

Season 4

05

Momentum: a new era in personalised digital mental healthcare for young people

with Professor Sonja March

Tania McMahon

Welcome to Digital Mental Health Musings, a podcast series from the e-mental health in practice initiative providing health practitioners with the latest news and developments in digital mental health services and resources.

eMHPrac acknowledges the Turrbul and Yuggera people the traditional custodians of the land on which we bring you this conversation. We acknowledge elders past and present, and honour their continuing connection to land, culture, and community, and that it's these connections that are intertwined in indigenous mental health and social and emotional wellbeing. We acknowledge the strength and resilience of all First Nations people and communities since colonisation of their unceded lands.

Hello, welcome back to digital mental health Musings, I'm your host Dr Tania McMahon, thanks for tuning in. Today we're talking about an innovative digital mental health platform that delivers much needed evidence-based treatment, tools and techniques right to the fingertips of 7 to 17 year olds who are experiencing common mental health issues.

Called Momentum, it's been described as Australia's most comprehensive digital platform for child and adolescent mental health that integrates detection, assessment and tailored interventions. It's been developed by researchers, experts and web designers nationwide from across 6 universities, 6 mental health organisations, co-designed with the help of hundreds of young people and their families, and support by the Australian government under the medical research future fund.

Joining me today to unpack the evidence behind the program and its key features is Professor Sonja March. Sonja is a registered psychologist with a PhD in clinical psychology. She is the director of the University of Southern Queensland's Centre for Health and Research, where she's also a professor in the School of Psychology and wellbeing. And she's also the Momentum project lead. Sonja, welcome to the show. We're so pleased to have you on to tell us more about this exciting new resource.

Sonja March

Thank you. I'm excited to be here.

Tania McMahon

So, Sonja, you've been working in the digital mental health space for quite some time. In fact, Momentum builds on your previous work across very popular Brave Program, which many of our listeners may already be familiar with, which has now reached more than 80,000 young people with anxiety. Could you tell us about the initial concept behind

Momentum? Where did that come from? What kind of gap or need were the team looking to meet with its development?

Sonja March

Yeah. Thanks. And and people often ask this question and and it wasn't just one moment, I suppose, that led to the ideas behind Momentum. But like you said, we've been researching Brave now for 20 years where we've been looking specifically at anxiety, and looking at how that online program works for young people and their families. But we've also been doing a lot of qualitative work with our young people, parents and clinicians and and asking, you know, how does it work for you? What could we do differently? What is it that's missing? What are you looking for? And we we sort of kept getting the same messages from both young people and their parents, and clinicians to an extent, where they were telling us that they really enjoyed working on their own. They loved the autonomy that they have working through the program, and they loved the skills that they were learning, but that they wanted it to be just a little bit more personalized. And while some people, to some people personalise means having therapist support, For a large proportion of of the young people and parents it was more that they wanted the program to tailor more to the young person's needs.

And so we know that anxiety doesn't just exist on its own. It does sometimes, but oftentimes it's accompanied by depression or other related difficulties like sleep problems, substance use in our teenagers, issues with other healthy lifestyle sort of behaviours and and things like that. And so we thought well, we know how helpful Brave can be, but let's try and figure out a way that we can make online programs a little bit more personalized by tailoring the content to the person's symptoms that they're experiencing. And there's not really been a lot of work done in that space in the digital sort of field. So we wanted to develop Momentum where we could really look at conducting an assessment of their problems and then building a program just for the young person based on their symptoms.

Tania McMahon

Wow. So the the main focus really was that tailoring. That going the next step and going not just delivering a really effective program that that targets a particular problem, but then that that extra step of really personalizing the treatment. Which is essentially what we try and do in face to face care as well, but it sounds like that was really the feedback coming, coming through from your experience with the with the Brave Program.

Sonja March

Exactly. That's right. And you know, part of the battle with engagement is finding what works for the young person and what and what keeps them interested. And so it's as much about figuring out whether the tailoring and the personalisation helps with engagement as it is about figuring out if it can make it more effective. So, you know, they're some of those questions that we're able to answer through this new platform.

Tania McMahon

Ohh fantastic. And I'd really love to hear more about the the co-design aspect of the program. What kind of an impact did that collaboration with young people have on the the

content that Momentum delivers? What kinds of priorities and themes developed out of that interaction?

Sonja March

Look the co-design part I think is the part that we're most proud of, and it's really shaped things a lot differently than perhaps we originally thought it would.

We've actually spent quite a bit of time now working with children, with adolescents, with their parents, and with clinicians. We've had over 100 clinicians also help with the co-design of, of the treatment platform. And it was really interesting and I think, you know, children and teenagers, they really tell it like it is, which is great. You know, we wanna hear. And what that meant is that we've been able to iteratively kind of refine our ideas and refine the web designers ideas and and really put those things into action so it leads to something that they're happy with and that they're likely to engage with.

It was interesting seeing the differences between children and adolescents, but also the similarities. And so really strong was this theme of nature and young people, children and adolescents just wanted to really make sure that the program gave this this element of of being calm and and you know and nature components. They wanted trees. They wanted, you know, whatever we could do to integrate those nature themes which was which was really great.

And the other theme that came through really strongly in both children and adolescents was making sure that it was, it was equitable and that we had, you know, diverse characters and and diverse sort of scenarios so that everybody felt as though the platform could speak to them. So that was really strong across both of our groups.

But we learnt we learnt new things. You know, kids kind of kind of told us, you know, teach me through stories and play. And the teens really clearly said you know, give me some information straight away for me or my friends and then teach me. So they want to be able to grab that information straight away so that they can put something in place and then they're willing to to sort of sit through the the, you know, the more prescribed component that we like to to deliver in in treatment. So there was not only differences in colours and and styles, you know, they've got different colour themes, but also in the way you teach the material. And that that came through the co-design elements as well.

Tania McMahon

Yeah. And that's so fascinating too, because those aren't necessarily things that would be intuitive or, you know, jump out immediately from a clinician's point of view. But when you've, you know, clearly consulted so many, and that those those themes are really coming through strong. It's so exciting to, you know, to think about then what that will look like in a program and how that's going to change the experience for those those young people.

Sonja March

Yeah, absolutely. And and you know, we know from theory and from literature that young children kind of learn that when you've got hero characters and things like that. So we've got that knowledge, but hearing hearing exactly from them and then from the teenagers how they want to to sort of see it is is really helpful.

We actually started right at the beginning with the naming of the site, the naming of the treatment program. And so we invited people who'd used Brave and other people who sort of either had mental health difficulties or engage with digital interventions. We went through a couple of rounds of naming where we sort of got them to generate all sorts of ideas and then e looked at the themes behind that and then we got them to comment on those further. And so 1,500 young people named Momentum platform. We've gone with Momentum Hub because it is a, you know, it's a hub full of resources.

Tania McMahon

Wow.

Sonja March

And it's the treatment program and it is Momentum. But they were really clear that it had to have a tagline. And young people really wanted something to grab them, and and not something to make them think that, you know, this was a magic treatment program that was going to make everything better straight away. You know, they wanted it to say momentum moving forward. They didn't want it to stay overcoming. They didn't want to say curing or anything like that. They just, they felt that they really needed to get a sense that as long as they're always moving forward and trying to sort of manage things, then that was what was important to them in indicating success, if you like.

Tania McMahon

Yeah. And that's so interesting because that, that doesn't necessarily align with how we, you know, historically might have approached treatment with young people and and adolescents. And, and you know it it's it's exciting because it really, you know, the the format and the platform, you know, really unlocks these new abilities of how you design something that just wasn't available to us, you know, 10, 20 years ago.

Sonja March

Yeah. And young people are much more savvy these days, you know? Not not only savvy about technology, but savvy about their mental health and savvy about what they need to do to manage their, their mental health. And so it's important that we adjust with that. You know, they they certainly were, were able to communicate to us that they really enjoyed that independence of using a digital self help program. And that there are ways that would help promote that for them. And so, you know, this is one of those ways.

Tania McMahon

Amazing. And so I, I mentioned in the introduction there that that Momentum has built in quite a sophisticated detection and assessment component. So young people who first use the program will be met with an online mental health check up. How does that work? What does it involve?



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Sonja March

Yeah. So, look, I mean the first thing to note is it's very specific to their age. And so we have, we have two versions. We have one version for children who are 7 to 12 years and then one version for adolescents who are 13 to 17 years. And so at this point, the way that we have the the platform set up for the 12 and unders, we actually encourage the parents to to do the the assessment and to have the child there to check in with them if, if you know if they need or to get the child input on things, but actually we're requesting the data from the parent as a parent self-report.

And look, you know, ultimately what we want to be able to do is is get information from the parent and the child, but in the terms of assessment and trying to come up with a a treatment program that taps into the person's experiences it will get more complex if you have too many data points. And so we sort of look at ways we can address that throughout the treatment program itself.

So the parents complete the assessment for the younger children, and for the teenagers we ask the teenagers to to do it themselves, the assessment themselves. The check up as you say, is built on evidence-based tools so you know, we're using very, very systematically checked and validated tools so that we have our norms that we can compare them to and and work out whether the level of difficulty the young person is, is reporting if something to be concerned about.

And so we are assessing for anxiety and depression as our primary problems, because that's what the treatment program is built for. So they're our most extensive assessments. But then we also assess sleep. We assess the teenagers, we assess their substance use. We assess healthy eating and their screen time and physical activity and those things.

Tania McMahon

Wow.

Sonja March

And we also look at quality of life. So we're sort of looking at this rounded package to figure out, well, what are the areas that this person has difficulty in. And if there's more than one and if they're very kind of similar in terms of their reports of symptom levels, then we also ask them more questions around, well which one of these is causing you the most problems and how. You know, trying to understand the impact of those problems so that we can build a treatment program that targets the one that's most impactful for them at the moment. And the idea is that it will generalise across those across those problems. So you know it works through that process.

We have a system in place that when a young person scores would indicate that they are experiencing an elevated level, so at a, at a level that would interfere in their lives, that we do let the parents know if it's the, the teenagers concluding it, and so they get more information about that as well.

But this is our version that we have up at the moment. It's, it's actually our short assessment tool. We are developing a longer assessment tool which is a little bit more in depth in it's questions, but that one is one that we are going to validate completely first before we make that open to the public. So at the moment we've got our Momentum checkup tool which is all based on our validated, is our validated measures. And we're also now creating a much longer version that can delve even deeper and find out more information. And we're going to be assessing that and the research study first.

Tania McMahon

Okay. And so what, what do you get at the end of these assessments? Is a kind of a report that compiles it all together and?

Sonja March

Yeah, absolutely. So as young people and their parents progress through the assessment, they'll finish that assessment, it will allocate them a treatment program based on their scores. But before they access the treatment program, it takes them through what we call a feedback module. Now this is where they can download the report at the end but before they even get the report we make sure we take them through a very detailed kind of summary of of what those scores mean and how our treatment program connects to those scores and and things like that.

So we take them through information on why these check up, you know, assessments were so important, what they can tell us. And then we take them through each of the main scales and their scores and and show them a graph. We actually, you know, show them on the on the level where their level of anxiety is, whether it's or social anxiety or separation or whether it's the depression and and know, whether or not it looks like it's causing problems in their life at the moment. So they can go through one by one and sort of see, oh, actually the only area I'm having difficulty with is social anxiety. I thought I was anxious across everything. Or it might pick up things that they haven't actually thought of before. So they might not have realised that their mood was quite low and it will show them that. So it sort of takes them through slide by slide of visual depiction of that.

It is not a clinical report, so we don't include really technical terms or anything. We keep in very, very sort of friendly terms for the parent young person. We're working on more sophisticated versions of those reports that they can give to to clinicians. But just trying to understand and can you know balance that sort of level of detail with what young people actually need to know before it becomes a little bit scary or too much information.

So at this point the the feedback module is really about letting them know these are the areas that you're having difficulty with that we've determined these treatment sessions might help with. So it will then take them through and show them what their treatment program is. So give them an outline of all the sessions and how they'll be able to access that through the Momentum platform.

Tania McMahon

So it gives them that kind of personalised suggestion and based on that, those results, yeah.

Sonja March

Yeah. That's right. Yeah.

Tania McMahon

So clearly it's it's really helpful for individuals or young people with their, with their parents kind of working through it on their own. How could health professionals use that kind of assessment piece with their clients? They're working together.

Sonja March

Yeah. And I I think there's a few ways that they could use it. And certainly one of our, many of our partners have health professionals will be referring into into this program and and for many it's it's almost like a waitlist reduction sort of referral. So that while they're waiting to see face to face psychologists, they can be getting some help this way.

Yeah. And I I think there's a few ways that they could use it. And certainly one of our, many of our partners have health professionals will be referring into into this program and and for many it's it's almost like a waitlist reduction sort of referral. So that while they're waiting to see face to face psychologists, they can be getting some help this way.

So the easiest way will be for professionals to refer young people to the platform. They can download, the young people themselves, can download this report and they can give that to their health professionals if they like. They can upload it to their my my health record. They can, you know, they can.

Tania McMahon

Wow.

Sonja March

We put that power back for the young person. So in all of our co-design, we we certainly consulting with our partners and the clinicians and even the IT components of our partners. And you know it really became clear that it needed to be in the hands of the young person and their parents in terms of what they do with the information. And integrating these types of platforms with health services is really difficult because every health service has a different system and a different process to follow. And so, you know, we we went forward with building this as a standalone platform that young people could access instead of then integrating with the health system, that they could use that information to provide that detail.

So, you know, young people could go in to see their professional and actually show them the program and show them what they're doing in the program. Download the reports for them. They'll do another report at the end when they do another session as well, and I can give that information. So guidance counselors, for example, might sort of just check in with their students once every few weeks or so, or they might choose to to have them come in and do the do the program in their office with them.

So there's lots of different ways that they could sort of implement the program. In one of our research studies at the moment, we're actually running through with clinician support and so we're testing a new model of care where we will have our therapists reviewing the responses that the young people are giving and providing support via phone calls and video conferencing and SMS support. So you know we're we're working towards having new for the system that the clinicians can directly use the platform as well, but at the current time is is sort of more in the hands of the person at hand.

Tania McMahon

But even as far as the just that first assessment portion, that sounds like there's so many ways that it can be useful. That you know that could just be used as an information kind of gathering tool where, you know, young, a young person or their, you know, along with their parents are going through those questions, getting that feedback, getting a report that is digestible for them. I love that they've got the, it really empowers them to take that information. And you know, it's not like I just found this, you know, which we are seeing a bit, I've just done this quiz on google and saying I'm really depressed. You know, this is a very, you know, safe, like I love that. You know, so safe, so carefully planned, thought out, effective, evidence based tools to to give them accurate feedback in a way that makes sense to them isn't too much that then they can feel empowered to go and give that information.

Sonja March

Yes.

Tania McMahon

To, yeah, you know, whoever might be able to refer them on. Or, you know obviously then engage with the program is is one pathway there, but you know there's multiple ways that they can use that information. I think that's wonderful.

Sonja March

That's right. And you know what we're seeing actually across a lot of the digital services in the adult space is that are really large proportion of the people who come to these sites actually are most looking for that assessment and most looking to understand what's going on for them. And and that might be all they need at that point or it might be what they need to get them to the next step of helpseeking. So that that's really important and and that's why we're also testing the longer version that could even go into that in in more detail. We also have created this really extensive guide for professionals.

So any of the health professional, psychologists, or GP or whoever it might be, we can actually provide a copy of this, this guidebook for them and they can really get to know what's going on in the platform, what measures they're using, and and really understand how the platform works before they start referring people into it as well.

Tania McMahon

Brilliant. And as we've been talking about, you know, what what's really great about the platform is that level of personalisation then that young clients receive after completing

that assessment because that really is at the heart of the tailored session plans. I'd love to dive into that a bit more. Can you talk us through what then a session plan might look like?

Sonja March

Yeah.

Tania McMahon

Or how long a session would run, over how many weeks? What types of therapies and techniques then those young people might be exposed to?

Sonja March

Yeah. And look, we've spent an awful lot of time really planning this out and, and thinking this through very carefully. So I mean, the important thing to remember is we have a really good deal of evidence and knowledge about what works for anxiety and depression in young people.

So we know that cognitive behavior therapy is a great treatment approach for young people. And so by and large the majority of of our sessions really focus on cognitive behavior therapy. But we also know that there are other things that you can do to supplement that and that can help with a bit of variety and treatment techniques. And so we certainly do bring in other concepts and other techniques like mindfulness and and acceptance, you know to to really help young people have a bit of choice in, in their, in their approaches.

Now look Brave certainly has been around for 20 years and we've built a really big evidence base around that. What we actually found through Brave, which was a 10 session program, is that when you deliver it in a self help form, most of the change happens in the first six sessions and then you know, not a lot of people want to keep going with the extra sessions. And so what we've done in Momentum is we've sort of focused on a core core number of around 7 sessions for for say, anxiety or say depression. And so your sessions will range anywhere from 7 to 13 sessions. So it totally depends on what the young persons symptoms look like.

So say if they have anxiety and depression then they would get a combination of of of cognitive behavior therapy techniques that target both the anxiety and and depression, and they might end up with say 10 sessions or so. If they have anxiety only then it will be 7 sessions.

So the other thing we've done to really make sure we're, you know, working this out and and giving the the approach that we would give in clinical practice is going back to that assessment and looking at the items and the symptoms that are most interfering in the young person's life. And so it's not just as simple as saying if you've got anxiety and depression, we'll give you this program that covers both, but actually it works out which one is causing the most problems. And if it's depression then we make sure we cover those depression sessions first, and then they move on to some of the anxiety components.

The beauty with depression and anxiety is that there's a lot of underlying similarities in some of the cognitions and behaviours that we can target together. But there still are some specific components that need to be addressed separately. But if a young person is having most difficulties with anxiety, then we would start with the anxiety, the exposure sessions. So it tailors the order of the sessions as well, and then say if they have sleep problems as well then it will add that on to the treatment program.

The other thing that we've done that's a little bit different is we sort of have these core programs and then we have optional modules that are just always there for everyone, and optional modules that are there are based on their symptoms and their and their assessment. So for every young person, we'll have a module that sits in our optional program that is all around health seeking. And what became really clear in the co-design is that young people want access to that sort of information. They want to know how they should seek help, who they should seek it from, when they should seek help. And so we made the decision to make that available to every single person on the platform at any time.

So that's a module that they can access irrespective of their program because the rest of the program we, we're a bit prescribed with the way that we want them to do it because we know from an evidence point of view, what what will work best. So they go through one session at a time, five to seven days apart, but with with these ones we wanted that one to be open.

We also make a healthy lifestyle module open and for our teenagers, if they're experiencing, say, depression and substance use, substance use will be optional modules. But we'll let them pop up at the end of the depression and the sleep modules for example, because we want to get to the core of things before we start overloading them with information around the substance. So there's a lot of clinical thought that's gone into the best sort of timing of things and and and where things should appear.

Tania McMahon

Yes. Yeah, that's incredible. It's a really well crafted and planned level of of detail about, you know, not just like not just a one size fits all, you know, like here's the program. It's a really, really fascinating how nuanced that is, you know, based on the, that, that assessment process. Yeah.

There are, there are also some really engaging and innovative design features that are incorporated into the platform. Obviously you know plenty of illustrations and colourful visualization tools. You know, things like planners and charts that that young people can actually personalise to help them keep on top of top of their progress and remind them as they work through the program about the skills they've learned, how they've built upon new skills as they acquire them. Can you tell us about some of those key features of that process that you found has really helped young people and their families get the most out of engaging with the platform?

Sonja March

Yeah, absolutely. So in addition to the main kind of component of the program, which is their their treatment sessions that they can work through one at a time, we also have our homepage on the on the Momentum program. And this is actually the one that we start with. So this is the one that comes up every time they log in that has our clinical tools on it as we call them, but for the for young people it's their toolbox, and it's the strategies, it's shortcuts and and links to resources and interactive activities around the key strategies that they're learning. Now again, these are different depending on on what sort of treatment the young person's getting. So they don't all get the same clinical tools here.

Say for example, young people with anxiety would to get access to a tool that's called a climbing plan. Now this is our tool to help them build their exposure hierarchy, and this is where we really get to the core of what their worry is or fear is and we help them build a step by step plan to overcome that through our our principles of exposure. And so this tool has been designed to be really really easy for them to use. It has example hierarchies. It has example steps that they can simply drag in and edit as they need. It has rewards examples that they can drag in and move around.

The idea with the exposure is that they should go, you know, little bit by little bit more anxiety provoking but oftentimes, we'll find and we'll see this in clinical practice as well is that young people want to jump straight up here to a really hard one. And so as they start to enter their steps in, if they pick something that's a little bit too hard and they rate it quite high on the anxiety thermometer gauge that we use, it'll come up with automatic prompts to say, hey, that looks a little bit difficult, let's try adding another step in between. So it really kind of covers all the possible scenarios that might happen that we would see in the clinical situation.

For the exposure hierarchy to this one, this there's then links to their practice sheets so they can record how they go. It's then linked to their rewards chart on their dashboard and their session page where they get stars every time they practice their homework tasks like exposure. So everything is linked and and leads to something else.

Those with anxiety would also get to relaxation and mindfulness exercises where they've, they've got a number of videos that they can watch. Young people were really clear to us that they wanted a mix of like cartoon type videos, but also videos with real people.

Tania McMahon

Ah, okay.

Sonja March

And so we have a combination of those throughout the program where they can see others learning how to do the relaxation process and then they can download the scripts and MP3s and things for themselves to do.

Say if they have depression, then they might get some different tools. They'll have a behavioral activation tool. Now this is where young people are really encouraged to try and

schedule in fun and practical and you know youthful things into their lives because they've tended to sort of retreat from their their normal routines. We've got an inbuilt calendar that they can drag and drop events into to make it really, really easy for them. They can colour code them in terms of what types of events. They can edit it. So you know really interactive sort of behavior activation tool.

We've got other tools around problem solving, changing focus, those kind of things. Lots of different clinical tools there that they can use in different situations.

What was really interesting when young people told us what they wanted, what tools they wanted. They wanted a feelings tracker, which which we always wanted to do because we we found that young people really like to see their progress mapped graphically. So in every session they do a very brief assessment, just an eight item assessment around their primary problem, and then it will map that on the on the graph for them with different colours to show their level of you know, whether it's interfering or not and they can map their progress over time.

So that's really cool and helpful for them, but they also wanted just something a little bit different, a little bit quirky, and they wanted something that they could kind of log in at anytime without them to do a session and to just just say how they were feeling.

Tania McMahon

Yeah.

Sonja March

So they actually helped us co-design all these feelings faces. And no labels, no words, they just wanted little pictures where they could go in and just click five times on the angry on the angry face or, you know, click on the happy face. And what our program does then is it maps that for the last 30 days. And so the faces has become bigger if they clicked on it more times. And they can kind of just look at it and go, oh, I've been actually quite.

Tania McMahon

Yeah. Wow.

Sonja March

Quite happy the last 30 days, you know or okay that face is coming up too much, I want to work on that. So that was something they specifically asked for.

Tania McMahon

That's so that's so interesting. And again, it's one of those things that that the digital kind of medium affords us. You know, when we're it's, you know, thinking comparing it to face to face treatment where we're really bound to numbers and questionnaires and things like that to measure progress. This is quite a unique way to be able to do that and seems to really yeah, meet the the needs of of the young people in a in a a more playful way.

Sonja March

Yeah. Yeah. And I think I think it fits well with what the adolescents were saying. You know they they like that quick sort of grab stuff. You know they want to be able to either grab information or give information really quickly and then, and then as long as they understand what the purpose of those things are, they're happy to then take that further, but that's their first instinct and so we sort of need to make sure we cover that. Yeah.

Tania McMahon

And that really is, thinking about adapting, like you were saying before adapting to where they are at this point in time which is you know, been shaped by interactions of social media probably, and and all of those things. And, and that's where they're at. That, that that's how they wanna, you know, track their outcomes and and interact with the the platform. So that that sounds really really quite cool.

Taking a a closer look at the evidence behind Momentum, I know we're talking about that briefly earlier. What kinds of outcomes have you been looking at amongst clients who have who have tried the program?

Sonja March

So what we're looking at and we'll continue to look at over the, you know, over the course of the project and as long as we offer Momentum is whether participating in the session.

Well, first of all, we're interested in in how they participate in the sessions, you know and and whether they complete certain components more than others. You know, whether they find that meets their needs and and that's kind of our, really our first question I guess. And what we're sort of doing at the end of each session is asking young people, okay, how was that session for you? Did it help with XYZ, you know, and do you intend on coming back? And if they don't or if they do intend on coming, we actually ask them why. So why do you want to come back or why are you not coming back? Just so we can really understand you know whether people potentially are coming back because they're seeing improvements in their symptoms or they're not going to come back because they've got what they needed, or it was too overwhelming, so that we can really understand and adapt the material for that.

So that's what we're doing, the first steps really trying to understand how young people are engaging and what we could do differently to make that better for them. But what we're ultimately interested in is whether participating in the treatment is related to reductions in their symptoms. So we're interested in their primary symptoms, but also all of the difficulties that they're they're sort of facing. So throughout the program, we will look every session, we will look at their core symptoms of depression and anxiety, and if they've got sleep problems, we'll also look at that, and see if we can notice the reduction in the symptoms. Like I said, we can map that on the chart so that young person can also see that. And we're looking at that over the course of the program. But then we're also looking at our follow-up points where we're we're sort of integrating the same assessment that we did at the beginning and we're redoing that at three months later and six months later to really understand if the treatment program does lead to those more sustained changes in their anxiety and depression and quality of life as well.

And during those assessments we're also asking around satisfaction and you know whether their needs were met and and what we could do different in the program. So we're also, whilst we have this program launched for the Australian public, we're also conducting research trials within within the platform. So anyone who comes into the platform has the option of being part of this trial.

Tania McMahon

Okay.

Sonja March

And our scientific question really is, does this personalized approach lead to a better outcome than, say, if we were to just give them a standard treatment program for their primary problem? So if they've got anxiety and depression, is it better if we tailor the treatment for both of those or if we just give them an anxiety program because that's their main problem and see if it generalises? Which is what we've always done with Brave and with other platforms and and it has generalized but maybe we could be doing better, and that's what we're, that's what we're sort of looking at here. So we're scientifically testing that question as well. And and and as we go, as we learn whether it does, then we can adapt the platform to to sort of suit that, that evidence.

Tania McMahon

Incredible. Yeah. And we we were kind of touching on this a bit earlier about, you know, how the program can be utilised. Obviously it's, you know, designed for young people to be able to work through on their own, if they're old enough, or with their parents or caregivers if they're, if they're a bit younger. But I know there are really some, some really important ways that health professionals and and you know, varying ways that health professionals can support clients through their journey with the program.

Can you unpack that a little more about the different ways that , that different health professionals too, might engage with Momentum? You know, and where it might even sit within a client's journey through therapy, if if someone's working alongside them through it?

Sonja March

Yeah. And so we found that our say, our school based partners, you know they are are interested in having a a treatment program that they can refer young people into because typically the guidance offices in school settings, it's not really in their role description to be able to offer that ongoing treatment. Although there are some psychologists who can do that and and are just limited in terms of how often they can do that.

So our education partners will will certainly be looking at this as a course that they can refer their young people into. But also we've certainly had guidance officers and psychologists in school settings before who really like to have the young person in a room once a week or once every fortnight, even if there's a bunch of kids you know doing the the program individually, where they can just check in with them and help them through any of the concepts that they might find a little bit challenging. So, you know, having the young person do the program on their own but in the school setting with the guidance officer so

they can provide clarifications if needed. And so that that can be we've had successful small groups kind of formats with that as well. So that that's certainly one way that people can use the program.

Our psychologists and our allied health professionals who might find it useful to ask the young person to to come in and and just take them through their progress to give them the report and and talk to them about what they're doing in each session and use it as a way of clarifying the content. They might find that that then supplements the work that they're doing. So you might be able to see the person every you know, three weeks instead of every week. It might be able to sort of reduce the the frequency or the number of sessions required, or they might use it while they're waiting to see it first for the first assessment assessment as well. So there are probably a couple of ways.

It's not designed to be a universal prevention program or anything like that. So it's not something that we would encourage everyone to do. And in fact it won't allocate a program if the person isn't elevated on you know on on those anxiety depression symptoms.

Tania McMahon

Interesting.

Sonja March

It will give them some psychoeducation and some materials, but it won't allocate the treatment sessions because it's really difficult for a young person to come in who doesn't have depression and anxiety and then be put through sessions where they're asked to provide examples of their depression and anxiety.

Tania McMahon

Yeah.

Sonja March

And so instead, we'll provide some the help seeking modules and healthy lifestyle information and some general sort of psychoeducation that they can come back at any time and redo the assessment, and then, you know, things change over time.

Tania McMahon

That's really interesting to know because that that's not necessarily the case with all programs or apps, you know, mental health apps and things out there. And that if someone gets referred in, it's almost like a a little bit of a a safety net that you know, they they get some feedback saying that actually they're doing okay and this this is the kind of information that might be helpful to them, and if they need to come back.

Sonja March

That's right.

Tania McMahon

That, you know, this is how to seek help. But that not pathologizing everything and putting everyone through unnecessary treatment, that's that's really good to know. Yeah.

Sonja March

Yeah. That's right. And and we, you know certainly with our previous programs where we just had say an anxiety program, we had it open to everyone and and people have been able to do that in any any sort of case. You know our data shows us that those people who aren't initially sort of anxious at the beginning but keep doing the program because they well learned skills do okay, you know, they it's not like they get worse or anything, in fact their anxiety does reduce a little bit, but that anxiety is actually not problematic to start with. And so whilst it it might be, it might generally be helpful, the feedback that we've had from those young people is that it doesn't make sense to them what they're doing, because they don't have any examples to put in. So yeah.

Tania McMahon

Yeah, like it, it was helpful, but it was felt a bit like unnecessary.

Sonja March

Yeah, yeah.

Tania McMahon

Yeah. Well, as we we, you know, we come to a close, it's been a really, really interesting discussion. Was there any other tips or advice you wanted to to add to any, you know, health professionals or or otherwise, you know, thinking of engaging with Momentum?

Sonja March

Look, there's plenty of information on our website, so momentumhub.org.au. Professionals can find out more information there. Young people and parents can as well.

There's some videos that they can watch to see a little bit of it in action, so I would encourage people to to sort of get on there and and have a look. We've also designed a a cool suite of little postcards and flyers and wallet cards for young people and we're happy to send that out to professionals if they wanna have some in their practice to to hand out to to people as well. So all of that information is on the website and people can access that at any time.

Tania McMahon

Ohh. Fabulous. And we'll have that in the the show notes as well, how to to access the the site. Well, Sonka, it's been such a pleasure to hear so much about this really incredible and very much needed, I would add, resource. Congratulations to you and the team on on bringing the ideas behind Momentum to life. Sounds like no small feat at all. And thank you so much for your time on the show.

Sonja March

Thank you very much.

Tania McMahon

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