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Developing and delivering school hosted digital mental health support for young people

Early intervention for adolescent mental health can improve outcomes. Digitally-delivered, self-help is a promising approach to reduce the burden on services but faces challenges around reach and safety. Hosting mHealth within schools is one solution. This study aimed to co-design and feasibility test an early self-help digital intervention for adolescents to be hosted within schools. We specified rules for progression to an effectiveness randomised controlled trial and tested two candidate primary outcome measures for well-being. Co-design involved creative workshops (n=14) and content reviews (n=40) with youth, parents/carers teachers, mental health professionals and software engineers. These determined the intervention aim, content, user features, implementation and evaluation protocol, and led to the production of a digital tool 'MindMate2U'. This was piloted in four UK high schools who offered human background support. Post-production, intervention content was mapped for use of evidence-based practices, behaviour change components and theory. Feasibility and acceptability were evaluated. Thirty-one symptomatic adolescents (15-17y) opted to MindMate2U for 6 weeks. We met our recruitment, retention and pre-post measure completion targets. Implementation fidelity was high in all schools. School evaluations and interviews with a sub-sample of users (n=6) indicated high acceptability and perceived usefulness. Priority content and implementation refinements were identified. Findings show the potential of merging mHealth with human support in schools and support progression to an effectiveness trial. Digital interventions appear effective in meeting the needs of some young people experiencing early symptoms of deteriorating mental health, particularly their reported needs for privacy, autonomy, choice and engagement.