

Introduction

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Purpose: This document provides a synthesis of existing evidence. This synthesis is designed with an intent to:

1. be useful to iyarn, because it represents the evidence base iyarn is grounded in and helps give a language to that;
2. be something iyarn can share to demonstrate the evidence base to external stakeholders;
3. guide future development and evaluation within the iyarn tool and its use

Using this resource: To do that, these documents are designed to:

1. provide a summary of the key evidence;
2. highlight key implications for iyarn in tool design and implementation;
3. point towards lessons for future evaluation work.

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iyarn Desktop Research – Overview

The following sample of desktop research approach aims to provide an indicative document for discussion, feedback and dialogue to inform the further research. It focuses on one of the key questions identified through the mapping of key drivers and outlined below and presented previously. A list of the key questions and themes for the desktop research are also outlined below.

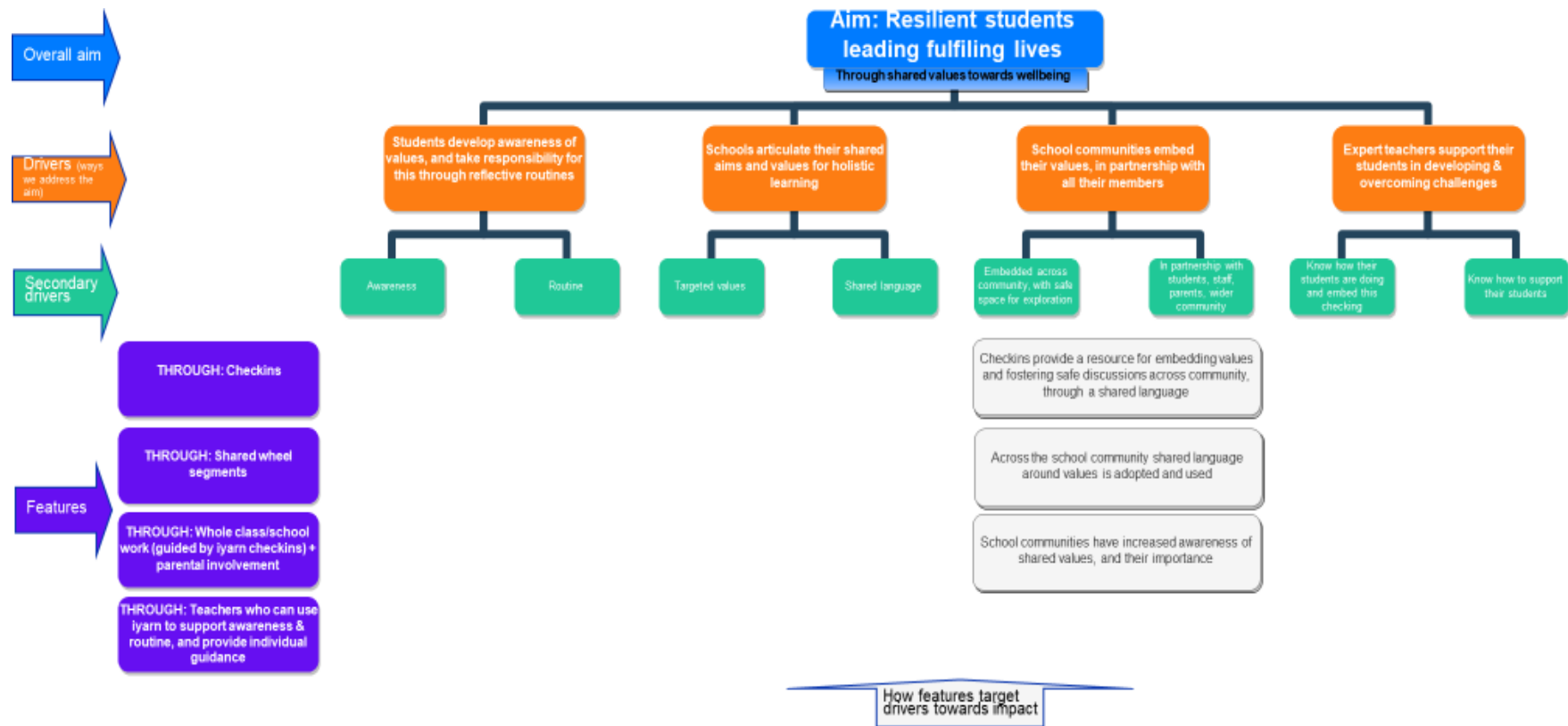


Figure 1: iyarn primary and secondary drivers research mapping

Topic: How do check-in apps build wellbeing, and what are young people's key concerns when using them in schools?

What are the key concerns for 14-19 year old age including around privacy?

The context of wellbeing and mental health for young Australians

The events of the past three years in Australia have seen a series of significant challenges including COVID-19, the 'Black Summer' bushfires, flooding and growing concerns over economic security and cost of living. These events have impacted our mental health, sense of wellbeing and certainty about the future. Young people are one group who have been found to be disproportionately affected in terms of the impact on their mental health and wellbeing (Headspace, 2020; Power et al., 2020a). These largely unforeseen and unexpected events have placed additional stress and strain on the systems of learning and education in secondary schools in Australia, which have already been struggling to deal with a significant and growing challenges of mental health issues for young people in their care.

Some contributing factors to these mental health challenges for young people include the rapidity in change of technology and society, the loss of security in traditional pathways for the future and climate anxiety (Potts, 2020). These concerns are in addition to traditional adolescent challenges of self-image and forming identity, social connection, family dynamics and pressures of study and work (Mission Australian and Black Dog Institute, 2017). It has become increasingly urgent to understand and explore what kinds of learning experiences and resources might support young people to cope in this context and to develop wellbeing and resilience through personal and collective agency for the challenges ahead (Potts, 2020).

What impact has COVID-19 had on young people's wellbeing and mental health?

In a survey by Australian youth mental health service headspace, 40% of young respondents believed the pandemic had impacted their confidence to achieve future goals and 51% felt their mental health had worsened during the pandemic (Headspace, 2020). Young people reported increased experiences of loneliness, isolation, anxiety and depression (Headspace, 2020). Evidence suggests young people may be one of the demographics more vulnerable to experiencing poor mental health outcomes both in the short and longer term (Power et al., 2020a)

While the potential physical health implications of the pandemic have been at the forefront of the response to the pandemic the psychosocial impacts and their consequences for young people are only now a priority. Research conducted in the UK by the YoungMinds (Power et al., 2020a) organisation found 83% of young people surveyed believed their mental health had been negatively affected and were specifically concerned about loss of social contact and structured activities. Young people have been impacted in the short term by issues such as job losses, loss of independence, social isolation, exacerbation of existing mental health issues, reduced access to services and emergence of new mental health issues. Young people are likely to find it more difficult cope with the ongoing uncertainty created by COVID-19 as their coping skills are still developing according to Fields & Prinz (Fields & Prinz, 1997).

These additional mental health stresses have compounded the pre-existing mental health crisis being experienced by young Australians. The Youth Mental Health Report 2012-2017 (Mission Australian and Black Dog Institute, 2017) found that one in four young Australians are at risk of a serious mental illness with greater risk for young women and Indigenous young people. Young people with existing mental health conditions such as anxiety and depression, anorexia, obsessive compulsive disorders reported the COVID-19 crisis had

worsened these pre-existing conditions, while one in four reported they were no longer able to access their support services due to the crisis (Power et al., 2020a).

These poor mental health outcomes for young people have both a short term and potential longer-term impacts. According to Headspace CEO Jason Trethowan these results are concerning as they reflect not only the acute effects on wellbeing and mental health but also raise concerns for future wellbeing, 'We can see from the research that COVID-19 has had significant negative short term impacts for young people when it comes to things like study, interactions with friends, work situation and mood, but the long term impacts have the potential to be much greater' (Headspace, 2020).

What is the relationship of wellbeing, mental health and education?

There is increasing consideration in education policy at both a national and state level about how to support the wellbeing, resilience and mental health of students in Australian schools. At a national level these concerns have been recognised as a major focus by the Education Council in a follow-on document to the *Melbourne Declaration on Educational Goals for Young Australians*, the *Alice Springs (Mparntwe) Education Declaration on Education Goals for Young Australians* December 2019 to which all state education ministers are signatories. This declaration states a core strategic aim of education in for students to be, 'Confident and creative individuals who are resilient and develop the skills and strategies they need to tackle current and future challenges' and, 'Are able to recognise, adapt to, and manage change' (Education Council, 2019). The NSW Department of Education and Communities (DEC) has developed a *Wellbeing Framework for Schools*, which recognises the changes in the school environment and world in which young people are growing up and commits to strengthening their cognitive, physical, social, emotional and spiritual development (NSW Department of Education, n.d.). Alongside this is a commitment in the NSW Department of *Education Inclusive Education Statement* to students with a disability to 'building a more inclusive education system...where every student is known, valued and cared for and all students are learning to their fullest capacity.' (NSW Department of Education, 2022).

The growing levels of stress and mental illness affecting children and young people is impacting their ability to learn and thrive. International research found 47% of Australian students feel very tense when they study, which negatively effects their academic results, engagement and mental health (OECD Publishing, 2017)

What are the key concerns and preferences for young people in using check-in apps including privacy?

As young people increasingly rely on the internet for information and services, the use of apps and online mental health services provide a space where young people increasingly feel confident to talk about their physical and mental health issues (OECD Publishing, 2017). The high levels of access to technology and mobile phones for Australian young people means there is increasing access to wellbeing and mental health apps to support physical, social and mental wellbeing. Research undertaken by Project Synergy as part of the 'Young and Well CRC' in collaboration with young people found one of the core features for inclusion in online health and wellbeing systems includes, 'A rapid but comprehensive self-rating system that examines a range of health and wellbeing domains' (Davenport et al., 2019). Other features included a specific goal setting function and real time tracking of actions to achieve self-determined goals (Davenport et al., 2019).

Do young people understand confidentiality and reporting duties?

Recent research has shown that high school students may have a limited understanding of the professional confidentiality obligations (Carlisle et al., 2006). A 2017 study involving over 2,400 year 9 students in Victoria found half the sample believed that family and friends were

legally required to keep their secrets (Lubman et al., 2017). This is significant because concerns about confidentiality are a major barrier to help seeking behaviour for mental health problems during adolescence (Carlisle et al., 2006). Information and education confidentiality are necessary to complement existing programs focusing on increasing accessibility and affordability (Bassilios et al., 2016)

What are young people's perceptions of privacy and trust in wellbeing apps?

Research in schools shows students understand wellbeing in a multi-faceted way which includes having a say, being listened to, having rights and being respected (Anderson & Graham, 2016). In studies which compare young peoples' perspectives on wellbeing to experts there are some interesting differences in how they perceive wellbeing (Gennings et al., 2021). For example young people were found to place greater emphasis on the value of friendship and belonging to feel accepted and respected (Foley et al., 2012) Other differences included the impact of others' judgements and the importance of family life for wellbeing (Gennings et al., 2021).

Young people consistently indicate that they prefer non-professional or self-managed strategies for mental health support. This is partly due to the stigma associated with having mental health challenges (Rickard et al., 2016). There is also a preference for privacy, anonymity, autonomy and the ability to opt out (Bakker et al., 2016; Clarke et al., 2015). For young people, stigmatising attitudes and embarrassment are often named as reasons they do not seek help. Other barriers include concerns around confidentiality and trust (Hickie et al., 2019).

What are considerations of diversity, equity, inclusion, in mobile wellbeing apps?

Therefore, any self-rating or check-in system needs to take into account these differences in understandings of wellbeing. Similarly, considerations of diversity, equity and inclusion are essential when looking at evaluation frameworks for wellbeing and mental health apps and services, along with ongoing user testing and validation with young people from marginalised groups (Ramos et al., 2021). In Australia this might include young women, Aboriginal and Torres Strait Islander young people and young people with disabilities, all of whom suffer disproportionate levels of mental ill health with many having less access to services (Mission Australian and Black Dog Institute, 2017).

How can we design to foster productive use of mobile wellbeing apps?

The importance of pro-actively including young people in the design of services and platforms for wellbeing and mental health is being increasingly recognised within Australia internationally. This approach recognises the expertise of due to their age and lived experience as equally valuable to that of clinicians and designers in order to design solutions that meet the needs of young people (Hetrick et al., 2018). Recommendations for co-design with young people from the Young and Well Cooperative Research Centre (CRC) include the following;

1. Young people are active participants throughout the entire design process including planning and design
2. Young people as design partners where they contribute by generating ideas, creating solutions and giving feedback on design concepts
3. Ongoing iteration and evaluation of platform and technology from perspective of young people to ensure it remains relevant, meaningful and engaging (Davenport et al., 2019).

Further principles recommended for participatory design or co-design with young people include ensuring clear expectations from team members about the scope of each person's

contribution; being flexible and enabling involvement (Eg, providing transport or reimbursement); valuing diverse forms of experience; making sure young people benefit from the experience (Eg. Skill development); avoiding tokenism and involving more than one young person; and providing feedback and updates on progress of what has been achieved (Hetrick et al., 2018).

Applying human-centred design approaches and co-design with young people has been found to be effective in developing digital mental health services to better meet their needs. In a co-design research process from the Centre for Youth Mental Health, University of Melbourne in collaboration with headspace young people (aged 18-25) with experience of depression along with clinicians worked on designing a mobile app for self-monitoring of moods to be used between meetings with clinicians (Hetrick et al., 2018). Young people involved saw the value of self-monitoring as a 'feedback mechanism assisting individuals to notice fluctuations in their symptoms and how this might relate to changes in circumstances or life events' (Hetrick et al., 2018). They expressed a strong level of comfort with using technology in particular mobile phones for this purpose. Some of the key features prioritised by young people in the co-design of the app were; the ability to access support in real time, the ability to customise the interface including colours, types of ratings and display options for ratings, the ability to enter comments and notes but also decide if they want to view and access these in future sessions, a range of real-time distractions including mindfulness or games, messages from friends and the ability to customise these (Hetrick et al., 2018).

A group of young people from the Oxford Neuroscience, Ethics and Society Young People's Advisory Group (NeuroX YPAG) recommend online, mobile-based interventions as they are less likely to carry the stigma attached to formal mental health services and provide self-reliant intervention platforms for those who would not otherwise seek help (Kretzschmar et al., 2019). They also note that given the long waiting periods for professional services and lack of availability in many locations well designed, evidence based digital services may fill some gaps. As with other research they comment on common barrier of young people seeking fearing that their problems are too personal and having concerns about the privacy and confidentiality if they were to disclose sensitive information. In their research they explore three AI mental health bots or automated conversational agents; Wysa, Woebot and Joy and consider the ethical and privacy implications of this kind of technology for mental health support for young people. They conclude that alongside efficacy and safety, privacy and transparency are essential for any chatbot services and question the limited capacity to recreate human interactions and offer tailored responses combined with a lack of access to real world services and support (Kretzschmar et al., 2019).

The recommendations from NeuroX YPAG for principles of privacy and confidentiality for chatbots, also relevant for other digital mental health apps, include the following;

1. Personal information, if collected, should be kept confidential
2. Content of conversations, if shared, should be de-identified
3. Privacy arrangements and limitations should be made transparent to users
4. Users should have the option of being reminded of privacy arrangements and limitations at any stage (Kretzschmar et al., 2019).

What are the key considerations for parents in giving consent to their children engaging with digital wellbeing and mental health programs in school?

There is very little research or evidence available regarding parents experience of giving consent for their children to engage with digital wellbeing and mental health programs in schools. This is an area that could be very valuable for Iyarn to consider undertaking

research given the importance of parental consent in enabling the platform to be used by students in school.

What role can parents play in early identification and support for mental health?

There is however a growing body of evidence surrounding parents experience of supporting young people with mental health issues which has been boosted by the co-design approach of services such as Reachout that provide parents with information and support about caring for teenagers and mental health. In this research Australian parents reported needing support to understand and respond appropriately to issues related to mental health and wellbeing for their teenagers (Cairns et al., 2019). Given mental health problems commonly first appear during adolescence and parents are often the first people that children raise their concerns with the ongoing education and support for parents is a critical part of growing a wellbeing ecosystem around students and schools.

Evidence has shown that parents' recognition that their child has a problem strongly influences whether the young person receives help (Sayal et al., 2010). Parents, however, report difficulty in knowing whether or not their child's behaviour warrants attention from a mental health professional and as a result may delay seeking help (Boulter & Rickwood, 2013). There is a general lack of information and education for parents of teenagers about the early warning signs of mental health issues and how to undertake mental health first aid in the community (Jorm et al., 2007). Following the National Mental Health Commissions strategic approach of investing in services for prevention and early intervention for young people self-help and non clinical online support are increasingly preferred (National Mental Health Commission, 2014). However broader community support and communication is required to inform and support parents to work closely with service providers and schools to support young people. Iyarn fits well with this preventative health strategy and also has potential to educate parents along with students. Many parents (61% in the Reachout study) rely on informal sources of information in the early stages of their help-seeking journey for their child. They may talk to other parents, to friends and family and often use the internet to source information (Cairns et al., 2019). In terms of seeking help at school the results were very mixed with 40% of parents saying they were likely or extremely likely to talk to a teachers, while 39% said they were unlikely to do so (Cairns et al., 2019). Parents from diverse cultural backgrounds were more likely to indicate they would handle the issue on their own or with help from friends and family (Zwaanswijk et al., 2003).

What are the potential issues around parental consent?









In the same study young people reported their relationships with their parents changing during high school from being a close relationship in Year 7 where they were reliant on their parents for support. Then in year 8 & 9 many reported experiencing tension with their parents as they explored their sense of identity separate to the family group. This continued into Year 11 & 12 when some young people reported shutting out their parents and taking them for granted as they turn to their own peers for support and advice et al., 2019). One strategy that has been found effective in communicating with teenagers is validating their feelings and asking questions rather than trying to solve the problem or criticise their behaviour (Cairns et al., 2019). Parental consent has been identified as a significant barrier for young people considering engaging with digital mental health services with on study with teenagers with eating disorders citing concerns about privacy and their parents not understanding enough about mental health. Over one half of potential participants stated they would not take part if parental consent was required (Cavazos-Rehg et al., 2020).

Young people interviewed felt strongly that a website for parents which could help them understand what they were going through would be valuable to encourage them and prevent them being alarmist (Cairns et al., 2019). Research on how parents have responded during COVID-19 with many having to facilitate home schooling during lockdown as well as

support their children's mental health have demonstrated some shifts in willingness of parents to engage in digital mental health interventions, however there is still significant reluctance and preference for face to face treatment with health professionals (Linardon et al., 2021).

There are ongoing concerns about privacy and confidentiality of data in the broader community. With the proliferation of self-help and wellbeing apps, many having been implemented on limited budgets, users are right to be concerned about their wellbeing and mental health data being poorly secured and misused. A 2019 study of 61 mental health apps found nearly half had no privacy policy to inform users about how their data might be used (Parker et al., 2019). Shifts in practices since the introduction of the European GDPR have promoted the interests of consumers and the protection of privacy as a high priority. Iyarn has a clear and well described privacy policy on it's website (Iyarn, 2022).

What are the UX/design implications lyarn?



Design Implication	lyarn status	Comment
Students actively involved in co-design of platform		Involvement in expression of segments. Wider input in design, or implementation unclear
Clear messaging around privacy and confidentiality		Priority area*
Ability for students to hide or show comments when reviewing past entries		Consider this feature for future
Ability for students to modify colours and look and feel		Consider this feature for future
Include one click buttons to request support from counsellor or teacher		Priority area
Include links to self-help resources in platform		Potentially integrating from resources bank developed for emails
Information for parents about their children's use of lyarn and links to reliable resources for parents such as Reachout		Increase information for parents as introduction to lyarn and blog posts
Enabling customisation of segments for students		Currently available with school support

*lyarn may wish to create a simple 'duty of care' document for teachers, parents, and young people to understand policies and obligations in interaction with the tool, and may take some inspiration from the reachout model: <https://schools.au.reachout.com/articles/reachout-duty-of-care-framework>


What are potential implications of these findings for iyarn?


This table is intended to provide an overview summary of the evidence synthesis, mapping the key takeaways to the driving questions.

Explanatory note.








 = strength of evidence, with 3*  indicating very strong evidence (e.g. from systematic reviews, meta-analyses, and multiple robust randomised control trials); 2* indicating multiple experimental or quasi experimental designs; and 1 * other studies such as observational or correlational work.

 is used to indicate a positive effect found, or supportive evidence.

 is used to indicate a negative effect found, or non-supportive evidence.

 is used to indicate the evidence is unclear or/and underexplored or/and cannot be addressed using quantitative research.

This approach is informed by van der Bles et al.'s discussion (n.d.)

Driver	Evidence	Comment
What are key concerns for 12-15 year age group, including around privacy?	  	General research on the key concerns for young people aged 12-15 has a strong foundation, however given the rapid changes with issues such as climate disruption and COVID-19 this research needs to be constantly reviewed and updated, particularly with regards to the impact on wellbeing and mental health. There is some research on the concerns and perspective of young people in using wellbeing and mental health apps, however specific evidence regarding students experience of issues such as privacy and confidentiality in self-monitoring apps in schools is very limited.
What are the key considerations for parents in giving consent to their children engaging with digital wellbeing and mental health programs in school.	  	Limited research could be found regarding parents considerations of consent. confidentiality and this could potentially be an important area for Iyarn to understand given parent consent is essential for students to use the platform at school
How can shared resources and information between parents, teachers and students help to build relationships to support student mental health		Program based approaches (across school communities, with a systematic implementation) are well supported, however the role of technologies and use of checkin apps to foster these has not been well explored yet.

Area of exploration and future evaluation for Iyarn:

Issue	Implication
<p>There is a lack of research and evidence of students experience of using wellbeing tools such as Iyarn in a school setting</p> <p>Exploring students' perspective of using wellbeing, self-monitoring tools in a school setting in particular with regards to privacy, trust and impact on help seeking behaviour could be valuable</p>	<p>Additional research and evidence of students' experience could contribute to considerations of how to develop the tool to continue to meet the needs of students within a school setting. It could also inform the use of the platform by young people outside of a school setting.</p>
<p>The role of parents in supporting young people's mental health and wellbeing in programs run within school time has limited research available</p>	<p>This research could be valuable to understand any potential barriers to consent from parents as well as providing a coordinated approach to support for young people across their networks</p>

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