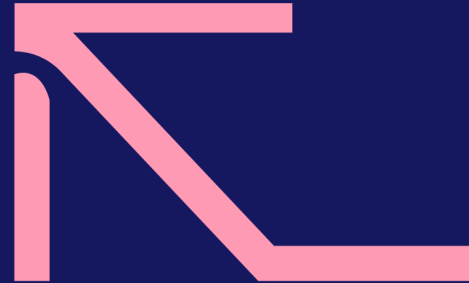


POLICY BRIEF

INTEGRATION OF TELEPSYCHIATRY SERVICES IN POLICIES AND PROGRAMS FOR OVERSEAS FILIPINOS

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* BACKGROUND

The mental health needs of Overseas Filipino Workers (OFWs) remain a critical concern requiring immediate policy attention. As the national organization that protects the rights and promotes the welfare of OFWs, the Department of Migrant Workers (DMW) is well-positioned to play a significant role in institutionalizing access to mental health services for its constituents, so that resources are allocated that can bridge the current gaps in successful implementation and global roll-out. This policy brief outlines evidence-based recommendations for integrating telepsychiatry services into existing OFW support mechanisms under the DMW. Based on:

- (1) Focus group discussions with representatives from relevant organizations from the public and private sectors;
- (2) Successful pilot implementation in Kuwait demonstrating high acceptance of telepsychiatry among OFWs; and
- (3) Analysis of current policy frameworks and implementation challenges.

EVIDENCE BASE

Research Findings from the Kuwait
Telepsychiatry Study (Candelario et al., 2024):

- Sample Demographics:
 - 55 female OFWs participated
 - 96.36% were household service workers
 - Median age of 35 years
- Mental Health Burden:
 - 40% diagnosed with mental health disorders
 - 25.45% had acute stress disorder
 - 9.09% experienced major depressive disorder
- Service Acceptability:
 - High satisfaction with telepsychiatry (4.77/5.00)
 - Successful implementation using secure video conferencing
 - Effective provision of culturally sensitive care by Filipino psychiatrists

Stakeholder Engagement Meeting:

- This policy brief draws from findings of a stakeholder engagement meeting conducted on November 22, 2024.
- Using purposive sampling, key representatives from several critical organizations were selected based on their direct or indirect involvement with migrant workers, policy-making, mental health, psychiatry, psychology, telemedicine, e-Health, or information and communications technology.
- Individuals from the academe and private sector were also invited for a well-rounded discussion.



Focus group discussions with relevant stakeholders.
Legend:
A – representatives from DMW-OWWA, DFA, DOST-PCHRD;
B – representatives from DOH, PHIC, DOST-PCHRD;
C – representatives from DICT, PPA, PAP, DOST-PCHRD, private sector;
D – representatives from PMHN, private sector and academe.

POLICY RECOMMENDATIONS

Call to Action

The Department of Migrant Workers must act now to institutionalize telepsychiatry services to protect the mental wellbeing of our modern-day heroes. With evidence demonstrating both the critical need and viability of telepsychiatry services, DMW has the opportunity to transform OFW mental health support through decisive policy action and systematic implementation of proven solutions.

1. Bilateral Agreement Enhancement

- Include telepsychiatry provisions in new and existing BLAs
- Define host country responsibilities
- Establish cross-border service protocols

2. Pre-Deployment Program Reform

- Integrate mental health modules in pre-departure orientation seminar (PDOS)
- Implement mandatory mental health screening
- Include telepsychiatry orientation

3. Resource Development

- Establish dedicated telepsychiatry units
- Create training programs (e.g., digital literacy; cultural competency)
- Develop service provider partnerships

RECOMMENDED IMPLEMENTATION STRATEGY

SHORT-TERM ACTIONS

6-12 months

- Form technical working group
- Review and enhance PDOS mental health modules
- Initiate partnerships with mental health providers

MEDIUM-TERM ACTIONS

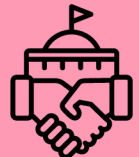
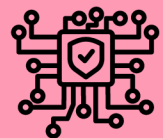
12-24 months

- Pilot telepsychiatry programs in key destinations
- Train welfare officers in telepsychiatry support
- Develop monitoring and evaluation frameworks

LONG-TERM ACTIONS

24+ months

- Full integration in bilateral labor agreements
- Establish dedicated telepsychiatry units
- Comprehensive program evaluation
- Institutionalization (bill) of telepsychiatry for OFWs



EXPECTED OUTCOMES:



- Improved mental health support accessibility for OFWs
- Enhanced pre-deployment mental health preparation
- Reduced mental health-related issues among OFWs
- Strengthened welfare support system for OFWs
- Better crisis intervention capabilities

RESOURCE REQUIREMENTS:



- Budget allocation for infrastructure, software, and staffing
- Technical resources for telepsychiatry implementation
- mhGAP-trained personnel (capacity building)
- Health promotion and education campaigns for patient navigation and referral awareness



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