Poster

Putting Young People at the Forefront of Their Mental Health Care Through Technology for Holistic Assessment and Routine Outcome Tracking

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Abstract

Background: Young people have the highest need for mental health support yet are least likely to seek it from professional services. Enabling access and engagement in mental health care is essential to intervening early to provide appropriate and effective care to prevent escalation of young people's mental health problems. In response, Australia initiated headspace: the National Youth Mental Health Foundation, which provides friend-to-friend (f2f) and online services to young people aged 12-25 with emerging mental health problems. Innovations in technology are being developed to better engage and put young people at the forefront of their mental health care.

Objective: The aim was to investigate how technology could be used to facilitate holistic psychosocial assessments for young people entering mental health services and routinely track meaningful outcomes across an episode of care. Objectives were to determine whether this use of technology would be engaging and acceptable to young people and how it would affect appropriateness and effectiveness of the care received.

Methods: An electronic holistic psychosocial assessment tool (EhHAT) and a brief routine mental health outcome measure (MyLifeTracker) were developed in collaboration with young people and their service providers. The EhHAT was piloted using a quasi-experimental 2-phase treatment-as-usual/intervention design with 339 youth and 13 clinicians. Engagement and rates of disclosure and risk across the psychosocial domains were compared in a mixed methods approach. MyLifeTracker was implemented with all clients, and quantitative data were available from 15,222 young people and used to compare MyLifeTracker with standardized mental health outcome measures. Qualitative data were collected from a small subsample to examine their experience of this routine monitoring approach.

Results: The EhHAT was shown to be highly engaging and acceptable to young people and resulted in disclosure of psychosocial risks that were 2.8 through 10.4 times higher compared with the non-intervention group. MyLifeTracker was shown to have concurrent validity against well-validated measures of psychological distress, functioning, and life satisfaction. It was highly sensitive to change with excellent stability. Young people valued the opportunity to report and track their progress. For both applications, the use of technology improved the experience for young people, making them feel more in control, and providing better information for clinicians.

Conclusions: The results show that technology is effective at engaging young people in their own mental health care. They are comfortable providing personal information via tablet applications and are more likely to disclose in this format. This yields better information for clinicians to provide more appropriate and tailored care. Young people appreciate the opportunity to routinely track their outcomes via technology and find this a helpful way to have conversations with their clinicians around the changes that are meaningful to them, leading to more appropriate and effective care. These holistic assessment and outcome

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tracking tools are essential ways forward harnessing technology to put young people at the forefront of their own mental health care.

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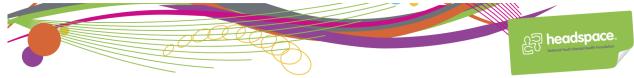
KEYWORDS

youth; mental health; assessment; outcomes

This poster was presented at the Connected Health Symposium 2016, October 20-21, Boston, MA, United States. The poster

is displayed as an image in Figure 1 and as a PDF in Multimedia Appendix 1.

Figure 1. Poster.



Putting young people at the forefront of their mental health care through technology for holistic assessment and routine outcome tracking

Background bung people have the highest need for mental health supp	oort yet are To i	bjectives	 Results – Highly engaging Disclosure of point 	ng and ac	ceptable to	o young	people.	• [d not c	affect ther	apeutic alli there was		mein session	
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nabling access and engagement in mental health care is e tervening early to provide appropriate and effective care to scalation of young people's mental health problems.	o prevent tra	sessments for young people entering ental health services, and routinely ick meaningful outcomes across an	Mean (SD) reported levels of self-disclosure for each domain Domain Control Intervention P d											
		isode of care.	Domain Physical health					2.86 (1.54)		2.91 (1.47)		<u>р</u> 777		- 03
headspace: Australia's National Youth Mental Health Foundation provides f2f and online services to young people aged 12-25 with		ecifically to:	Home life					3.41 (1.24)		3.51 (1.25)		.491		08
herging mental health problems.	• 0	determine whether use of technology	School					3.35 (1.44)		3.47 (1.49)		.461	1	08
		would be engaging and acceptable to	Bullied					2.58 (1.78)		2.96 (1.70)		.058		22
ovations in technology are critical to better engaging you		oung people; and	AoD					3.04 (1.91)		3.47 (1.77)		.046		23
and putting them at the forefront of their own mental health care.		now it would affect appropriateness	Relationships					3.49 (1.19)		3.41 (1.32)		.601		.08
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risk and protective factors.			Worry					3.51 (1.20)		3.61 (1.27)		.336		08
Routine outcome monitoring to track progress.			Total self-disclosure					0.94 (10.66)		33.18 (11.51		.083		- 20
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Multimedia Appendix 1

Poster.

[PDF File (Adobe PDF File), 130KB-Multimedia Appendix 1]

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