POLICY BRIEF

INTEGRATING TELEPSYCHIATRY INTO FILIPINO MIGRANT HEALTH SERVICES

GREGORIO R. CANDELARIO JR., MPA
CRISTELA MAE C. CANDELARIO, RMT, MSMT
MA. ANGELICA C. PLATA, RN, MD
ISMAEL L. CORDERO, JR., MD, DPCAM
REAGAN JOSEPH T. VILLANUEVA, MD, DPCAM, MAHA

PHILIPPINE MIGRANT HEALTH NETWORK

❄ BACKGROUND

The mental health challenges faced by Overseas Filipinos (OFs) represent a significant public health concern requiring coordinated intervention. The complex nature of migrant mental health requires a networked approach that connects various stakeholders and service providers. Telepsychiatry presents an opportunity to bridge service gaps, but its implementation demands careful consideration of migrant-specific needs, cultural factors, and practical limitations in host countries. As the leading multi-collaborative network for migrant health, the Philippine Migrant Health Network serves as a crucial coordinator in ensuring comprehensive health services for OFs are met. This policy brief outlines recommendations for integrating telepsychiatry services into the comprehensive migrant health framework based on: (1) Focus group discussions with key stakeholders; (2) Service coordination insights from Kuwait telepsychiatry implementation; and (3) Analysis of current networks and service integration challenges.

EVIDENCE BASE

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

- Stakeholder Coordination:
    - Successful Philippine overseas shelter-provider collaboration
    - Effective referral systems established
    - Clear communication channels
- Service Integration:
    - 55 female OFWs served through culturally sensitive coordinated care
    - 40% of OFWs found to require mental health interventions
    - Multiple stakeholder involvement in mental healthcare delivery

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 seven 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.

Candelario CM et al. 2024. Acceptability of Telepsychiatry among Overseas Filipino Workers in Kuwait. Philipp J Sci 153(4): 1465–1475

BEST PRACTICES AND RECOMMENDATIONS

1. Service Integration Framework

- Coordinated Care Model
  - Establish clear referral pathways between stakeholders
  - Develop integrated case management systems
  - Create unified documentation protocols
- Resource Optimization
  - Share infrastructure and technical resources
  - Pool professional expertise
  - Coordinate training and capacity building

2. Support System Enhancement

- Pre-deployment Preparation
  - Mental health awareness programs
  - Digital literacy training
  - Telepsychiatry service orientation
- On-site Support
  - Welfare center capacity building
  - Staff mental health training
  - Emergency response protocols

3. Stakeholder Coordination

- Inter-agency Collaboration
  - Regular coordination meetings
  - Shared resource planning
  - Joint program development
- Information Sharing
  - Standardized reporting systems
  - Data sharing protocols
  - Joint monitoring mechanisms

Call to Action

The Philippine Migrant Health Network must act now to strengthen the coordination framework essential for successful telepsychiatry implementation. The evidence from Kuwait demonstrates that effective stakeholder coordination is crucial for service delivery, while our consultations reveal the urgent need for enhanced network integration. As the key coordinator for migrant health services, PMHN must take decisive action to build the collaborative frameworks needed for sustainable telepsychiatry services. The pathway to better mental health support for OFWs depends on our ability to work together effectively!

For more information, contact:
Gregorio R. Candelario, Jr. (gregjrcandelario2@gmail.com)

CHALLENGES TO CONSIDER:

- **Service Access and Continuity**
  - Limited access to devices and internet in host countries
  - Communication barriers
  - Restricted communication opportunities for distressed OFWs
  - Challenges in maintaining continuity of care

- **Coordination Challenges**
  - Complex stakeholder landscape
  - Varied healthcare systems across host countries
  - Limited integration of existing services

- **Implementation Barriers**
  - Mental health stigma affecting service uptake
  - Limited resources in welfare centers
  - Bureaucratic processes delaying care

RECOMMENDED STRATEGY

PHASE ONE: Network Preparation
- Stakeholder mapping and engagement
- Resource assessment and allocation
- Protocol development
- Instrument standardization

PHASE TWO Service Integration
- Referral pathway development
- Pilot program implementation
- Coordinated service delivery
- Monitoring system activation

PHASE THREE System Optimization
- Coordination with local healthcare
- Service evaluation and refinement
- Network expansion
- Continuous improvement

ANDITO PROJECT: Advocating National Discourse to Integrate Telepsychiatry in Policies and Programs for Overseas Filipinos

DOST - PCHRD