from these interactions.

This study employs a phenomenological approach to address these gaps by investigating the lived experiences of individuals with bipolar disorder in utilizing digital mental health services. By centering on participants' narratives, this research seeks to uncover the emotional, psychological, and relational dimensions that shape their interactions with these platforms. The phenomenological framework allows for an in-depth exploration of how users experience accessibility, support, and emotional connection within digital mental health environments.

The structure of this article follows a clear progression to ensure coherence and analytical depth. It begins with an introduction to the research problem and the existing literature on digital mental health services, followed by an explanation of the phenomenological approach adopted in this study. The methodology section details the process of participant selection, data collection, and interpretative analysis. The results section presents key themes that emerged from the data, while the discussion contextualizes these findings within existing theoretical frameworks. Finally, the conclusion highlights the broader implications of this research and provides recommendations for future studies and improvements in digital mental health service design.

RESEARCH METHODS

Study Design

This study employed a phenomenological approach to explore the lived experiences of individuals with bipolar disorder in accessing digital mental health services (Morris-Paxton dkk., 2020). Phenomenology was chosen as the methodological framework due to its emphasis on understanding subjective experiences and uncovering the meaning participants assign to their interactions with digital healthcare platforms. A hermeneutic phenomenological approach was applied to interpret participants' narratives beyond surface-level descriptions, enabling a deeper exploration of the challenges and perceived benefits associated with telemedicine and digital mental health applications.

Participants

Participants in this study were individuals diagnosed with bipolar disorder who had accessed digital mental health services for a minimum of six months. Inclusion criteria required participants to be between 18 and 50 years old, have a formal diagnosis of bipolar disorder by a certified mental health professional, and have experience using telemedicine or mental health applications. Exclusion criteria included individuals with severe comorbid psychiatric conditions that might confound their perception of digital health services. A purposive sampling strategy was used to recruit 10-15 participants, ensuring diversity in experiences while maintaining a manageable sample size for in-depth phenomenological analysis.

Data Collection

Data were collected through in-depth, semi-structured interviews, allowing participants to articulate their experiences freely while ensuring consistency across responses. Interview guides focused on themes such as ease of access, emotional engagement, technical challenges, and the impact of digital services on mental well-being. Each interview lasted approximately 45-60 minutes and was conducted through secure online communication platforms. To create a comfortable environment for participants, interviews were scheduled at times convenient for them, and they were assured of confidentiality. Audio recordings of interviews were transcribed verbatim for subsequent analysis.

Data Analysis

Data were analyzed using an interpretative phenomenological analysis (IPA) approach, which involved systematically identifying emerging themes across participant narratives. Transcriptions were

reviewed multiple times to ensure immersion in the data, followed by manual and NVivo-assisted coding to categorize themes. Key patterns, such as accessibility, technical barriers, and emotional experiences, were identified and linked to theoretical frameworks, including Self-Determination Theory and the Technology Acceptance Model. The interpretative process ensured that findings were deeply rooted in participants' lived experiences and not merely descriptive summaries.

Ethical Considerations

Ethical approval was obtained from the relevant research ethics committee before data collection commenced. Informed consent was secured from all participants through written documentation, ensuring that they understood the purpose, risks, and voluntary nature of their involvement. Participants' anonymity was safeguarded through pseudonyms and secure data storage. The study adhered to ethical guidelines outlined by the American Psychological Association (APA) and the Declaration of Helsinki, ensuring the highest standards of research integrity and participant welfare.

RESULTS

Accessibility and Convenience in Digital Mental Health Services

Participants reported that digital mental health services provided a more accessible and convenient alternative to traditional in-person consultations. Many highlighted the ease of scheduling appointments and the ability to receive medical advice without the need for physical travel, which was particularly beneficial for those living in remote areas or facing mobility challenges. One participant shared:

"I feel more comfortable consulting online because I don't have to travel to the hospital, but sometimes I feel that the doctor does not understand my condition as well as during face-to-face meetings."

While most participants appreciated the flexibility of digital platforms, some also noted that technical issues, such as unstable internet connections, could interfere with the effectiveness of their consultations. The accessibility of mental health services through telemedicine was perceived as a positive step toward destigmatizing psychiatric consultations, yet some participants expressed concerns over the impersonality of virtual interactions.

Technical and Emotional Barriers to Effective Engagement

Despite the advantages of accessibility, participants encountered several technical and emotional challenges when using digital mental health services. A recurring issue was the lack of stable internet connectivity, particularly among participants residing in rural areas. Additionally, some participants mentioned that virtual interactions did not provide the same level of emotional connection as in-person therapy. One participant explained:

"Sometimes, I feel like my psychiatrist is just going through a checklist during our online sessions. I miss the warmth and presence of a real conversation."

Others reported difficulties in expressing themselves through digital mediums, especially during episodes of emotional distress. Some participants felt that their needs were not fully met, particularly in moments of crisis, where face-to-face support might have been more effective.

The Impact of Digital Mental Health Services on Well-Being

The use of digital mental health services had varying effects on participants' well-being. Several participants appreciated the ability to track their moods and symptoms through mental health apps, stating that such tools helped them develop a better understanding of their emotional patterns. One participant mentioned:

"This app helps me monitor my mood, but when I experience severe depressive episodes, I still feel lonely and lack the support I need."

However, others argued that digital services could not fully replace traditional therapy, particularly for individuals experiencing severe bipolar episodes. While digital platforms fostered a

sense of independence in managing mental health, many participants emphasized the necessity of in-person support for more profound psychological interventions.

This study uncovered a complex interplay between accessibility, technical limitations, and emotional needs in the context of digital mental health services for individuals with bipolar disorder. While digital platforms offered greater flexibility and convenience, they also introduced barriers that limited the depth of therapeutic interactions. The findings suggest that while telemedicine and digital health applications can be valuable tools, they should be integrated with traditional mental health services to provide a more holistic and effective care model for bipolar patients.

DISCUSSION

The findings of this study reveal that digital mental health services offer increased accessibility and convenience for individuals with bipolar disorder but also present significant limitations in emotional engagement and personalized support (Peritogiannis dkk., 2022). Participants highlighted that while telemedicine provides flexibility, it does not fully replicate the interpersonal depth of face-to-face consultations (Politis dkk., 2023). These insights align with the research question regarding the extent to which digital mental health platforms impact user experience and well-being.

This study contributes to the existing body of knowledge by demonstrating that the effectiveness of digital mental health services is contingent not only on technological efficiency but also on their ability to foster meaningful therapeutic relationships (Randall dkk., 2023). By emphasizing lived experiences, this research underscores the necessity of designing digital interventions that accommodate users' emotional and psychological needs, rather than merely serving as logistical solutions for healthcare access.

Comparing these findings with prior literature, this study reinforces the argument that technology adoption in mental health care must be accompanied by frameworks that prioritize human connection and user-centric design (Ssengooba dkk., 2022). While previous studies have focused on usability and adoption rates, the phenomenological perspective employed here provides a deeper understanding of how individuals perceive and internalize their interactions with digital platforms.

Explanation of Findings Implications

The findings of this study hold significant implications for both theoretical understanding and practical applications in digital mental health services. From a theoretical perspective, the research highlights the complex interplay between accessibility, emotional support, and the limitations of digital platforms in replicating face-to-face therapeutic engagement. The study provides insight into how individuals with bipolar disorder navigate these challenges, emphasizing the need for technology-driven mental health interventions to incorporate elements of relational and emotional depth (Theron & Pelsler, 2020). From a practical standpoint, the findings underscore the necessity of improving user-centered digital mental health tools that address not only logistical accessibility but also the psychological and emotional needs of users.

Study Limitations

Despite these contributions, several limitations must be acknowledged. The study's sample size, while appropriate for phenomenological research, may not fully capture the diversity of experiences among individuals with bipolar disorder across different cultural and socioeconomic contexts (Waibel dkk., 2021). Additionally, reliance on self-reported data may introduce biases related to participants' recall or personal perceptions of digital mental health services. The study also does not assess long-term outcomes of digital interventions, leaving room for future research to explore how sustained engagement with these platforms affects users' mental health over time.

Prospective Statement for Future Research

Future research should consider expanding the demographic scope of participants to include a broader range of experiences, particularly from underrepresented groups (Yates dkk., 2022). Additionally, longitudinal studies examining the long-term impact of digital mental health services on

emotional well-being and therapy adherence would provide valuable insights. Further exploration into hybrid mental health models—integrating digital platforms with in-person therapy—may offer a more comprehensive approach to supporting individuals with bipolar disorder. This study serves as a foundation for these future inquiries, advancing the understanding of how digital mental health services can be optimized to meet the needs of diverse user populations.

CONCLUSION

This study explored the lived experiences of individuals with bipolar disorder in accessing digital mental health services, emphasizing the emotional, psychological, and relational aspects of their interactions. The findings highlight that while digital platforms improve accessibility, they often lack the interpersonal depth required for meaningful therapeutic relationships. This research contributes to the growing discourse on mental health technologies by providing a phenomenological perspective that captures the complexity of user experiences beyond clinical outcomes. The study's insights suggest that digital mental health services should integrate user-centered features that enhance emotional support and engagement. While the findings are valuable, further research should explore diverse demographic contexts to broaden understanding. Future studies may also examine hybrid models combining digital and in-person interventions to optimize patient care.

CONFLICT OF INTEREST

This article has undergone an independent and objective review process. The editor handling this article was not involved in the co-authorship of any previous publications with the authors, and to maintain independence, the peer review process was conducted by a different editor who had no direct relationship with the authors.

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