

Technical Perspectives on Mobile Sensing in Mental Health

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Technical University
of Denmark



UNIVERSITY OF
COPENHAGEN



Outline

BACKGROUND

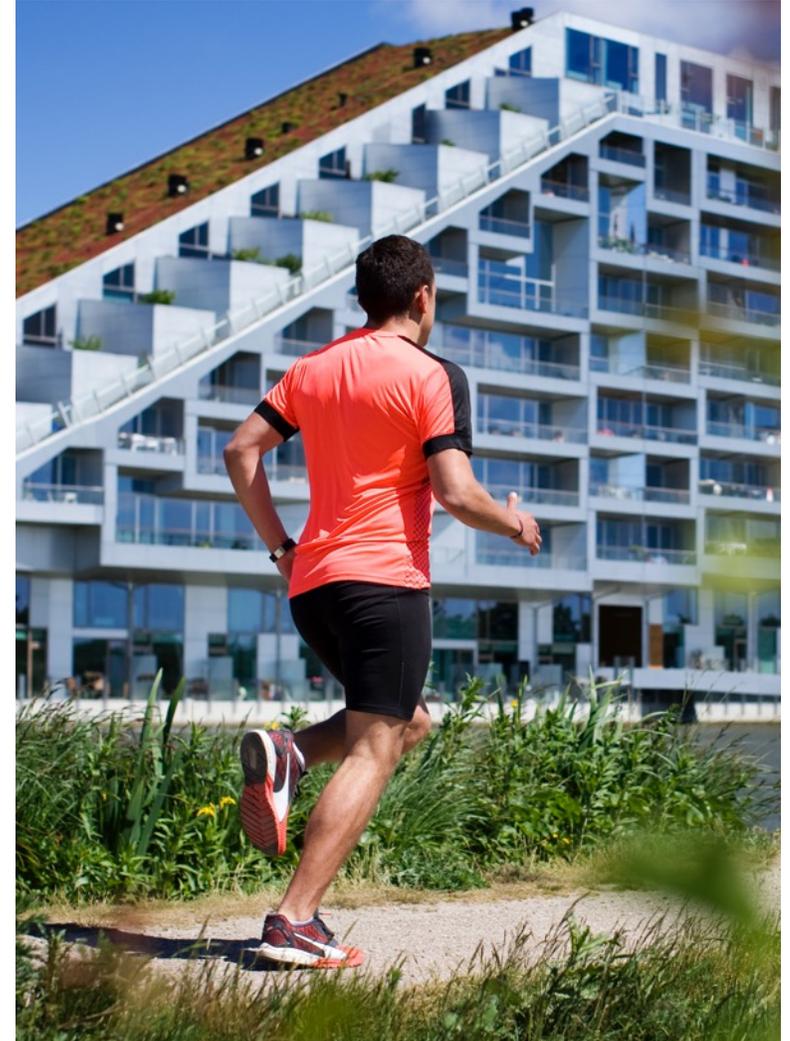
- Digital Phenotyping
- Copenhagen Research Platform (CARP)

CHALLENGES

- (Technical) Challenges in Mobile Sensing (in Mental Health)
- ... and what to do about them

LOOKING AHED

- What is coming
- How do I see the future of mobile sensing in Mental Health?

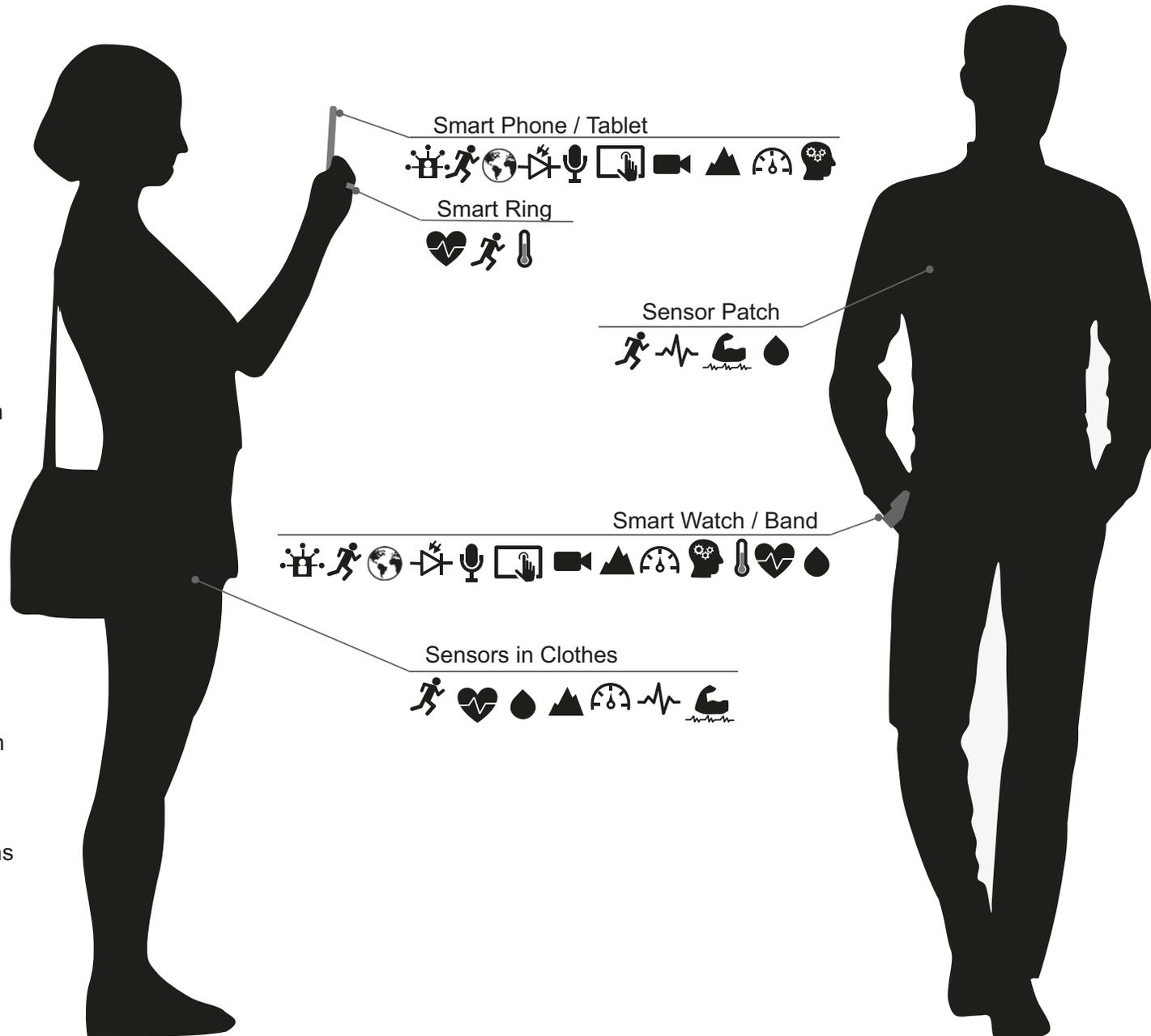


BACKGROUND

Digital Phenotyping & The Copenhagen Research Platform (CARP)



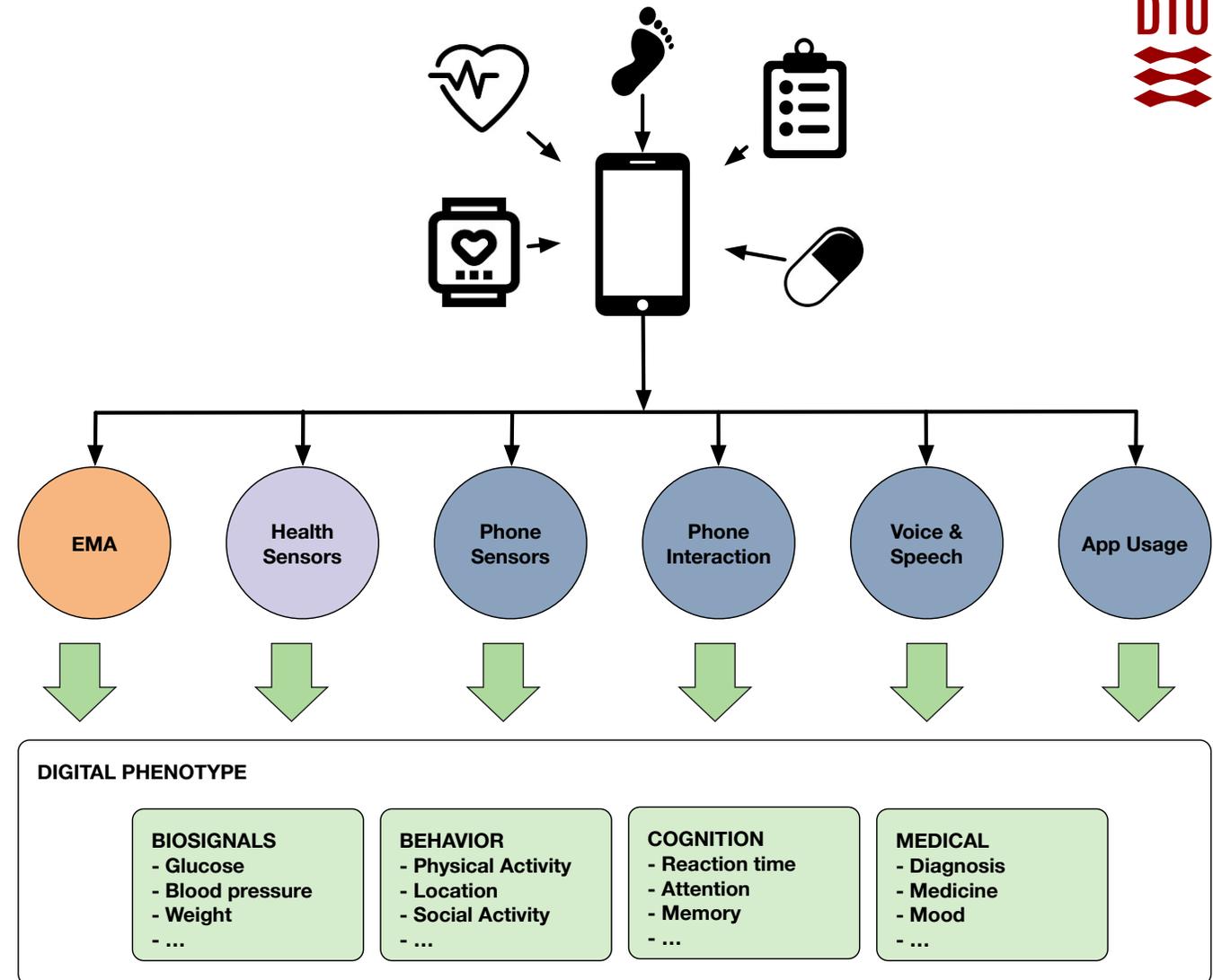
-  Microphone
-  Touch Screen
-  Camera
-  Altimeter
-  Barometer
-  PPG
-  ElectroCardioGraph
-  IMU
-  Geo-Positioning
-  Light Sensor
-  Thermometer
-  ElectroMyoGraph
-  ElectroDermoGraph
-  Logic
-  Wireless Interactions
-  Social Network



Kourtis, L. C., Regele, O. B., Wright, J. M., & Jones, G. B. (2019). Digital biomarkers for Alzheimer's disease: the mobile/wearable devices opportunity. *NPJ digital medicine*, 2(1), 9.

Digital Phenotyping

- **Continuous**
 - 24/7, longitudinal,
- **Ambulatory**
 - “in-the-wild”, at home, ...
- **Unobtrusive**
 - consumer / everyday technology
 - mobile / wearable sensing
- **Large N’s**
 - large-scale deployment
 - “cheap” technology
- **Inference & Insights**
 - behavior, cognition, health, ...
 - based on health data science (AI/ML)

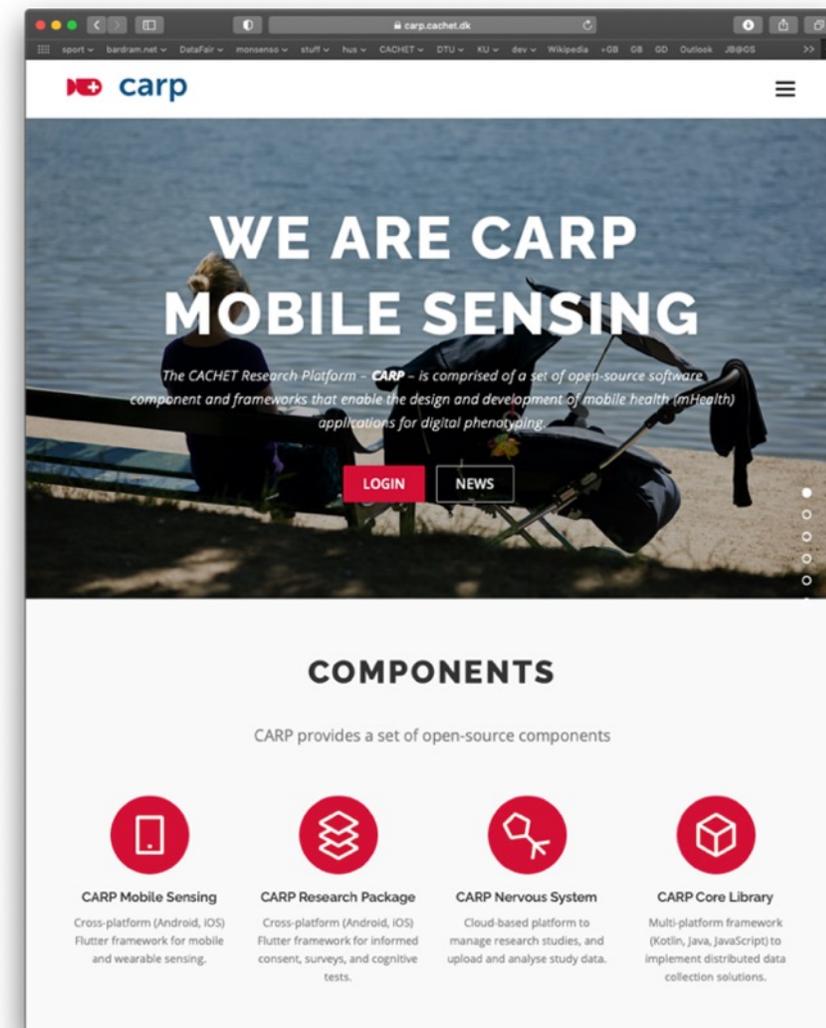


- JP Onnela & SL Rauch (2016). Harnessing Smartphone-Based Digital Phenotyping to Enhance Behavioral and Mental Health. *Neuropsychopharmacology*. 41(7): 1691–1696.
- SH Jain, BW Powers, JB Hawkins & JS Brownstein (2015). The digital phenotype. *Nat Biotech*, 33(5), 462–463.
- TR Insel (2017). Digital phenotyping: Technology for a new science of behavior. *JAMA*, 318(13), 1215–1216.

Copenhagen Research Platform – CARP

Large-scale data science platform for digital phenotyping and personal health technology

- **Open source [programming] framework**
 - multi-project platform used in many mHealth applications
 - developed and shared w industry partners
- **Sharing**
 - multi-study platform
 - analysis of data across multiple studies
- **Privacy & Security**
 - enabling privacy & security as part of platform (GDPR)
 - secure local hosting @ DTU Computerome
- **Standardization**
 - part of open international standards
 - FHIR, IEEE 1752, ORK, ORS, ...



CARP Components



CARP Core

- domain model and standards



CARP Mobile Sensing (CAMS)

- mobile & wearable sensing framework



CARP Research Package

- informed consent & survey framework



CARP Cognition Package

- 14 pre-made cognitive test & API for extending



CARP Web Services (CAWS)

- cloud-based infrastructure for data management

StudyProtocol	Trigger	Task	Measure
UUID owner	int id	String name	DataType type
String nar			
String des			

Type	Android	iOS	Package	Description
accelerometer	+	+	sensors	Accelerometer data from the built-in phone sensor

The screenshot displays the CARP mobile application interface. At the top, there are several mobile status bars. Below them, a privacy consent screen is visible with a lock icon and the text 'The Technical University of Denmark (DTU) is the data responsible and all data will be collected on secure servers, protected by privacy laws'. A 'NEXT' button is at the bottom. The main screen shows the 'icar' logo and an 'Overview' section. The overview includes a 'Status' card (Live, Started 5/11/2020, Stop study button), a 'Participants' card (5 participants, Invite participants button), and a 'Problematic participants' card. Below these are 'Data types' and 'Study data 0' cards with charts. The 'Data types' card shows a circular gauge for '1.305 060 5.4 Mb' with a legend for 'Web App' and 'Phone App'. The 'Study data 0' card shows a line chart comparing 'Web App' and 'Phone App' data over time, with a legend and a table of 'Last incoming Documents' and 'Last incoming Measures'.

Data Collection

Physiological

- weight, height, ...
- ECG, HR, HRV, blood pressure...
- Blood glucose

Behavioral

- physical activity (steps, movement, ...)
- social activity (communication, calendar, messaging, ...)
- phone usage (screen, connectivity, ...)

Contextual

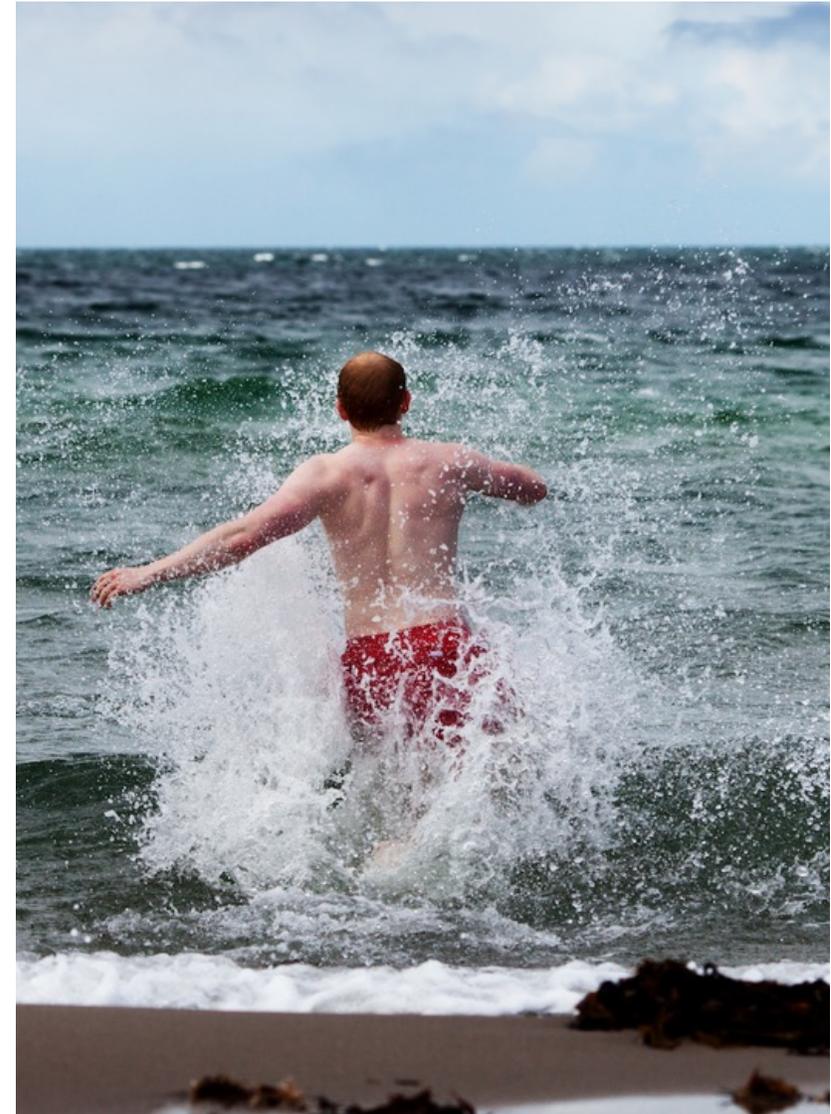
- location (geo-position, geofence, ...)
- weather, air quality

Patient-Reported

- surveys
- ecological momentary assessments (EMA)
- audio & video

Cognition

- 8 Neurocognitive domains
- 14 validated gold-standard cognitive tests



Cross-platform Mobile Sensing

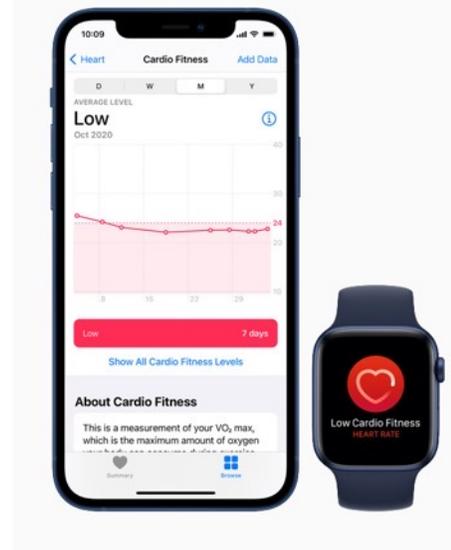
Type	Android	iOS	Package	Description
accelerometer	+	+	sensors	Accelerometer data from the built-in phone sensor
gyroscope	+	+	sensors	Gyroscope data from the built-in phone sensor
pedometer	+	+	sensors	Step counts from the device on-board sensor
light	+	-	sensors	Ambient light from the phone's front light sensor
device	+	+	device	Basic device information
battery	+	+	device	Battery charging status and battery level
screen	+	-	device	Screen event (on/off/unlock)
memory	+	-	device	Free memory
connectivity	+	+	connectivity	Connectivity status
bluetooth	+	+	connectivity	Scanning nearby bluetooth devices
wifi	+	+	connectivity	SSID and BSSID from connected wifi networks
location	+	+	context	Request the location of the phone.
geolocation	+	+	context	Listens to location changes.
activity	+	+	context	Activity as recognized by OS
weather	+	+	context	Current weather and weather forecasting
air_quality	+	+	context	Local air quality from land-based air pollution stations
geofence	+	+	context	Entry/dwell/exit events in circular geofences
audio	+	+	audio	Records audio from the device microphone
noise	+	+	audio	Detects ambient noise from the device microphone.
phone_log	+	-	communication	Log of phone calls in/out
text_message_log	+	-	communication	Log of text messages (sms) in/out
text_message	+	-	communication	Text message (sms) events when received
calendar	+	+	communication	All calendar events from all calendars on the phone
apps	+	-	apps	List of installed apps
app_usage	+	-	apps	App usage over time
survey	+	+	survey	User surveys via the Flutter <code>research_package</code>
movisens	+	-	movisens	ECG-related data from the Movisens EcgMove4 device.
esense	+	+	esense	Sensor and button events from eSense devices.
health	+	+	health	Wearable device data from Apple Health / Google Fit.



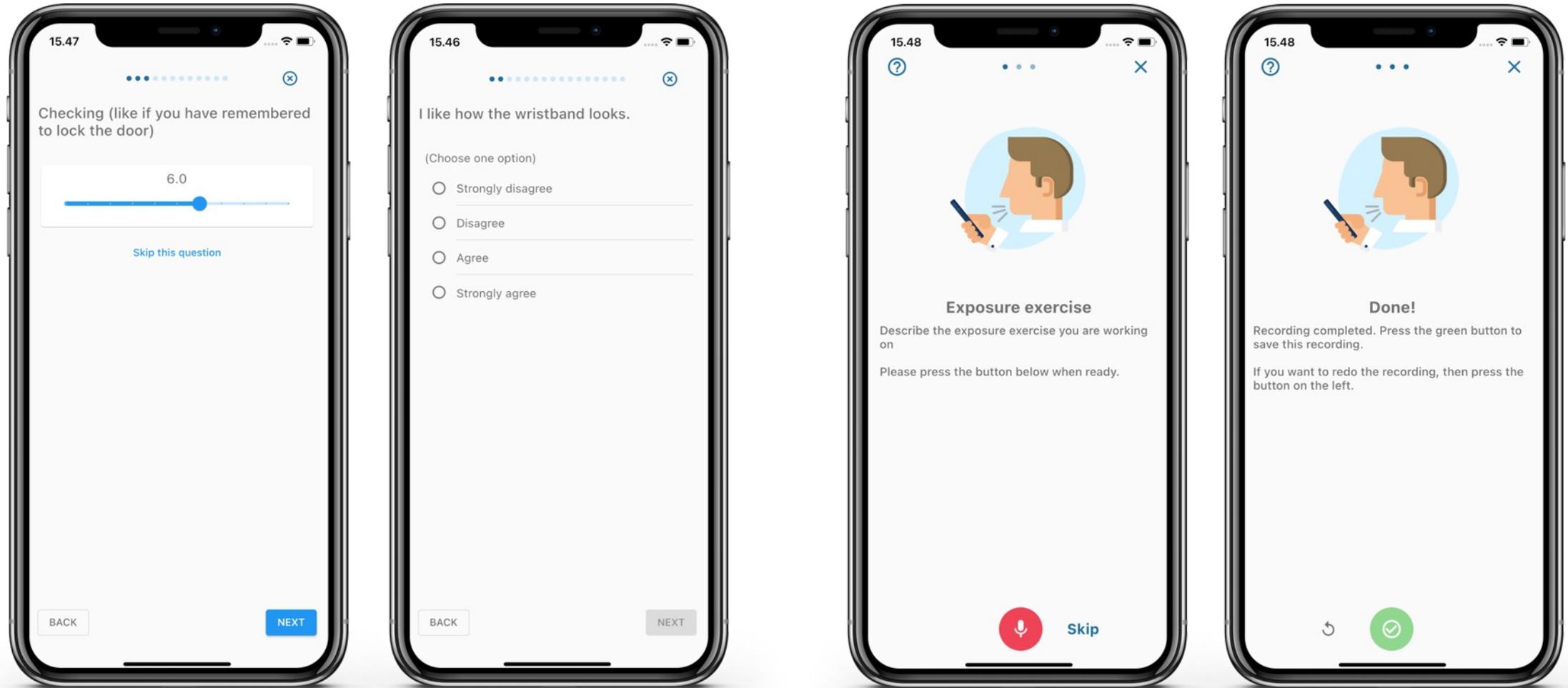
- Bardram, J. E. (2020). The CARP Mobile Sensing Framework--A Cross-platform, Reactive, Programming Framework and Runtime Environment for Digital Phenotyping. *arXiv preprint arXiv:2006.11904*
- Bardram, J. E. (2022). Software Architecture Patterns for Extending Sensing Capabilities and Data Formatting in Mobile Sensing. *Sensors*, 22(7), 2813

Devices

- Movisens Move4 (activity)
- Movisens EcgMove4 (activity, ECG)
- Nokia Bell Labs eSense (noise, activity)
- Polar Sense & H10 (HR/ECG)
- Empatica E4 (HR, GSR, activity)
- Apple Health
- Google Fit / Health Connect
- Dexcom (CGM)
- Garmin (activity, sleep, HR, ...)
- Fitbit (activity, sleep, HR, BP, ECG, weight, ...)
- Withings (activity, sleep, HR, BP, ECG, weight, ...)

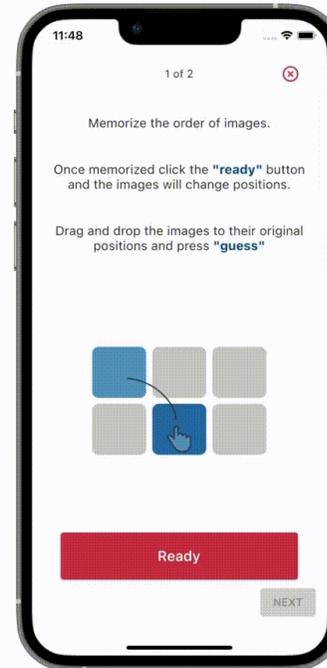


Patient Reported Data (PRO)

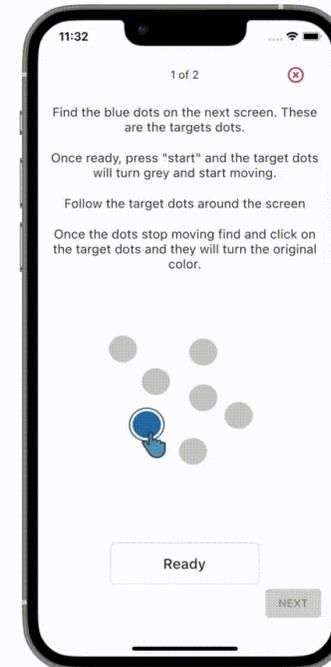


Cognition

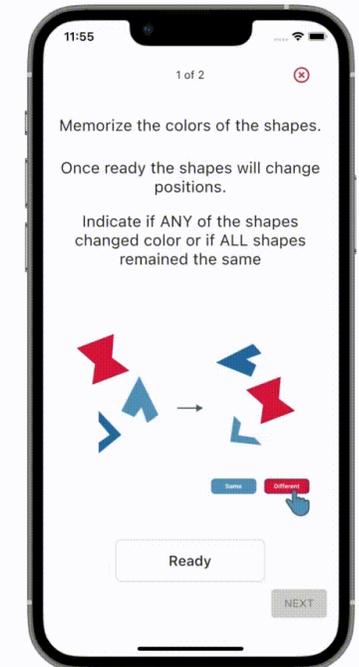
- 14 validated gold-standard cognitive tests
- 8 Neurocognitive domains
 - Sensation
 - Perception
 - Motor skills and construction
 - Attention and concentration
 - Memory
 - Executive functioning
 - Processing speed
 - Language and verbal skills



Picture Sequence
Memory



Multiple Object
Tracking

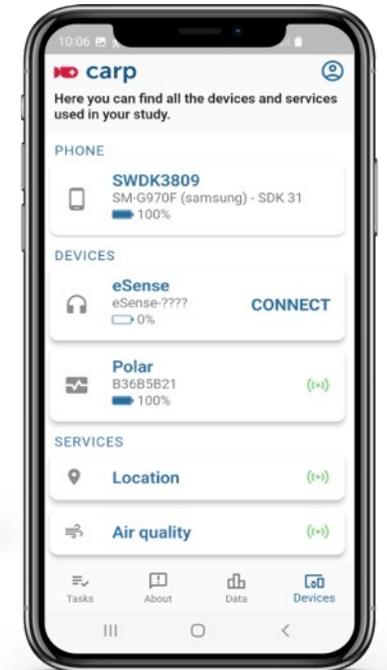
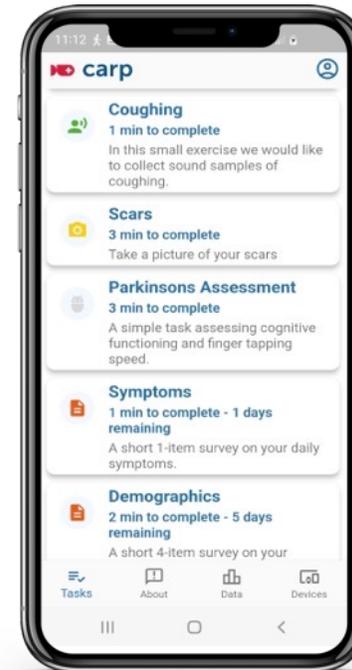


Visual Array
Change

“CARP Studies” App (standard, out-of-the box)



- Triggering of **user tasks**
 - surveys, cognitive tests, EMAs
 - notifications
- **Sensor** data collection
 - on-board mobile sensing
 - wearable devices
- Informed Consent (**eConsent**)
- On-going study **information**
- **Internationalization** (DA, EN, ES, FR, ...)
- **Cross-platform** (Android & iOS)
- Infrastructure-independent (**upload** data to any backend server)



CHALLENGES

(Technical) Challenges in Mobile Sensing (in Mental Health)



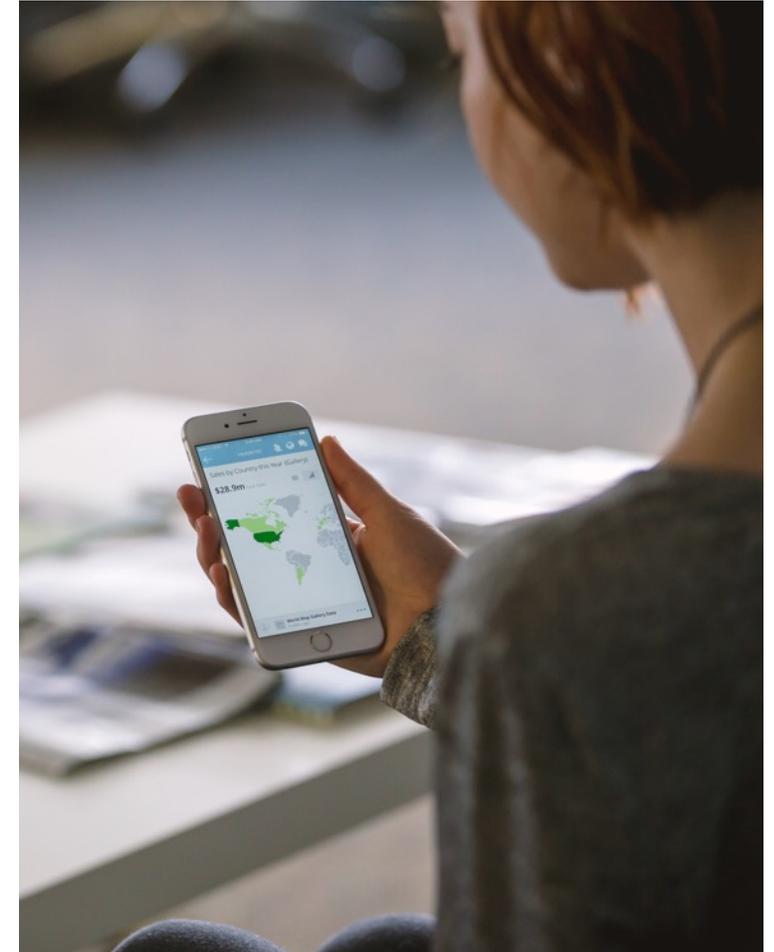
(Technical) Challenges in Mobile Sensing

#1 The **Fallacy** that Smartphones are Ubiquitously Available

#2 Accessing **Sensors**

#3 (Background) **Sensing**

#4 **Adherence** to Sensing



#1 – The “Ubiquitous” Computing Platform

Smartphones as Mobile Healthcare Sensors

F Gravenhorst, A Muaremi, JE Bardram, ... (2015) “Mobile phones as medical devices in mental disorder treatment: An overview,” *Personal and Ubiquitous Computing*. 19 (2)53.

From a common networked devices like the smartphone (e.g., GPS, keyboard touches, phone use, and communication patterns) and wearables can provide a continuous stream of the data about an individual’s behaviors, psychological states, and environments, forming a picture of their lived experience¹. This sensing

DC Mohr, K Shilton & M Hotopf (2020). “Digital phenotyping, behavioral sensing, or personal sensing: names and transparency in the digital age”. *NPJ digital medicine*, 3(1), 45.

With the global trend toward increased smartphone ownership (44.9% worldwide, 83.3% in the UK) and wearable device usage forecast to reach one billion by 2022⁸, this new science of “remote sensing”, sometimes referred to as digital phenotyping or personal sensing⁹ presents a realistic avenue for the management and treatment of depression. When combined with the completion of questionnaires, remote sensing may generate more objective and

V De Angel, ... & M Hotopf. (2022). Digital health tools for the passive monitoring of depression: a systematic review of methods. *NPJ digital medicine*, 5(1), 3.

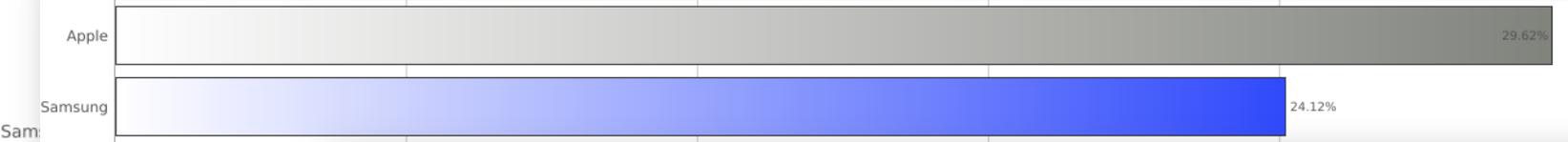
Due to increasing ubiquity and cost-effectiveness, smartphones and wearable devices, compared to medical devices, allow researchers to monitor personalized daily behaviors and physiology over time for large and diverse populations^{5–7}. Combined with scalable data collection platforms, these technologies provide high-fidelity multimodal behavior sensing capabilities⁸.

Y Zhang, ... & RADAR-CNS consortium. (2023). “Long-term participant retention and engagement patterns in an app and wearable-based multinational remote digital depression study”. *NPJ digital medicine*, 6(1), 25.

Table 2. mHealth Sensing Frameworks and Their Functional Features

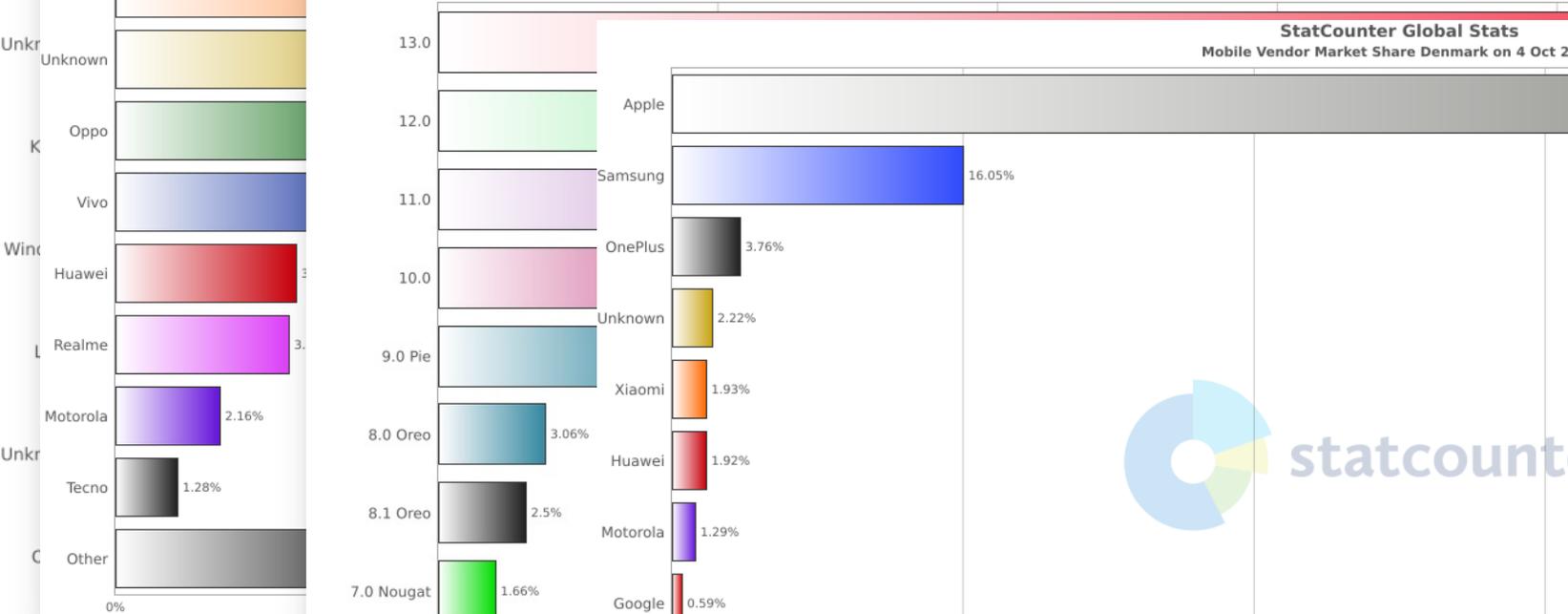
Android			Sensing and Storage	Data Processing, Analytics & Visualization	Study Management
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StatCounter Global Stats
Mobile Vendor Market Share Worldwide on 4 Oct 2023

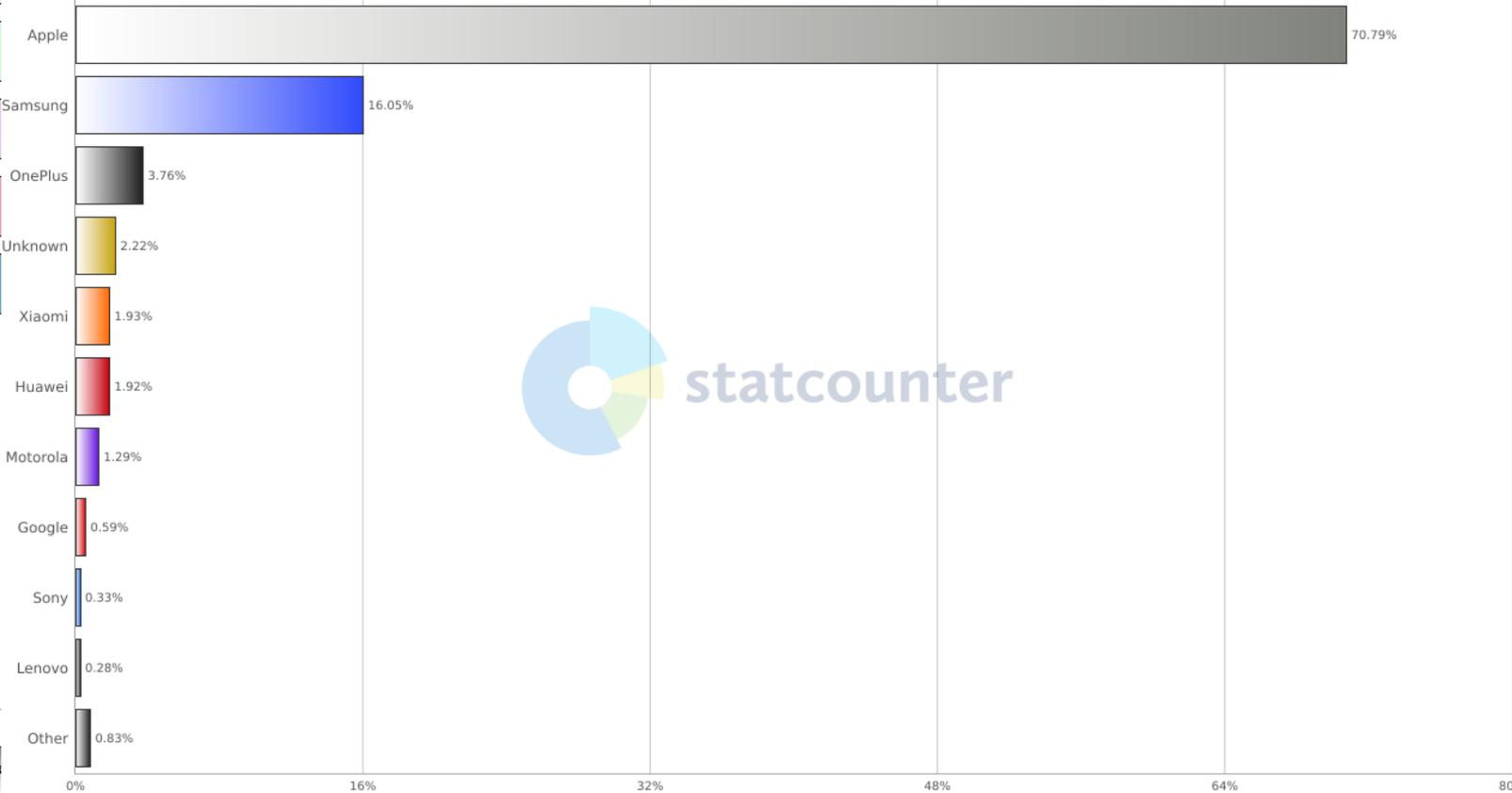


Study Setup & Monitoring	✓
	✓
	✓

StatCounter Global Stats
Mobile & Tablet Android Version Market Share Worldwide on 4 Oct 2023



StatCounter Global Stats
Mobile Vendor Market Share Denmark on 4 Oct 2023



Funf
Open mH
Passive I
Kit
Purple R
Research
Research
The fra
Windows); Target stakeholders (D = Deve

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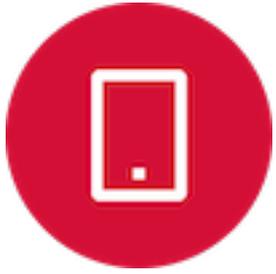
Cross-Platform Sensing

- There is a fundamental need for cross-platform support across
 - hardware | OS | versions | countries

ID	Sex	Age	YwD	Days	Phone	Interview
P1	F	71	27	125	iOS	✓
P2	M	48	15	58	iOS	✓
P3	M	67	10	41	iOS	✓
P4	F	65	16	108	iOS	✓
P5	M	71	25	104	iOS	✓
P6	M	73	N/A	7	iOS	–
P7	F	44	1	14	Android	✓
P8	M	71	20	88	iOS	✓
P9	M	64	N/A	3	iOS	–
P10	M	69	12	110	iOS	✓
P11	F	67	8	38	iOS	✓
P12	M	71	6	124	iOS	✓
Overall	4/8 (F/M)	65 ± 9.3	14 ± 8.3	68 ± 46	11/1 (i/A)	10/12 (83%)

Table 2. Participants demographics. YwD: Years with T2D. Days: Days active in the study.

JE Bardram, C Cramer-Petersen, A Maxhuni, ... (2023). "DiaFocus: A Personal Health Technology for Adaptive Assessment in Long-Term Management of Type 2 Diabetes". *ACM Transactions on Computing for Healthcare*, 3(2).



CARP Mobile Sensing

The CARP Mobile Sensing (CAMS) **Flutter package** is a **programming framework** for adding **digital phenotyping** capabilities to your mobile (health) **app**.

CAMS is designed to collect research-quality **sensor data** from the smartphone **on-board** sensors and attached **off-board** wearable devices.

carp_mobile_sensing 1.3.2

Published 3 days ago · @ cachet.dk (Dart 3 compatible)

PLATFORM | ANDROID | IOS

19 LIKES | 140 PUB POINTS | 72% POPULARITY

Readme | Changelog | Example | Installing | Versions | Scores

CARP Mobile Sensing Framework in Flutter

pub v1.3.2 | pub points 140/140 | stars 71 | license MIT | arkiv 2006.11904

This library contains the core Flutter package for the [CARP Mobile Sensing \(CAMS\)](#) framework. Supports cross-platform (iOS and Android) mobile sensing.

For an overview of all CAMS packages, see [CARP Mobile Sensing in Flutter](#). For documentation on how to use CAMS, see the [CAMS wiki](#).

Usage

To use this plugin, add `carp_mobile_sensing` as dependencies in your `pubspec.yaml` file.

```
dependencies:
  flutter:
    sdk: flutter
  carp_core: ^latest
  carp_mobile_sensing: ^latest
```

Repository (GitHub) | View/report issues

Documentation | API reference

License



Cross-platform framework

Android & iOS (web, Windows, ...)

UI framework (write once!)

compiles natively (fast!)

OS-level plugins (hackable!)

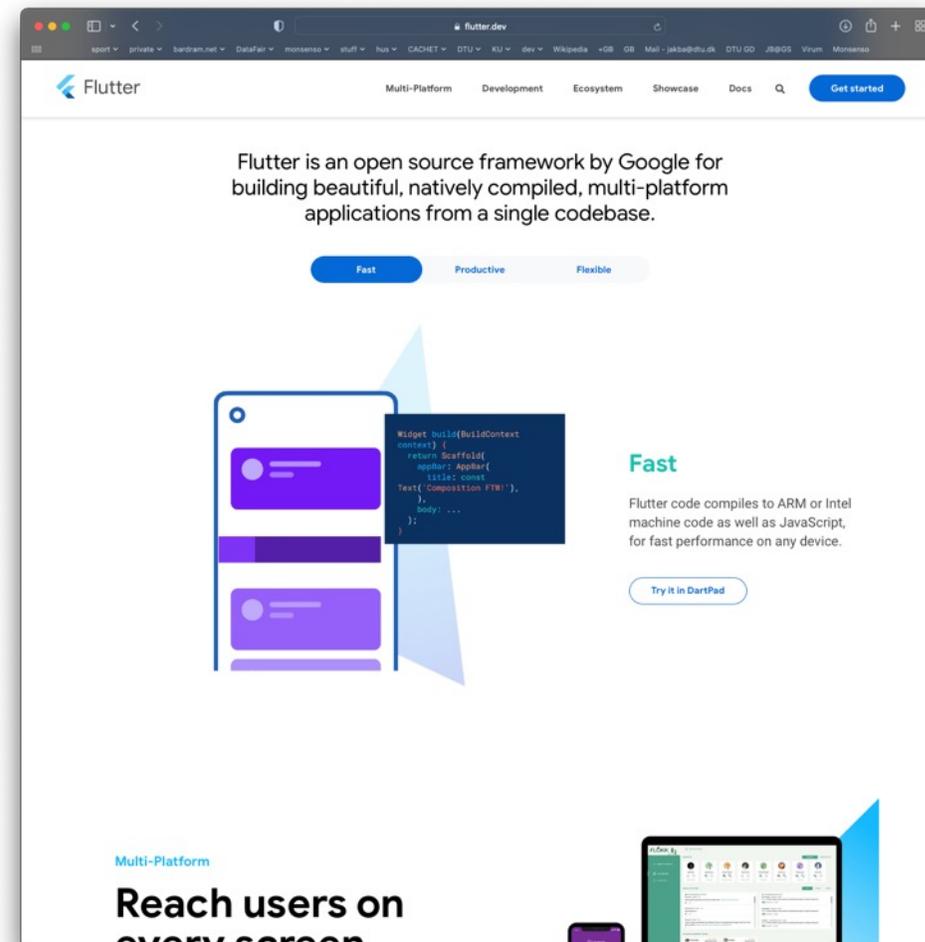
Dart programming language

modern, reactive, ... (like Swift)

Significant traction

Large number of 3rd party packages and plugins

`pub.dev`



Plugin Arc

- Allow for access to
 - ... across different platforms
 - access to native APIs

CACHET Flutter plugins

This repo contains the source code for Flutter first-party plugins developed by developers at the [Copenhagen Center for Health Technology \(CACHET\)](#) at The Technical University of Denmark. Check the `packages` directory for all plugins.

Flutter plugins enable access to platform-specific APIs using a platform channel. For more information about plugins, and how to use them, see <https://flutter.io/platform-plugins/>.

Plugins

These are the available plugins in this repository.

Plugin	Description	Android	iOS	http://pub.dev/
screen_state	Track screen state changes	✓	✗	pub v3.0.1
light	Track light sensor readings	✓	✗	pub v3.0.1
pedometer	Track step count	✓	✓	pub v4.0.1
noise_meter	Read noise level in Decibel			
app_usage	Track usage of all applications or phone.			
weather	Get current weather, as well as forecasting using the OpenWeatherMap API.			
air_quality	Get the air quality index using the WAQI API.			
notifications	Track device notifications.			
movisens_flutter	Movisens sensor communication			
esense_flutter	eSense ear sensor plugin.			
health	Apple HealthKit and Google Fit interface plugin.			
activity_recognition	Activity Recognition			
audio_streamer	Stream audio as PCM from mic			
mobility_features	Compute daily mobility features from location data			
carp_background_location	Track location, even when app is in the background	✓	✓	pub v4.0.0
flutter_foreground_service	Foreground service for Android	✓	✗	pub v0.4.1

No releases published

Packages

No packages published

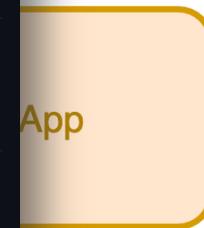
Used by 65

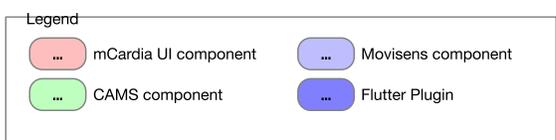
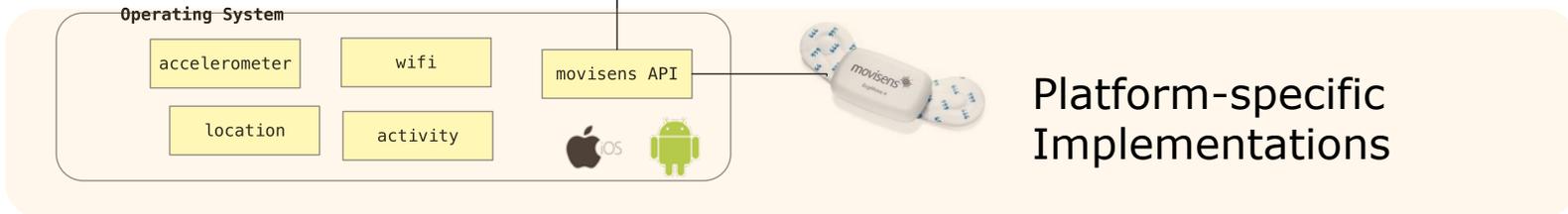
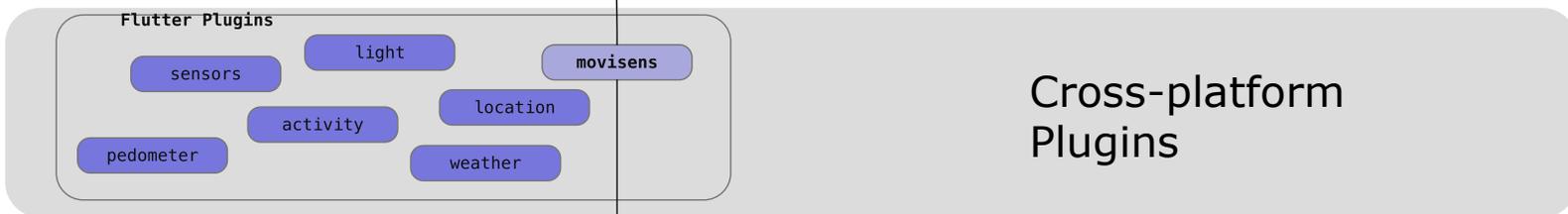
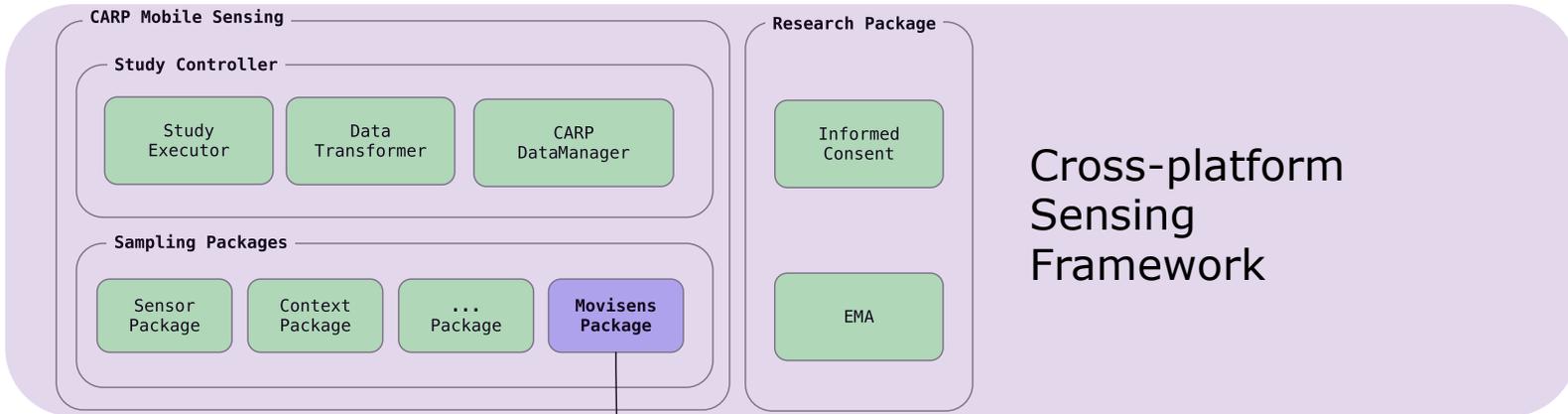
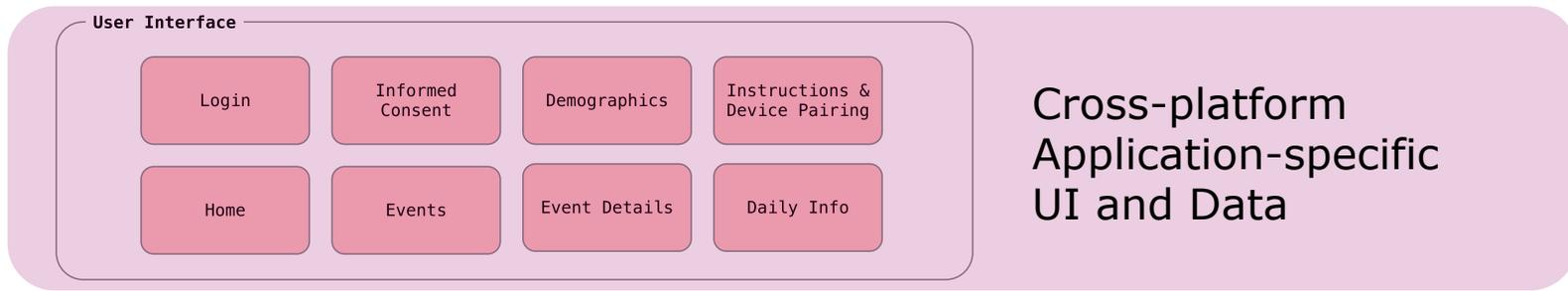
Contributors 55

+ 44 contributors

Languages

Dart 52.7%	Kotlin 18.5%
Java 13.6%	Swift 10.3%
Ruby 4.0%	Objective-C 0.8%
Shell 0.1%	





D Kumar, R Maharjan, A Maxhuni, H Dominguez, A Frølich & JE Bardram (2022). mCardia: A Context-Aware ECG Collection System for Ambulatory Arrhythmia Screening. *ACM Transactions on Computing for Healthcare*, 3(2), 1-28.

#2 – A

Common network, keyboard touch, wearables can individual's behavior forming a picture technology can patterns, activity conditions². The potential to improve individuals and treatments. Beginning to become more engaging standard psychological stand-alone of populations of and interventions innovations have beginning their dissemination

CACHET Flutter plugins [↗](#)

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pedometer	Track step count	✓	✓	pub v4.0.1
noise_meter	Read noise level in Decibel	✓	✓	pub v5.0.2
app_usage	Track usage of all applications on phone	✓	✓	pub v1.0.0
weather	Get weather for a location	✓	✓	pub v1.0.0
air_quality	Get air quality for a location	✓	✓	pub v1.0.0
notifications	Track notifications	✓	✓	pub v1.0.0
movisens_flutter	MoSens API	✓	✓	pub v1.0.0
esense_flutter	eSense API	✓	✓	pub v1.0.0
health	Apple HealthKit interface plugin.	✓	✓	pub v1.0.0
activity_recognition	Activity Recognition	✓	✓	pub v5.0.0
audio_streamer	Stream audio as PCM from mic	✓	✓	pub v4.0.0
mobility_features	Compute daily mobility features from location data	✓	✓	pub v4.0.1
carp_background_location	Track location, even when app is in the background	✓	✓	pub v4.0.0
flutter_foreground_service	Foreground service for Android	✓	✗	pub v0.4.1

Location updates in Android

To further protect user privacy, Android 11 adds one-time location updates. Users grant background location access. These updates are more precise and higher.

No releases published

12:18

Allow Location updates for this app

Precise

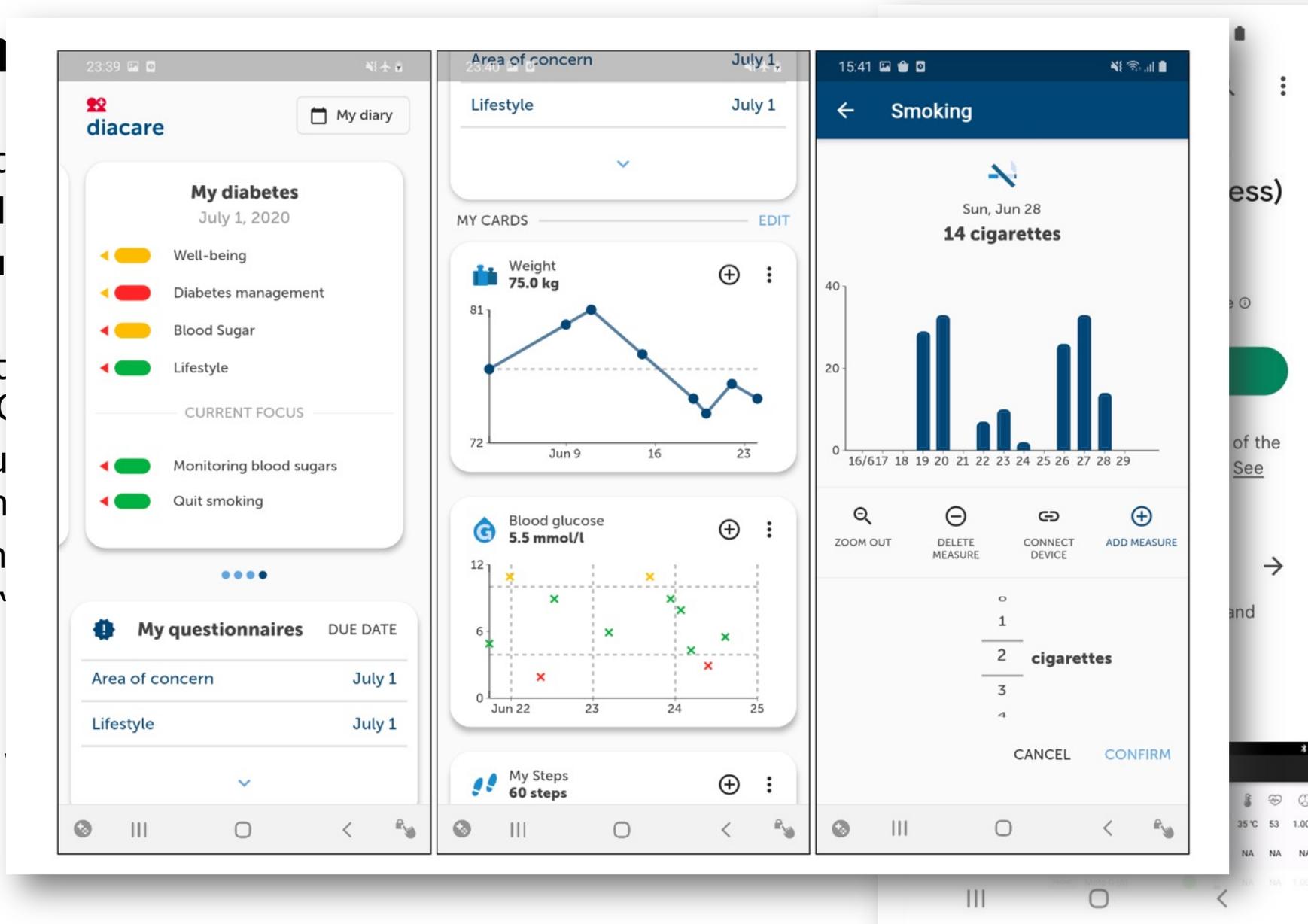
```

/// Returns a list of all possible [PermissionGroup] values.
static const List<Permission> values = <Permission>[
  calendar,
  camera,
  contacts,
  location,
  locationAlways,
  locationWhenInUse,
  mediaLibrary,
  microphone,
  phone,
  photos,
  photosAddOnly,
  reminders,
  sensors,
  sms,
  speech,
  storage,
  ignoreBatteryOptimizations,
  notification,
  accessMediaLocation,
  activityRecognition,
  unknown,
  bluetooth,
  manageExternalStorage,
  systemAlertWindow,
  requestInstallPackages,
  appTrackingTransparency,
  criticalAlerts,
  accessNotificationPolicy,
  bluetoothScan,
  bluetoothAdvertise,
  bluetoothConnect,
  nearbyWifiDevices,
  videos,
  audio,
  scheduleExactAlarm,
  sensorsAlways,
];

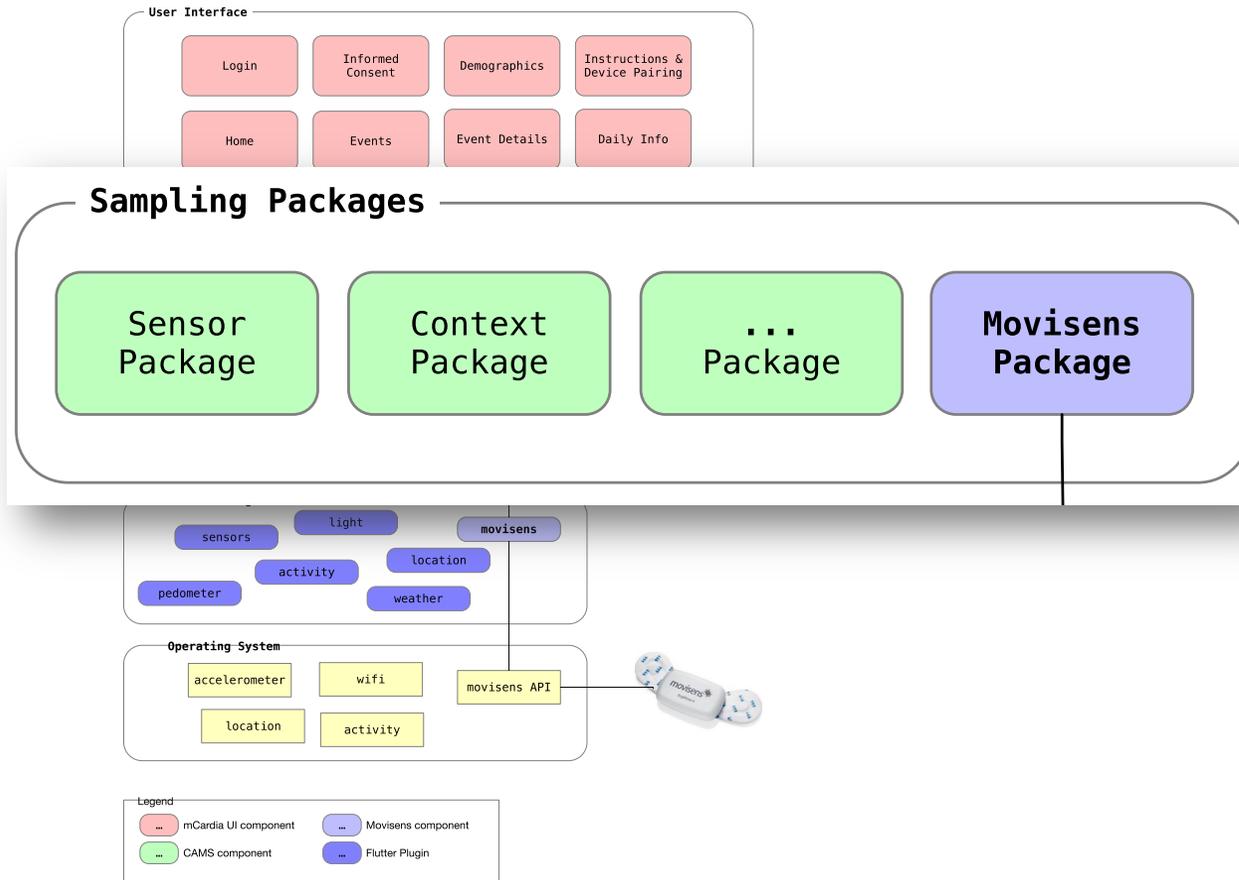
```

Handlin

- ... is a night
 - for the d
 - for the u
- ... and most
 - AppStore / (
 - numerou
 - publishin
 - mental h
 - generic “
- Not allowed
 - location
 - children



Sampling Package Architecture



- A sampling package is responsible for
 - implementing **access to sensors**
 - handling **permissions**
- **Unified architecture** for
 - on-board sensors (e.g., location)
 - wearable sensors (e.g., ECG)
- **Modulization**
 - only include “sensors” that are relevant to your domain
 - which you can get approved

JE Bardram (2022). Software architecture patterns for extending sensing capabilities and data formatting in mobile sensing. *Sensors*, 22(7), 2813.

#3 – Background Sensing?

- The core assumption in mobile sensing is that this runs “**continuously**”
 - 24/7
 - in the “Background”, i.e., when the user doesn’t use the app or the phone
- ... “**unobtrusively**”
 - doesn’t disturb the user or require him/her to “do” anything
 - with minimal resource drain
 - battery | network | data plan (money)
- ... “**collecting**” data
 - from on-board sensors and the OS
 - from connected devices (BLE)

Don't kill my app!



Our mission API Press

Developer

News

Discover

Design

Develop

Distribute

Support

Account



Developer Forums

Search by keywords or tags

Post

#1 Samsung especially af

Can iOS kill an application in background in battery saving mode



Hello there,

I developed an iOS application that is connected to a BLE device.

2.4k

My application has the background mode activated because I need to listen to ble events. Sometimes I put my app in background for a few hours and the app disappear from the apps in background.



Yes.

iOS will kill off backgrounded apps, based on various factors (which are hard to predict). You could expect this to happen more aggressively in low power mode.

Posted 1 year ago by [robnotty](#)

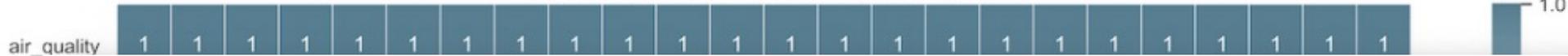
Over the past years, it has been painfully difficult to support Chinese OEM devices (Huawei, Xiaomi, etc.). These OEMs are modifying Android in ways that break core functionality. The default behavior of these devices is to forbid newly installed apps to send/receive broadcasts, acquire wakelocks, start services, set alarms, etc. in certain conditions (e.g. screen off), unless the user explicitly whitelists the app.

The problem with this approach is that users are not very savvy and unaware of this. The blame is therefore directed to developers. We explicitly need to detect the manufacturer, and guide the user to whitelist their app. Maintaining this for all manufacturers is a nightmare.

Additionally, these OEMs preload (and remotely configure) a whitelist of packages that are allowed to freely perform said actions. How is this fair to the rest of us?

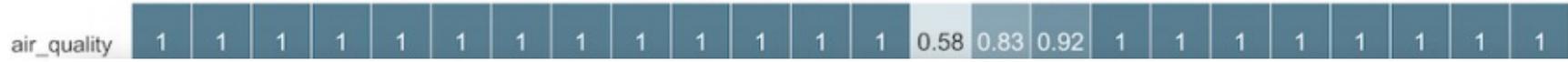
Honestly, how is Google certifying these devices when the core functionality does not work out of the box?

Android SM-A320FL - API 26



1.0

Android SM-G970F - API 29



1.0

iPhone 11 Pro, OS 13.7



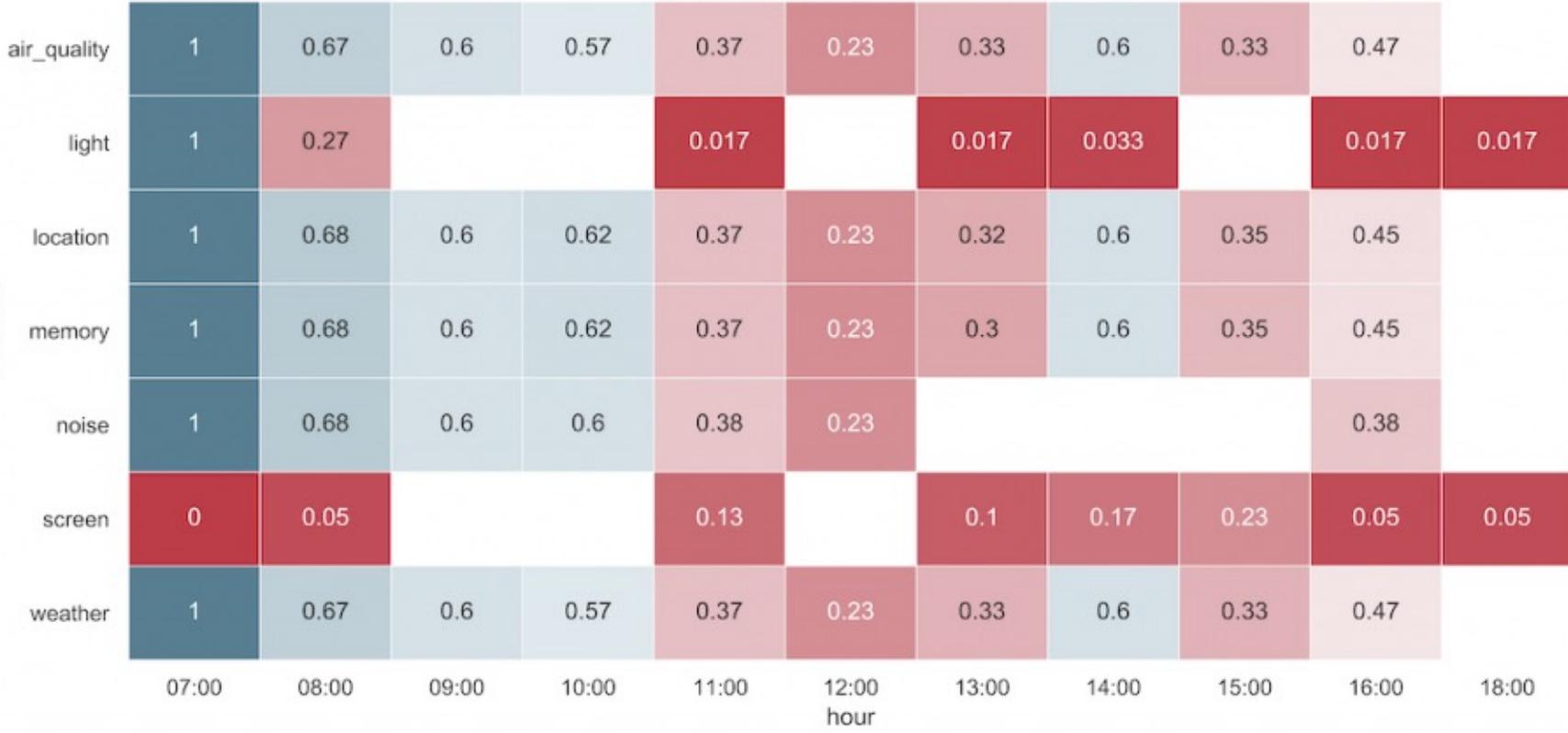
1.0

Android API 30 - part 1



1.0

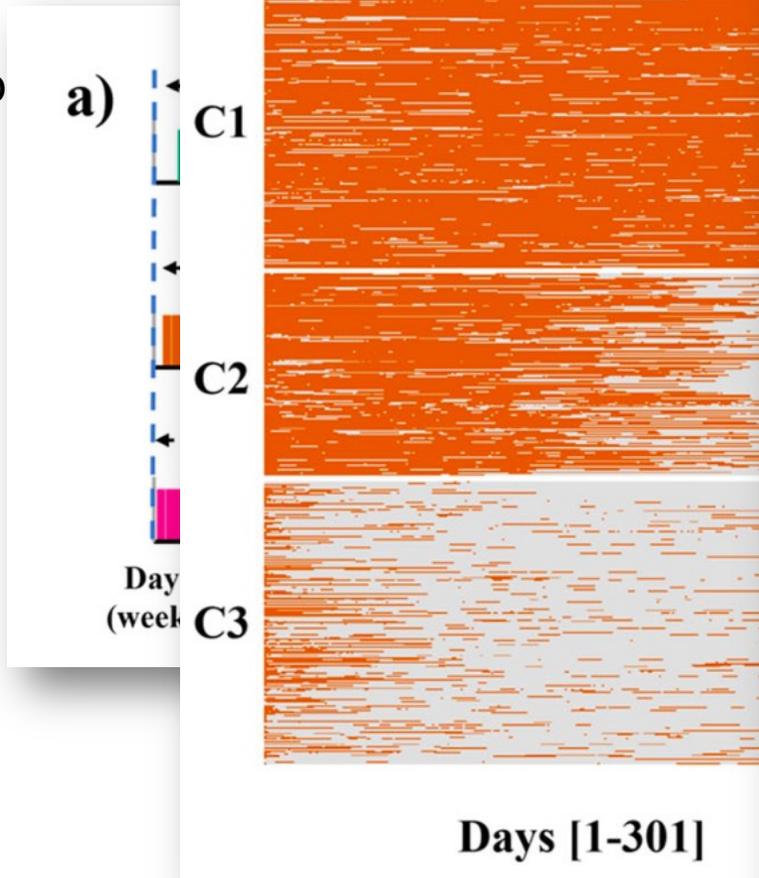
Android API 30 - part 2



Sampling

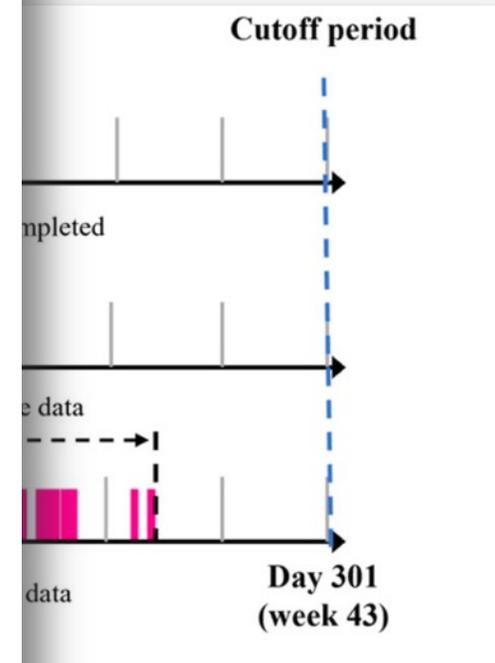
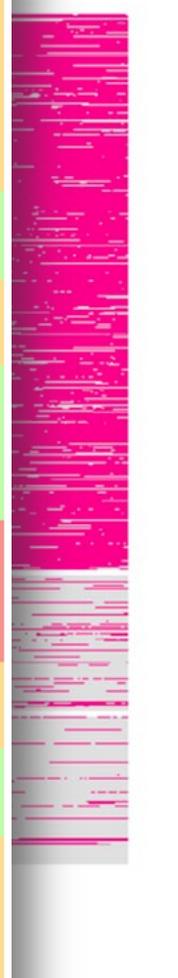
- “Engagement”

- To

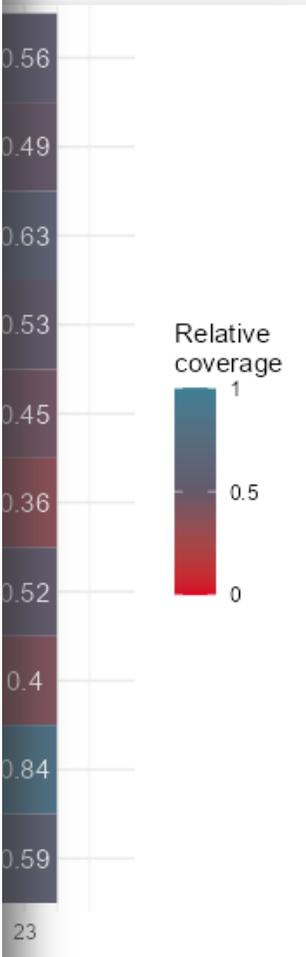
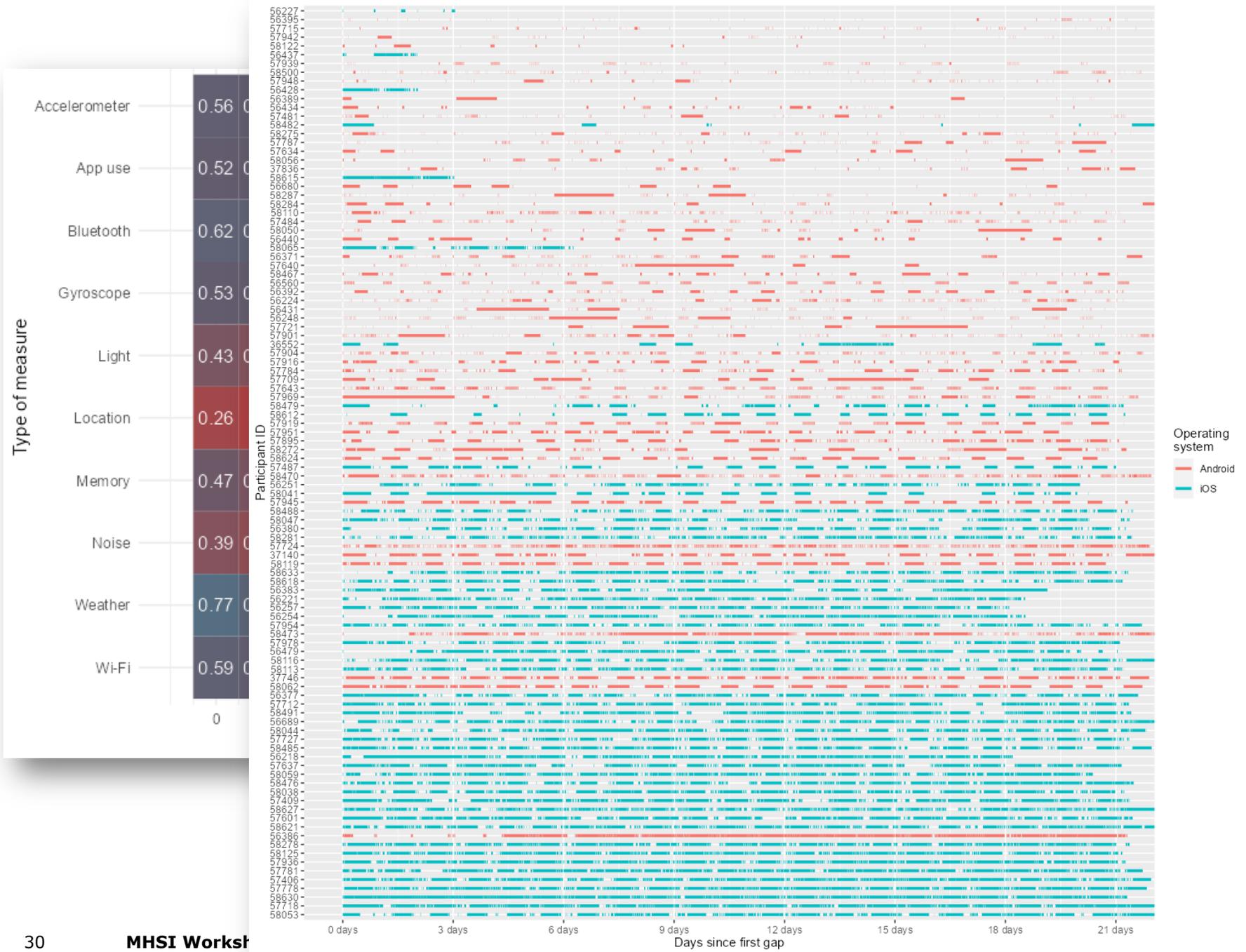


Sensors per phone type

	Android	iOS
Acceleration	yes	foreground only
Gyroscope	yes	foreground only
Magnetic field	yes	foreground only
Light sensor	yes	foreground only
Battery level	yes	foreground only
Significant location changes	yes	yes
Regular location changes	yes	foreground only
Steps	yes	read historical steps from HealthKit when in foreground
App usage	yes	no
Call/SMS logs	for self-published apps only	no
Scan bluetooth devices	yes	foreground only
Connect to known peripheral	yes	yes
Timezone	yes	foreground only
External time synchronization	yes	foreground only
Weather	yes	foreground only
Data sending	always	when activated only



Y Zhang, ... & RADAR-CNS consortium. (2023). “Long-term participant retention and engagement patterns in an app and wearable-based multinational remote digital depression study”. *NPJ digital medicine*, 6(1), 25.



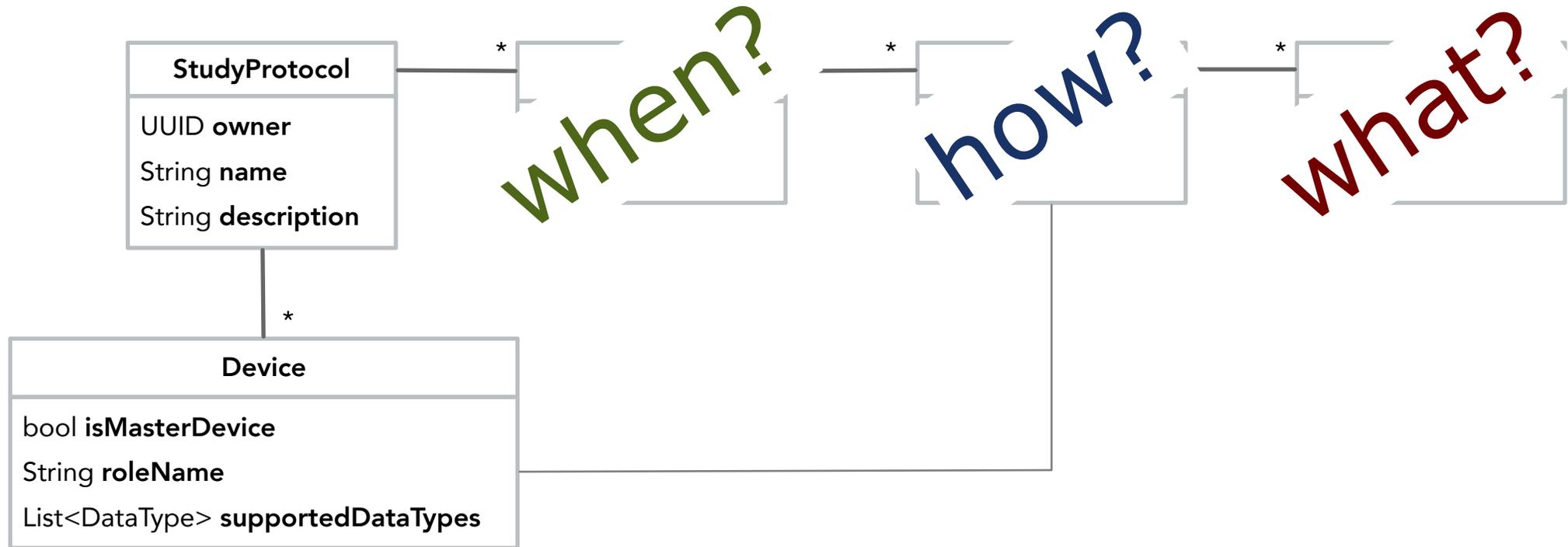
Operating system
 — Android
 — iOS

Relative coverage
 1
 0.5
 0

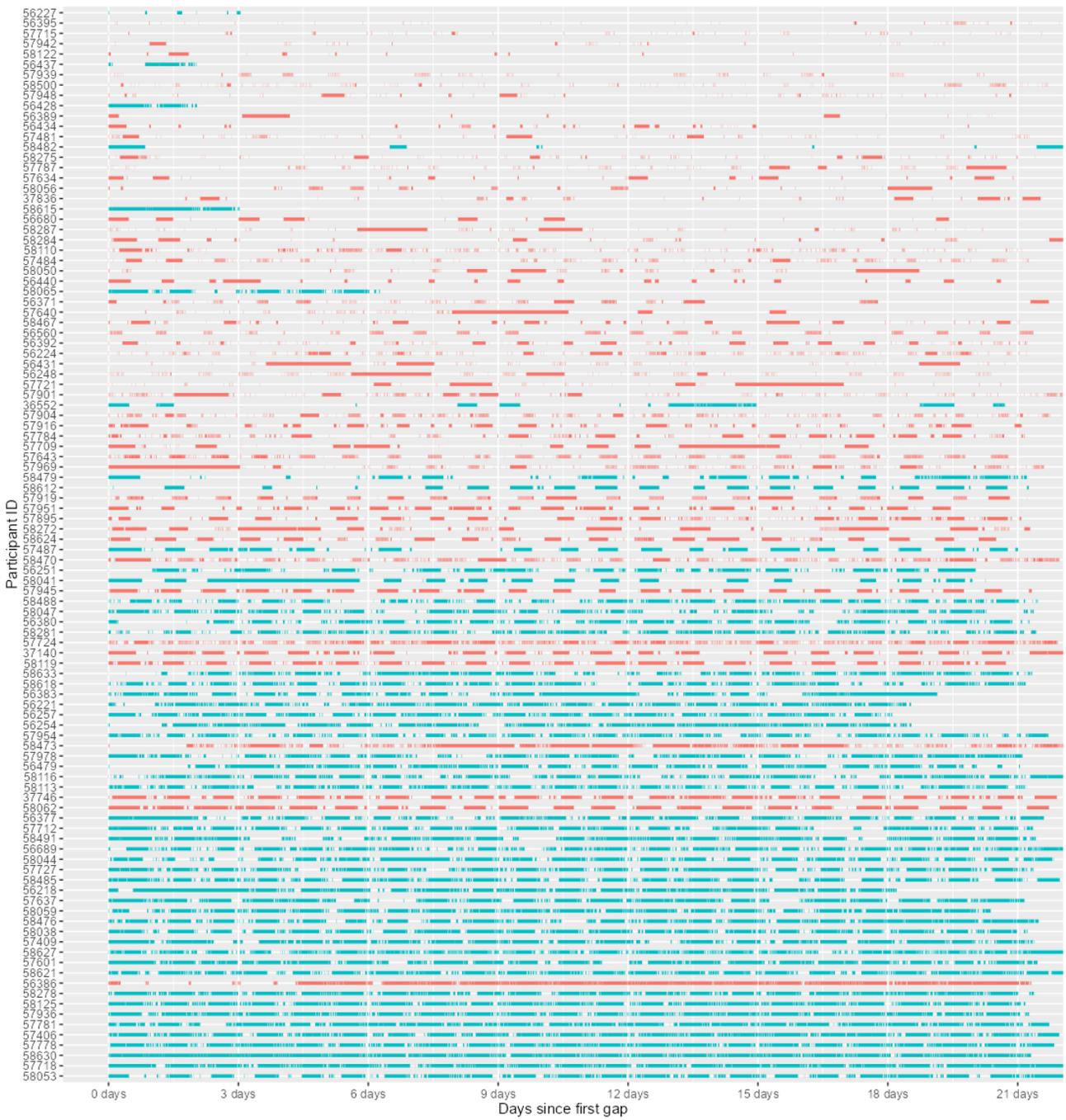
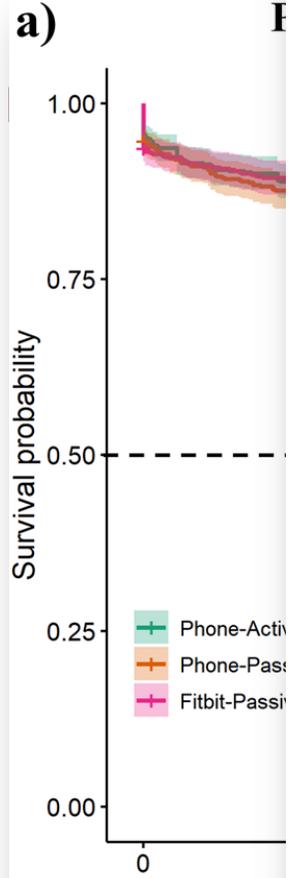
Sampling Coverage

- “Engagement” | “Compliance” | “Adherence”
- To what degree do we collect the data we expect?
- This requires us to **standardize** what we mean by
 - collect
 - data
 - expectation

CARP Study Protocol



#4 - "A"



Operating system

- Android
- iOS



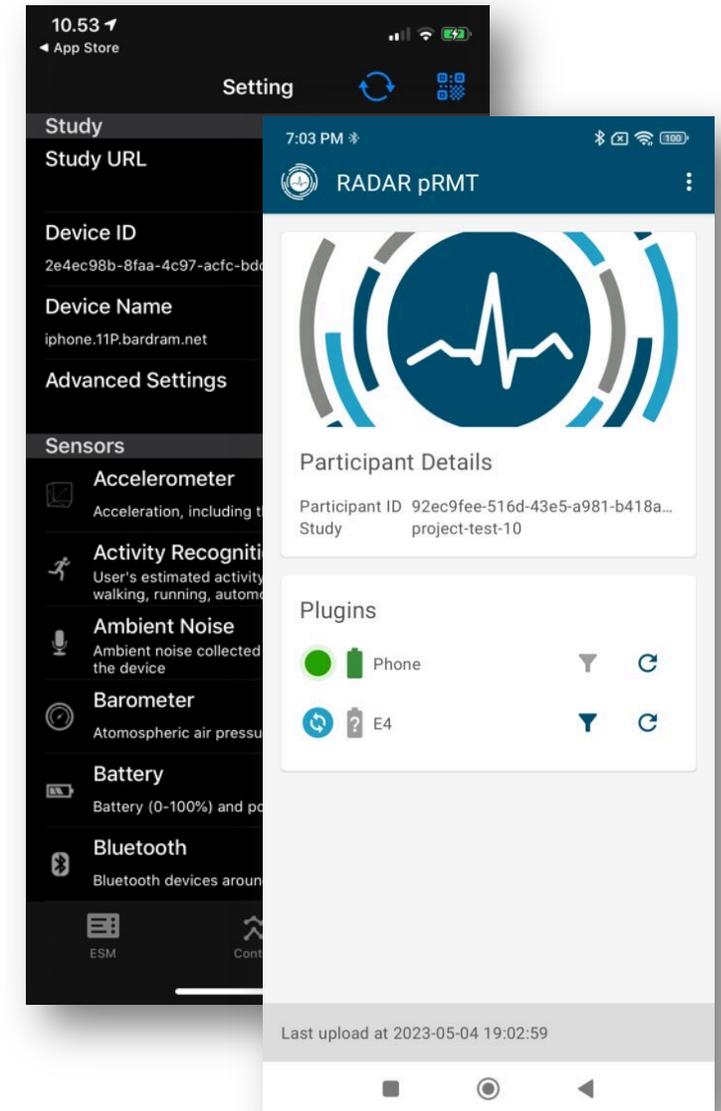
ive sensing

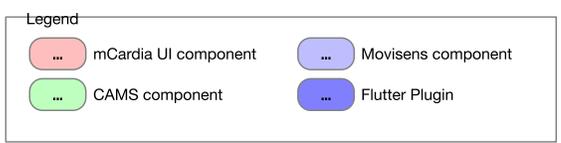
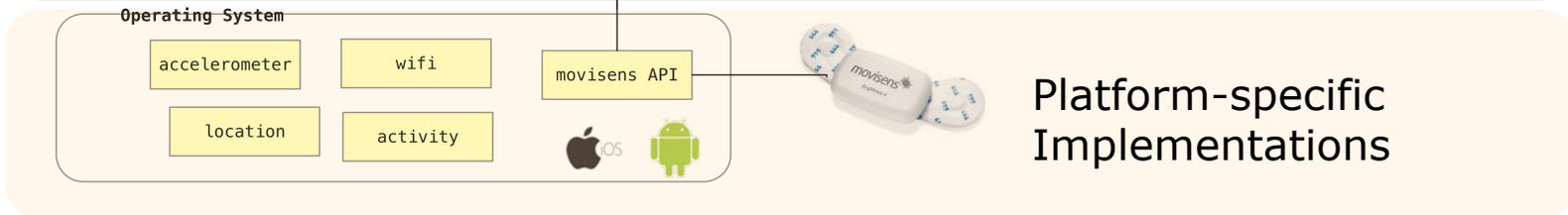
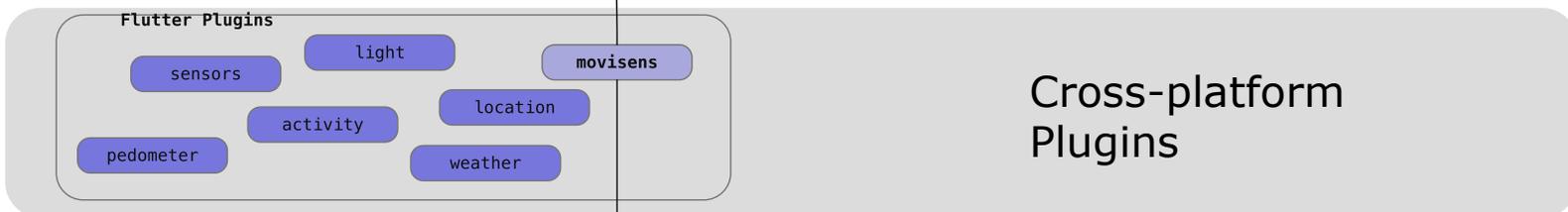
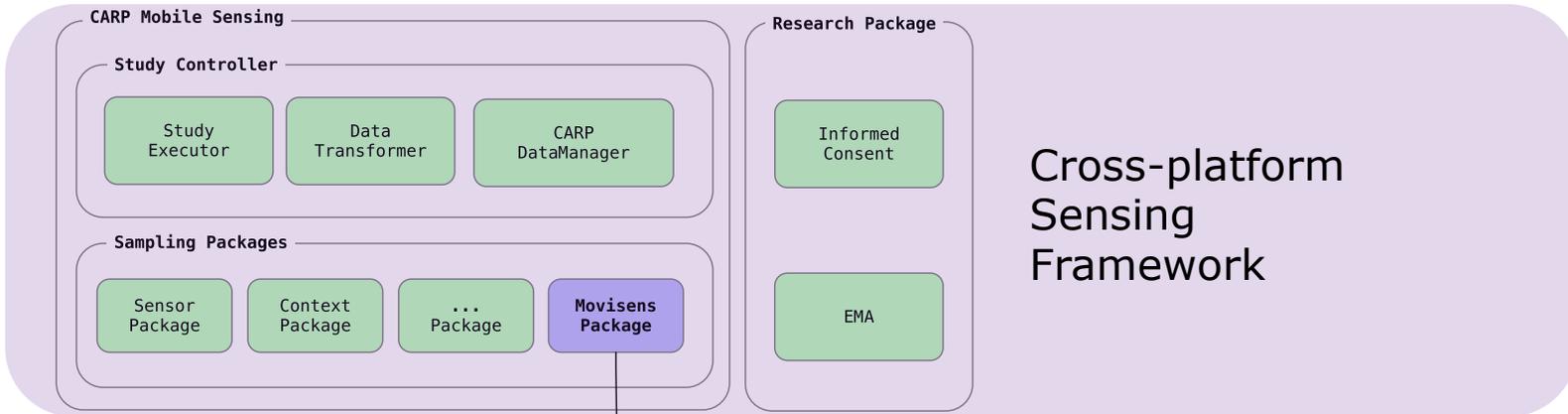
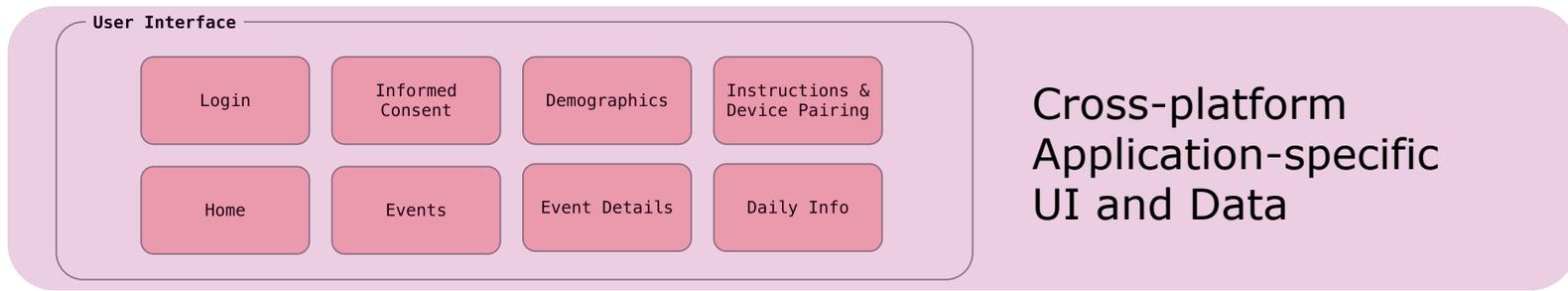
Y Zhang, ... & RADAR-CNS consortium. (2023). "Long-term participant retention and engagement patterns in an app and wearable-based multinational remote digital depression study". *NPJ digital medicine*, 6(1), 25.

K Niemeijer, ... (2023). "Combining Experience Sampling and Mobile Sensing for Digital Phenotyping With m-Path Sense: Performance Study". *JMIR FORMATIVE RESEARCH*, 7(e43296).

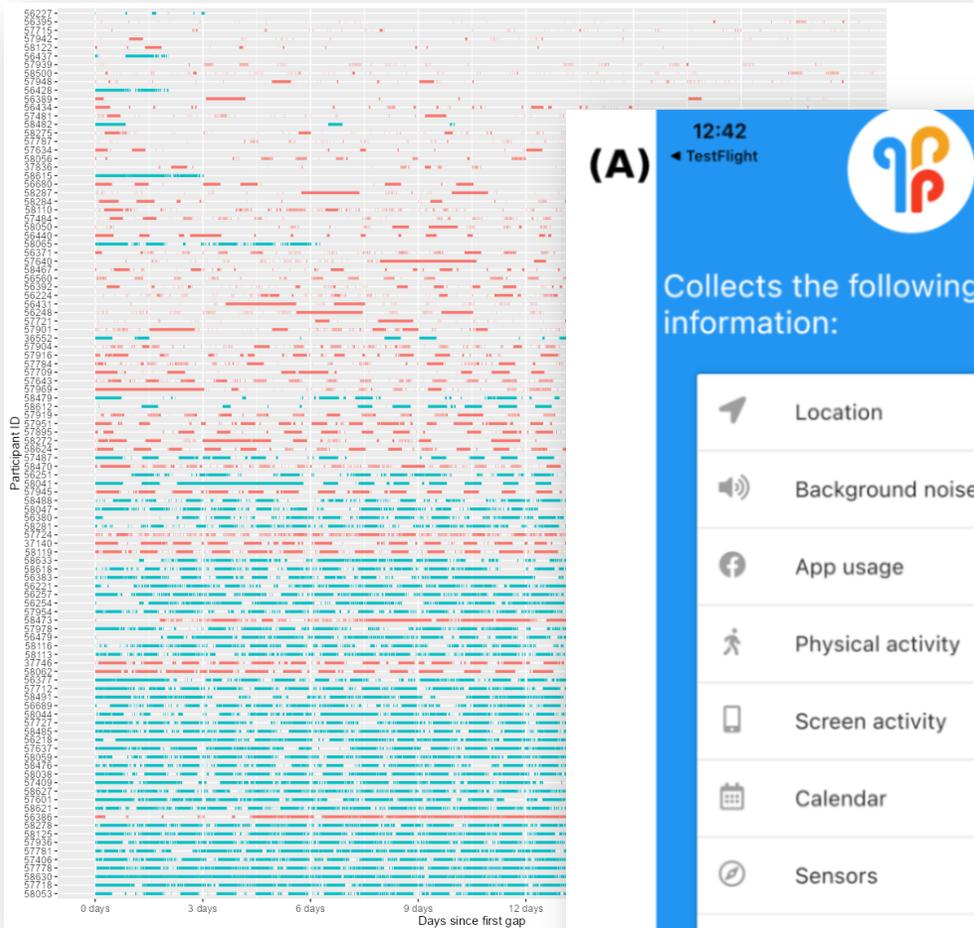
Domain-specific Applications

- Rather than having generic “sensing” apps ...
- ... we should allow for the design of domain-specific apps that ensure **engagement**
 - can undergo a UX design process – “participant-centric design”
 - provides “something” for the participant
 - allow for “human-in-the-loop”
 - allow for “disease-targeted recruitment”
- .. and can be **approved** in the app stores





D Kumar, R Maharjan, A Maxhuni, H Dominguez, A Frølich & JE Bardram (2022). mCardia: A Context-Aware ECG Collection System for Ambulatory Arrhythmia Screening. *ACM Transactions on Computing for Healthcare*, 3(2), 1-28.



(A) 12:42
TestFlight

Collects the following information:

- Location
- Background noise
- App usage
- Physical activity
- Screen activity
- Calendar
- Sensors
- Connection
- Diagnostics

I AGREE

(B) 12:47
TestFlight

KU Leuven Study

A demo study by KU Leuven to test the CARP framework.

User: 36390

Sampling Strategy: MAXIMUM

Data Endpoint: FILE - buffer 5000 KB, zipped

State: Created

Sample Size: 64

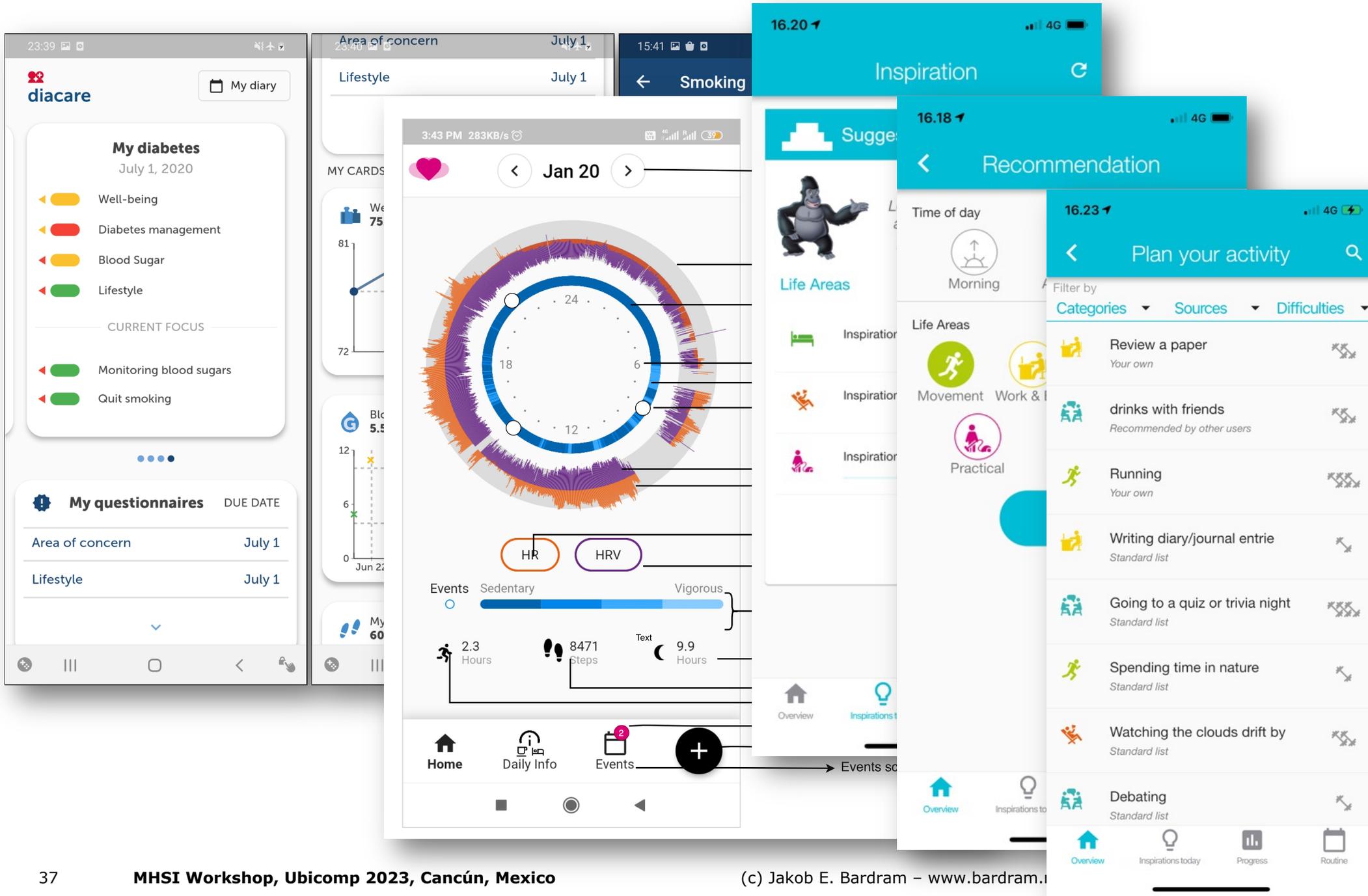
Context

- Activity Recognition**
Measure: type: carp.activity, enabled: true
- Geo-location**
LocationMeasure: type: carp.geolocation, enabled: true, frequency: 0:01:00.000000, duration: null, accuracy: GeolocationAccuracy.low
- Location**
LocationMeasure: type: carp.location, enabled: true, frequency: 0:01:00.000000, duration: 0:00:05.000000, accuracy: GeolocationAccuracy.best
- Mobility Features**
MobilityMeasure: type: carp.mobility, enabled: true, usePriorContext: true, stopRadius: 25.0, placeRadius: 50.0, stopDuration: 0:03:00.000000

Sensors

- Accelerometer**
PeriodicMeasure: type: carp.periodic_accelerometer, enabled: true, frequency: 0:00:05.000000, duration: 0:00:01.000000

K Niemeijer, ... (2023). "Combining Experience Sampling and Mobile Sensing for Digital Phenotyping With m-Path Sense: Performance Study". *JMIR FORMATIVE RESEARCH*, 7(e43296).



A person wearing a red jacket and dark pants stands with their back to the camera, looking out over a vast, misty green field at sunrise. The sun is low on the horizon, creating a soft, golden glow and casting long shadows. The sky is filled with light, wispy clouds.

LOOKING AHEAD

Where is Digital Phenotyping in Mental Health Heading?

What can we use sensing in mental health for?

Correlation

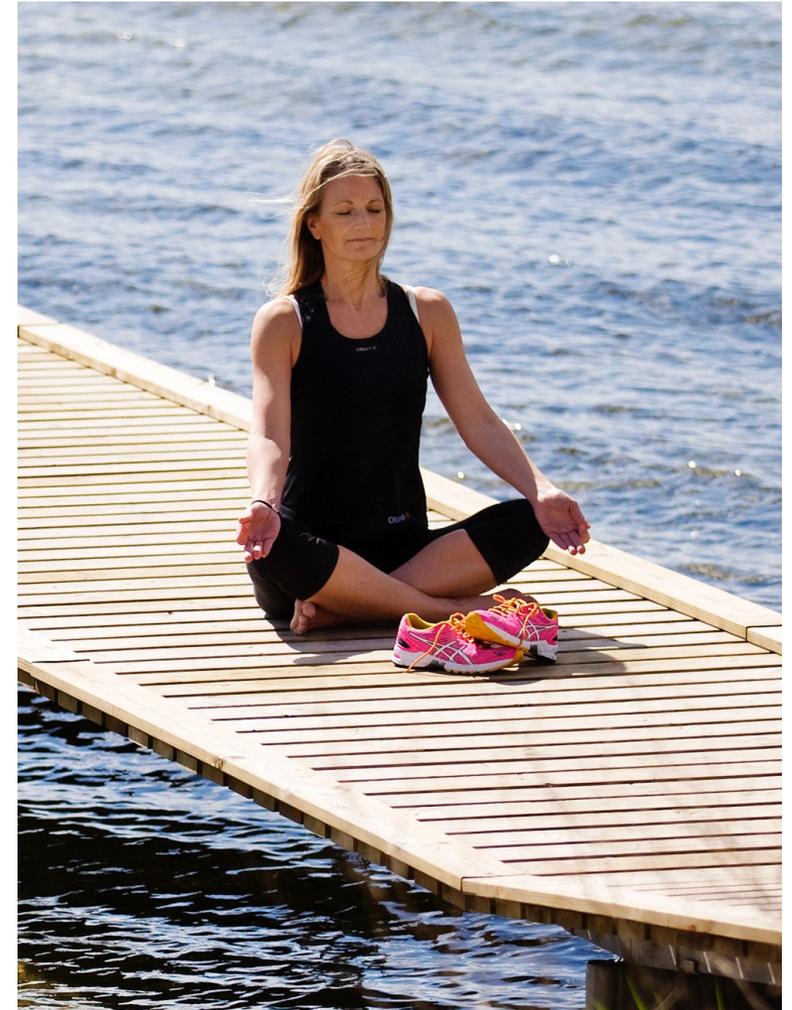
- self-reported mood
- mobility
- social activity
- physical activity
- voice
- ...

Classification

- disease classification
- state (e.g., manic/depressive episodes)

Prediction

- mood forecasting (1-5 days)
- relapse / remission
- readmission



What can we use sensing in mental health for?

Monitoring – overcoming the “snapshot” problem

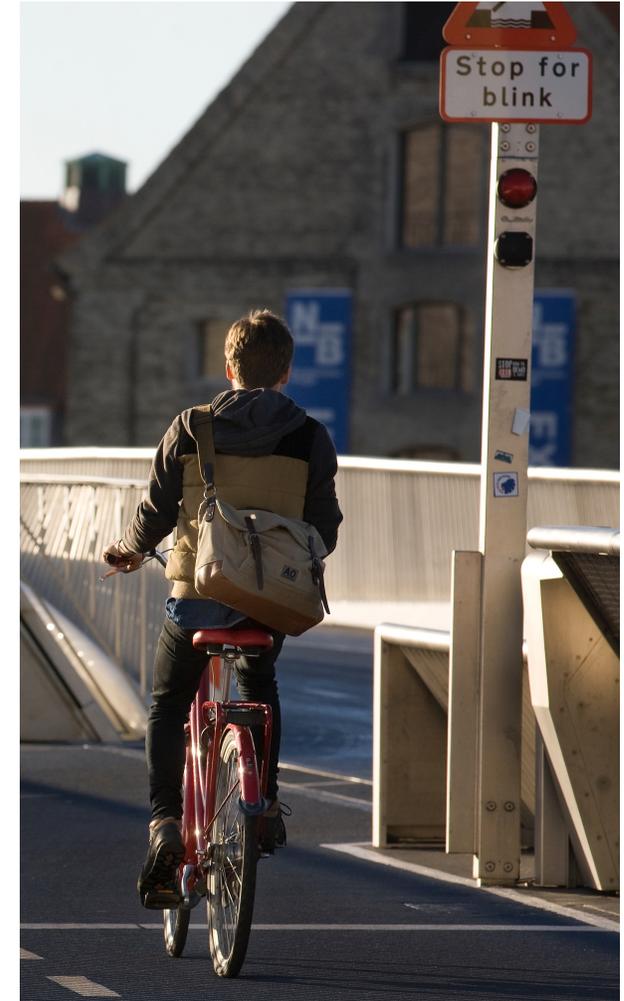
- ambulatory, in-the-home, contextual, “in-the-wild”, ...
- long-term, trends, deviations, ...
- continuously, real-time, ...

Diagnosis

- ambulatory
- early
- more precise

Research – clinical | industrial

- (digital) biomarkers ~ digital phenotyping
- clinical evidence, real-world evidence
- phase 5 studies



What can Digital Phenotyping be used for?

DIGITAL HEALTH

- **Medical Product** as part of the patient’s life (Digital Therapeutics (DTx))
- **Patient-generated Health Data** collected from digital health technologies allows us to understand patient behavior in the context of their daily lives



www.fda.gov/digitalhealth

STUDY MEDICAL PRODUCTS

- Can transform how we **study medical products** – pharmacological & medical device technology
- De-centralized **clinical trials**
- Capture **real-world evidence** (RWE)



Enable Remote Data Collection in Decentralized Clinical Investigation

- More frequent or continuous monitoring compared to traditional methods
- Longitudinal view of participant’s health status
- Improved recruitment and retention of participants leading to less missing data



Improve Access to Clinical Investigations

- Meet a participant where they are at for a clinical investigation
- Fewer visits to a study site places less burden on participants
- Reach a more diverse population, advancing health equity



Facilitate Innovative Clinical Investigation Endpoints

- New types of data to inform novel endpoints
- Complementary to other forms of data used to support a regulatory submission



Capture Real-World Data (RWD) and Patient-Generated Health Data (PGHD)

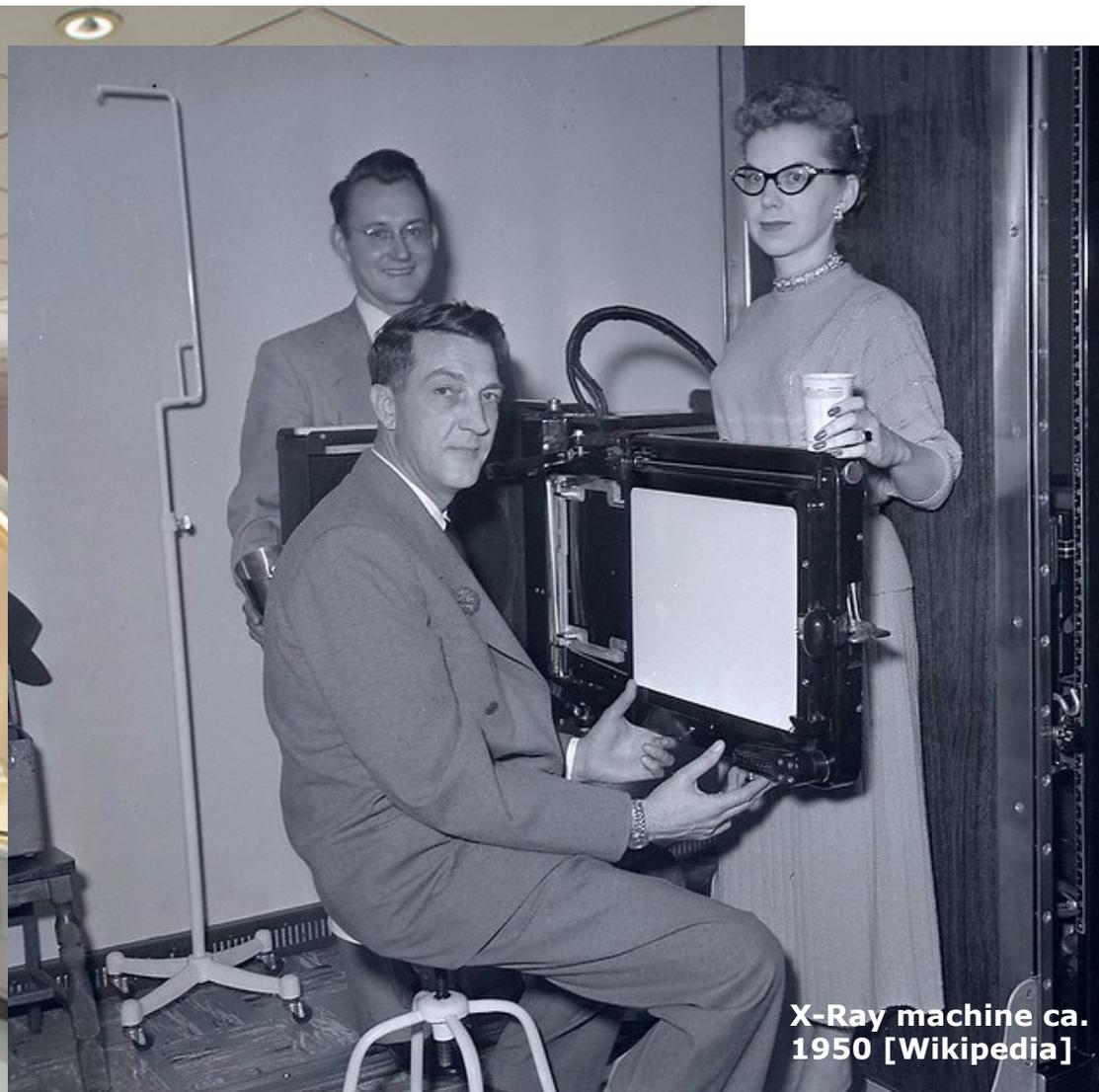
- Data reflects a participant’s daily life
- Remote and longitudinal follow-up with participants beyond the clinical investigation
- More detailed picture of the impact of a medical product on a participant

www.fda.gov/digitalhealth

110



MRI Scanner - Northern Lincolnshire
and Goole NHS Foundation Trust



X-Ray machine ca.
1950 [Wikipedia]

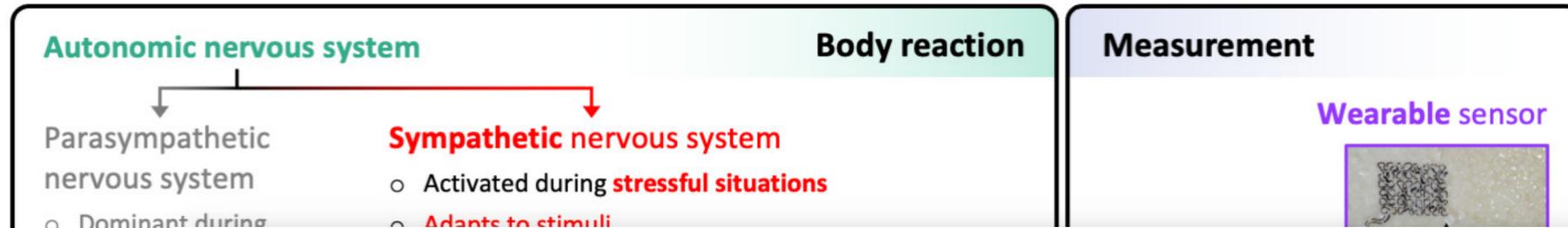


Early Holter Monitoring setup [Wikipedia]



Open Questions

- Is the **Smartphone** a good **hardware / sensor platform** for mental health?
 - maybe there is a need for **dedicated** hardware and devices?
 - with dedicated sensors for health (and not piggybacking on other sensors designed for other purposes)
 - which would be much more application- / **health-specific**
 - could be regulated as a **medical device**
 - not controlled by the **monopoly** of Apple & Google
- **Wearable** and/or **implantable** biomedical / physiological sensors
 - Heart rate (HR) & electrocardiograph (ECG)
 - Electroencephalography (EEG)
 - Electrodermal Activity (EDA)
 - Electrochemical (e.g., Cortisol, Dopamine)



M Kang & K Chai (2022). "Wearable Sensing Systems for Monitoring Mental Health". *Sensors*, 22(994)



(A)

HPA axis
Producing cortisol → **Released into biofluids**

Biofluid	Cortisol level:
Blood	20 ~ 250 ng/mL
Sweat	8 ~ 141 ng/mL
Saliva	1 ~ 30 ng/mL

→ **Electrochemically detected**

(B) Patch-type

Surface functionalization

HOOC-PEG-SH: HOOC-(CH2)2-O-(CH2)2-SH

Current vs Voltage excitation graph:

Voltage excitation (mV)	Current (µA)
-100	~0
0	~50
100	~150
200	~100
300	~50
400	~20
500	~10

Current vs Concentration graph:

Concentration (log[Cortisol], nM)	Current difference (µA)
2.0	~35
2.1	~45
2.2	~55
2.3	~65
2.4	~75
2.5	~85
2.6	~95
2.7	~105

Linear regression: $\Delta I = a + b \log c$
 $R^2 = 0.99796$
 $a = -88.20027 + 3.38587$
 $b = 61.18224 + 1.38215$

Power Supply → **Data Transmission**

From Sensing to Acting

Novel Technological Topics

- Actuator Hardware & Technology
- Operating Systems & Programming APIs
- AI & ML Models
- UI Technology and UX

Challenges

- Safety
- Autonomy
- Accountability

THEME ARTICLE: GRAND CHALLENGES

From Sensing to Acting—Can Pervasive Computing Change the World?

Jakob E. Bardram  Technical University of Denmark, 2800, Lyngby, Denmark

Computing technology has indeed become pervasive. Taking a quick look around me, I see computing systems in literally everything—in the cars, televisions, smartphones, restaurants, ski-lifts, heating systems, sports trackers, medical devices, etc. This has been realized by a tremendous development in hardware and software technology in terms of CPUs, memory, sensors, operating systems, network, display, etc. However, looking back at this technology development—and the research done in the field—it strikes me that something is missing. One of the grand visions was to make the computer “invisible,” as framed by Weiser. But it seems like instead of computing becoming more invisible, it is taking up more of the user’s attention. In this article, I argue that this is because (pervasive) computing has only come halfway. Much effort has been done in terms of sensing and understanding the world around the user, while much less effort has been put into helping the user actually doing anything. By providing examples mostly taken from the medical domain, this article discusses if moving from “sensing” and “thinking” to actually “doing” something is possible and what challenges are associated with this movement.

Pervasive and ubiquitous computing builds on the idea of trying to integrate computing into the “fabric” of human life and make computers more aware of, and integrated into the physical world and the activities of people. Going back to the initial research on “context-aware” computing in the seminal paper on “Context-Aware Computing Applications,” Bill Schilit, Norman Adams, and Roy Want¹⁸ wrote that “context-aware software adapts according to the location of use, the collection of nearby people, hosts, and accessible devices, as well as to changes to such things over time. A system with these capabilities can examine the computing environment and react to changes to the environment.” [p. 85]. Since then, almost 30 years of research and development have brought forth a fantastic set of technologies in the Ubicomp family: Advanced mobile phones with powerful processing power, memory, network connectivity, sensors, and interactive displays; wearable computers,

including smartwatches with similar powerful resources; wireless networking technology from low-power networks to high-speed cellular and wireless networks; and interactive displays in all sizes and forms. In addition, the software in terms of operating systems, programming application programming interfaces (APIs), and user-interface software technology has seen a similar development in the Ubicomp space. And the recent revival of artificial intelligence (AI) and machine learning (ML) has provided the field with new opportunities for analyzing data collected via these devices.

Despite these fantastic and promising achievements within the Ubicomp family of hardware and software technology, it still seems like something is missing. To me, it seems like we have only come half the way. We have been very good at collecting data and deriving some level of understanding from this. We are, however, not very good at using this for anything. It is worth noting that in the original definition of context-aware computing previously, the words “adapts” and “reacts” are used, thus assuming some active action from the computer’s side. Take the smartphone, for example. The smartphone is the Ubicomp device *par excellence*. But the whole device is

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July–September 2022

Published by the IEEE Computer Society

IEEE Pervasive Computing

17

Bardram, Jakob E. "From Sensing to Acting — Can Pervasive Computing Change the World?." *IEEE Pervasive Computing* 21.3 (2022): 17-23.

CLOSING

Technical Perspectives on Mobile Sensing in Mental Health



Outline

BACKGROUND

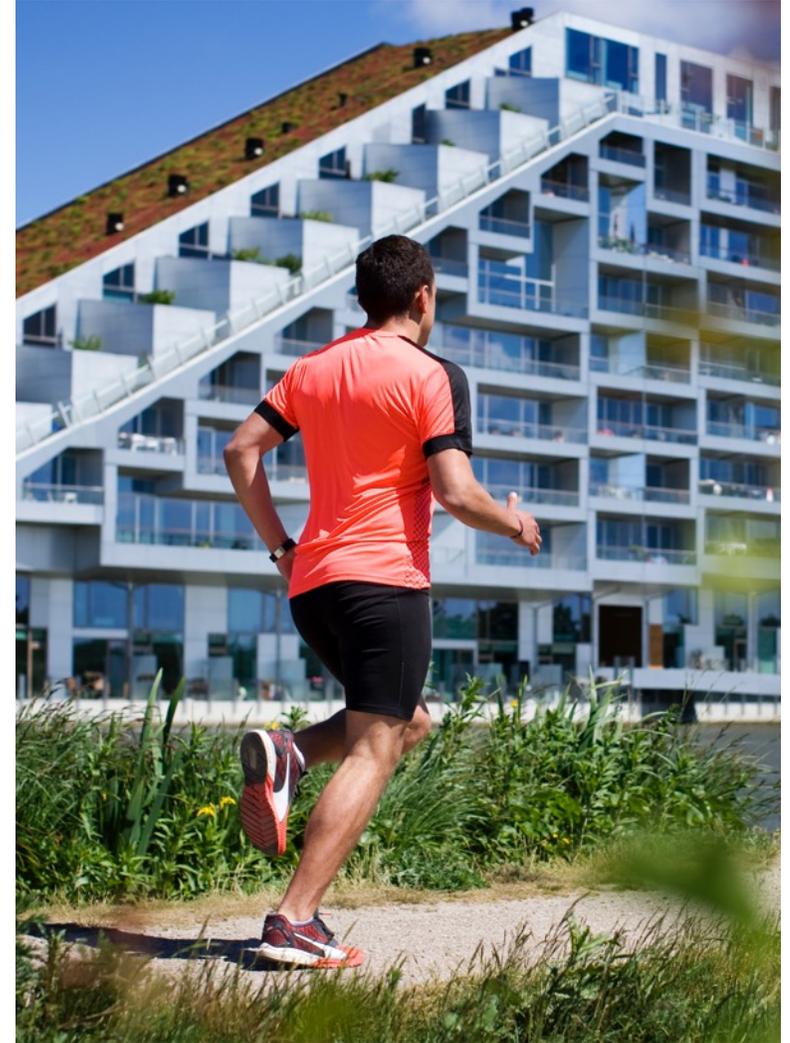
- Digital Phenotyping
- Copenhagen Research Platform (CARP)

CHALLENGES

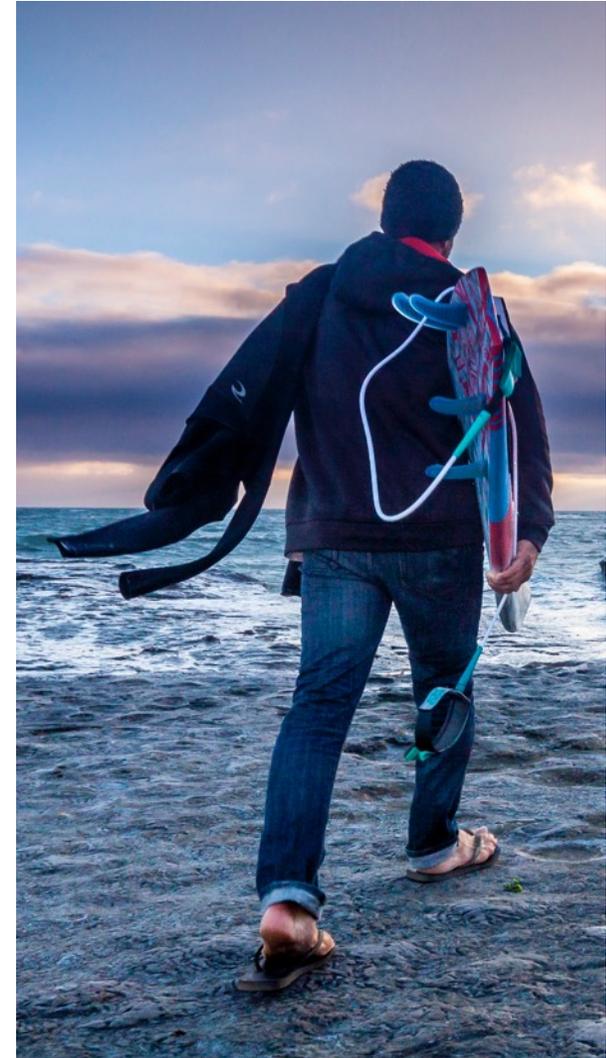
- (Technical) Challenges in Mobile Sensing (in Mental Health)
- ... and what to do about them

LOOKING AHED

- What is coming
- How do I see the future of mobile sensing in Mental Health?



Questions



Technical University
of Denmark



UNIVERSITY OF
COPENHAGEN



DTU



BACKUP SLIDES



Technical University
of Denmark



UNIVERSITY OF
COPENHAGEN



Diagnosis.... or Overdiagnosis?

Overdiagnosis is a huge problem

- ... especially in mental health

Medical technology

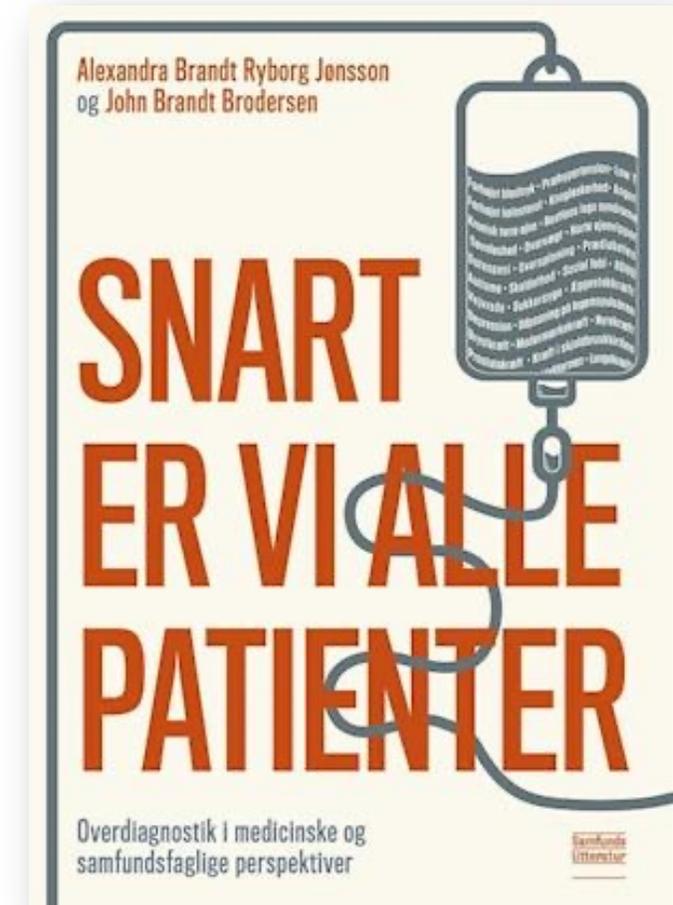
- diagnostic tools
- wearable devices / smartwatches
- apps
- big data / AI / personal medicine

... is a major source for over-diagnosis

... and may even worsen (e.g., rumination)

... which again leads to high **inequality** in healthcare

***caveat** :: this is spoken from a Danish, Scandinavian, publicly funded healthcare system*



Sensing Dev

September 11, 2018

Apple Inc.
% Donna-Bea Tillman
Senior Consultant, Biologics Consulting Group
Biologics Consulting Group, Inc.
1555 King St, Suite 300
Alexandria, Virginia 22314

Re: DEN180044
Trade/Device Name: ECG App
Regulation Number: 21 CFR 870.2345
Regulation Name: Electrocardiograph software for over-the-counter use
Regulatory Class: Class II
Product Code: QDA
Dated: August 13, 2018
Received: August 14, 2018

Dear Donna-Bea Tillman:

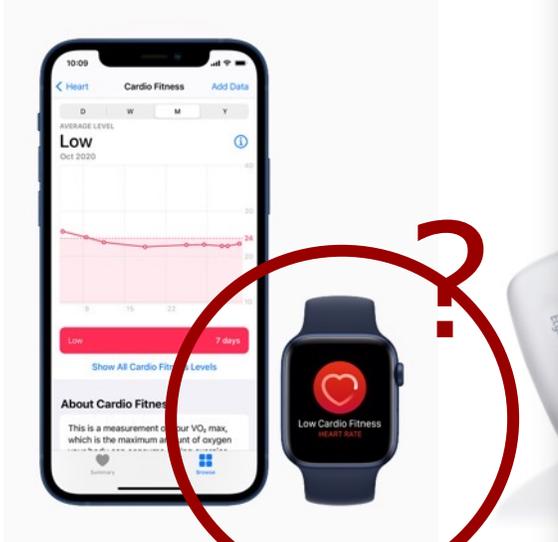
The Center for Devices and Radiological Health (CDRH) of the Food and Drug Administration (FDA) has completed its review of your De Novo request for classification of the ECG App, an over-the-counter device under 21 CFR Part 801 Subpart C, with the following indications for use:

The ECG app is a software-only mobile medical application intended for use with the Apple Watch to create, record, store, transfer, and display a single channel electrocardiogram (ECG) similar to a Lead I ECG. The ECG app determines the presence of atrial fibrillation (AFib) or sinus rhythm on a classifiable waveform. The ECG app is not recommended for users with other known arrhythmias.

The ECG app is intended for over-the-counter (OTC) use. The ECG data displayed by the ECG app is intended for informational use only. The user is not intended to interpret or take clinical action based on the device output without consultation of a qualified healthcare professional. The ECG waveform is meant to supplement rhythm classification for the purposes of discriminating AFib from normal sinus rhythm and not intended to replace traditional methods of diagnosis or treatment.

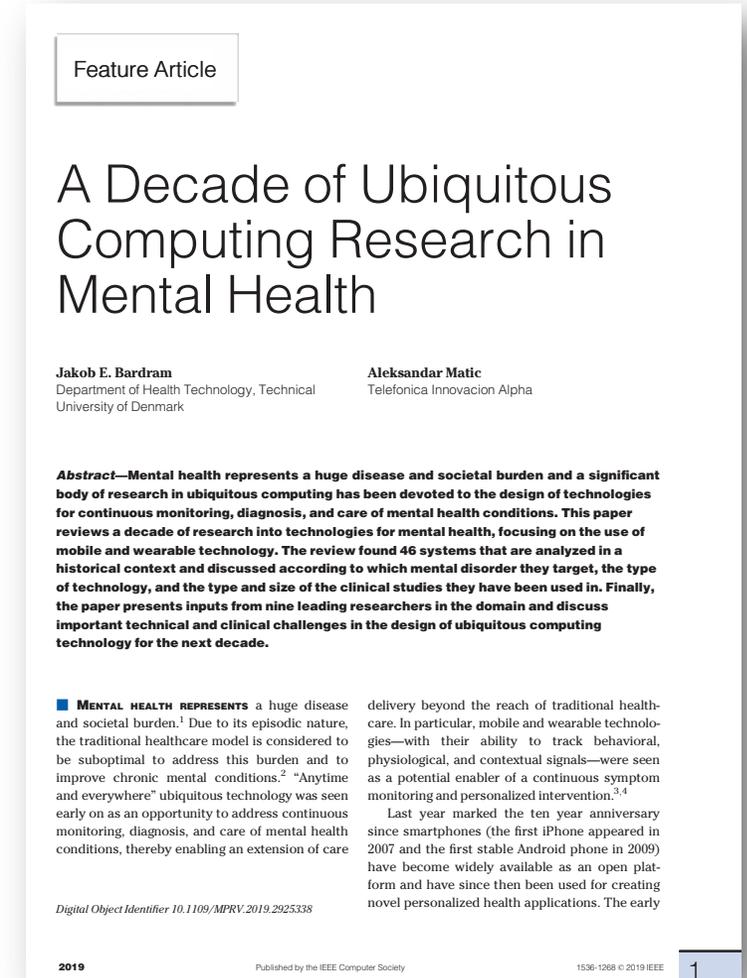
The ECG app is not intended for use by people under 22 years old.

FDA concludes that this device should be classified into Class II. This order, therefore, classifies the ECG App, and substantially equivalent devices of this generic type, into Class II under the generic name electrocardiograph software for over-the-counter use.



What has been designed?

- Systematic review of technologies (not studies!)
 - as published in peer-reviewed literature
 - 2009-2019
 - mobile & wearable technologies ('ubicomp')
 - severe mental illness (SMI) as defined by ICD-10
- Results
 - 45 systems – 32 clinical | 13 non-clinical
- "Typology"
 - sensing
 - clinical assessment
 - predictive modelling
 - intervention models
 - user interaction



J. E. Bardram and A. Matic, "A Decade of Ubiquitous Computing Research in Mental Health," *IEEE Pervasive Computing*, p. 1–11, 2020.

A All ages

Leading causes 1990	Percentage of DALYs 1990	Leading causes 2019	Percentage of DALYs 2019	Percentage change in number of DALYs, 1990-2019	Percentage change in age-standardised DALY rate, 1990-2019
1 Neonatal disorders	10.6 (9.9 to 11.4)	1 Neonatal disorders	7.3 (6.4 to 8.4)	-32.3 (-41.7 to -20.8)	-32.6 (-42.1 to -21.2)
2 Lower respiratory infections	8.7 (7.6 to 10.0)	2 Ischaemic heart disease	7.2 (6.5 to 7.9)	50.4 (39.9 to 60.2)	-28.6 (-33.3 to -24.2)
3 Diarrhoeal diseases	7.3 (5.9 to 8.8)	3 Stroke	5.7 (5.1 to 6.2)	32.4 (22.0 to 42.2)	-35.2 (-40.5 to -30.5)
4 Ischaemic heart disease	4.7 (4.4 to 5.0)	4 Lower respiratory infections	3.8 (3.3 to 4.3)	-56.7 (-64.2 to -47.5)	-62.5 (-69.0 to -54.9)
5 Stroke	4.2 (3.9 to 4.5)	5 Diarrhoeal diseases	3.2 (2.6 to 4.0)	-57.5 (-66.2 to -44.7)	-64.6 (-71.7 to -54.2)
6 Congenital birth defects	3.2 (2.3 to 4.8)	6 COPD	2.9 (2.6 to 3.2)	25.6 (15.1 to 46.0)	-39.8 (-44.9 to -30.2)
7 Tuberculosis	3.1 (2.8 to 3.4)	7 Road injuries	2.9 (2.6 to 3.0)	2.4 (-6.9 to 10.8)	-31.0 (-37.1 to -25.4)
8 Road injuries	2.7 (2.6 to 3.0)	8 Diabetes	2.8 (2.5 to 3.1)	147.9 (135.9 to 158.9)	24.4 (18.5 to 29.7)
9 Measles	2.7 (0.9 to 5.6)	9 Low back pain	2.5 (1.9 to 3.1)	46.9 (43.3 to 50.5)	-16.3 (-17.1 to -15.5)
10 Malaria	2.5 (1.4 to 4.1)	10 Congenital birth defects	2.1 (1.7 to 2.6)	-37.3 (-50.6 to -12.8)	-40.0 (-52.7 to -17.1)
11 COPD	2.3 (1.9 to 2.5)	11 HIV/AIDS	1.9 (1.6 to 2.2)	127.7 (97.3 to 171.7)	58.5 (37.1 to 89.2)
12 Protein-energy malnutrition	2.0 (1.6 to 2.7)	12 Tuberculosis	1.9 (1.7 to 2.0)	41.0 (-47.2 to 33.5)	62.8 (-66.6 to 58.0)
13 Low back pain	1.7 (1.2 to 2.1)	13 Depressive disorders	1.8 (1.4 to 2.4)	61.1 (56.9 to 65.0)	-1.8 (-2.9 to -0.8)
14 Self-harm	1.4 (1.2 to 1.5)	14 Malaria	1.8 (0.9 to 3.1)	-29.4 (-56.9 to 6.6)	-37.8 (-61.9 to -6.2)
15 Cirrhosis	1.3 (1.2 to 1.5)	15 Headache disorders	1.8 (0.4 to 3.8)	56.7 (52.4 to 62.1)	1.1 (-4.2 to 2.9)
16 Meningitis	1.3 (1.1 to 1.5)	16 Cirrhosis	1.8 (1.6 to 2.0)	33.0 (22.4 to 48.2)	-26.8 (-32.5 to -19.0)
17 Drowning	1.3 (1.1 to 1.4)	17 Lung cancer	1.8 (1.6 to 2.0)	69.1 (53.1 to 85.4)	-16.2 (-24.0 to -8.2)
18 Headache disorders	1.1 (0.2 to 2.4)	18 Chronic kidney disease	1.6 (1.5 to 1.8)	93.2 (81.6 to 105.0)	6.3 (0.2 to 12.4)
19 Depressive disorders	1.1 (0.8 to 1.5)	19 Other musculoskeletal	1.6 (1.2 to 2.1)	128.9 (122.0 to 136.3)	30.7 (27.6 to 34.3)
20 Diabetes	1.1 (1.0 to 1.2)	20 Age-related hearing loss	1.6 (1.2 to 2.1)	82.8 (75.2 to 88.9)	-1.8 (-3.7 to -0.1)
21 Lung cancer	1.0 (1.0 to 1.1)	21 Falls	1.5 (1.4 to 1.7)	47.1 (31.5 to 61.0)	-14.5 (-22.5 to -7.4)
22 Falls	1.0 (0.9 to 1.2)	22 Self-harm	1.3 (1.2 to 1.5)	-5.6 (-14.2 to 3.7)	-38.9 (-44.3 to -33.0)
23 Dietary iron deficiency	1.0 (0.7 to 1.3)	23 Gynaecological diseases	1.3 (0.9 to 1.5)	48.7 (45.8 to 51.8)	6.8 (-8.7 to 4.9)
24 Interpersonal violence	0.9 (0.9 to 1.0)	24 Anxiety disorders	1.1 (0.8 to 1.5)	53.7 (48.8 to 59.1)	-0.1 (-1.0 to 0.7)
25 Whooping cough	0.9 (0.4 to 1.7)	25 Dietary iron deficiency	1.1 (0.8 to 1.5)	13.8 (10.5 to 17.2)	-16.4 (-18.7 to -14.0)
27 Age-related hearing loss	0.8 (0.6 to 1.1)	26 Interpersonal violence	1.1 (1.0 to 1.2)	10.2 (3.2 to 19.2)	-23.8 (-28.6 to -17.8)
29 Chronic kidney disease	0.8 (0.8 to 0.9)	40 Meningitis	0.6 (0.5 to 0.8)	-51.3 (-59.4 to -42.0)	-57.2 (-64.4 to -48.6)
30 HIV/AIDS	0.8 (0.6 to 1.0)	41 Protein-energy malnutrition	0.6 (0.5 to 0.7)	-71.1 (-79.6 to -59.7)	-74.5 (-82.0 to -64.5)
32 Gynaecological diseases	0.8 (0.6 to 1.0)	46 Drowning	0.5 (0.5 to 0.6)	-60.6 (-65.2 to -53.6)	-68.2 (-71.9 to -62.8)
34 Anxiety disorders	0.7 (0.5 to 1.0)	55 Whooping cough	0.4 (0.2 to 0.7)	-54.5 (-74.6 to -16.9)	-56.3 (-75.6 to -20.3)
35 Other musculoskeletal	0.7 (0.5 to 1.0)	71 Measles	0.3 (0.1 to 0.6)	-89.8 (-92.3 to -86.8)	-90.4 (-92.8 to -87.5)

Global Health Metrics

Global burden of 369 diseases and injuries in 204 countries and territories, 1990-2019: a systematic analysis for the Global Burden of Disease Study 2019

GBD 2019 Diseases and Injuries Collaborators*

Summary

Background In an era of shifting global agendas and expanded emphasis on non-communicable diseases and injuries along with communicable diseases, sound evidence on trends by cause at the national level is essential. The Global Burden of Diseases, Injuries, and Risk Factors Study (GBD) provides a systematic scientific assessment of published, publicly available, and contributed data on incidence, prevalence, and mortality for a mutually exclusive and collectively exhaustive list of diseases and injuries.

Methods GBD estimates incidence, prevalence, mortality, years of life lost (YLLs), years lived with disability (YLDs), and disability-adjusted life-years (DALYs) due to 369 diseases and injuries, for two sexes, and for 204 countries and territories. Input data were extracted from censuses, household surveys, civil registration and vital statistics, disease registries, health service use, air pollution monitors, satellite imaging, disease notifications, and other sources. Cause-specific death rates and cause fractions were calculated using the Cause of Death Ensemble model and spatiotemporal Gaussian process regression. Cause-specific deaths were adjusted to match the total all-cause deaths calculated as part of the GBD population, fertility, and mortality estimates. Deaths were multiplied by standard life expectancy at each age to calculate YLLs. A Bayesian meta-regression modelling tool, DisMod-MR 2.1, was used to ensure consistency between incidence, prevalence, remission, excess mortality, and cause-specific mortality for most causes. Prevalence estimates were multiplied by disability weights for mutually exclusive sequelae of diseases and injuries to calculate YLDs. We considered results in the context of the Socio-demographic Index (SDI), a composite indicator of income per capita, years of schooling, and fertility rate in females younger than 25 years. Uncertainty intervals (UIs) were generated for every metric using the 2.5th and 97.5th ordered 1000 draws values of the posterior distribution.

Findings Global health has steadily improved over the past 30 years as measured by age-standardised DALY rates. After taking into account population growth and ageing, the absolute number of DALYs has remained stable. Since 2010, the pace of decline in global age-standardised DALY rates has accelerated in age groups younger than 50 years compared with the 1990-2010 time period, with the greatest annualised rate of decline occurring in the 10-19-year age group. Six infectious diseases were among the top ten causes of DALYs in children younger than 10 years in 2019: lower respiratory infections (ranked second), diarrhoeal diseases (third), malaria (fifth), meningitis (ninth), whooping cough (tenth), and sexually transmitted infections (eleventh). In this age group, it is fully accounted for by congenital syphilis (ranked tenth). In adolescents aged 10-24 years, three injury causes were among the top causes of DALYs: road injuries (ranked first), self-harm (third), and interpersonal violence (fifth). Five of the causes that were in the top ten for ages 10-24 years were also in the top ten in the 25-49-year age group: road injuries (ranked first), HIV/AIDS (second), low back pain (fourth), headache disorders (fifth), and depressive disorders (ninth). In 2019, ischaemic heart disease and stroke were the top-ranked causes of DALYs in both the 50-74-year and 75-year-and-older age groups. Since 1990, there has been a marked shift towards a greater proportion of deaths due to NCDs from non-communicable diseases and injuries.