

Screening MHIN for promising innovations suitable for EA-supported scaleup

Complete [list of innovations accessible here](#), taken from the website of the Mental Health Innovation Network. We firstly focus on [depression, anxiety, and stress interventions only](#).

Screening process

Collect the following data, spending no longer than 20 minutes per innovation on average if possible:

- Project name
- URL
- 1-line description of the project
- Does objective and description indicate this is an intervention that could conceivably receive funding (regardless of cost-effectiveness)?
 - If so record the following, else record why not and move onto next innovation
 - Objective
 - Brief description
- What illness(es) does the intervention target
 - List
- Benefits and costs of implementation
 - Found under “impact” tab below summary box, record
 - Cost of implementation
 - Number of people reached
 - Subjective impression about whether *intervention* could be cost effective if at scale and without research related costs
 - **This impression is highly subjective. The following quantifications are for rough benchmarking only.**
 - A ‘mechanical’ cost-effectiveness estimate reached by multiplying:
 - Score 1-5 cost per beneficiary
 - 5 \$0<\$10;
 - 4 \$11<\$100;
 - 3 \$101<\$1,000;
 - 2 \$1,001<\$10,000;
 - 1 \$10,001<\$100,000
 - (leave blank if no possible way to estimate)

- Score 1-5 benefit per average beneficiary
 - 5 cures moderate or severe illness, e.g. endured reduction in depression severity of >5 points on PHQ-9 at 6 months followup;
 - 4 improves severe illness substantially or moderately, e.g. endurance of reduction in depression severity of 2-5 points on PHQ-9 at 6 months followup;
 - 3 improves illness substantially but effects are not endured, e.g. short term reduction in depression severity > 10 points on PHQ-9 without followup data or without sustained improvement;
 - 2 improves illness moderately but effects are not endured, e.g. short term reduction in depression severity > 5 points on PHQ-9 without followup data or without sustained improvement;
 - 1 less valuable benefits
 - 0 null effects
- Report central, lower, and upper bound (80%CI) for effectiveness score
- ((even if there is a research component of this innovation, model the costs as if those were necessary for implementation + monitoring and evaluation, in order to be consistent across innovations. A substantial research component could however influence your final intuitive score and be reflected in your free text notes.))
- A cut-off defining whether an intervention is screened in or out will be defined after all screenings have been completed.
- Who is working on this project
 - List affiliated organizations found in right panel *and* partners and funder found in “Innovation” tab below summary box
- [update after you have reviewed all your innovations] Subjective/intuitive score (0-10) in terms of relevance to our goal to identify strong candidates for most effective initiatives that EAs could financially support?