Global Leadership Exchange

NASMHPD Annual Meeting

Presented by Steve Appleton, President/CEO.

July 2025.



About us...

Global Leadership Exchange connects leaders in mental health, disability, and addiction. We create space for sharing ideas, knowledge, and best practice to help spread innovation, improve services and change lives.

GLE members

Our members come from all over the world and are committed to leading change and to learning about new or different ways of working to improve the lives of people with mental health, disability or addiction needs.

Some have many years of experience, and some are just starting out, and we believe we can all learn from each other.

Our global community is vast and wideranging consisting of organizational, policy, government, service, experts by experience, academic and faith leaders.



Leadership Principles underpin our work

We ask all members and subscribers to GLE to sign-up to our principles. We regularly revisit these and seek input from members to ensure they are relevant and reflect the everchanging and expanding environments we find ourselves in.





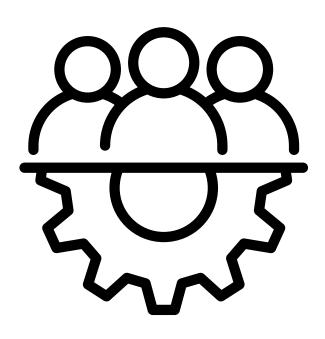
Benefits of being a member of GLE





The way we work



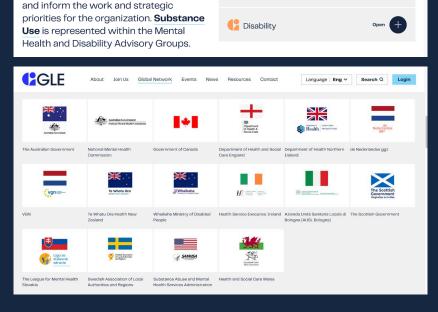


We are a global collaboration

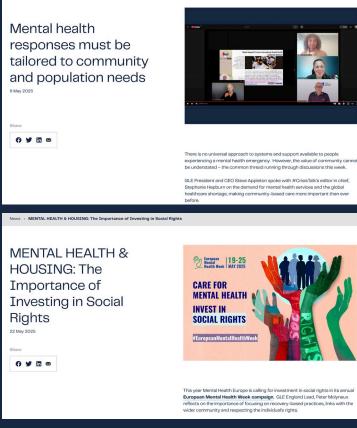
- A virtual international office is led by Steve Appleton, President/CEO.
- A small global team works flexibly across multiple time-zones providing a wide range of expertise, network facilitation, membership coordination, communication and administrative support.
- We are funded by departments/ organizations in Australia, Canada, England, Italy, Northern Ireland, the Netherlands, New Zealand, Republic of Ireland, Scotland, Slovakia, Sweden, USA and Wales
- We currently have almost 5,000 members subscribed

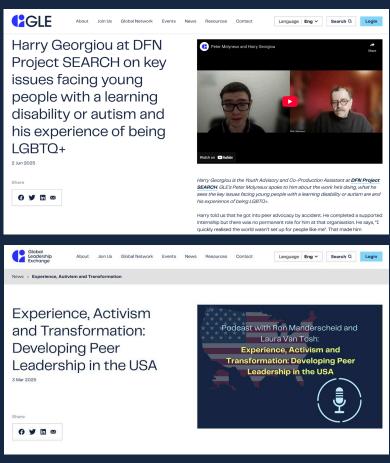


Snapshot of GLE activity



Mental Health







21 Apr 2025





In partnership with GLE's Canadian Disability Planning Group, we are pleased to invite Canadian disability leaders to join an interactive webinar.

The webinar will explore 'Independent, thriving, self-directed lives for all: international collaboration and Canadian leadership'.

Date: 29 May 2025

Time: 12pm, Eastern time



Advisory Groups

Global Leadership Advisory Groups

(GLAGs) have been established to oversee

About our Leadership Exchange



- Our main event is our Leadership Exchange which happens every two years and is mainly an inperson event, hosted within one of our funding countries and attended by up to 600 of our members.
- We host a series of matches (similar to innovation labs or workshops) in the lead up to the event, and outcomes and learning is played back to all attendees where more discussions take place, and leaders plan the next level of activity or engagement to keep the conversation going and ensure learning continues in between the Leadership Exchange event.
- Our last Leadership Exchange was held in Utrecht, Netherlands, June 2024
 - In-Person Workshops (Matches): June 24 and 25
 - Welcome Reception: June 26
 - In-Person Network Meeting: June 27 and 28
- Visitors came from all over the world, primarily from our 13 investing countries/regions
- <u>Leadership Exchange 2024 Global Leadership Exchange (gle.world)</u>

















Comprehensive Community Suicide Prevention Match











Our Leadership Exchange in pictures

Link: GLE 2024 photo gallery (youtube.com)

Coming soon



GLE is now starting to plan for the next Leadership Exchange in June 2026 in Canada.

We have a strong international mental health, disability and addictions leadership network and we are committed to strengthening relationships with existing and new members.





This Photo by Unknown Author is licensed under CC BY



Scan the QR code to find out more about becoming a member



Thank you

Over to you...



www.gle.world



global-leadership-exchange



global-leadership-exchange





Professor Anil Thapliyal

Executive Director

eMental Health International Collaborative (eMHIC)

NASMHPD Annual 2025 Meeting

Global Overview: Towards A Sustainable and Scalable Digital Mental Health Ecosystem

Washington DC, USA July 29, 2025



What is Digital Mental Health?

- 1. Clinician Facing
- 2. Patient Facing
 - Mobile apps & Websites for information, navigation, Self-help, self-management (clinician-guided or go alone)
 - Al Technologies (Chatbots and generative Al)
 - **Helplines** (Phone or text)
 - Online communities (Peer support)
 - Clinician tools (e.g., monitoring platforms, telehealth)
 - Digital Therapeutics
 - VR e.g. for Schitzophrenia and phobia
 - Wearables for tracking well-being
 - EMR systems or Patient Portals with built in DMH tools





Scale of Challenges

ASC RECOMMENDATIONS FOR CONDUCTING ETHICAL MENTAL HEALTH AND PSYCHOSOCIAL RESEARCH IN EMERGENCY SETTINGS



- 1. Humanitarian Settings 2024
 - 1. 300 million people
 - 2. 66 million experiencing mental health challenges
- 2. Low to middle income countries
 - 1. Bangladesh Remote and Rural <>114 million
- 3. Lack of Leadership
- 4. Workforce shortages
- 5. Marginalised Groups LGBTQ+, Sex workers, children and adolescents, Women and girls, people with disabilities, ethnic and religious minorities
- 6. Funding
- 7. Inter-agency coordination





Bahamas, Bangladesh, Brunei, Gambia, Grenada, Jordan, Kenya, Malawi, Maldives, Myanmar, Nigeria, PNG, Qatar Saint Lucia, Saudi Arabia, Sierra Leone, Somalia, South Sudan, UAE, Sudan, Tonga, Uganda, Tanzania.

barriers to access

Stigma – prejudice and discrimination

Suicide legislation suicide is still treated as a crime in many countries



United Nations







UNICEF







World Health Organisation







Types of Digital Therapeutics

Low Complexity<>High Volume

<u>Target segment</u>: Population Wellbeing Examples: Headspace, Calm, Kids Help Phone

Mild to Moderate Complexity<>Moderate Volume

<u>Target segment</u>: Primary Care Examples: Thubble, Just and Thought, Kooth

High Complexity<>Low Volume

<u>Target segment</u>: Tertiary Care Examples: Psyomics, CHESS Health

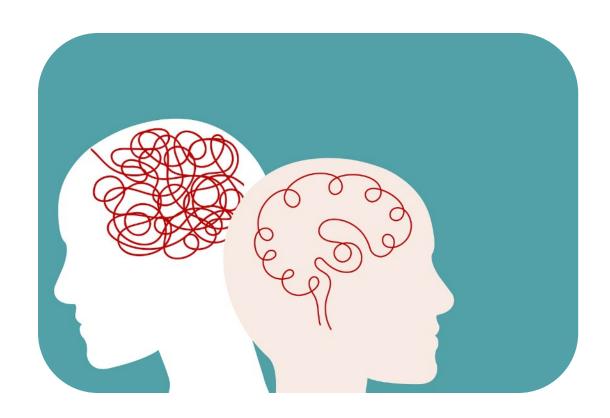


Implementation





Lived experience perspective



- Mental health systems navigation
- 2. Completed suicides in 2023 1,862 (40% <> 60%)
- 3. Amber LeRoy, Clarenville, Newfoundland and Labrador

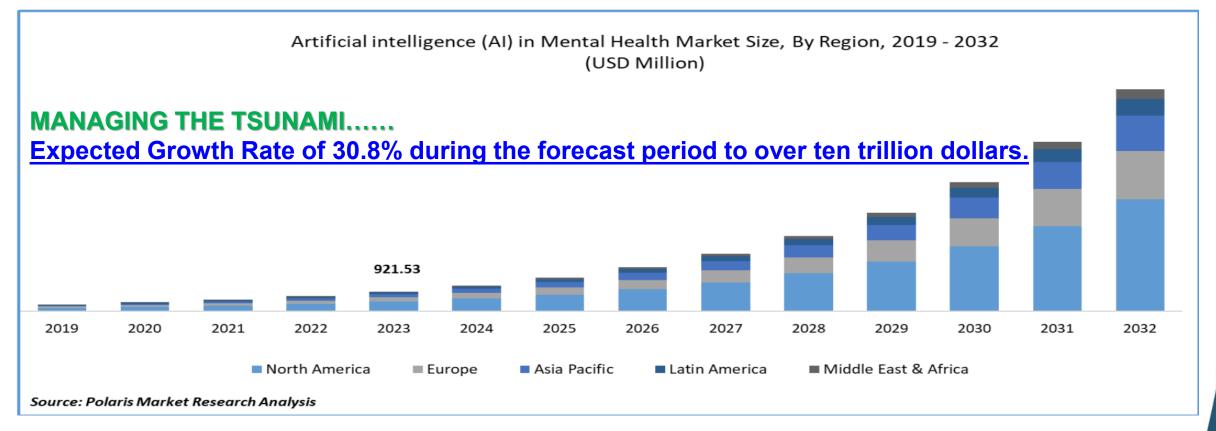


International strategy and policy landscape

Country	Year	Output
Australia	2012 2019	eMental Health Strategy Digital Mental Health Standards
Canada (Federal) Canada (Provincial)	2014 2022 2024 2011	eMental Health Briefing Paper eMental Health Accreditation Framework eMental Health Strategy eMental Health Strategy – Government of Newfoundland and Labrador
Ireland	2024	National Digital Mental Health Plan
New Zealand	2019	Digital Mental Health and Addiction Toolkit (DMHAT)
Wales	2025	Digital Mental Health Strategy
Singapore	2025	Digital Mental Health Plan
Dubai Health Authority	2025	Digital Mental Health Regulatory Framework
Sri Lanka	2025	National Digital Mental Health Roadmap
England	2025	Regulatory Framework published by MHRA

Artificial intelligence (AI) in mental health market size was valued at \$921.53m in 2023.

The market is anticipated to grow from \$1,202.50m in 2024 to \$10,334.09m by 2032



https://www.polarismarketresearch.com/industry-analysis/artificial-intelligence-ai-in-mental-health-market



MANAGING THE TSUNAMI.....

Cautious yet positive approach to GenAl in mental health.

Active engagement of mental health professionals in guiding GenAI development.

Emphasizes ensuring that GenAI advancements are technologically sound but also ethically grounded and patient-centered.

> JMIR Ment Health. 2024 Oct 17:11:e58011. doi: 10.2196/58011.

An Ethical Perspective on the Democratization of Mental Health With Generative AI

Zohar Elyoseph ¹ ², Tamar Gur ³, Yuval Haber ⁴, Tomer Simon ⁵, Tal Angert ⁶, Yuval Navon ⁶, Amir Tal ⁷, Oren Asman ⁷ ⁸

Affiliations + expand

PMID: 39417792 PMCID: PMC11500620 DOI: 10.2196/58011



AI in Mental Health <> Netherlands Roundtable







Al in Mental Health<>Wales Roundtable







Al in Mental Health<>Ireland Roundtable







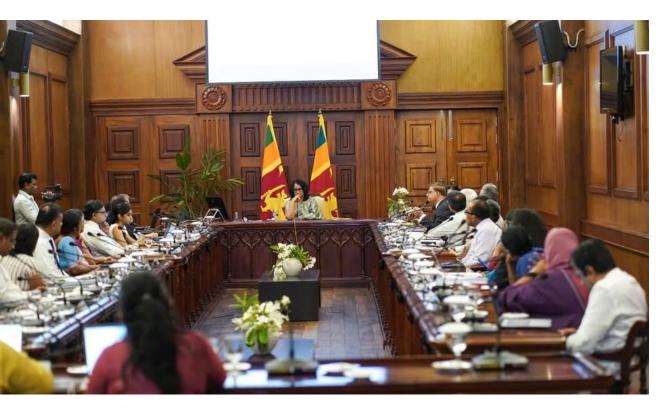
Al in Mental Health<>Singapore, Roundtable







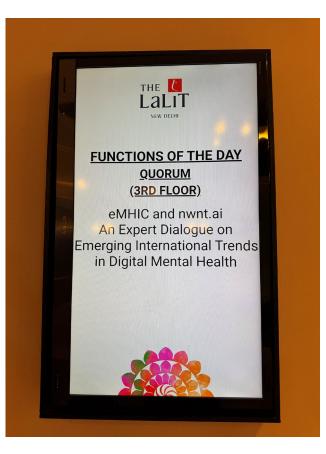
Al in Mental Health<>Sri Lanka, Roundtable







Al in Mental Health<>India, Roundtable











NEED A WATCHDOG.....



Lessons learned: System truths

You can build it, and they may **NOT** come

Consensus through <u>CO-CREATION</u> with end-users and other stakeholders is essential.

Physical and mental health must be managed jointly

They are not separate

People will never be replaced in the health system

Al represents assistive technology – choices will be made by people.

Generative AI is a massive opportunity

<u>There is an 11Trillion US\$ expansion in the economy</u> predicted in this sector by 2033... Do not fail to invest because of those who indicate that AI for health is too risky.

Streaming data is an essential goal

Citizens need up-to-date monitoring and the ability to access rapid intervention



Lessons learned: What to invest in?

Never consider implementing products without an evidence-based use case

Ensure that reliable, clinically validated outcome measures are in place

Engage stakeholders to find out: what end-users will accept, what service providers understand as useful.

Capitalize on existing infrastructure development: e.g., streaming data smart tech exists – do not re-invent the wheel.



It is not about standards It is about the ecosystem

It is not about digital
It is about people and trust



Let's get it right by design

- 1. Bold vision, leadership
- 2. Anchor digital mental health in policy
- 3. Build digital mental health champions for change
- 4. Workforce development
- 5. Foster collective ownership of digital mental health
- 6. Systems navigation
- 7. Focus on partnership and collaboration



Digital Mental Health Global Congress





2025 Theme:

Mental Health Equity: Digital Solutions for an Interconnected World

Date:

19–21 November, 2025

Location:

The Westin Harbour Castle, Toronto, Canada

Participation:

In-Person and Virtual Attendance Options

