



“Our main objective is to increase the use and impact of digital health services”



Forhelse SFI partners from research, healthcare services and industry.

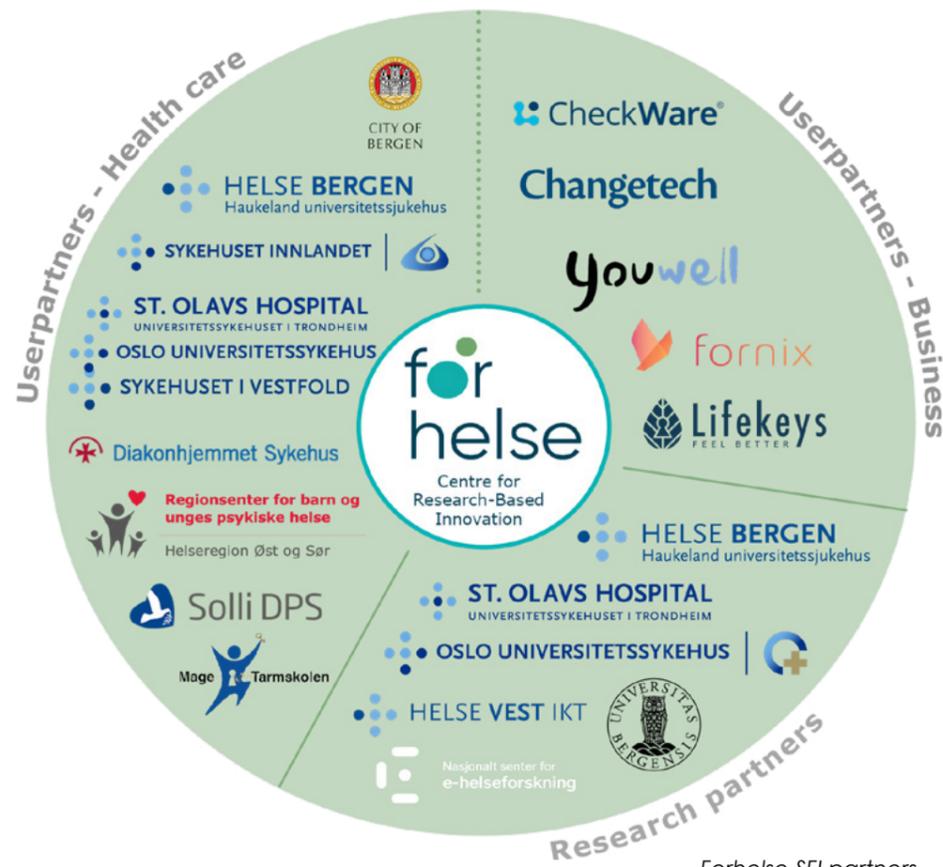
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Summary

The 2025 Annual Report highlights a peak year for Forhelse SFI, marked by strong scientific output, expanded partnerships, and significant progress in digital mental health services. The Research Council of Norway's midterm evaluation approved continued funding and praised the centre's high-quality research, strong user involvement, and meaningful collaboration across healthcare, academia, and industry.

In 2025, the centre advanced its four research work packages (WP): WP1 Effectiveness, focusing on clinical effects of digital mental health interventions; WP2 Cost-Effectiveness, assessing economic impact and value for healthcare services; WP3 Early Health Technology Assessment (Early HTA), evaluating digital solutions in early development phases to guide innovation; and WP4 Implementation, studying real-world adoption and scalability in routine care. Together, these work packages strengthened the scientific foundation for safe, accessible, and sustainable digital mental health services.



Foreword by the Centre Director

The year 2025 is the «peak» year of our Research Centre for digital mental health services (Forhelse SFI) 2020-2028 with the most resources and largest budget throughout the Centre period. This also means that our phasing out/phasing over strategy needs to be activated. In this perspective it has been of great value to us that the midway assessment conducted by the Research Council of Norway with the international expert panel has given us both encouragement for what we have done so far and challenges for the following next three years.

The panel views Forhelse SFI very positively overall, emphasizing the high quality and strong relevance of its research activities. They note that the Centre is well on track to meet—and in some cases exceeding original goals. The research across all four work packages is described as ambitious, well structured, and likely to have significant impact for researchers, healthcare providers, and industry. The Centre has produced a substantial number of publications, carried out important clinical trials and cost-effectiveness studies, and strengthened collaboration with both health services and commercial partners. Its innovation efforts are also praised, particularly the implementation of digital interventions in routine services, the development of decision support and implementation tools, and its strong commitment to user involvement. Partner organizations report high satisfaction, and the Centre's management, organization and financial situation are regarded as robust and effective. Training of PhD students and postdoctoral researchers is highlighted as a clear strength, with students describing a supportive and energizing research environment.

At the same time, the panel identifies several tasks that need attention for the last three years. One is

international visibility: publications tend to appear in mid-tier rather than top ranked journals, and although collaborations exist, the Centre has not yet developed a distinct international research profile or taken leading roles in major EU projects. The panel points out that our long-term plans for sustaining results after the Centre's funding period need to be developed. For more details about the mid-term evaluation, please see the research strategy section below.

Together with all the good work that has been conducted by our partners in the private businesses, healthcare services, research organizations and user – organizations this report encourages us to continue our work – with the goal to provide high-quality digital mental healthcare services to people in need.

Do you have any questions and comments? Do not hesitate to contact us at forhelse@helse-bergen.no

Tine Nordgreen, PhD
Centre Director

Research centre for digital mental health services, Helse Bergen HF



Reflections from the Chairman of the board

As we reflect on the past year at Research Centre for digital mental health services (Forhelse SFI), it is evident that the Centre has built a strong foundation for the coming years. In a time of growing demand for mental healthcare, the relevance of our mission continues to increase.

While we would like to see a faster rate of adoption of digital healthcare in Norway, our ambition to increase the adoption of digital psychological interventions to 20% by 2030 remains firm. Strategic communication and networking are essential tools in achieving these goals. For the years to come, the Centre is intensifying its efforts to become even more visible.

The work done by Forhelse SFI has been, and remains, very important for our industry partners. However, the market in which they operate is still very small, a direct consequence of the adoption rate. This adoption rate stems from the knowledge about digital healthcare; without this knowledge, there is not a broad recognized demand for this treatment approach. The impact of a small market is a corresponding lack of investment in developing digital healthcare technologies.

In an era where AI and robotics are rapidly accelerating in market adoption and showing promising effects, securing funding is crucial. This investment is necessary for our industry partners to be able to contribute to the future delivery of mental healthcare services.

The Centre has also continued to build substantial competence in digitalisation, providing a strong platform for future-oriented initiatives. In line with the board's decisions, increased attention is now

being directed toward artificial intelligence and machine learning. Following the midway evaluation by the Research Council of Norway, a key follow-up document will include a dedicated focus on potential collaborations, funding applications, and activities related to AI, reflecting both technological developments and future needs within digital mental healthcare.

The progress and the achievement during the year is the result of the dedicated efforts of a multidisciplinary community of researchers, healthcare partners, industry partners, user representatives, and the Centre leadership. I would like to thank Tine Nordgreen for the strong leadership and an excellent result from the midway evaluation. The collaboration and commitment remain central to the continued success and relevance in the next period.

Thank you for your continued engagement and contribution to this important work.

Jonny Klemetsen
Chairman of the board

Youwell



User representative about user involvement

The past year has been interesting and highly educational working as a user representative in the Centre.

On behalf of Forhelse SFI I was lucky to be invited back to give several presentations for nursing students about user involvement in research and developing digital health interventions.

What is user involvement really? How to involve users? What are digital mental health services?



These are all relevant and essential questions that came up when I went back to the educational institutions to talk about the Centre, Forhelse SFI, and why user involvement is important in research. It also took place a panel discussion in the end where we shared examples of how real user involvement had affected Forhelse, SFI, the students and an invited user organization.

Further - I held another lecture about user involvement in digital health services, from a user perspective together with several experienced researchers from Forhelse SFI in the professional psychology program (subject PSYK314) at the University of Bergen (UiB). The discussion with students afterwards brought up fundamental principles and guidelines within user involvement, equal interaction and collaboration, customized information for the users and real influence and involvement. Also, how accessible the different digital healthcare services are to the target group and population in general.

These are all topics, values and principles to be considered in future work within Forhelse, SFI. It struck me how important it is to be present in educational arenas. We need to continue to work towards a common understanding of what user involvement is, and what it can be in the future.

For more details about user involvement please see the sections about Communication activities and User involvement below.

Stine Hope Spjeld
User representative
Forhelse SFI

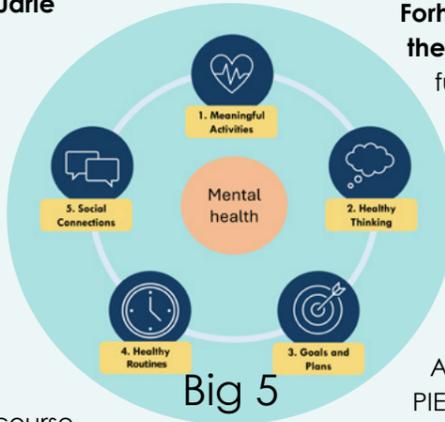
In the spotlight

"In the Spotlight" showcases key activities from Forhelse SFI in 2025, providing a snapshot of selected initiatives highlighted more thoroughly in the report, along with other noteworthy moments from the year.

January

Forhelse SFI continues collaboration with the eCentre Clinic, Macquarie University, Sydney:

As part of work package 1 (effect), Post-doctoral Researcher Smiti Kahlon has initiated several promising areas for continued partnership, including research on Big 5, a low threshold digital mental health course developed in Australia. Her team is now exploring how Big 5 can be adapted to a Norwegian context, with the aim of assessing whether simple daily actions can help reduce symptoms of anxiety and depression.



February

Solli DPS offers digital workfocused therapy:

Forhelse SFI's healthcare service and research partner Solli DPS became in February among the first in the world to provide digital, workfocused therapy to patients in specialist mental healthcare. The research project is called eTreatment Health and Work and is led by Solli DPS.

March

On March 4, Minister of Health Jan Christian Vestre (Ap) visited our partner eTreatment at Haukeland University Hospital: eTreatment is an online treatment program for anxiety and depression. The Minister of Health was impressed by the results, and the discussions and input from the visit have since been conveyed by national authorities in connection with the future of digital health services. [Read about eTreatment in Norway.](#)



April

Forhelse SFI participated in a workshop arranged by the Directorate of Health with the goal to explore future opportunities and barriers on how to provide evidence-based digital mental health interventions in primary and secondary care.

May

Forhelse SFI contributes to the implementation of cancer prevention programmes:

As a partner in the EU-funded research project PIECES, one of Forhelse SFI's collaborating projects, we participated in the second annual consortium meeting on 18–19 May in Florence. The PIECES project develops an expanded version of the digital implementation tool ItFits – Toolkit, a tailored tool that provides clinicians with systematic and evidencebased support for identifying useful implementation strategies.



ItFits toolkit

June

Joint gathering in Oslo:

In June, we held an inperson joint meeting in Oslo hosted by work package 3 (early HTA). The lunch-to-lunch event focused on the Directorate of Health's new assignment on digital mental health tools and on how Forhelse SFI can contribute to its implementation. The program also included broader discussions on benefit realization, drawing inspiration from innovation projects across sectors and highlighting experiences from digital mental health services.

August

eTreatment is offered throughout Norway:

More people can now receive digital treatment for social anxiety, panic disorder, depression, ADHD, and gambling addiction. So far, around 2900 patients have received help for their mental health challenges, and Helse Bergen aims to support even more. Research shows that working through various tasks independently, combined with written communication with a therapist, is as effective as facetoface treatment. This approach frees capacity for those who cannot receive digital treatment, thereby improving overall services for the population.

September

Forhelse SFI represented at IEPA Berlin:

In September, work package 3 (early HTA) took part in IEPA 15 – The International Conference on Early Intervention in Mental Health. Linn Støme and her team presented several Forhelse SFI projects. The conference theme, "Breaking Boundaries," underscored the expanding scope of early intervention and the importance of interdisciplinary approaches.



October

Forhelse SFI at ESRII 2025, European research on internet interventions:

Forhelse SFI participated in this year's ESRII conference in Vilnius, Lithuania, hosted by the European Network for Research on Internet Interventions under the theme "Resilience through Innovation." In the session on implementing and evaluating therapistguided digital treatment in routine mental healthcare, our researchers presented insights from several projects. The Centre also chaired the first official meeting of the new Nordic network, established to support the scaling of digital mental health interventions across the Nordic countries.

November

The 2025 National Healthcare Services Research Conference was held in Trondheim on 6–7 November, bringing together more than 220 participants from research institutions, national health authorities, hospitals and municipalities. This year's theme was "Knowledge and innovation needs in municipal health and care services." Day two focused entirely on mental health at the system level and challenges in practice. In the parallel session on mental health and internetbased treatment, Forhelse SFI was strongly represented, and our work package 2 (cost-effectiveness) contributing four of the six presentations.

December

Forhelse SFI continues collaborates with the eCentre Clinic, Macquarie University in Sydney:

Camilla Thuen, a PhD candidate at Forhelse SFI and the Gastrointestinal School at Helse Bergen, participated in a three month research stay at the eCentreClinic, School of Psychological Sciences at Macquarie University, in the autumn of 2025. The stay contributed to collaboration with researchers from both the eCC and the Lifespan Health and Wellbeing Research Centre.



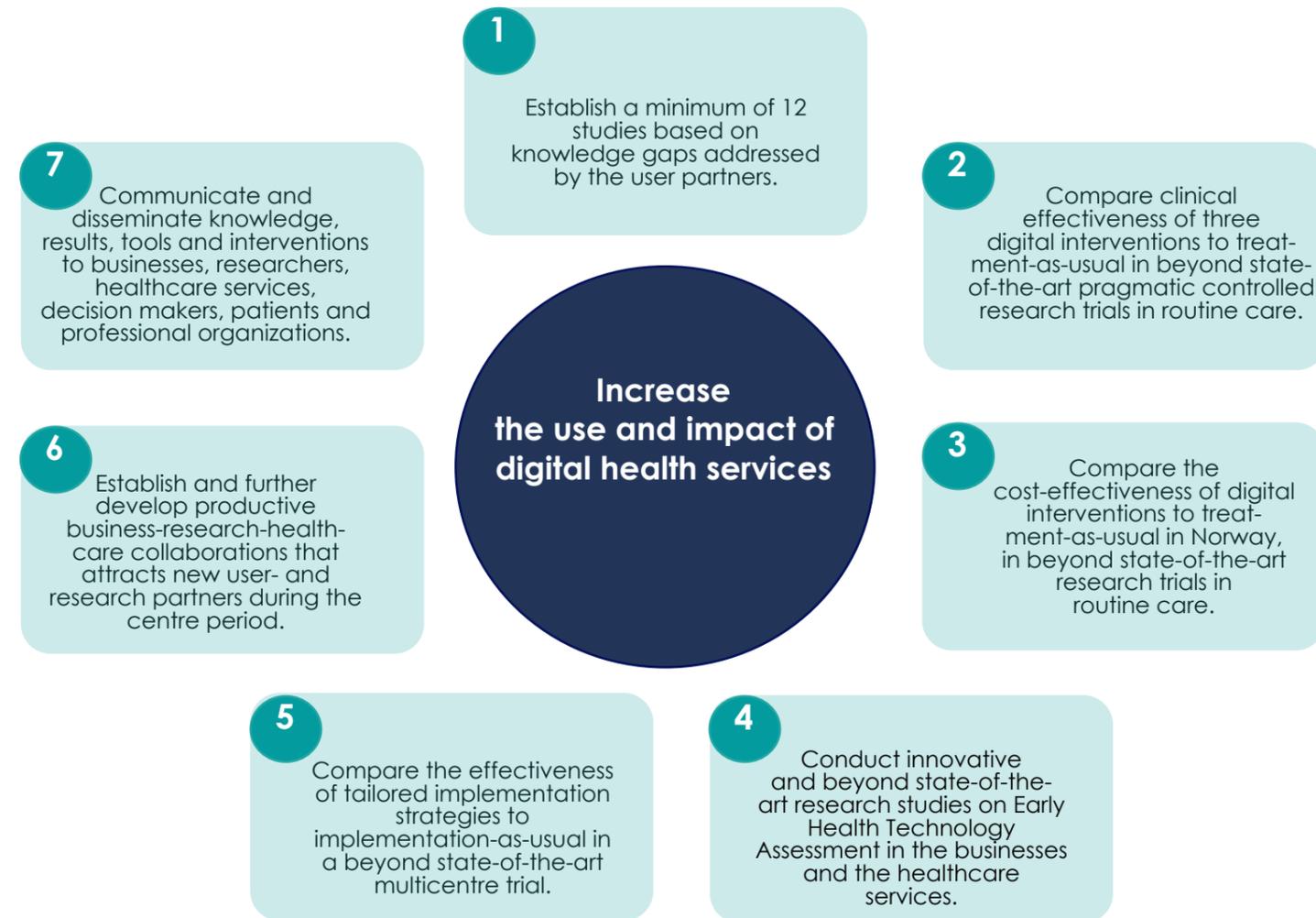
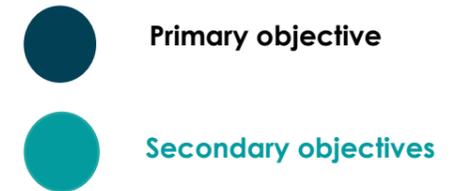
Vision and objectives

In line with the scheme for Research-based Innovation, Forhelse SFI develop expertise, knowledge and research-results within the field of digital mental health services in close cooperation with our partners. Mental disorders affect over one million people in Norway each year, yet only 20–30% receive help. Digital interventions can improve access. The Centre aims to increase the use and impact of digital psychological interventions in Norway.

Forhelse SFI brings together leading ehealth companies, public health services, university hospitals, research institutions, and users to develop and scale effective digital health solutions:

- Five leading e-health enterprises in Norway
- Ten public health services recognized for their national leadership in digitalization
- Three university hospitals with national and international research groups focused on innovative digital health services
- Three leading institutions in advancing research and knowledge on digitalization of health services
- Therapists and patients contributing first-hand experiences to enhance and innovate digital health services.

The Research centre for digital mental health services (Forhelse) is a centre for research-based innovation (SFI) supported by funding from the Norwegian Research Council under The Centres for Research-based Innovation scheme. For more information please see <https://www.forskningsradet.no>. The centre's SFI-identification number is 309264.



The figure features our primary objective in the Centre, surrounded by the seven secondary objectives specifying how we concretely aim to achieve the primary objective.

Our partners

The research partners in Forhelse SFI come from all parts of Norway and represent a wide range of sectors. These partners can be categorized into three key groups: business, healthcare, and research. Below is a brief description of each partner, with their specific roles in the work packages outlined in the chapter "Scientific activities and results".

Research partners

Haukeland University Hospital

serves as both the host institution and a healthcare partner in Forhelse SFI. As the largest supplier of professional staff, it provides administrative support, premises, and infrastructure. As the host institution, Haukeland University Hospital also holds the main responsibility for ensuring that research investments from the SFI grant are maintained and continued after the Research Council's funding ends.

St. Olavs Hospital HF leads the research on cost-effectiveness and contributes on implementation. Additionally, the hospital provides eTreatment services in the Mid-Norway region.

Oslo University Hospital (OUS) leads the research on early health technology assessment in Forhelse SFI. The focus is on evaluating new services, developing methods, and assessing data to estimate the value of early-stage innovations.

The University of Bergen (UiB) collaborates with Forhelse SFI on implementation research, offering their expertise in qualitative research. The Department of Global Public Health and Primary Care (IGS) at UiB also provides PhD training in the western region of Norway.

The Norwegian Centre for E-health Research (NSE) are involved in multiple research projects at the Centre, providing expertise in implementation research and qualitative research methodologies.

Helse Vest IKT is the full-service provider of ICT services to the specialist health service for the Western Norway Regional Health Authority. Helse Vest IKT aims to facilitate innovative use of ICT solutions and is a particularly relevant partner due to their expertise in privacy, security, and universal design.



Forhelse SFI partners.

Business partners

Changetech, founded in 2006, is a pioneer in evidence-based behaviour change. In collaboration with Forhelse SFI, Changetech is involved in research on Mamma Mia, a depression prevention program for pregnant women and their partners, that the company developed.

CheckWare, established in 2007, is a leading Norwegian international software company in digital patient involvement. The company partners with hospitals, clinics and municipalities to offer sustainable digital health services. CheckWare also provides the platform for the digital IBS school.

Lifekeys is an online psychological service offering video consultations and theme-based seminars with selected psychologists. Since its startup in 2017, Lifekeys has focused on innovative solutions to make it easier for anyone to connect with a psychologist.

Youwell, established in 2015, provides an online portal for building and offering digital health services, for healthcare providers, municipalities, clinics, research institutions and private practitioners. The company aims to improve healthcare quality, safety, efficiency, and service delivery.

Fornix joined Forhelse SFI as partner in 2024. Founded in 2020, Fornix delivers VR-applications tailored for use in work inclusion, youth development and social inclusion, prevention and treatment of mental disorders, and trauma relief. Their aim is to improve quality of life through virtual reality exposure therapy in various areas.

Healthcare partners

Bergen municipality offers the service "Barne- og familiehjelpen" (Child and Family Services), providing low-threshold interventions for children and adolescents with mild to moderate health complaints.

eTreatment formerly known as eCoping, is a guided internet delivered treatment, originally developed at Haukeland University Hospital as an online treatment option for anxiety disorders. It has since expanded to include treatments for depression, and alcohol misuse. eTreatment is now being implemented in all health regions in Norway, with additional treatments under development.

Several of the health institutions offering eTreatment are partners in our centre, including *Haukeland University Hospital, Solli District Psychiatric Centre, Vestfold Hospital Trust, St. Olavs Hospital and Innlandet Hospital Trust.*

Centre for Child and Adolescent Mental health, Eastern and Southern Norway (RBUP) works to increase competence and quality in services working with the mental health of children and young people. They co-developed Mamma Mia, an internet program that supports women in transitioning to motherhood and through the first months after childbirth. >>

The digital IBS-school is a digital treatment for patients diagnosed with irritable bowel syndrome (IBS), offered by Haukeland University Hospital. It is a continuation of the physical IBS-school. This internet-delivered treatment has the potential to reduce the severity of IBS symptoms and improve patient's quality of life.

Solli DPS – District Psychiatric Center, owned by Stiftelsen Diakonova Haraldsplass, is a private non-profit enterprise that treats adults with mental disorders. Since 2014, it has been a provider of eTreatment. Recently, Solli DPS developed the digital treatment program "Health and Work", aimed at adults with anxiety and depression who are on sick leave or work assessment allowance. This program will be implemented in clinical practice and researched in collaboration with Forhelse SFI.

Adult Psychiatry Department Vinderen, is a district psychiatric centre at Diakonhjemmet Hospital. They offer assessment and interdisciplinary specialized treatment for individuals with mental and/or substance use disorders. The app iTandem, developed to assist in the treatment of patients with psychosis, will be tested in clinical practice for both patients and staff in collaboration with Forhelse SFI.

New healthcare partner!

Oslo University Hospital (OUS) user partner is a new partner in Forhelse SFI from 2025 and contributes to the projects under the umbrella "Digital Clinic". A series of pilots are planned in different departments in the clinic with the primary objective to develop a robust framework for digital services at the Clinic for Mental Health and Addiction at OUS. The project is led by the Regional Competence Centre for Early Innovation in Psychosis (TIPS Sør-Øst) and is firmly integrated into the clinic's leadership and strategic plans.

Communication and dissemination activities

The communication and dissemination activities of the centre are managed by work package 5 (communication). Forhelse SFI works continuously to share knowledge and information about our research activities and results. Since the Centre's establishment, we have completed 411 such activities, including conference contributions, teaching, and news publications. Importantly, most communication activities are carried out by our healthcare and industry partners, rather than solely by the researchers.

Websites on new platform

In December 2025, Forhelse SFI published new websites in Felles nettløsning for spesialisthelsetjenesten (FNSP), a common web solution for the specialist health service in Norway. The reason for the change is the need for better stability, security and support for our websites. In FNSP, Forhelse SFI is organized under the research environment in Helse Bergen. Moving the pages makes the Centre's connection to Helse Bergen and Haukeland University Hospital more visible.

In connection with the establishment of new pages, the Centre has received a new design but retains its profile as before included the Forhelse logo. Current content has largely been transferred in its entirety, in Norwegian and English. Please visit [Forhelse.no](https://forhelse.no).



A new website was established in 2025.

Social media

Forhelse SFI uses Facebook and LinkedIn strategically and actively for promoting the Centre and digital health services, recruiting participants for research projects, and supporting network building.

Facebook 2025

Number of posts
Spring: 28 Autumn: 17
Number of views
Spring: 184,742 Autumn: 139,359

LinkedIn 2025

Number of posts
Spring: 16 Autumn: 18
Number of views
Spring: 5,814 Autumn: 11,821

2025:
340.000
views
on
social
media



Popular science articles and opinion pieces

Two years ago, Forhelse SFI organized an opinion-piece writing course delivered by a professional communication firm. The course was a success and resulted in five published opinion pieces. In 2025, we therefore repeated the initiative and organised a new course for researchers and partners in November.

We are pleased that the opinion-piece courses continue to create ripple effects in the important work of communicating research to the public. Selected excerpts from opinion pieces and popular science publications in 2025:

- **Opptil 7 av 10 opplever “chemo brain”-ingen behandling.**

Sunniva Brurok Myklebost. NRK.no kronikk

- **Appen har tatt av: Det mest skannede produktet? Bremykt!**

Camilla Thuen. Bergens Avisen.

- **IBS: Professorens oppskrift hylles!**

Camilla Thuen. NRK radio.

- **Kronikk: Fra ord til handling i digital helse. MEDWATCH.**

Centre Director at Forhelse SFI,

Tine Nordgreen and CEO at Youwell Øyvind Grimsgaard share their experiences with public-private collaboration

- **ADHD, the positive parts.**

Emilie Sektnan Nordby. 640 Toronto,

Vancouver/The Last Show with David Cooper.



Researcher Emilie Sektnan Nordby, Forhelse.

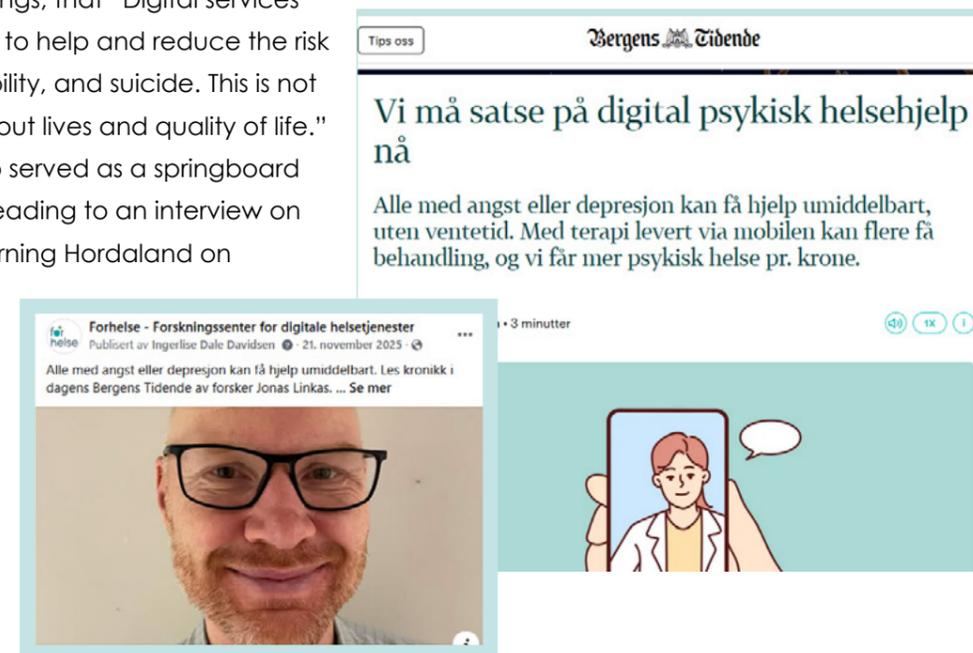


Researcher's Op-Ed on Digital Mental Health Sparks Wider Media Coverage

We would particularly like to highlight the opinion piece by one of our researchers, Jonas Linkas, published in Bergens Tidende (BT): “We must invest in digital mental health services now.” In the piece, he writes, among other things, that “Digital services can provide faster access to help and reduce the risk of sickness absence, disability, and suicide. This is not just about money—it is about lives and quality of life.”

Jonas's opinion piece also served as a springboard for further dissemination, leading to an interview on NRK Hordaland/Good Morning Hordaland on 24 November 2025

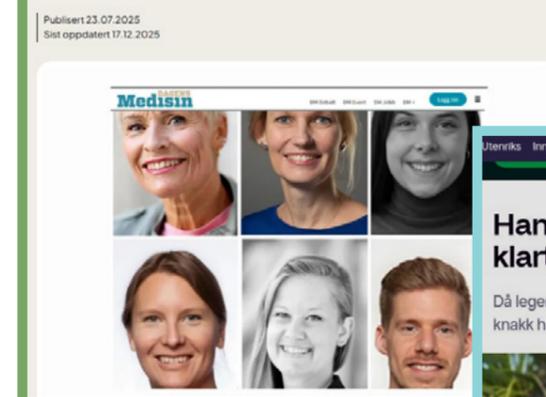
God morgon Hordaland - NRK Radio.



More from the media

Kronikk i Dagens Medisin: Slik lykkes vi med digitalisering i mental helse

Å dele gode resultater på tvers av helseforetakene og ha tydelige gevinstrealiseringsmål vil være avgjørende for å drive digitaliseringen fremover.



Researchers from Oslo University Hospital and Forhelse workpackage 3, shared their opinions in the medical journal “Dagens Medisin”.



The newspaper BA: eBehandling at Helse Bergen can now offer rapid mental health care.



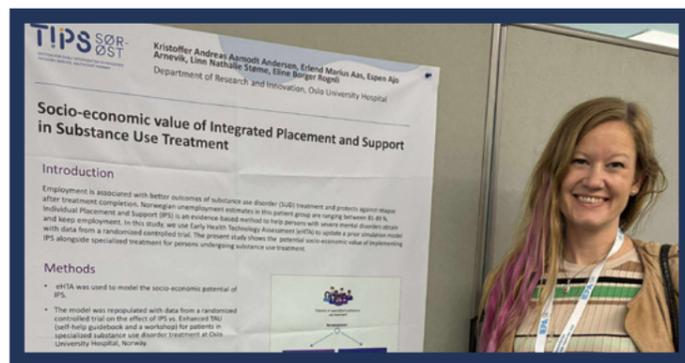
BA also told the story about a young person who got help for eating disorder with the app eBalance.

TV2 news. Forhelse SFI partner Solli DPS, offers a health service that helps patients return to work after sick leave.

Conferences

IEPA15: Forhelse SFI was well represented at the IEPA15 conference in Berlin together with five researchers from work package 3 (early HTA) and TIPS (Section for Early Intervention in Psychosis) at Oslo University Hospital. This is the 15th International Conference on Early Intervention and Prevention in Mental Health (IEPA15) and in 2025, the theme was "Breaking Boundaries". Through poster presentations, the group highlighted new digital tools, early health technology assessments, and innovative approaches to relapse prevention and improved follow-up in mental health services. Their work demonstrated how early needs assessment, user involvement, and digital innovation can strengthen mental healthcare and support more sustainable interventions.

- Researcher Kristin Lie Romm presented research on enhancing video consultations in mental health-care, and showcased Drawn to Recovery, an interactive tool designed to make therapy more collaborative and engaging.
- Researcher and work package leader Linn N. Støme presented work on relapse prevention for individuals with substance use disorders and demonstrated how early health technology assessment and registry data can identify effective followup strategies and their economic impact.
- Researcher Sofie R. Aminoff presented the development of REACT NORV Bipolar, a tailored online support tool for relatives of people with bipolar disorder and highlighted key challenges related to managing manic and depressive episodes and preparing the tool for pilot testing in 2025.
- PhD candidate Mari Skoge presented a qualitative study on clinicians' experiences with video consultations and showed that attitudes toward video consultations depend more on personal experience than clinical sector, underlining the need for improved training and broader cultural support for digital care.



Linn Støme, leader of Forhelses work package 3 (early HTA).

Alrek Helsedager 2025: Alrek Health Days is a meeting place for sharing knowledge and strengthening collaboration between research, education, municipalities, and hospitals. Researchers from Forhelse SFI presented how digital health services can support people with anxiety, depression, panic disorder, and ADHD. They highlighted that mental disorders affect over one million people in Norway each year, while only a minority receive help. Digital psychological interventions offer an evidence based, accessible way to reach more people, and can be as effective as face to face therapy. The team shared examples from Bergen's eTreatment services.



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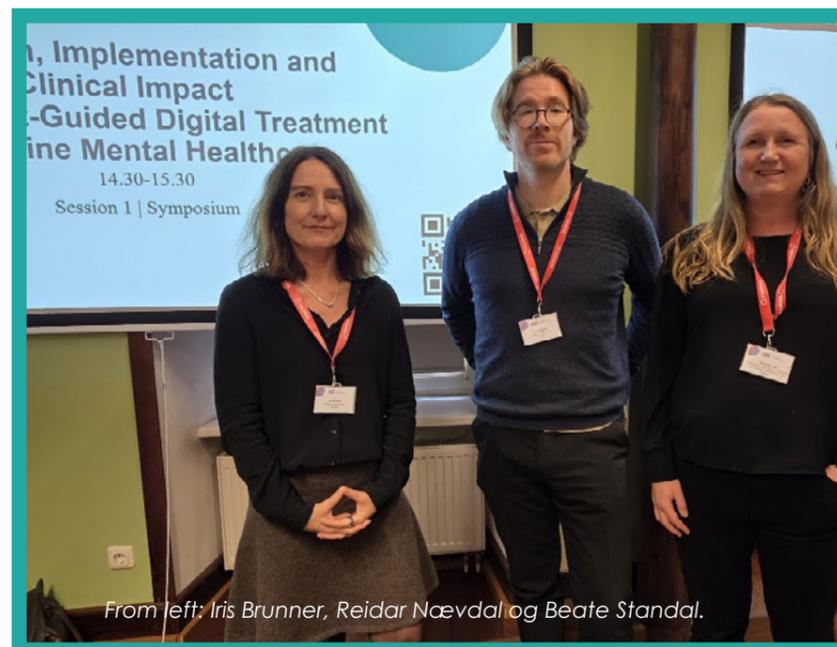


Camilla Thuen and Hanne Karoline Hinderaker presented Forhelse at DigitalHelse25.

The DigitalHelse2025 conference by Alrek Helseklynge: DigitalHelse25 is, like Alrek Helsedager, a meeting place for sharing knowledge and strengthening collaboration between research, education, municipalities, and hospitals. This year's theme focused on the competencies and potential solutions the healthcare sector will need in the future. Several researchers and partners associated with Forhelse SFI contributed. We would particularly like to highlight the presentation from the Centre's partner, the digital IBS-school at Haukeland University Hospital, delivered by Birgitte Berentsen (managing director and researcher). Birgitte emphasized the need to establish funding mechanisms that support the transition from innovation to implementation. Hanne Karoline Hinderaker, research consultant at Forhelse SFI, and PhD candidate Camilla Thuen from the digital IBS-school presented their research study

on the implementation of the digital IBS-school services in the healthcare system. They stressed that implementation competence is just as important as clinical and technical competence.

ESRII 2025: Forhelse SFI participated in October in this year's ESRII conference in Vilnius, Lithuania. The theme of the conference, organized by the European Society for Research on Internet Interventions, was Resilience Through Innovation. In the session 'Adoption, Implementation and Clinical Effect of Therapist-Guided Digital Interventions in Routine Mental Healthcare', our researchers shared experiences from their various projects:



From left: Iris Brunner, Reidar Nævdal og Beate Standal.

- Postdoctoral fellow Aleksander Heltne presented preliminary results from an ongoing open study of a therapist-assisted internet-based intervention for adults with ADHD in routine clinical practice.
- PhD candidate Beate Standal provided an in-depth look at healthcare professionals' experiences, exploring how therapists perceive the fit of guided digital interventions within their clinical practice. >>

- Researcher Iris Brunner presented preliminary data on therapists' time use and how this relates to adherence across different treatment programs.
- PhD candidate Reidar Nævdal shared findings from a large survey of therapists providing digital mental health services, focusing on how they experience this new mode of treatment delivery — what characterizes these therapists, and what determines their acceptance?
- Postdoctoral fellow Smiti Kahlon presented a poster on the project Rule-based chatbot application for adolescents with anxiety: a non-randomized pilot and feasibility study.
- PhD candidate Maren Støretvedt presented a poster on the project Optimizing a digital mental health intervention for youth with ADHD: youth perspectives on digital health promotion.

Den nasjonale Helsetjenesteforskingskonferansen 2025: Forhelse SFI was well represented at the national conference on health services research in Trondheim in November. This year's theme was "Knowledge and innovation needs in municipal health and care services." The local organizers were SINTEF and NTNU, in collaboration with the National Network for Health Services Research. Our Centre was represented with four presentations:

- Researcher Zareen Abbas Khan: "Costs and outcomes of a therapist-guided internet-delivered cognitive behavioural therapy: a multicentre observational study"
- PhD candidate Beate Standal: "Digitalization of therapy in mental healthcare: Changes in therapist and patient roles"
- Researcher Vidar Halsteinli, leader of work package 2: "Performance measurement: Efficiency of Guided Internet-Delivered Cognitive Behaviour Therapy in routine care"
- Postdoctoral fellow Jørn Heggelund: "Predictors of adherence and perceived system usability in internet-based cognitive behavioural therapy"



Researcher Vidar Halsteinli from St. Olav's Hospital represented Forhelse at the Health Service conference. Halsteinli is the leader of work package 2 (cost-effect) in Forhelse SFI.

Teaching Digital Health in Higher Education

University of Bergen

How can the use of digital health services be increased? One way to stimulate greater use of digital health services is to include instruction on digital healthcare in professional training programmes.

In 2025, several experienced researchers from Forhelse SFI together with our user representative Stine Hope Spjeld, taught students in the professional psychology programme subject PSYK314 at the University of Bergen (UiB). The teaching took place in both the autumn and spring semesters as an integrated part of the students' preparation for clinical practice. The twoday course on digital mental health services became mandatory in 2025 for the cohort of approximately 50 students.



Stine Hope Spjeld is teaching at the psychology programme. The user perspective is essential to highlight in many contexts — including in the education of healthcare professionals. Photo: Tora Kyllingstad / NRK

The course covered various aspects of digital mental health services, including what digital treatment for mental disorders can involve, the user perspective, the role of the eTherapist, and hands on testing of different digital treatment programmes and included a visit to eTreatment Bergen, where they talked with practicing eTherapists. The students also completed a group assignment in which they developed an idea for a digital treatment programme. The task included a brief description of the target group, the intervention, the technological solution, and the expected benefits. The groups then presented their proposals through a one-minute pitch in plenary.

Positive Student Feedback on Digital Therapy Training at UiB

Feedback from participating students at UiB has been very positive. One student, for example, wrote in the course evaluation:

"It was very useful to gain better insight into what digital therapy involves. I was initially a bit unsure what it actually was and imagined more of a video therapy setup. It was also helpful to learn about the different programmes they work with and to see the variety in digital therapy. It was especially motivating to try it out ourselves and explore ideas with fellow students in the group assignment. I also appreciated hearing about digital therapy from both the patient perspective and the therapist perspective when we visited the e treatment clinic."

Norwegian Business School (BI)

In 2025, as previous years, “the Step Up-method” was further integrated into teaching and dissemination activities. Step Up is now incorporated into the curriculum of the MBA program in Leadership of Service Development at BI. This program, which offers a specialized leadership track for professionals across primary, specialist, and municipal healthcare services, introduces approximately 300 participants to the tool each year. The method is used both in master’s theses and as a key teaching tool for future healthcare leaders.



From left Linn Støme, WP leader Early Health Technology Assessment at Forhelse and OUS, and Kari Kværner, OUS and the Norwegian Business School (BI).



New solutions in the healthcare sector often fail. Early Health Technology Assessment can ensure that health innovation succeeds.

Other events

Forhelse SFI contributed in February to the national leadership conference for eTreatment, organized by the Interregional Competence Network (IRK) in Trondheim on 6–7 February. Over two days, participants explored how to accelerate the development and rollout of digital health services, with presentations of treatments already in use and those under development. The conference, opened by Forhelse SFI board member Elin Ulleberg from St. Olav’s Hospital, gathered more than 150 participants from 14 hospitals and highlighted the gap between the number of patients who could benefit from eTreatment and those who currently complete available programs.



Ulleberg emphasized the need for active change management and closer collaboration among professionals and organizations. Attendees were also inspired by contributions from the new Directorate of Health, Minister of Digitalisation Karianne Tung, and Nick Titov from the Mindspot Clinic in Australia—who is also a member of Forhelse’s Scientific Advisory Council. Titov shared how Mindspot increases access to mental health services across Australia through self-help programs, assessments, and guided digital treatments, including efforts aimed at supporting people in particularly challenging life situations.

The Norwegian Institute of Public Health nominated the UngSpotlight app to the EU Joint Action MENTOR, where Forhelse SFI postdoctoral researcher Smity Kahlon contributed to a 2025 review. The EU initiative aims to promote mental health across Europe and strengthen understanding of digital mental health solutions, identifying effective resources for users in member countries. Apps that meet the criteria may be included in the EU’s Best Practice Portal, giving UngSpotlight formal recognition on the project’s website, greater visibility in Norway, and valuable feedback to support further development.



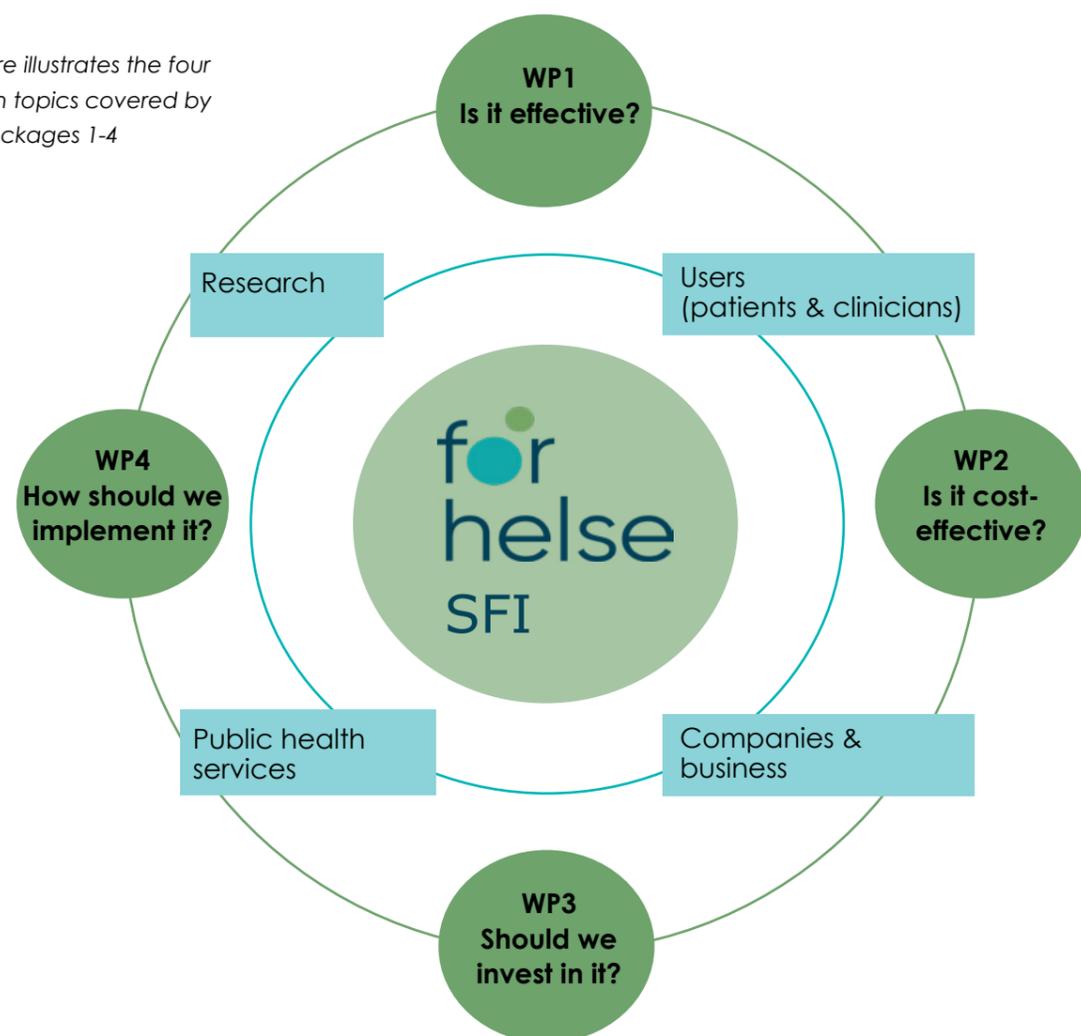
Strategy: Research and innovation

Research

Forhelse SFI's main objective is to increase the use and impact of digital health services. Haukeland University Hospital (HUH) is the host institution, and key research partners include Oslo University Hospital (OUS), St. Olavs Hospital (St. Olavs), and the University of Bergen (UiB), in addition to our nine healthcare partners and five industry partners. [Please read more about Forhelse SFI.](#)

In its work to increase the use and effectiveness of digital health services, Forhelse SFI examines four main themes related to digital psychological treatments: Do they work (effectiveness), are they cost-effective (cost-benefit), do decision-makers receive support early in the innovation process (early health technology assessment), and what hinders or promotes the implementation of digital health services. Each main team consists of several sub-projects, with a project leader reporting directly to the corresponding work-package leader (WP-leader). The results from this research, along with the experience gained, are applied by our healthcare and industry partners.

The figure illustrates the four research topics covered by work packages 1-4



Mid-term Evaluation by the Research Council of Norway: Forhelse SFI Approved for Continued Funding

Forhelse SFI is one of 22 Centres for Research-based Innovation established in 2020. As part of the national SFI scheme, all centres undergo a comprehensive mid-term evaluation 3,5 years after start-up. The outcome determines whether the centre will receive funding for its final three years.

The evaluation of Forhelse SFI began in autumn 2024, and on 19 March 2025 we received the very positive news: Forhelse SFI has been approved for continued funding under the current contract.

We extend our sincere thanks to all partners, the Board, work package leaders, support staff, our Scientific Advisory Council, and the Research Council of Norway. Your contributions have been crucial to a thorough and constructive evaluation process.

The international expert panel concluded that: "The Centre is conducting research and educational activities of very high quality and is working well with commercial and public sector partners. It is on track to more than meet its formal objectives and is likely to exceed the original targets in several areas by the conclusion of the project."

In addition to this strong endorsement, the panel highlighted three areas where the centre can grow even further in its final phase:

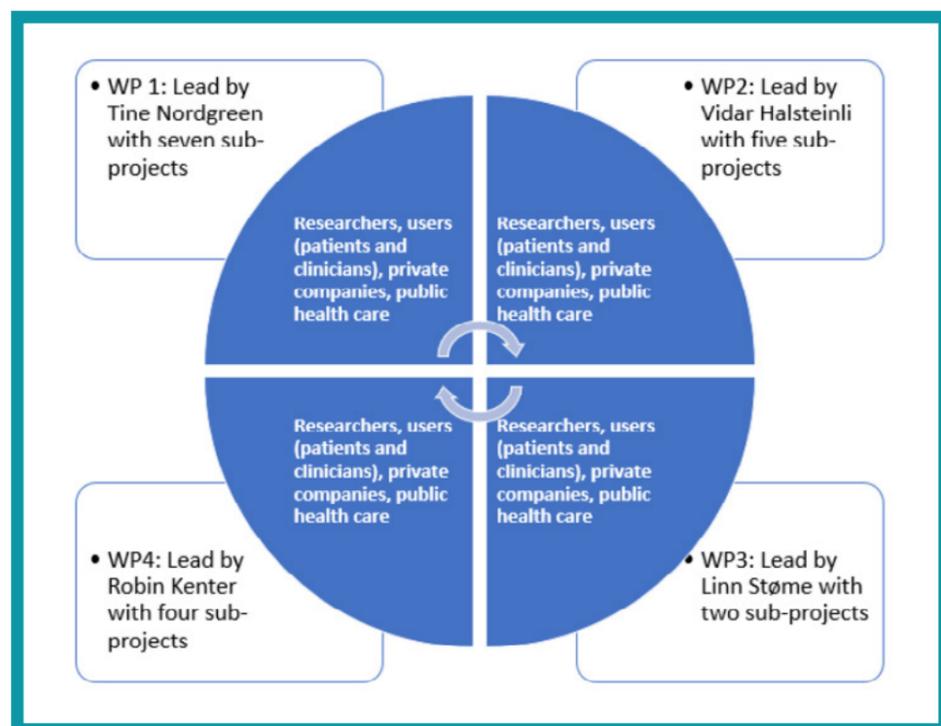
1. Strengthen the centre's identity and visibility – Increase scientific publications and broader dissemination efforts and develop a plan to sustain this beyond the project period.
2. Enhance the centre's role as a network facilitator – Expand collaboration with users, including new user partners, and increase engagement with society and the private sector.
3. Prioritise strategic, high-level discussions – Assess what has been achieved towards the centre's ambitious main goal (that at least 15% of psychological interventions in Norway should be offered digitally), identify remaining knowledge gaps, and consider how the centre's work can inform national and international health policy.

We are now incorporating these recommendations into our work plans and strategic documents for the final project period — ensuring that Forhelse SFI continues to deliver high-impact research and innovation for digital mental health.

Innovation

The SFI scheme of the Research Council of Norway aims to strengthen innovation and value creation in Norwegian industry through longterm research. To achieve this, research results must actually be taken into use by the partners. Therefore, all SFIs enter into a consortium agreement that regulates rights and obligations related to the results. In Forhelse SFI, a routine has been established whereby new results are reported to the board through a Notification of Rights. This functions as an agreement on the transfer of rights and ensures that results can be used for both commercial and noncommercial purposes. As a general principle, ownership of technological results is assigned to the technology providers, while ownership of clinical content is assigned to the research and healthcare partners. The Centre also follows up innovations by contributing knowledge to support decisionmaking. One example is the costeffectiveness analysis of the Mamma Mia programme, carried out by St. Olavs Hospital. The analysis provided the Norwegian Directorate of Health with a solid basis for assessing licensing and led the directorate to continue the licence.

Forhelse SFI has also structured the Centre to ensure that its research is valuable to both healthcare services and industry partners. This means that participating companies and public healthcare providers are directly involved in research topics relevant to them and meet with work package leaders and researchers from the earliest stages of each sub-project. This integrated setup strengthens the connection between research, healthcare, and industry. In addition, centre management and work package leaders organize several joint gatherings each year, where partners and researchers come together to discuss and engage with topics of shared relevance



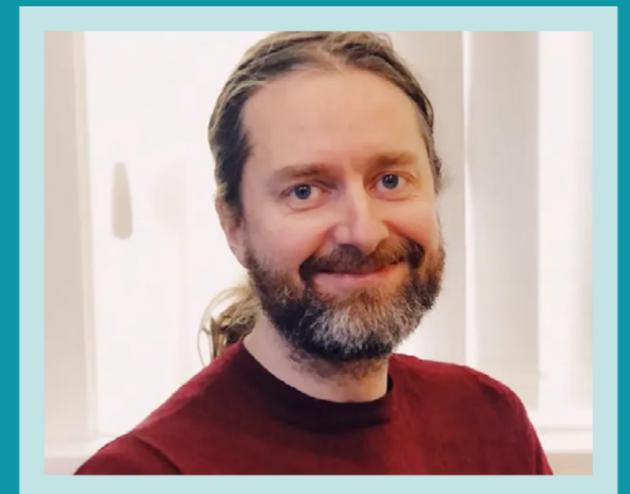
The figure illustrates the four main research topics covered by work packages 1-4 and how the different stakeholders are integrated in Forhelse SFI.

Key innovations in 2025

In 2025, we highlight the following examples of how results from the centre have been put into use in the healthcare services:

Work and Health

A new initiative within eHealth treatment is the project eTreatment Work and Health, a groundbreaking effort aimed at digital work-focused therapy. The project is led by one of Forhelse SFI's partners, Solli DPS, and is among the first in the world to offer patients in specialist mental health services digital work-focused therapy. The background is the increasing sickness absence in Norway, particularly due to mental health challenges. Digital treatment has already shown effectiveness in helping long-term sick-listed individuals return to work. Now, 400 participants in the South-Eastern Norway Regional Health Authority and the Western Norway Regional Health Authority will receive the digital treatment, which combines a focus on mental health and work mastery. The project examines usefulness, user experience, and patient satisfaction, with the goal of national implementation.



Henning Monsen is a PhD candidate at Solli DPS.

Based on this, PhD candidate Henning Monsen from Solli DPS published a scientific article in 2025 (PDF) [Work-focused therapy in an internet-based CBT format – A mixed methods feasibility study](#)

The study shows promising results in reducing sickness absence and improving mental health symptoms:

- **Purpose:** To test a work-focused internet-based cognitive behavioural therapy (W-ICBT) for patients with depression and/or anxiety who are on sick leave.
- **What was done:** A study with 15 participants, measuring treatment use, return to work, self-efficacy, symptoms, and quality of life.
- **What was achieved:** Eleven participants completed the treatment. Sickness absence decreased from 79% to 32%. Clear improvements were found in self-efficacy, depression, and quality of life, but no changes in anxiety or daily functioning. Interviews supported these findings.

Conclusion: Work-focused internet-based cognitive behavioural therapy (W-ICBT) appears promising for reducing sickness absence and should be investigated further in larger studies.

The Gastrointestinal School

The Gastrointestinal School expanded its services nationwide in 2025. It is a digital treatment programme for irritable bowel syndrome (IBS) and has treated more than 1,200 patients at Helse Bergen, receiving highly positive feedback. The programme continues to have good capacity, and information about the service is actively shared with general practitioners and patients. Forhelse SFI is examining factors that influence implementation, and the findings will support further national rollout.

PhD candidate Camilla Thuen from the Gastrointestinal School at Helse Bergen published a scientific article in 2025 based on her research on treatment for patients with IBS. The article was published in BMC Health Services Research and is titled: [\(PDF\) Implementing a digital treatment program for patients with irritable bowel syndrome into routine care: a qualitative evaluation of barriers and facilitators perceived by key stakeholders.](#)



PhD fellow Camilla Thuen.

Purpose: The aim of the study was to investigate how a digital treatment programme for patients with IBS can be integrated into routine healthcare services, and to identify factors that hinder or facilitate this process as perceived by key stakeholders.

What was done: Sixteen individuals involved in the use of the digital IBS programme in specialist healthcare services were interviewed. Participants represented a range of roles, including senior management, physicians, and implementation leads. The study showed that participants recognised both advantages and challenges associated with introducing digital treatment.

What was achieved: The study identified facilitators and barriers to implementing a digital treatment programme for IBS in routine healthcare services.

Facilitators:

- Clear advantages of the programme compared with traditional treatment
- Critical incidents increased awareness of the need for change
- Team engagement and collaboration supported progress

Challenges:

- Lack of funding and insufficient planning were the main obstacles

What is the Gastrointestinal School? The Gastrointestinal School (GI School) is an online treatment programme for individuals with irritable bowel syndrome (IBS). It provides evidence based support to help you understand and manage your symptoms — at the time that suits you best. You work from home, at your own pace, using tools and exercises designed to improve everyday coping and quality of life.



Birgitte Berntsen Jacobsen (no 3 from left), and her team at the Gastrointestinal school.

Methods for Better Innovation

Forhelse SFI works with methodologies that can support better decision making and cost savings related to digital health innovations. What if we could know earlier whether a new health innovation is truly worth investing in—before large sums are spent on research, development, and procurement? Within the theme of “Early Health Technology Assessment,” research is being conducted on how decisionmakers can receive support at an early stage of innovation or change processes. Early assessment builds on research from the former SFI Centre for Connected Care and further develops and improves the “Step Up” framework - an openly accessible framework for anyone involved in innovation and service development in the health sector. The framework consists of four components that guide an innovation project step by step from idea to actual change, helping reduce waste of research funding and ensuring that new solutions genuinely address real needs.

In 2025, the Early Assessment research team worked along two tracks to adapt the method to digitalisation and mental health. In collaboration with Norway Health Tech, the method has been incorporated into a framework under development for evaluating digitalisation in healthcare services. Furthermore, Step Up will be used as decision support when the Clinic for Mental Health and Addiction at Oslo University Hospital (OUS) develops its digital outpatient clinic across the clinic’s treatment services.

Based on this researcher and work package-leader Linn Nathalie Støme, published a commentary article titled [\(PDF\) Defining early health technology assessment: building consensus using Delphi technique: a commentary on implementation and diffusion of early HTA](#) in the International Journal of Technology Assessment in Healthcare. The article comments on the first consensusbased definition of Early Health Technology Assessment and is important for the implementation and dissemination of the method.

- **Purpose:** Improve tools for innovation.
- **What was done:** Through an international Delphi study, researchers in the Netherlands, England, and other countries established the first consensusbased definition of early assessment: Early Health Technology Assessment informs decisions about further development, research, and investment by evaluating the potential value of a method at an early stage. In her commentary article, Linn Støme highlights how early assessment can play a key role in public–private collaboration, technology transfer, and public procurement.
- **What was achieved:** By clarifying the value of a new method early, it becomes easier to invest in solutions that deliver health benefits and societal value. For example, public actors can use the method to set clearer requirements in procurement processes, and private actors can adapt product development based on early assessments of needs.



Work package leader Linn N. Støme.

Youwell – Application for Classification as Medical Device

Youwell is one of Forhelse SFI's industry partners and provides a secure ehealth platform for developing and delivering digital health services across patient pathways. The platform supports services related to prevention, treatment, training, rehabilitation, and followup. Through its longstanding research and innovation collaboration with Forhelse SFI, Youwell is now applying to have the platform classified as a medical device under the EU Medical Device Regulation (MDR), class IIa. This risk class includes digital technologies used for monitoring, assessment, and support in clinical decisionmaking.

Such classification will enable Youwell to further develop and launch new functionalities that fall under regulated medical software. It will enhance the quality of care for both patients and clinicians by ensuring access to safe and quality-assured digital tools. The work to classify the platform as a medical device is supported by clinical research conducted on treatment programmes delivered through the platform.



CEO at Youwell Øyvind Grimsgård in discussion with Marthe Brurok Myklebost, eTreatment, Øystein Tveite, the Director of Health and Geir Granerud, Helse Vest IKT.

Scientific activities and results

The Centre's research activities are divided into four work packages. These work packages cover the effectiveness (WP1) and cost-effectiveness of digital health services (WP2), early health technology assessments (WP3), and how these technologies are implemented in real-world settings (WP4).

Work package 1: Effectiveness

This work package focuses on how internet-delivered treatments are developed and evaluated. The research theme "effectiveness" investigates the feasibility, acceptability and effect of various digital psychological treatments. The group working on effectiveness is organized in a work package that consists of researchers, healthcare and industry partners, as well as end-users. The implementation of these studies is crucial for documenting the feasibility, acceptance and effectiveness of digital psychological interventions, and will contribute to future innovation and value creation in the form of research-based and quality-assured programs, health apps, and scientific publications. The projects use the "Person-Based Approach" (PBA) as a framework for user-involvement. PBA integrates quantitative and qualitative data on relevant health issues and ensures high end-user involvement in the development of digital interventions.

Highlights from 2025

- Five scientific articles published in peer-reviewed international journals! More articles are submitted / in review.
- National and international dissemination through oral conference presentations at ESRII, Alrek Helse dager and DigitalHelse25.
- The first PhD thesis from our work package has been submitted.
- International research stay at Maquire University, Sydney, Australia by post doc Smiti Kahlon which has led to the development of a new subproject: Big 5 for public mental health.

Activities and results in the subprojects

The work package has the following ongoing subprojects, and included participants/patients are as follows:

Digital psychological treatment for adolescents with anxiety:

The study is conducted in Bergen Municipality with Yowell as the platform provider.

Included: 12.

Contact person: PhD Smitti Kahlon.

Digital psychological intervention for improving better mental health the general population:

The Big five project- a three-arm randomized controlled trial. The study is conducted with Yowell as the platform provider. Included: 242.

Contact person: PhD Smitti Kahlon.

Digital psychological treatment for adults' post-cancer treatment.

The study is conducted in Helse Bergen with Youwell as the platform provider. Included: 76.

Contact person: PhD Sunniva Myklebost.

Digital psychological treatment for adults with ADHD in routine care.

The study is conducted in Helse Bergen with Youwell as the platform provider. Included: 357.

Contact person: PhD Aleksander Heltne Gulla.

Digital psychological self-help for adults with mental health problems.

The study is conducted at occupational health services in various companies with LifeKeys as the platform provider. Status: Pending.

Contact person: PhD Aleksander Heltne Gulla.

Guided transdiagnostic internet-delivered treatment for adults with common mental health disorders, and who are on sick-leave or at risk for sick leave.

The study is conducted at Solli DPS, Helse Bergen, Vestfold Hospital trust, Sykehuset Innlandet, and more.

The platform is provided by Youwell AS. Included: 105.

Contact person: PhD candidate Henning Monsen.

Exploring possible future clinical studies using VR for adolescents in primary care.

The clinical studies may be conducted in Bergen Municipality with Fornix AS as the platform provider. Status: Pending.

Contact person: PhD Smitti Kahlon.



Innovations supported by the work package

- Based on the needs of adults with attention and concentration difficulties we have extracted content from our different interventions resulting in the self management program "Attentiv". Attentiv was developed in collaboration between the Section for eTreatment and the Section for eHealth. User participation has been central to the entire development process. Attentiv is available at Helse Bergens webpage [Attentiv](#).
- Two of our researchers have applied and received funding for developing an app for women with premenstrual dysphoric disorder. Congratulations!
- Our partner Youwell AS celebrated in 2025 their 10-year anniversary. Researchers at Forhelse SFI has been a part of this journey since the very beginning and are looking forward to future collaboration!

The self management program Attentiv

Therapists are seeing an increase in the number of people experiencing attention and concentration difficulties. Some of these individuals seek help from their general practitioner, some from specialist health services, while many do not seek help for such challenges at all. On social media, people can find a great deal of information about these difficulties, but much of it is not evidencebased or qualityassured.

The digital selfmanagement program Attentiv is intended as a counterbalance to this and has been developed as a lowthreshold service to make the healthcare sector's knowledge easily accessible.

Partners

- **Haukeland University Hospital** leads the research activities.
- **Bergen municipality** is collaborating with Forhelse SFI to research and implement the Modi app amongst adolescents.
- **Youwell** delivers the platform for various digital programs, such as Modi and MyADHD.
- **University of Bergen** contributes to the research activities.
- **Fornix** joined as partner in 2024 and will help explore the use of VR technology in treatment.
- **Helse Vest IKT** supports scalable IT architecture across service levels.
- **Solli DPS** joined as partner in 2024 and will help investigate the effects of eTreatment Work and Health.



UNIVERSITY OF BERGEN



Solli DPS



fornix

Work package 2: Cost-effectiveness

In this work package, we evaluate the cost-effectiveness of digital health services and identify factors that may influence the cost-effectiveness of such services. We assess cost-effectiveness alongside RCT studies providing evidence whether to implement or not, and we assess costs and outcomes after implementation, that is from real-world healthcare settings. The aim is both to provide practical methodological knowledge to enhance and advance the application of economic evaluation at different stages in the innovation process, from development to implementation, and to provide cost-effectiveness results from evaluation of specific digital interventions.

In 2025 the work package has provided knowledge to healthcare partners and business partners about how to calculate the relevant intervention or program costs, whether digital self-help programs are cost-effective and main factors that should receive major attention to assure cost-effectiveness in routine practice.

Highlights from 2025

- The peer-reviewed Journal of medical Internet Research published the paper "Costs and Outcomes of a Therapist-Guided Internet-Delivered Cognitive Behavioral Therapy: Multi-center Observational Study" by PhD candidate Khan et al.
- The paper "Long-term clinical and cost-effectiveness of a fully automated digital cognitive behavioral therapy for insomnia: A two-year follow-up of a large-scale randomized controlled trial" was submitted to The Lancet Regional Health - Europe.
- Three papers from WP2 were presented in November 2025 at the National Conference on Health Service Research in Trondheim.
- The start-up of a new collaboration team between Trondheim Municipality and St. Olavs Hospital supported by InnoMed, assessing referrals and requests for digital mental health treatment.



Activities and results in the subprojects

Cost-effectiveness study of an evidence-based digital psychological intervention preventing postpartum depression and enhancing quality of life (Mamma Mia)

Data collection for the Mamma Mia-study on prevention of postpartum depression was finished. This study compares the utilization of the Mamma Mia self-help app with added health personnel involvement to Mamma Mia self-help only. A total of 44 well-baby-clinics and 812 women participated, and analyses of effectiveness and cost-effectiveness was started late 2025. Analyses and submission of a scientific paper will be finalized early in 2026. The value of this study is to assess the importance of low-level health personnel involvement from midwives and nurses at well-bay clinics, both in terms of added outcomes and costs. In addition, results from this study will feed into the next step of the subproject where a model-based analysis on long-term cost-effectiveness of Mamma Mia is taking place, and by long-term a 20-year perspective is being applied. Long-term evidence on prevention interventions is important both for health service and business partners.

Cost-effectiveness evaluation of SHUTi – a digital CBT-based treatment program for insomnia

The long-term clinical and cost-effectiveness of fully automated digital cognitive behavioural therapy for insomnia (dCBT-I) remain uncertain. In this study we aimed to evaluate the long-term cost-effectiveness of dCBT-I in the general population. A parallel-group randomized controlled trial was performed comparing dCBT-I to patient education. Participants were self-recruited. At 2-years follow-up results indicated significantly lower long-term insomnia severity with dCBT-I and an additional gain in quality adjusted life years (QALYs). Total costs were €6,183 for dCBT-I versus €6,461 for PE, yielding lower costs an outcome improvement.

These findings support dCBT-I as a scalable and cost-effective long-term intervention for insomnia in the general population and inspire both health service partners and business partners in collaboration to achieve universal access to dCBT-I.

Innovations supported by the work package

- The iCBT results of eTreatment have supported the start-up of a new collaboration team between St. Olavs hospital and Trondheim municipality. The aim was to establish a new shared organizational unit assessing referrals and requests for digital mental treatment broadly, aiming to increase access to treatment across primary- and specialist services.
- The paper published by Khan et al in 2024 and the checklist for program cost estimation have supported methodological improvements in evaluation of cost-effectiveness at different stages in the innovation process, from development to implementation.

Evaluation of costs and outcomes of eTreatment at four sites in Norway

We analysed data from routine care at four hospitals in the period 2021 to 2024 and benchmarked across different service models. The treatment consisted of therapist-guided internet delivered cognitive behavioural therapy (iCBT) for depression, social anxiety and panic disorder, and the results from 565 participants showed substantial improvement across a range of outcomes post treatment and six months later. Results were consistent across hospitals, but the program cost per patient varied substantially between hospitals, mostly due >>



PhD candidate Zareen Abbas Khan submitted her thesis "Cost-Effectiveness of Digital Psychological Interventions: Methodological challenges and empirical evidence" in August 2025 and defended the thesis at the beginning of 2026.

to patient volume. This study confirms the potential of therapist-guided iCBT when implemented as part of routine specialist healthcare. The observed differences in costs per patient underscores the importance of patient volume to optimize efficient use of resources. A scientific paper was published in spring 2025 (Khan et al, 2025). An additional analysis of engagement, system usability and outcomes of the eTreatment at the four hospitals have been performed, and preliminary results was presented at the National Health Service Research Conference in Trondheim in November 2025.

Measurement of productivity and efficiency of iCBT delivery at four hospitals

Following up on cost per patient variation reported by Khan et al (2025) an assessment of productivity and efficiency measurement of eTreatment delivery was performed in 2025. It was motivated

by the anticipated efficiency increase that may follow increased use of digital treatment interventions (DHI) accommodating more patients without a proportional increase in therapists or costs. The assessment used data from 2022 and 2023, and the four hospitals differed with respect to organizational set-up for eTreatment delivery. We applied three indicators of productivity hypothesized to show similar results when comparing delivery unit performance. However, results differed between indicators – mainly due to lack of accuracy of resource input measurement. Results were presented at the Norwegian Health Service Research Conference in November 2025, and a scientific paper will be submitted in spring 2026. For both health service partners as well as business partners it is important to know that productivity gains need to be assessed at department or hospital level, rather than at the eTreatment delivery unit level.

Platform Transition in Internet-Delivered Mental Health Services: Comparing Two Platform Versions

In 2024 a new technical platform for eTreatment provided by Youwell, was launched and implemented in the participating hospitals. This update included changes in technical features as well as changes in the content. A major update like this requires documentation and quality insurance through scientific methods to assess how platform changes affect quality, patient experiences, adherence and service delivery. The aim is to describe changes with the new platform, and to analyse associations that these changes might have with important outcomes. Inclusion of patients and preparations for data extraction from the new platform was carried out in 2025 and will be completed in 2026. The study will provide experiences and knowledge from technical platform changes of high value for both health service- and business partners.

Partners

- **St. Olavs Hospital** leads the research activities and offer eTreatment at their mental health clinic.
- **Haukeland University Hospital, Vestfold Hospital Trust, Innlandet Hospital Trust** offer eTreatment at their mental health clinics.
- **CheckWare** provided the former eTreatment platform, while **Youwell** provides the current platform.
- **Changetech** developed the Mamma Mia app, in collaboration with **RBUP HSØ**, and in addition RBUP HSØ is leading the ongoing Mamma Mia-study.
- **PBUP HSØ** is a collaborating research partner at the Mamma Mia studies.



Work package 3: Early Health Technology Assessment

In this work package, we examine ways to provide decision-makers with early-stage decision support during innovation and change processes. We focus on evaluating new services and technologies, developing methodological approaches, and assessing data validity to estimate the value of innovations at an early stage.

Highlights from 2025

- PhD candidate Mari Skoge published her first article, and submitted her second article, while working in her final stages of her third scientific publication.
- During spring 2025, Mari Skoge spent three months at the Hospital Clinic in Barcelona as a visiting researcher.
- WP leader Linn Nathalie Støme was accepted for a three-month international collaboration with the Agostino Gemelli University Policlinic and University Cattolica in Rome in March 2025.
- The eHTA framework StepUp was integrated in a project with Norway Health Tech.
- Project startup of the development and testing of a «Digital Clinic» in The Clinic of mental Health and Addiction at OUS. This project will serve as an umbrella for our Forhelse SFI projects.
- Broad representation of five Forhelse SFI projects at the international conference IEPA in Berlin.
- Submitted three articles, four accepted and four published in 2025.
- Work package 3 hosted the Forhelse partner seminar in Oslo with a following article in Dagens Medisin on how to succeed in digitalization.

Innovations supported by the work package

- Digital Clinic has established 12 pilot projects in the Clinic for Mental Health and Addiction including over 70 healthcare personnel.
- A consensus-based definition of eHTA was established with and commented on by the WP.
- A framework for pre commercial procurement based on StepUp was developed and implemented in a Horizon 2020 project.
- The video consultation tool "Tegn til Bedring" is in its pre stage of development with our partner Youwell.
- AI powered conversation simulator in Psykosekompetane.no

Activities and results in the subprojects

Progress of iTandem.

In 2025, Mari Skoge published her first study in her PhD: A Mobile App Designed to Promote Shared Decision-Making in the Treatment of Psychotic Disorders: Feasibility and Acceptability Study. The study was a feasibility study of the app iTandem at Innlandet Hospitality Trust. Following this study, we completed another pilot study at the Adult psychiatry department at Vinderen, testing the app in specialist treatment for psychosis. Recruitment, data collection and analysis were completed in 2025, and the manuscript is now in its final stages. This will result in Mari's third publication in her PhD.



REACT Nor – follow-up of next of kin for psychosis patients.

In 2025, we completed an economic simulation on how introducing a digital intervention alongside the gold standard psychoeducational groups, affects economy. We have looked at health related costs as well as social costs. The platform is designed to support the follow-up of next of kin within early intervention units for psychosis nationwide. The paper is meant as a policy paper on incentives for implementing digital health solutions.

CBTi for heart patients.

The economic modelling study "Potential benefits of group cognitive-behavioural therapy for in-

somnia in outpatients with coronary heart disease versus usual care: an early economic evaluation" was published in 2025. We developed an economic simulation model in preparation for the results of a randomized controlled trial (RCT) on CBTi group therapy for heart patients. The economic simulation study was published in BMJ Open (n = 1,127). The CBTi group course is available at Vestfold Hospital Trust as part of the RCT. We are planning to create a digital solution in collaboration with our Forhelse SFI partners.

Therapists' experiences and attitudes toward video consultations.

The second journal article in Mari Skoge's PhD "Behind the screen: a qualitative study exploring video consultations across the public and private sectors in Norway" was submitted. The study mapped out private and public sector implementation and adoption experiences with video consultations.

Digital Clinic (KPHA, OUS): The project was established in 2024 with the primary objective to develop a robust framework for digital services at the Clinic for Mental Health and Addiction. The study was designed as a series of pilots utilizing mixed-method analyses, action research and eHTA. Through locally anchored pilots across various departments in the clinic, digital services will be tested as either a replacement for or a supplement to in-person attendance over eight-week periods. The design, data collection protocol and necessary approvals were important parts of the groundwork completed in 2025. Led by TIPS Sør-Øst, the project is firmly integrated into the clinic's leadership and strategic plans. Strict privacy frameworks via TSD (Services for Sensitive Data) and comprehensive training packages for clinicians have been established. Iterative testing will continue through 2026, with the goal of completing data collection in 2026.

A tool to enhance video consultations: The project “Tegn til bedring” (TTB) is a collaboration with Youwell and is central to developing a «Digital Clinic». TTB is creating a digital whiteboard to improve video consultations in mental healthcare. With features like co-writing, drawing, and resource sharing, it replaces physical tools, making video therapy more engaging and effective. In 2025 we have prototyped and tested different clinical scenarios with patients and applied for more funding.

Incorporating AI tools:

As an extension of the online interactive learning platform psykose-kompetanse.no, TIPS SØ, in collaboration with Skills AS, has initiated the development of an AI powered conversation simulator. The simulator enables clinicians to practice communication skills, symptom recognition, and admission interview techniques through direct verbal interaction with preprogrammed personas designed to simulate a range of clinical encounters. TIPS SØ will lead the research efforts and engage resources from the present WP in guiding further development of the simulator and will explore additional future areas of application.



Photo credit: Adobe Stock

A common framework for evaluating digital services in healthcare – an initiative lead by Norway Health Tech:

In 2025, WP3 has collaborated with Norway Health Tech on a 1.5year project funded by Akershus County to explore models for documenting cost–benefit of digitalized services across the health and care sector. Workshops and dialogue meetings revealed major variation in how organizations measure effects. A key insight is the need for national frameworks that ensure comparability while allowing local adaptation. Stakeholders across the entire ecosystem – from hospitals and municipalities to authorities and the technology industry – highlighted issues with data quality, missing baseline measurements, and limited evidence. WP3 contributed with learnings from the application of the eHTA framework StepUp to clarify where value is created and for whom. Today, cost–benefit assessments are isolated, hindering learning and shared progress.

A more coordinated, evidencedriven approach is needed to treat digital solutions as investments, not costs.

Partners

- **Oslo University Hospital** leads the research activities.
- **Vinderen DPS (Adult Psychiatry Department at Vinderen)** joined as a partner in 2024 and will contribute with data from testing the iTandem app on their patients and staff.
- **Youwell** contributes to the Digital Outpatient Clinic through the Pilot Helse pre-project.
- **OUS user partner:** TIPS HSØ in lead, joined as partner in 2025 and will contribute with projects in Digital Clinic.

Work package 4: Implementation

In this work package we focus on how digital health services are put into practice. We explore the factors that help or hinders the successful use of these services in routine care and examine the impact of (tailored) strategies for their implementation.

Highlights from 2025

In 2025, WP4 increased its value for partners by turning research findings into practical insights for service leaders, clinicians, and technology providers. Health service partners benefit from clearer guidance on how to plan and carry out implementation work and manage technology changes, while industry partners gain insight into clinician needs, acceptance, and the conditions required for successful use of digital mental health solutions:

- Submission of 6 manuscripts to international peer-reviewed journals (BMC Health Services Research, BMC Digital Health, Nature Mental Health and Implementation Research and Practice), addressing implementation related outcomes, technology acceptance, and predictors of outcomes.
- Two peer-reviewed journal publications in Internet Interventions and BMC Health Services Research.
- National and international dissemination through oral conference presentations at SWESRII, ESRII, Alrek Helse dager, DigitalHelse25, and the Norwegian Health Services Research Conference.
- International research stays at Karolinska Institutet and Amsterdam Centre for Implementation Science (AmsCIS), significantly strengthening analytical quality, methodological competence, and international collaboration.
- Symposium at ESRII (WP4) ([ESRII 2025, europeisk forskning på internet intervensjoner - Forhelse](#)) and Alrek helsedager: [Muligheter og utfordringer knyttet til innføring av digitale behandlingstilbud - Forhelse](#)

Innovations supported by the work package

- Providing documentation on how clinician acceptance of iCBT develops and changes during technology transitions, enabling health services to better plan and manage platform changes in routine care.
- Identifying specific organizational and contextual factors, like therapist roles, patient expectations, and service organization that influence the way iCBT becomes part of routine practice over time.
- Testing and applying an evidence-informed implementation support tool (ItFits Toolkit) that health-care services can use to plan, adapt, and strengthen local adoption of digital treatments.
- Producing the first national overview of therapists delivering iCBT, offering services and partners a factual basis for workforce planning, training, and targeted implementation support.

Activities and results in the subprojects

A qualitative evaluation of the implementation of iCBT for three clinics

This subproject examines how outpatient clinics integrate therapist-guided internet-delivered cognitive behavioural therapy (guided iCBT) into routine services, focusing on how the intervention fits existing clinical structures and reshapes therapist roles and patient expectations. Interviews and site visits with healthcare professionals showed that implementation was influenced by the perceived fit between the intervention and its professional, organisational, and external contexts.

Although guided iCBT has a strong evidence base, clinicians often viewed the platform as outdated and insufficiently flexible, reducing its perceived value. Professional orientations, organisational preparedness, and tensions between digital and traditional in-person therapeutic practices further shaped perceived legitimacy.

Adoption of guided iCBT introduced new demands on therapists, including additional administrative tasks and responsibility for presenting and promoting the treatment, while also offering greater flexibility. Both therapists and patients required time to adapt to a non-face-to-face model, and motivation and ability to work independently were identified as key determinants of engagement and outcomes. Overall, the findings show that implementing guided iCBT affects multiple organisational levels and highlights the need for tailored implementation strategies responsive to local context. Findings are reported in three scientific papers (one under review, one submitted, and one in preparation).



Phd candidate Beate Standal examines how outpatient clinics integrate therapist-guided internet-delivered cognitive behavioural therapy (guided iCBT) into routine services.

Determinants influencing implementation of guided Internet-delivered treatment for adults with IBS (routine specialist healthcare)

The implementation study explored how the digital IBS-school is integrated into routine care. Interviews with key stakeholders showed that the program is viewed as clinically useful and aligned with service needs, while challenges related to financing structures and planning processes limit scalability and long-term sustainability. Facilitators included organizational motivation, perceived clinical benefit and strong cross-disciplinary collaboration. Together, the findings clarify what health services need to integrate digital interventions into somatic care and where key systemic barriers remain. The study demonstrates that successful implementation of internet-delivered interventions for IBS requires early attention to structural and organizational factors. Clear financing pathways, stronger planning processes and deliberate use of organizational readiness and perceived clinical benefit may support long-term integration. These insights provide a more practical understanding of how digital programs can be sustainably embedded within secondary care services.

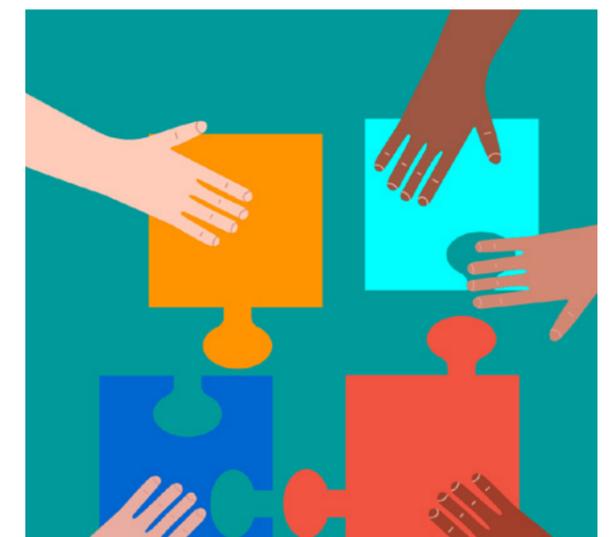
Determinants of digital mental interventions for adolescents with anxiety in primary mental healthcare

In 2025, this subproject completed a mixed-methods pre-implementation study on introducing guided digital mental health interventions for adolescents with anxiety in municipal primary care. Interviews with healthcare professionals and leaders were combined with short questionnaires to assess readiness and fit. The study identified clear benefits, such as improved access to care, but also important barriers, including limited digital com-

petence, time pressure, unclear responsibility, and weak integration with existing workflows. Successful implementation was found to depend on leadership support, system integration, and the use of hybrid care models. Findings were used by municipal service leaders in a 2025 workshop to inform implementation planning.

Multicenter Tailored Implementation Study (It-Fits)

This study investigates the use of the self-guided implementation support tool ItFits Toolkit among routine care staff implementing iCBT. In 2025, seven implementation projects using the toolkit were followed across multiple sites. Four qualitative interviews were conducted in May to explore how the toolkit was used in practice, perceived usefulness, and contextual influences on implementation. Data analysis is ongoing. The study will result in a qualitative publication examining which elements of the toolkit work and under what circumstances, planned for publication in 2026. Findings will inform further refinement and optimisation of the toolkit and implementation work in routine care settings.



Platform change and technology acceptance among iCBT therapists

This national longitudinal study examines therapists' acceptance of iCBT and how acceptance is affected by large-scale technology change. Data were collected using repeated measures among therapists delivering iCBT in Norwegian specialist mental health services. In 2025, data collection was completed, comprising 47 therapists (69% of the national iCBT therapist population). One paper describing therapist characteristics and acceptance levels was published, and a second paper examining changes in acceptance during a national technology transition was finalised and submitted in 2025.

Analysing Therapists' and Patients' Time Utilization in Digital Mental Health Services

This study examines how therapist and patient time is allocated in digital mental health interventions, addressing the gap between reported and actual time use. In 2025, initial analyses revealed that nearly two-thirds of patient-related therapist time occurred outside direct interaction with the treatment platform. Together with an ongoing scoping review, the findings indicate that time use in digital interventions is systematically underreported, limiting accurate implementation planning and scaling. The study identifies additional time categories necessary for realistic workforce planning in digital services.

Scoping review of the literature on strategies for implementing and upscaling iCBT

This scoping review aimed to identify higher-level implementation strategies at organizational and governance levels that support the successful integration and sustainability of guided DMHIs in real-world settings. The review addressed: (1) implementation outcomes and determinants and (2) critical organizational and governance transformations enabling guided and blended DMHI uptake and dissemination. In this review key features for a successful and lasting implementation were identified. These include political commitment along with adequate resources for training, familiarisation, supervision, and long-term support. Ensuring regulatory compliance, data privacy, risk management, and reliable hardware and software is also critical. Involving key stakeholders, including healthcare professionals, managers, organisational leaders, and end users, helps increase acceptance and adoption. The scoping review was submitted to a scientific journal and is under review.



In work package 4, Researcher Iris Brunner presented promising figures from the literature on the measured effect of digital tools at the centre's joint meeting in June 2025. Therapist-supported eHealth interventions showed particularly good effect.

Partners

- **Haukeland University Hospital** leads the research activities.
- **Norwegian Centre for E-health Research (NSE)** contributes to the research activities and PhD supervision.
- **Haukeland University Hospital, Vestfold Hospital Trust, Innlandet Hospital Trust** and **Solli DPS** provide eTreatment at their mental health clinics and participate in the studies.
- **CheckWare** provides the platform for the digital IBS-school and previously provided the platform for eTreatment, while **Youwell** provides the current platform for eTreatment.
- **Bergen municipality** collaborates with Forhelse SFI to assess organisation readiness for digital treatment for adolescents with anxiety.
- **The digital IBS-school** carries out the the DIGIBS study.
- **University of Bergen** contributes to research activities, PhD supervision and PhD education.



CITY OF BERGEN



UNIVERSITY OF BERGEN



User involvement

Our user representative, Stine Hope, helps to spread knowledge and awareness about integrating user representatives into the various phases of research projects. Stine does a fantastic job in Forhelse SFI, and we would argue that our work packages, with their respective subprojects, are good at involving relevant representatives — such as patients, therapists, or healthcare service leaders — to improve the quality of our research projects.



To illustrate this, we would like to highlight one particularly example: Sunniva Myklebost's project Digital psychological intervention for adults recovering from cancer providing the firsttime documentation of a new software platform (this is subproject 3 in work package 1).

provided to patients by the healthcare services is also insufficient. Through her research studies, Sunniva aims to ensure that healthcare services are better equipped to address “chemobrain”, as these difficulties are often called, within treatment pathways. She has developed a questionnaire for cancer survivors with cognitive late effects, which will form the basis for further development of the intervention. The questionnaire was reviewed by user representatives from the Young Cancer Society, the Breast Cancer Association, and Helse Bergen. In digital meetings, user representatives, researchers, and clinicians discussed the content and proposed revisions. The project group reviewed these suggested changes afterwards. The user representatives then received an overview of which changes had been implemented based on their feedback.

In 2025, Sunniva and her team also published a scientific article in which two user representatives were coauthors: [Self-management of cognitive impairments: A qualitative study of cancer survivors' coping strategies | Supportive Care in Cancer | Springer Nature Link](#)



Research shows that 7 out of 10 cancer survivors experience cognitive difficulties following cancer. Photo:printscreen - nrk.no



Clinical Psychologist Specialist and researcher Sunniva Brurok Myklebost, Forhelse SFI

Sunniva has developed an intervention targeting cognitive difficulties following cancer. Research shows that 7 out of 10 cancer survivors experience these kinds of challenges. At present, there is little help available for this group, and the information

International cooperation

Nordic network

The Nordic countries have much in common, and therefore, Centre director Tine Nordgreen has taken the initiative to establish a Nordic forum for sustainable service models for digital mental health services: The Nordic Network for Better Digital Psychological Health Services. The Nordic countries face shared challenges in integrating digital mental health services into patient pathways and service models. The network exchanges experiences, tools, and strategies that can support this integration.

In connection with the European Society for Research on Internet Interventions (ESRII) in Vilnius in October 2025, Forhelse SFI hosted the third Nordic network meeting. Several topics were discussed at the meeting, including the implementation of internet-based psychological treatments, robust healthcare service models, sharing of treatment content and technology across national borders, as well as quality assurance of internet-based psychological treatments through quality registries, with examples from Sweden. Participants from all countries except Iceland took part in the meeting.



Participants from Norway, Sweden, Finland, and Denmark were represented at ESRII 2025.

There was general agreement that there is a significant need for a Nordic network going forward, and that it is important to clarify issues such as how to define digital treatment and who should be included from each country (e.g., patients, industry representatives, clinicians, leaders, and policymakers). The discussions in Vilnius further highlighted that a central goal for the network could be for the Nordic countries to jointly conduct a mapping exercise and develop recommendations for service models for digital health services across the Nordic region.

Now that a Nordic Network for Internet-Based Psychological Treatments has been established, the next step is to carry out a mapping with the aim of providing experience-based recommendations on robust service models to decision-makers. Forhelse SFI looks forward to continuing collaboration with our Nordic colleagues.

International research exchange

Forhelse SFI promotes international collaboration and research exchange. In 2025, five PhD fellows have undertaken research stays abroad, through which they have established and strengthened international academic networks.

Postdoctoral researcher Smiti Kahlon spent autumn 2024/spring 2025 on exchange at Macquarie University, where they work on the Big Five Intervention developed by Professor Nick Titov. The intervention, designed as a public health initiative, is based on five positive habits that support mental health: meaningful activities, helpful thoughts, goals and plans, good routines, and social relationships. At Forhelse SFI, we have developed a Norwegian version: 5 gode vaner ("5 Good Habits"). Recruitment for the intervention began in September 2025 and currently includes more than 200 participants.

PhD candidate Mari Skoge spent spring 2025 at the Hospital Clinic of Barcelona. The stay led to a publication on barriers to using digital mental health services: "The promise and challenges of mHealth in psychiatry: Bridging the gap between potential and long-awaited implementation," published in European Neuropsychopharmacology. Mari is also conducting a systematic review on sensor wearables for psychosis with the Barcelona team, and the manuscript is under submission. Scientific publications like this are important because research lays the foundation for innovation.

PhD candidate Reidar Nævdal completed a research stay at the Amsterdam Centre for Implementation Science (AmsCIS) at Amsterdam University Medical Centre in spring/summer 2025. The stay strengthened Forhelse SFI's visibility both at AmsCIS and at other European institutions through participation in the EU project PIECES, which works to improve cancer prevention. During the stay, he wrote and submitted a scientific article on therapists' perceptions of the effectiveness of internet-based cognitive behavioural therapy (ICBT) in Norway, and initiated collaboration on methods and statistics for a new study on how changes to IT platforms for digital treatments influence acceptability and implementation. He also participated in a workshop on qualitative research and realist evaluation, led by AmsCIS and international partners from PIECES.

PhD candidate Beate Standal undertook a research stay at Karolinska Institutet and Internetpsykiatrien in Sweden in autumn 2025. The stay contributed to knowledge exchange, network building, and increased visibility for Forhelse SFI in international research environments. It also provided access to advanced methodologies and expert feedback, strengthened academic skills, and enabled the integration of best practices from the host institution. Furthermore, the stay resulted in the submission of one scientific article, completion of a first draft of a new article, presentations at the SwesRll conference, and participation in meetings and seminars with leading researchers. The stay thus established a solid foundation for further collaboration and development in digital mental health.

PhD candidate Camilla Thuen completed a three month stay at Macquarie University, eCentreClinic (CC), School of Psychological Sciences in Sydney. The stay contributed substantially to both scientific progress and professional development. Results from the main Randomized Controlled Trial (RCT)-paper in Camillas thesis were presented in relevant forums, and the feedback received strengthened the quality of the manuscripts. A formal collaboration for the third PhD article was established, focusing on predictors of treatment response within the RCT dataset. During the stay, professional connections were formed, providing deeper insight into intervention development and research across the lifespan. A particularly valuable collaboration with a visiting PhD candidate from the Research Unit for Digital Psychiatry in Odense offered insight into digital intervention design through the Danish program CoolMinds, including userinvolvement strategies and methodological approaches.

International experts

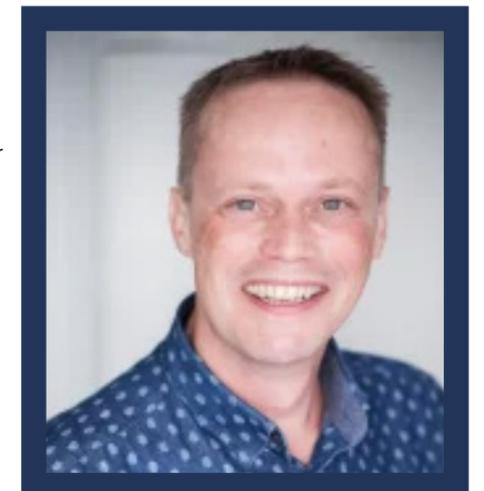
Forhelse SFI maintains an active international collaboration with Professor Kristian Kidholm and Dr. Christiaan Vis. In 2025, both participated in the research gathering organized by the centre in October in Bergen, where the aim was to share our knowledge and experiences and to define the contributions of Forhelse SFI to the knowledge base on digital health services. The gathering consisted of both plenary presentations and group work, and input from our international experts was highly valuable.



Prof. Kristian Kidholm

Professor Kristian Kidholm serves as Head of Research at the Centre for Innovative Medical Technology (CIMT) at Odense University Hospital. He is an active contributor to work package 2 (cost-effectiveness) in Forhelse SFI and participates regularly in discussions, offering valuable insights and presenting at relevant events, including Forhelse SFI's board meetings and joint gatherings.

PhD Christiaan Vis, based at Vrije Universiteit Amsterdam, is closely involved in work package 4 (implementation), led by PhD Robin Kenter at Forhelse SFI. Dr. Vis plays a key role in the work package by attending regular meetings, supervising PhD candidates, and providing valuable expertise and feedback that strengthens the scientific and practical perspectives of the project.



PhD Christiaan Vis

Collaborating projects

Forhelse SFI maintains three ongoing collaborating projects:

- **PIECES (2023–2027)** – funded by Horizon Europe the PIECES project - Forhelse where Forhelse SFI collaborates through researcher Robin Kenter's expertise in implementation in work package 4.



- **UngMeistring (2022–2026)** – funded by the Research Council of Norway's Pilot Health Programme About UngMeistring - Forhelse Forhelse SFI benefits from numerous thematic and administrative synergies with UngMeistring.



- **COST action (European Collaboration on Science and Technology)**
- funded by the European Union on Extended Reality (XR) for spatial neglect and related disorders <https://www.cost.eu/actions/CA24123/>. Forhelse SFI is part of the core committee of the action and responsible for grant award coordination.



In 2025, the Centre has also contributed to the project **Innovation on Women's Health: Premenstrual Dysphoric Disorder (PMDD)**. PMDD is an innovation initiative funded by Haukeland University Hospital, focusing on developing a digital, CBTbased intervention for women with PMDD. The project will explore integrating smartwatch sensor data to predict symptom worsening and deliver justintime support. The longterm aim is to offer more accessible and personalised treatment for women affected by PMDD.

In addition to the projects that have received research funding described above, our researchers are working hard to secure new funding. The application work is educational and forms the basis for new networks, additional applications, and knowledge.

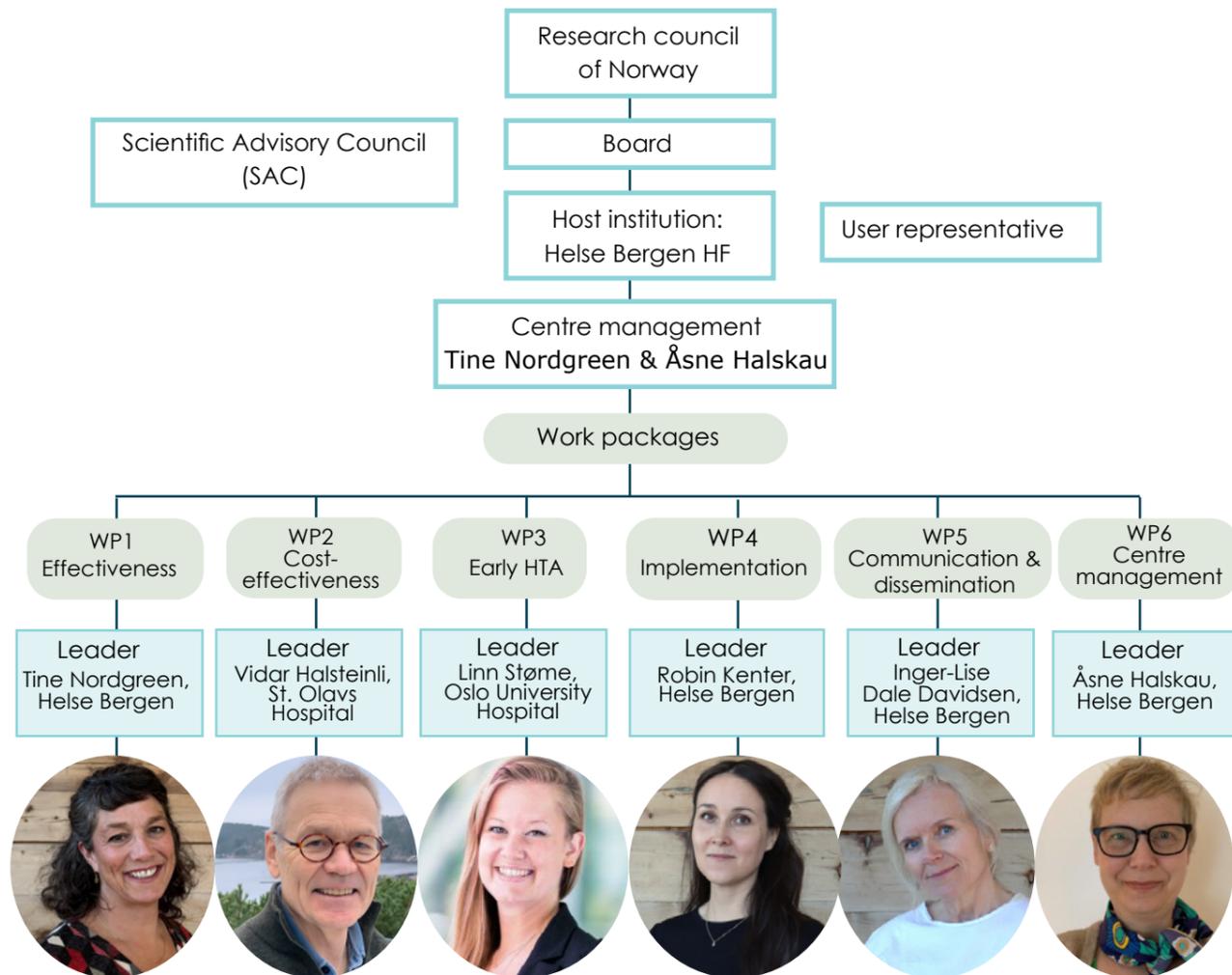
In 2025, the following applications have been submitted but not received funding:

- **Pilot Health Project (Health Pilot)** – "Tegn til bedring" (TTB): Together with Youwell, Sykehuspartner, and the Norwegian Health Network, researchers submitted a Pilot Health application for the development of Tegn til bedring — a digital whiteboard designed to enhance video-based therapy. The tool aims to support CBT, ensure secure therapeutic communication, and enable transfer of information to electronic health records.
- **Horizon Europe Applications:** Researchers in the Implementation theme contributed to two new Horizon Europe proposals:
 - ◇ **INSIGHT** – Inclusive digital support for adults with ADHD, dyslexia, and dyscalculia in work and educational settings, building on MyADHD and aiming for cross-European implementation.
 - ◇ **ENABLE IBS** – Implementation of digital IBS treatment across more than eight countries. The project application is led by MTS/Forhelse SFI, with Youwell and Forhelse SFI as partners.
- **National Programme for Clinical Treatment Research in the Specialist Health Service (KlinBeforsk):** Our researchers applied for funding for the project Data-driven personalized guided internet treatment in the specialist health service – a randomized controlled trial.
- **Research and Innovation to Strengthen the Sustainability of Municipal Health and Care Services:** Our researchers contributed to two proposals under this scheme:
 - ◇ Sustainable youth health through VR
 - ◇ Self-guided digital coping program for cognitive late effects after cancer
- **AI Centre Proposal (Research Centres for Artificial Intelligence):** Forhelse SFI applied to the Research Council of Norway's AI initiative with the project Norwegian Research Centre for Psychologically Informed Artificial Intelligence. The proposal received seed funding, and the expertise and collaborations developed will be leveraged in upcoming calls.

Organisation

Organisational structure

The Centre Director reports to the board, which is chaired by a business partner. The Centre's management arranges two board meetings a year at the host institution, Helse Bergen HF.



Board

Jonny Klemetsen	(Chairman of the Board) Youwell
Randi-Luise Møgster	Division of psychiatry, Helse Bergen HF (Project owner)
Borghild Marie Skadal Midtun	CheckWare AS
Elin Ulleberg	St. Olavs Hospital
Christian Reissig	Vestfold Hospital Trust
Kari Kværner	Oslo University Hospital
Kjell Ø. Petersen	Changetech
Ragne Gjengedal	Adult Psychiatry Department Vinderen
Anton Åhrén	Innlandet Hospital Trust
Kristin Farestvedt	Helse Vest IKT
Erik Hellestøl	Lifekeys
Kari Dyb	Norwegian Centre for E-health Research
Filip Drozd/Silje Haga	Centre for Child and Adolescent Mental health, Eastern and Southern Norway (RBUP)
Silje Mæland,	University of Bergen
Maria Norheim	Bergen municipality
Elise Rimer	Fornix
Frederic Andre E. Larsen	Solli DPS District Psychiatric Center

Scientific Advisory Council and Potential New Collaboration

The Scientific Advisory Council (SAC) provides strategic guidance to ensure high-quality research and activities at Forhelse SFI and played a key role in the Centre's 2024 mid-term evaluation. The Council consists of internationally leading experts:

- **Professor Nick Titov**, Macquarie University, Australia.
- **Professor Lee Ritterband**, The University of Virginia, USA.
- **Professor Heleen Riper**, Vrije Universiteit Amsterdam, The Netherlands.

Building on the SAC's contributions and ongoing international collaborations, Forhelse SFI has applied for Professor Nick Titov to join the Centre through the Research Council of Norway's programme Recruitment of Talented Researchers to Norway. If funded, this two-year stay in Bergen will significantly strengthen the Centre's expertise and expand its international collaboration network.

Centre management

The day-to-day running of the centre is handled by the centre management team, which is organized under work package 6. This team holds weekly operational meetings and collaborates closely with the project managers of the PIECES and UngMeistring projects, co-located with Forhelse SFI. The centre management team includes:

- **Centre director** Tine Nordgreen
- **Centre coordinator** Åsne Halskau
- **Section leader** Kjersti Skare

Work packages and partners

Each work package (WP) includes researchers, healthcare services, businesses, and end users (patients, healthcare personnel) and is led by a WP manager. WP managers and the Centre management meet bi-weekly to increase mutual understanding and work towards common goals. Additionally, each WP leader holds regular meetings with the researchers (PhDs and post. docs), healthcare partners and business partners involved in the WP.

Our offices

The host institution is located at Haukeland University Hospital, within the Division of Psychiatry, in Bergen. Our main offices at Haukelandsbakken 2, serve as the primary workplace for most of the team based in Bergen, including those working on projects like PMDD, PIECES and UngMeistring. Two of our work packages are led from Oslo and Trondheim, while our partners are spread across Norway. We continue to facilitate both digital and in-person meetings with partners in healthcare, business, and research sectors. Being co-located with the management of the Division of Psychiatry at Haukeland University Hospital fosters valuable synergies between the research Centre and the hospital.

Our meeting places

One of our main strategies for collaboration and achieving our goals is through our annual joint gatherings. As experienced by the Centre management, the partners in the Centre have developed a shared identity and familiarity with one another, partly through these joint events. In 2025, Forhelse SFI organized several joint gatherings, both in person and digitally.

In March, we held the first gathering of 2025, which was digital and aimed to provide updates and status reports on results from each work package, as well as to discuss topics relevant to our healthcare and industry partners.

In June, we organized an inperson joint meeting hosted by work package 3 in Oslo. The event took place from lunch to lunch, and the main theme on Day 1 was a discussion of the Norwegian Directorate of Health's new assignment: "Implementation of measures to make highquality digital tools for mental health more accessible and increase their use." Øystein Tveite from the Directorate gave an opening presentation, followed by a discussion led by work package leader Linn Støme. The session generated many suggestions on how Forhelse SFI could contribute to fulfilling the Directorate's mandate. Day 2 was dedicated to the topic of benefit realization. We received inspiration from several innovation projects in both the public and private sectors, including how therapists allocate time in digital mental health interventions and experiences with needsdriven outpatient clinics.



Our host institution Haukeland University Hospital

It is important for Forhelse SFI to understand and contribute to the development of policy directions within the field of digital health services. We therefore invited Øystein Tveite from the Norwegian Directorate of Health to present the assignment "The Directorate of Health's Measures to Increase the Availability and Use of Quality Assured Digital Tools in Mental Health."



Following the joint gathering, we hosted a researcher meeting where next steps after the midterm evaluation were discussed. The researchers revisited this work in October during a research meeting in Bergen, where the goal was to define Forhelse SFI's contributions to the knowledge base for digital health services. In November, the entire Centre met digitally once again to discuss the status and future plans for the digitalization of health services.

Recruitment

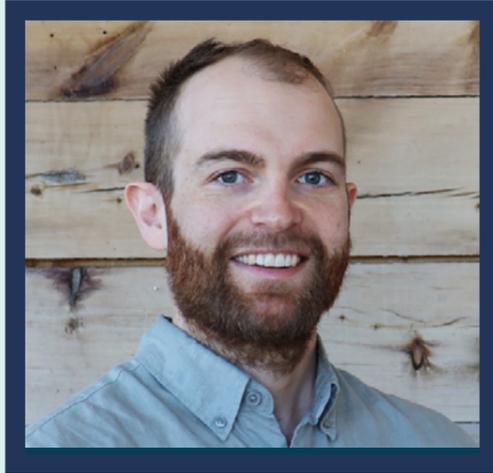
Zareen Abbas Khan, the PhD candidate for work package 2, submitted her PhD in September 2025 and successfully defended her thesis on February 5, 2026. She has now entered her postdoctoral period in



Forhelse SFI, during which she will continue analyses of the Mamma Mia app. The objective of Zareen's project is to perform an economic evaluation of Mamma Mia. Mamma Mia is an app designed to prevent perinatal depression. The app is currently undergoing a randomized controlled trial to evaluate the effectiveness of offering the app together with support from healthcare personnel, compared to self-guided use by pregnant women. Zareen will use data from this RCT to assess the app's cost-effectiveness in both the short and long term.

In addition to the economic evaluation of Mamma Mia, Zareen is interested in how factors related to the implementation of digital healthcare solutions influence their costs. To this end, she is conducting implementation-related cost analyses for both eTreatment and Mamma Mia.

Zareen holds an MSc in Global Health from NTNU in Trondheim and a Master of Public Affairs from The University of Texas at Austin. We warmly welcome Zareen as a postdoctoral researcher in Forhelse SFI and congratulate her on a successfully completed PhD defence.



Robin Gulseth has been recruited as a Doctoral Research Fellow for work package 1. Gulseth has an academic background in political science and holds a Master of Science from Copenhagen University. He has professional experience as an analyst in market research and a research consultant in the health sector. He will bring strong methodological and analytical skills, solid digital competence and broad communication skills into WP1. Gulseth will be doing a three-year PhD project intended to investigate predictive models of treatment outcomes within the context of internet-based cognitive behavioural therapy (iCBT) in mental healthcare, using digital phenotyping as a guiding framework.

His supervisory team has a relevant background for the project and will contribute to both quality and innovation:

- **Aleksander Heltne** will serve as the main supervisor and primary contact for the PhD candidate. Dr. Heltne is a postdoctoral researcher at the Research Centre for Digital Mental Health Services, Haukeland University Hospital. He is a trained clinical psychologist from the University of Bergen and holds a PhD from the Institute of Clinical Medicine at the University of Oslo. He has research experience in the assessment of personality disorders, the development of clinical assessment instruments, and psychometrics. Dr. Heltne is currently working on effectiveness studies of digital mental healthcare interventions in routine care.
- **Andrew Athan McAleavey** serves as a co-supervisor. Dr. McAleavey is an associate professor at Western Norway University of Applied Sciences (HVL) and a senior researcher at Helse Førde. He is a trained clinical psychologist in the United States, holds a PhD from The Pennsylvania State University, and completed pre- and postdoctoral training at Weill Cornell Medical Centre/NewYork-Presbyterian Hospital in New York, NY. His work is currently focused on measurement-based care. Dr. McAleavey will provide guidance and input on methodological and statistical approaches across the three planned studies.
- **Caroline Engen** also serves as a co-supervisor. Dr. Engen is a trained medical doctor and holds a PhD from the University of Bergen. She has a background in both biomedical research and clinical practice. Dr. Engen is an associate professor of medical ethics and denoted theory of science at the University of Bergen. She is currently working on how suffering shapes and challenges relationships in modern medicine. Dr. Engen will contribute additional depth to the supervisory team, particularly with regard to the project's theoretical foundation.

We welcome Robin as a PhD candidate and look forward to following his exciting project.

Attachments

A1 Personnel 2025

Centre management		
Name	Institution	Role
Tine Nordgreen	Helse Bergen HF	Centre Director
Åsne Halskau	Helse Bergen HF	Centre Coordinator
Kjersti Skare	Helse Bergen HF	Section Leader

Key researchers		
Name	Institution	Main research area
Tine Nordgreen	Helse Bergen HF	WP1 Effectiveness
Aleksander Heltne	Helse Bergen HF	WP1 Effectiveness
Vidar Halsteinli	St.Olavs Hospital	WP2 Cost-effectiveness
Linn Støme	OUS	WP3 Early HTA
Robin Kenter	Helse Bergen HF	WP4 Implementation
Filip Drozd	RBUP	WP2 Cost-effectiveness
Silje Marie Haga	RBUP	WP2 Cost-effectiveness
Monika Gullstett	NSE	WP3 Early HTA/WP4 Implementation
Kari J. Kværner	OUS	WP3 Early HTA
Birgitte Berentsen	Helse Bergen HF	WP4 Implementation
Christiaan Vis	Helse Bergen HF/AUMC	WP4 Implementation
Kristian Kidholm	St.Olavs/Odense University Hospital	WP2 Cost-effectiveness

Support staff		
Name	Institution	Role
Inger-Lise Dale Davidsen	Helse Bergen HF	Communication consultant
Robin Gulseth	Helse Bergen HF	Research consultant
Hanne Karoline Hinderaker	Helse Bergen HF	Research consultant
Malin Schrøen Johansen	Helse Bergen HF	Research consultant
Karine Gjerde Bevan	Helse Bergen HF	Research consultant

Postdoctoral researchers with financial support from Forhelse SFI				
Name	Nationality	Period	Sex	Topic
Jørn Heggelund	Norwegian	2021-2028	M	WP2
Smiti Kahlon	Norwegian	2022-2028	F	WP1
Sunniva Myklebost	Norwegian	2023-2025	F	WP1
Aleksander Heltne	Norwegian	2023-2027	M	WP1
Iris Brunner	German	2024-2027	F	WP4

PhD students with financial support from Forhelse SFI				
Name	Nationality	Period	Sex	Topic
Mari Skoge	Norwegian	2024-2026	F	WP3
Zareen Abbas Khan	Norwegian	2021-2025	F	WP2
Jill Kristin Bjarke	Norwegian	2022-2025	F	WP1
Reidar Nævdal	Norwegian	2023-2026	M	WP4
Camilla Thuen	Norwegian	2023-2026	F	WP4
Beate Standal	Norwegian	2021-2025	F	WP4
Robin Gulseth	Norwegian	2025-2028	M	WP1

Master's degrees		
Name	Sex	Topic
Ida Tøsdal	F	Digital Support in Everyday Life: A Qualitative Study of Adolescents' Experiences with a Digital Intervention for ADHD
Kristine Bastlien og Solvår Martine Nykrem	F	Adolescents' Experiences with a Novel Digital Treatment for Eating Disorders: A Reflexive Thematic Analysis
Oda Wulvik	F	Experience of digital cognitive remediation for residual symptoms after depression
Anne Hovland	F	Digital mental health team - management
Siv R. Olsen	F	Digital mental health team - Working conditions

A2 Statement of Accounts (All figures in 1000 NOK)

Funding	
Partner or partner category	Amount
The Research Council	17 680
Helse Bergen HF - host institution	3 109
Research partners	2 980
User partners - health services	7 196
User partners - industry	2 960
Total	33 925

Costs	
Partner or partner category	Amount
Helse Bergen HF - host institution	14 879
Research partners	8 890
User partners - health services	7 196
User partners - industry	2 960
Total	33 925

Allocation per WP						
Partner or partner category	WP1	WP2	WP3	WP4	WP5	WP6
Helse Bergen HF - host institution	4 856	0	0	4 672	576	4 774
Research partners	0	2 453	2 954	3 483	0	0
User partners - health services	2 661	1 364	1 016	2 155	-	-
User partners - industry	2 146	498	261	55	-	-
Amount per WP	9 664	4 315	4 231	10 365	576	4 774

Note: Three institutions have more than one partner type

Helse Bergen HF - host institution is also legal partner for user partners: IBS, HUH and eMeistring HUH. The table above lists the host institutions costs only for the research part of Helse bergen. For clarity we have included the numbers for Helse Bergen HF as one legal entity below.

Costs	
Partner type	Amount
Helse Bergen HF - host institution research partner	14 879
Helse Bergen HF - host institution user partner health services IBS HUH	1 825
Helse Bergen HF - host institution user partner health services eTreatment HUH	816
Total Helse Bergen	17 519

St. Olavs Hospital HF is also a legal partner for one user partner, eMeistring Nidaros. The table above contains numbers for St. Olav as a research partner in the research partner category, and eMeistring Nidaros as user partner in the user partner - health services category.

From 2025: Oslo Universityhospital (OUS) is also a legal partner for one user partner; OUS User partner. The table above contains numbers for OUS as a research partner in the research partner category, and OUS Userpartner in the user partner - health services category.

A3 Scientific publications

No	Publication	Partner
1	André Pekkola Pacheco; Toril Dammen; John Munkhaugen; Costas Papageorgiou; Kari Jorunn Kvaerner; Linn Nathalie Støme <u>Potential benefits of group cognitive-behavioural therapy for insomnia in outpatients with coronary heart disease versus usual care: an early economic evaluation- BMJ Open</u>	OUS
2	Mari Skoge; Sofie Ragnhild Aminoff; Elizabeth Ann Barrett; Gina Engen Bryhni; Kristine Kling; Kari Jorunn Kvaerner; Ingrid Melle; Erlend Mork; Carmen Simonsen; Linn Nathalie Støme; Josina Vink; Tor Gunnar Værnes; Kristin Lie Romm <u>A Mobile App Designed to Promote Shared Decision-Making in the Treatment of Psychotic Disorders: Feasibility and Acceptability Study</u>	OUS
3	Jill Bjarke; Gjestad Rolf; Tine Nordgreen <u>Effectiveness of General Practitioner Referral Versus Self-Referral Pathways to Guided Internet-Delivered Cognitive Behavioral Therapy for Depression, Panic Disorder, and Social Anxiety Disorder: Naturalistic Study</u>	HBE
4	Diego Hidalgo-Mazzei; Skoge, Mari <u>The promise and challenges of mHealth in psychiatry: Bridging the gap between potential and long-awaited implementation – ScienceDirect</u>	OUS
5	Reidar Nævdal; Christiaan Vis; Robin Maria; Francisca Kenter <u>Therapist characteristics and acceptance of internet-delivered cognitive behavioral therapy: A national cross-sectional survey using the technology acceptance model after ten years of iCBT in Norway ScienceDirect</u>	HBE
6	Birgitte Berentsen Jacobsen; Camilla Thuen; Eline Margrete Randulff Hillestad; Elisabeth Kjelsvik Steinsvik; Trygve Hausken; Jan Gunnar Hatlebakk <u>The Effects of Digital eHealth Versus On site 2-Day Group-Based Education in 255 Patients With Irritable Bowel Syndrome: Cohort Study JMIR</u>	HBE
7	Sigrund Breistig; Kari Marie Thorkildsen; Henrica Maria Johanna Werner; Tine Nordgreen; Ragnhild Johanne Tveit Sekse <u>Women's lived experiences with nurse-supported digital rehabilitation after gynaecological cancer: A phenomenological hermeneutic study Sage Journals</u>	HBE
8	Nils-Otto Ørjasæter; Kari Jorunn Kvaerner; Linn Nathalie Støme <u>Value-Based Framework for Evaluating Pre-Commercial Procurement: Case Study of Value-Based Key Performance Indicators JMIR Mental Health</u>	OUS

A3 Scientific publications

No	Publication	Partner
9	Sunniva Brurok Myklebost, Karine Gjerde Bevan, May Aasebø Hauken, Ragnhild Johanne Tveit Sekse, Marit Therese Schmid, Stine Hope Spjeld, Glenn Fredrik Fletcher & Tine Nordgreen <u>Self-management of cognitive impairments: a qualitative study of cancer survivor' coping strategies Springer.com</u>	HBE
10	Sunniva Brurok Myklebost, Tine Nordgreen, Eivind Haga Ronold, Aleksander Heltne, Åsa Hammar <u>Predictors of Improvement in Subjective Executive Functioning Following an Internet-Delivered Cognitive Enhancement Intervention for Adults in Remission From Depression Acta Psychiatrica Scandinavica</u>	OUS
11	Camilla Thuen, Hanne Karoline Hinderaker, Elisabeth Kjelsvik Steinsvik, Linn Anja Slåke Vikøren, Gülen Arslan Lied, Birgitte Berentsen & Robin Maria Francisca Kenter <u>Implementing a digital treatment program for patients with irritable bowel syndrome into routine care: a qualitative evaluation of barriers and facilitators perceived by key stakeholders BMC Health Services Research</u>	HBE
12	Henning Monsen; Jon Vøllestad; Peter Prescott; Audun Røren; Kristin Bruvik; Torkil Berge; Pål W. Wallace; Tine Nordgreen; Nick Titov; Anders Hovland <u>Work-focused therapy in an internet-based CBT format – A mixed methods feasibility study ScienceDirect</u>	HBE
13	Zareen Abbas Khan; Jørn Heggelund; Stian Lydersen; Kristian Kidholm; Henrik Pedersen; Imre Janszky; Tine Nordgreen; Vidar Halsteinli <u>Costs and outcomes of a the rapist-guided internet-delivered cognitive behavioral therapy: a multicenter observational study JMIR</u>	HBE
14	Linn Nathalie Støme <u>Defining early health technology assessment: building consensus using Delphi technique: a commentary on implementation and diffusion of early HTA International Journal of Technology Assessment in Healthcare Cambridge Core</u>	OUS
15	Jill Bjarke; Gjestad Rolf; Tine Nordgreen <u>Effectiveness of General Practitioner Referral Versus Self-Referral Pathways to Guided Internet-Delivered Cognitive Behavioral Therapy for Depression, Panic Disorder, and Social Anxiety Disorder: Naturalistic Study JMIR Mental Health</u>	HBE

for
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