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DEVELOPMENT OF THE DEAL PROJECT:

A Brief, Online Intervention for Depression and Problematic Alcohol use in Young People

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INTRODUCTION

Both depression and alcohol misuse represent two of the major social and health problems facing young people worldwide¹. Frequently, these conditions co-occur and this is associated with high rates of:

- Suicidal ideation and behaviours;
- Attrition, relapse and poor treatment response;
- Functional impairment².

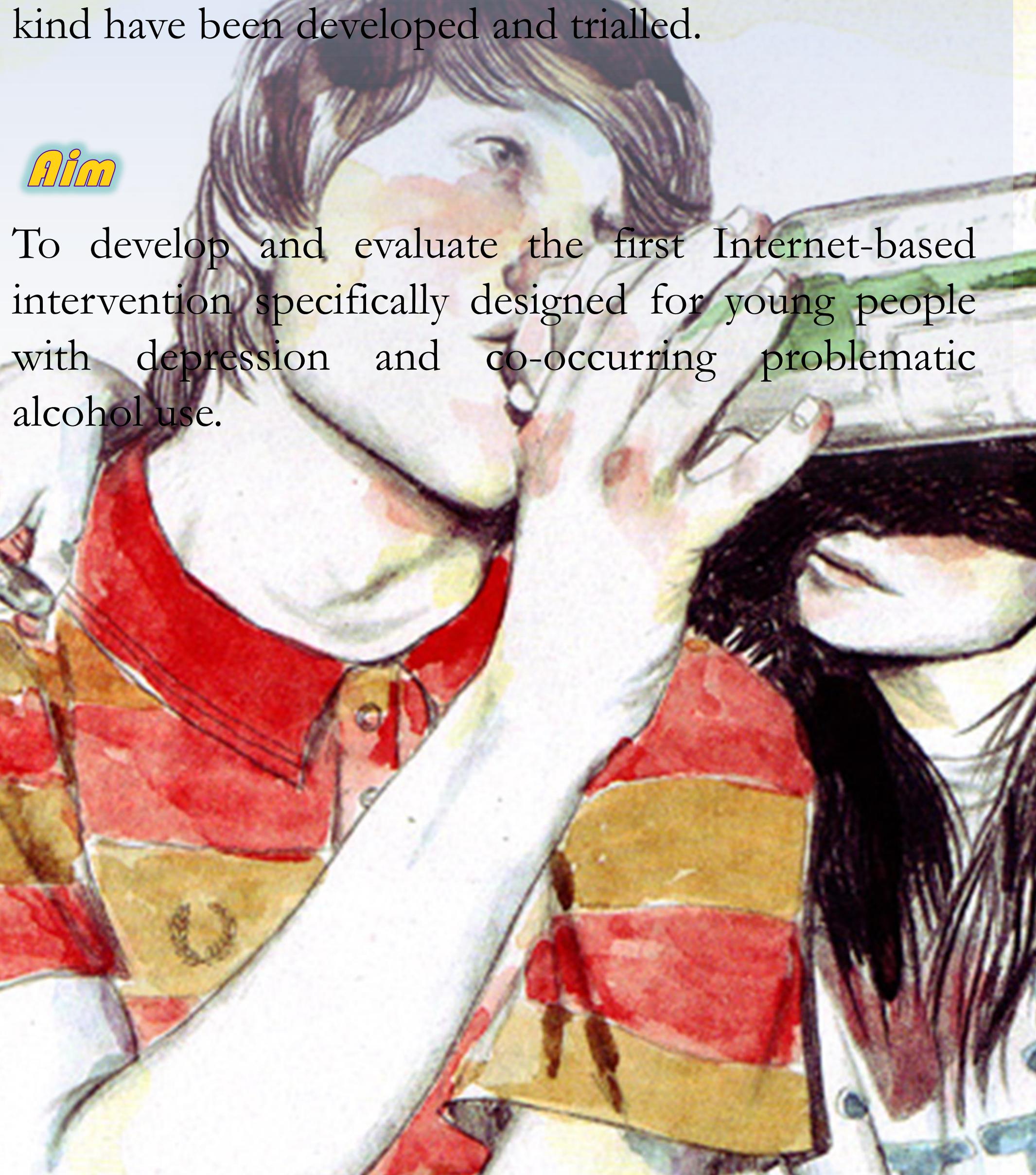
Yet less than 25% of affected young people access health services in a 12-month period³.

Advantages regarding flexibility, anonymity, cost, reach, and interactivity make the Internet an ideal means by which to engage young people in treatment, overcoming many traditional barriers⁵.

Although Internet-based interventions have been shown to be effective in treating depression^{6,7} and alcohol use^{8,9} alone, only one intervention addressing both disorders in adults (the computerised *SHADE* program) has been evaluated^{10,11}. No youth-focussed or Internet-based comorbidity interventions of this kind have been developed and trialled.

Aim

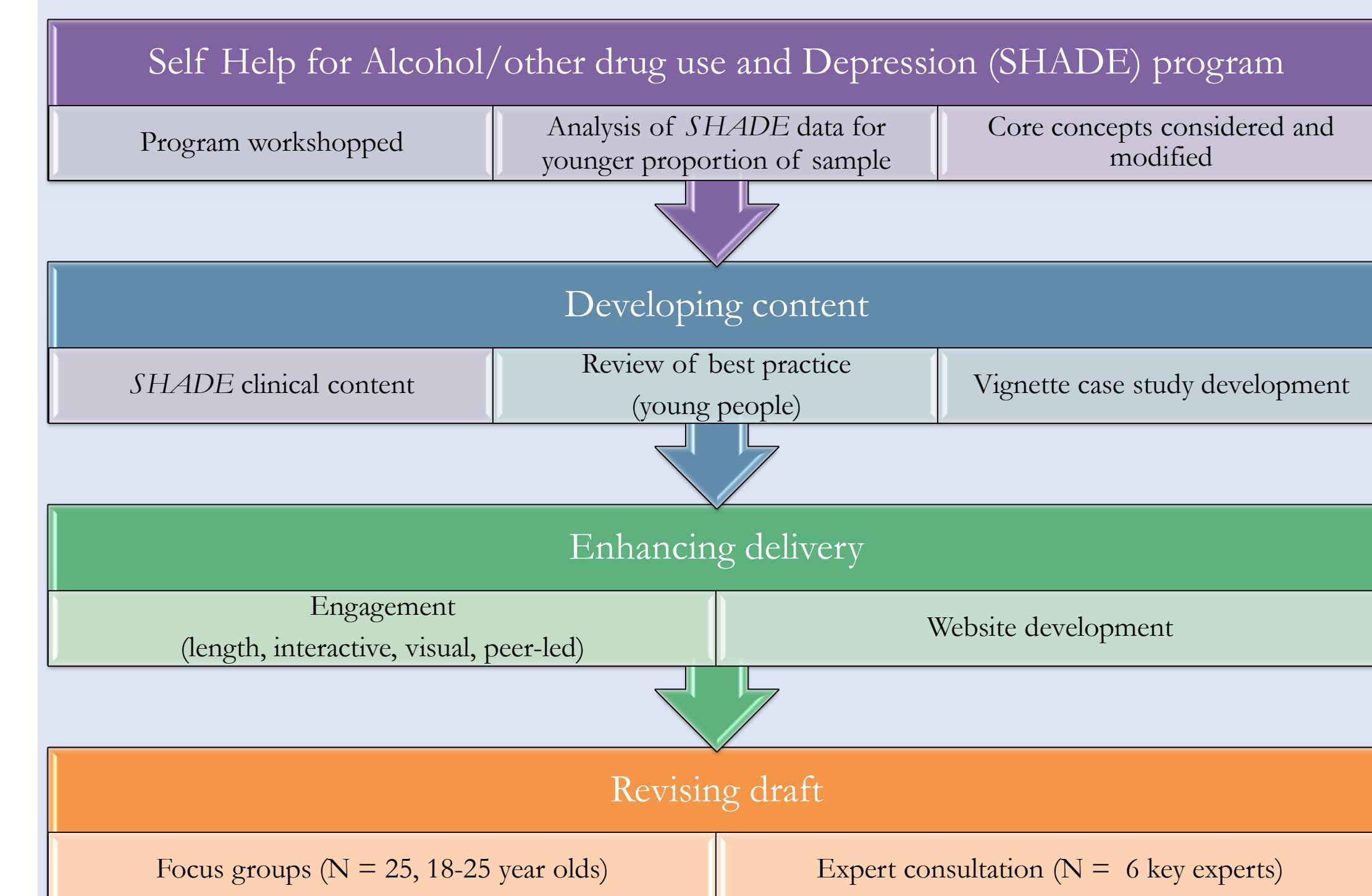
To develop and evaluate the first Internet-based intervention specifically designed for young people with depression and co-occurring problematic alcohol use.



METHOD

Figure 1 illustrates the procedure used to develop the *DEAL Project* program.

Figure 1. Procedure for developing the *DEAL Project*



Program content

- Week 1 – Psycho-education, assessment, goal setting, mood/activity/alcohol use monitoring.
- Week 2 – Behavioural activation, decisional balance (alcohol use), behaviour change, activity scheduling.
- Week 3 – Mood monitoring, cognitive restructuring.
- Week 4 – Coping skills: mindfulness + relaxation, problem solving, drink reduction + refusal, relapse planning + management.

Delivery

- Brief (4-week), online self-help intervention for moderate depression and problematic alcohol use
- Therapeutic components:
 - Motivational enhancement principles
 - CBT-based
 - Solution-focussed and skills-based
- Interactivity and engagement:
 - Self-selected case studies
 - Personalised normative feedback
 - User input and control (flexible timing + content)

RESULTS – Revising the draft

Figures 2 and 3 present the results of the focus groups (N = 25, 18-25 year olds).

Figure 2. Appropriateness of *DEAL Project* draft – focus groups

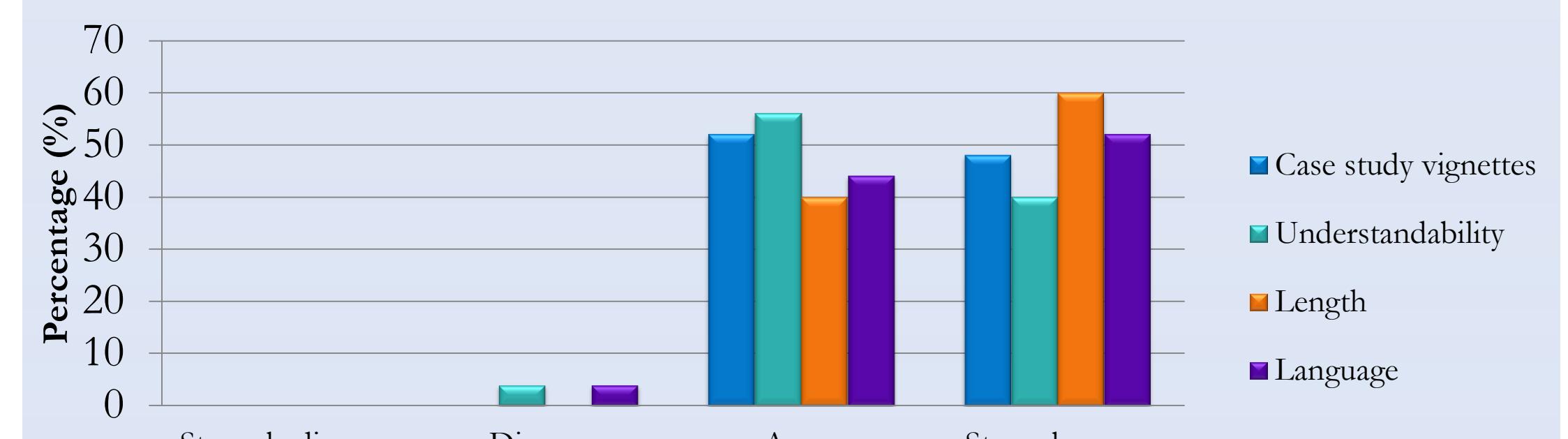
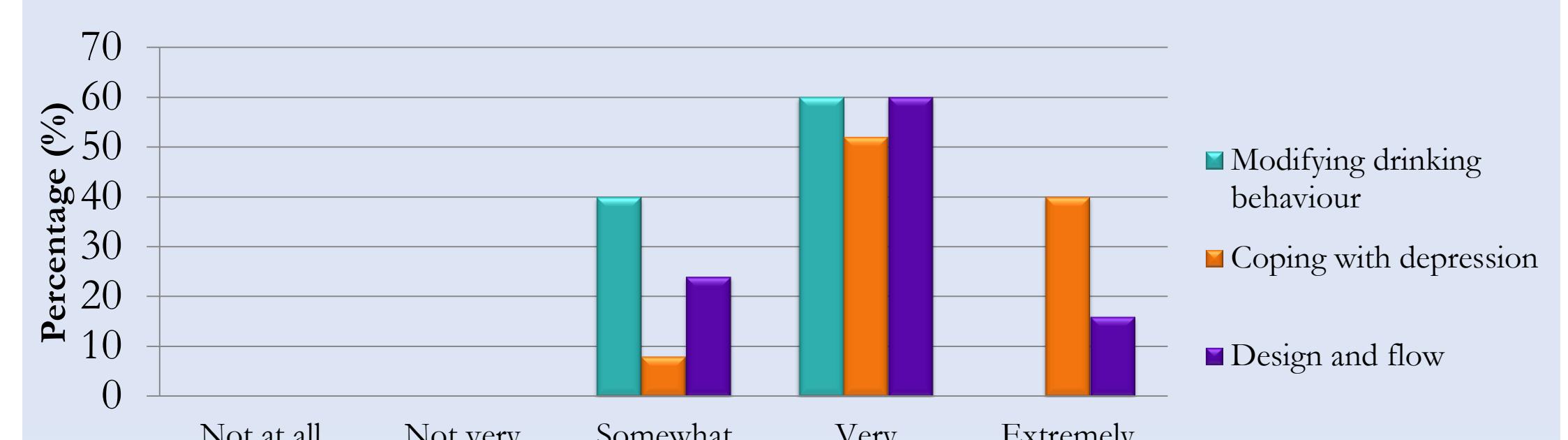


Figure 3. Effectiveness of *DEAL Project* draft – focus groups



Figures 4 and 5 present the results of the expert interviews (N = 6, youth mental health experts).

Figure 4. Appropriateness of *DEAL Project* draft – experts

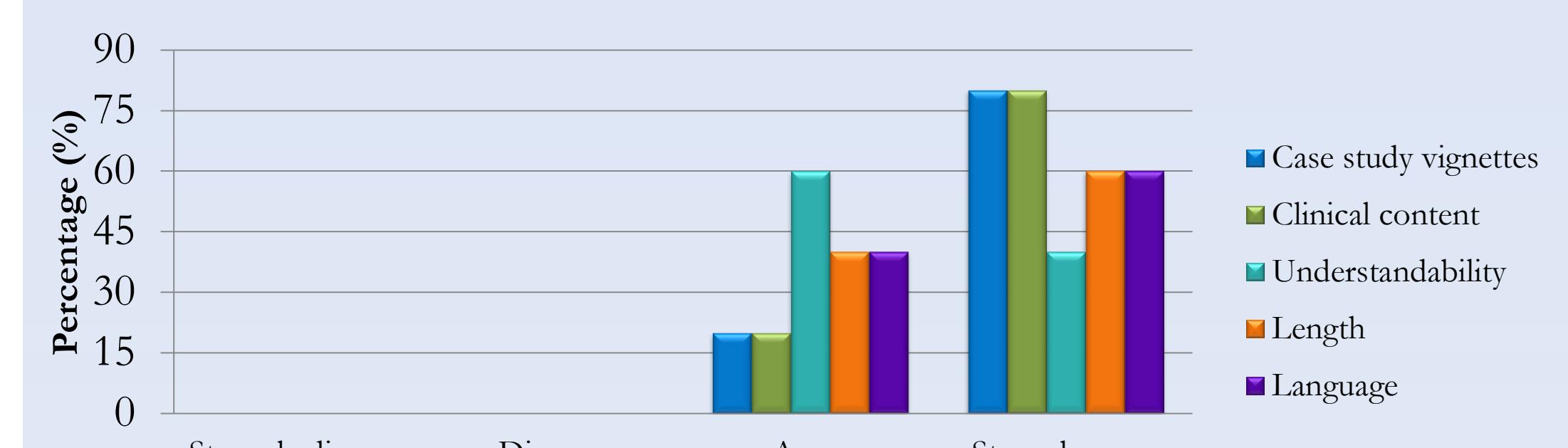
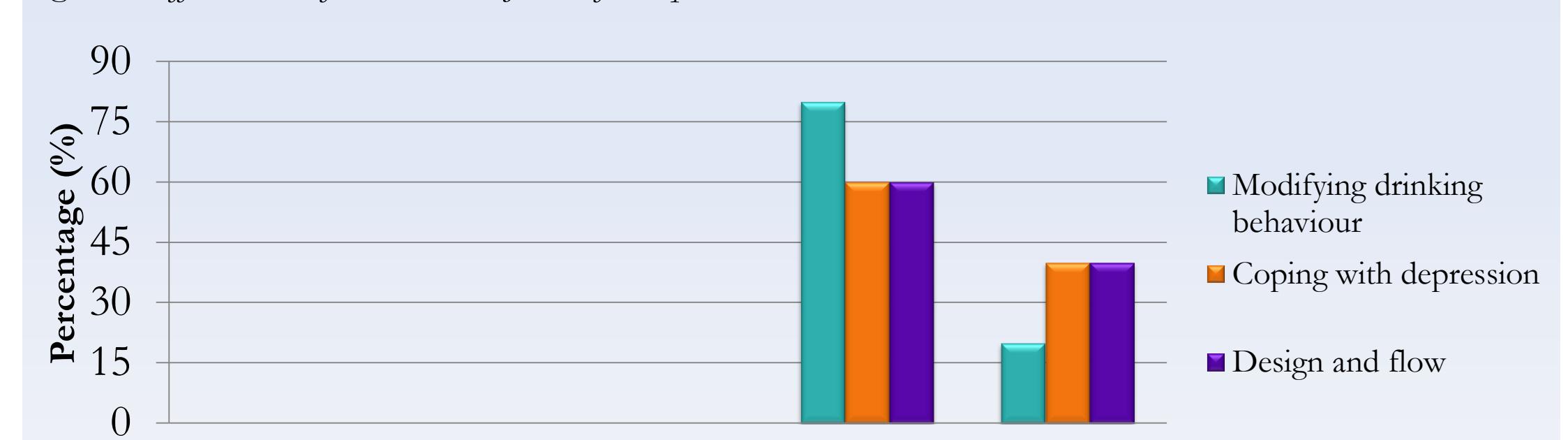


Figure 5. Effectiveness of *DEAL Project* draft – experts

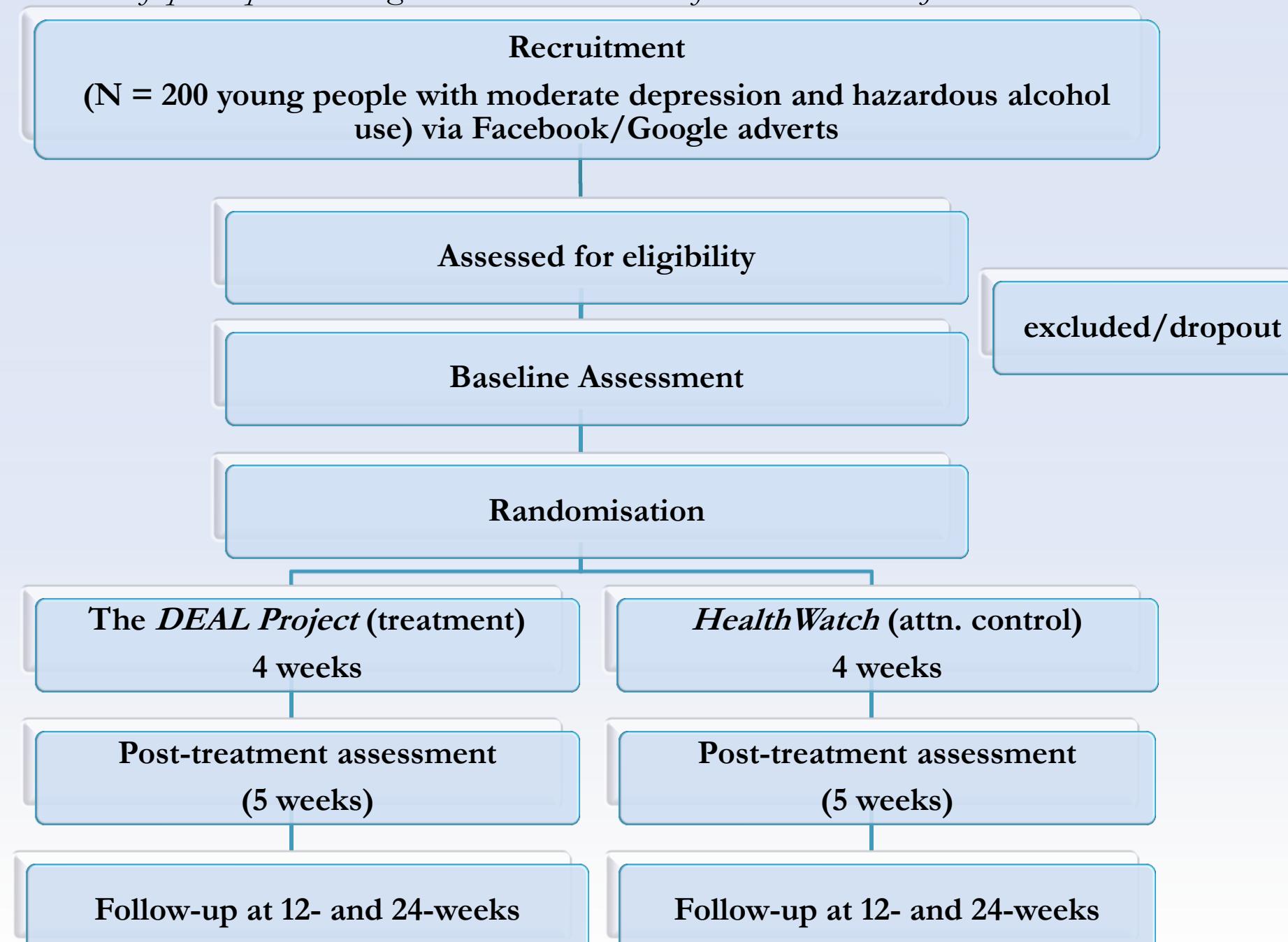


On the basis of suggestions from the young people and experts, program revision occurred. This largely pertained to the simplification of complex concepts, increased use of non-text elements and summaries, and adopting techniques to overcome extrinsic barriers and enhance intrinsic motivation (see¹²).

EVALUATION PHASE...

Recruitment for the evaluation of the program is set to commence. The trial will run the *DEAL Project* against an attention control condition, *HealthWatch*¹³. Figure 6 details the flow of participants through this effectiveness trial phase.

Figure 6. Flow chart of participants through the RCT evaluation of the *DEAL Project*



CONCLUSION

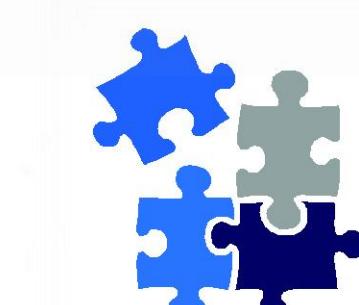
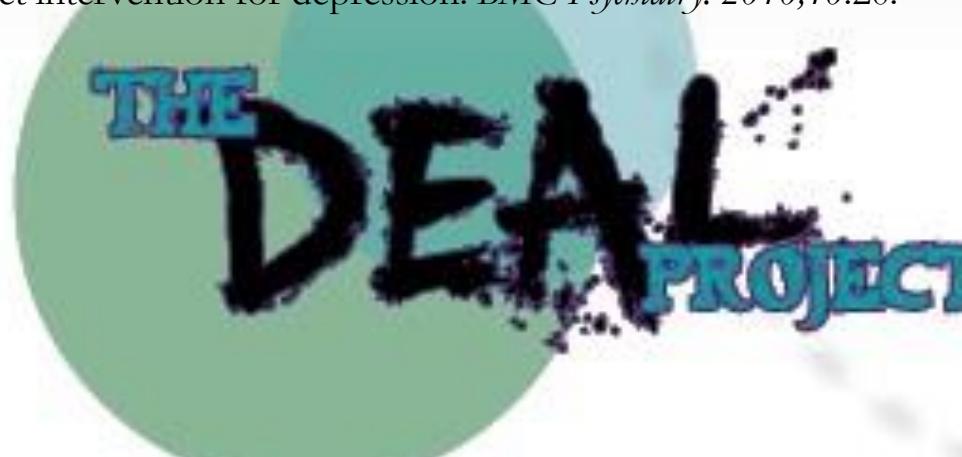
The *DEAL Project* program was well received by the young people and key experts and represents the first intervention of its kind. The evaluation trial of the program is forthcoming.

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