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Bridging the Digital Disconnect

Exploring Youth, Education, Health and Mental Health Professionals’ Views on Using Technology to Promote Young People’s Mental Health

Dr Aleisha M Clarke
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Derek Chambers
Professor Margaret M Barry

September 2014
Bridging the Digital Disconnect

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Copies of this publication can be downloaded from the Young and Well CRC website youngandwellcrc.org.au.
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Young and Well Cooperative Research Centre

The Young and Well Cooperative Research Centre is an Australia-based, international research centre that unites young people with researchers, practitioners, innovators and policy-makers from more than 75 partner organisations. Together, we explore the role of technology in young people’s lives, and how it can be used to improve the mental health and wellbeing of young people aged 12 to 25. The Young and Well CRC is established under the Australian Government’s Cooperative Research Centres Program.

youngandwellcrc.org.au

Health Promotion Research Centre, National University of Ireland Galway

The Health Promotion Research Centre (HPRC) at the National University of Ireland Galway produces high quality research, of national and international significance, that supports the development of best practice and policy in the promotion of health. As the only research centre in Ireland dedicated to Health Promotion, the Centre collaborates with regional, national and international agencies on the development and evaluation of Health Promotion initiatives. The Centre has an active multidisciplinary research programme in place and is a designated World Health Organization Collaborating Centre for Health Promotion Research.

nuigalway.ie/hprc

The Inspire Ireland Foundation

The Inspire Ireland Foundation was incorporated in 2009 to deliver ReachOut.com. While independent, Inspire Ireland retains strong connections and has a close working relationship with Inspire in Australia and the United States. Most importantly, Inspire Ireland shares the mission of helping young people get through tough times. Our work is focused on service delivery through ReachOut.com, mental health promotion and research.

inspireireland.ie
Table of Contents

EXECUTIVE SUMMARY...................................................................................................................... 6

INTRODUCTION.................................................................................................................................... 8

METHODOLOGY.................................................................................................................................. 11

SURVEY RESULTS............................................................................................................................. 13

DISCUSSION...................................................................................................................................... 37

IMPLICATIONS.................................................................................................................................. 41

CONCLUSION.................................................................................................................................... 42

REFERENCES...................................................................................................................................... 43
List of Tables

Table 1  Professions that took part in survey and response rate................................................................. 11
Table 2  Time working in profession and proportion of work focused on young people.............................. 14
Table 3  Work computer and access to internet on work computer.................................................................. 14
Table 4  Perceived level of confidence using a computer................................................................................. 15
Table 5  How often internet is used for professional purposes.............................................................. 15
Table 6  Respondents’ reported use of internet for professional use in previous month............................... 15
Table 7  Professionals’ perceived confidence in supporting young people’s mental health.......................... 15
Table 8  Sources of support that professionals reported being likely to use.............................................. 17
Table 9  Reported level of awareness of mental health organisations by health and education professionals.......................................................... 18
Table 10 Percentage of respondents that (i) heard of and (ii) visited online mental health websites............. 20
Table 11 Development of online resources for professionals........................................................................ 23
Table 12 Topics relevant to youth mental health.......................................................................................... 27
Table 13 Number and percentage of respondents that reported they would use the resource if it was made available to the profession................................................................................... 28
Table 14 Respondents' views on should have access to the online resource............................................ 31
Table 15 Respondents' views on the role of computers and internet in supporting young people's mental health and wellbeing........................................................................................................ 35

List of Figures

Figure 1  Respondents' age profile..................................................................................................................... 13
Figure 2  Workplace location of professionals.................................................................................................. 13
Figure 3  Respondents’ preference regarding how they would like to receive youth mental health information......................................................................................................................... 21
Executive Summary

“Bridging the Digital Disconnect” is a three-year program of research that aims to develop online resources for adults, including parents, youth workers, education, health and mental health professionals who wish to support the mental health of young people aged 12 to 25. This programme of research is being carried out by the Health Promotion Research Centre at the National University of Ireland Galway and Inspire Ireland Foundation in collaboration with the Young and Well Cooperative Research Centre, Australia. This report is the second in a series of reports that will inform the development of these online mental health resources. The first report examined findings from a needs assessment survey conducted with parents of young people in Ireland (Clarke, Kuosmanen, Chambers & Barry, 2013).

This report outlines key findings from a needs assessment survey carried out with youth workers, education, health and mental health professionals in Ireland. The specific aims of this study were to:

- determine professionals’ current use of online technologies
- examine professionals’ needs in relation to youth mental health
- explore professionals’ views regarding the use of online technologies to assist them in supporting young people’s mental health and wellbeing; and
- explore professionals’ needs in relation to using online technologies to support young people’s mental health.

A total of 900 professionals, including youth workers, secondary school teachers, guidance counsellors, general practitioners, health promotion officers, social workers, psychologists, psychiatrists and resource officers for suicide prevention completed an online questionnaire. The participants in this study, who were contacted through their professional bodies and associations, expressed positive views on the use of technologies to improve the mental health and wellbeing of the young people they work with and were supportive of the development of online mental health resources. The potential of online resources as a source of support was highlighted by the high percentage of youth workers, education and health professionals that said they would look for guidance on the internet or on a mental health website. Over 70 percent of youth workers, guidance counsellors, social worker and health promotion officers reported they would use one or other of these resources if a young person was going through a tough time. Younger respondents (18 to 25 years old) and female respondents were more likely to report using online resources.

Resources requested by youth workers, education and health professionals centered around the need for accurate information and guidelines in relation to promoting positive mental health and wellbeing in young people and the identification of youth mental health problems. Youth workers and education professionals specifically requested youth friendly online resources and materials to support the implementation of mental health promotion classes. Mental health professionals’ needs differed from the other professional groups with an emphasis on guidelines around working with young people and their parents in the promotion of positive mental health, reliable information on mental health issues concerning young people and online, evidence-based self-help interventions that young people could use to support their own mental health. All professions requested information on the services and supports that are available locally. The importance of an online resource that pooled the evidence base in relation to mental health supports and resources was also highlighted by respondents.
Of the 900 respondents that completed the survey, 98.8 percent reported that they would use the resource if it was made available. Participants in this study expressed a particular interest in the use of technologies in promoting positive mental health and wellbeing. However, mental health professionals cautioned against the development of mental health prevention and treatment resources for professionals not qualified to deal with mental health problems. All professions advocated enhancing the capacity of parents to enable them to better support young people’s mental health and wellbeing. A reliable, evidence-based online resource to which professionals could refer parents was proposed across the professional groups. Youth workers and teachers emphasised the additional need for guidelines on communicating with parents and including parents in youth mental health activities.

Concerns in relation to the development of online resources included the relevance of the resource to the specific needs of each profession, the broad age range for which the resources are being developed for (young people aged 12 to 25), and the need for the online resource to be used as an adjunct rather than a replacement of face-to-face services with young people. In planning and delivering online mental health resources to professionals, it is important to address these concerns and ensure that these issues are not overlooked. Findings in relation to potential barriers that would hinder professionals’ use of online mental health resources provided further insight into potential issues that need to be addressed. These barriers included being unsure about the reliability of the information provided, overload of information, resources not being updated regularly and the site being difficult to navigate. Respondents also referred to the need for additional training to enhance professionals’ IT skills. In addition, support from management in terms of providing time and access to the resource was regarded as essential to the successful integration of mental health promoting technologies within the services provided as part of the youth health workforce. Overall, the findings from this needs assessment demonstrate that there is a strong interest and willingness among professionals in utilising online technologies, particularly in combination with face-to-face supports, in their work with young people.
Introduction

The Health Promotion Research Centre at the National University of Ireland Galway in collaboration with Inspire Ireland Foundation are undertaking a three year programme of research working with young people and adults to determine how best to use technology to improve the mental health and wellbeing of young people. This initiative is part of an international research project, which is being led by the Young and Well Cooperative Research Centre in Australia. The Young and Well CRC unites young people with researchers, practitioners and innovators from over 70 partner organisations to explore the role of technology in young people’s lives and how technologies can be used to improve the mental health and wellbeing of young people. Bridging the Digital Disconnect seeks to develop tailored online resources for adults, including parents, youth workers, education, health and mental health professionals, who wish to support the mental health of young people age 12 to 25 years old. Specifically, the research projects aims to assess and address the “digital disconnect” between young people and adults in order to develop effective technology-based mental health supports. The objectives of this study are to:

- examine adults’ understanding of and attitudes to youth mental health
- explore adults’ willingness to use technology to support their work with young people
- determine the needs of adults in relation to the use of technology to support young people
- develop and test online resources that facilitate and enable adults to use information and online community resources for the benefit of the young people they work with and support; and
- launch a range of tailored mental health resources to help those who can support and work with young people, including, parents, youth workers, education, health and mental health professionals.

The first resource that has been developed, ReachOutParents.com, is designed to meet the needs of parents. Following this, online resources to support other professional groups working with young people will be developed.

For most young people, online technologies are a part of their everyday lives. In Europe, young people aged 16 to 24 are the most frequent users of the internet. Data from the European Commission highlights the steady increase in young people’s use of the internet over the past six years. In 2007, 75 percent of young people age 16 to 24 reported having accessed the internet (European Union, 2013). In 2013, this figure rose to 92 percent. Of this group, 88 percent reported accessing the internet on a daily basis. Regarding mental health, a recent survey conducted with 14,306 young people in Ireland highlights the role of technologies in supporting young people’s mental health and wellbeing. For young people aged 12 to 19, in post-primary school, the internet was the third most frequently reported sources of support after friends and parents. For young adults aged 17 to 25 (post-second level), the internet was the most frequently reported source of support for mental health and wellbeing, followed by friends and parents (Dooley & Fitzgerald, 2012). The findings from this study provide evidence that for young people the internet can be seen as a “tool and a setting for action” (Blanchard et al., 2011) in improving their mental health and wellbeing. The potential that online mental health interventions hold include direct, convenient access to resources one might not otherwise have. Online interventions also offer individuals increased privacy and anonymity and can offer a cost effective method that more readily addresses those living in isolated geographical areas, even reaching disenfranchised and minority populations (Barak & Grohol, 2011).
The increasing role of online technologies in young people’s lives in combination with the current expansion of online mental health resources as evidenced by recent systematic reviews (Clarke, Kuosmanen & Barry, 2014; Griffiths, Farrer & Christensen, 2010; Cuijpers et al., 2009; Spek et al., 2007; Griffiths & Christensen, 2006) has significant implications for adults and the role they play in supporting young people. Relatively little is known, however, about adults’ views on the role technologies can play in supporting young people’s mental health and adults’ needs in relation to mental health and digital literacy. The majority of research conducted in this area to date has been carried out in Australia. Blanchard et al. (2011) examined the capacity of the Australian youth health workforce to support young people’s engagement with technologies in ways that benefit their mental health. Results from an online survey conducted with 233 professionals including psychologists, psychiatrists, GPs and health promotion officers, suggest that technologies have the potential to improve young people’s mental health and wellbeing when used alone, or as an adjunct to face-to-face interventions, as appropriate. However, a number of barriers to using technology were identified. These included poor infrastructure, lack of guidelines or policies to support safe and constructive use of technologies and lack of awareness about which technology-based strategies or approaches are most effective and in which contexts (Blanchard et al., 2011).

In addition to this study, the Inspire Foundation in Australia conducted a needs assessment survey with 324 professionals including educational workers, youth and social workers, psychologists, GPs and nurses (Inspire Foundation, 2012). The purpose of the research was to determine the needs and preferences of professionals working with young people in relation to mental health and wellbeing. The results from this study indicated a desire among professionals to know about what services, resources and materials are available to young people. All professionals expressed a preference for learning about youth mental health in a face-to-face environment. Education professionals expressed a need for practical strategies to support positive youth mental health and for concise information about where to refer students who have particular issues. Youth and social workers requested a deeper level of mental health training which is tailored to their work context. Psychologists and GPs identified the need for more specific, nuanced and current information about mental health issues affecting young people and successful interventions based on the latest youth related evidenced-based research.

The “Bridging the Digital Disconnect” program of research was designed to contribute to current knowledge about parents and professionals’ use of technologies to support youth mental health in an Irish context and to inform the development of tailored technology-based mental health resources for these professional groups. In 2012 a needs assessment survey was conducted with parents of young people aged 12 to 25 in Ireland, in order to determine how best to support parents in using technologies to promote young people’s mental health (Clarke et al., 2013). The results from this study revealed a strong need among parents for guidance in relation to youth mental health and the potential of online technologies in combination with face-to-face training in providing support. Parents recognised the importance of technology in young people’s lives and were aware of the gaps between themselves and young people regarding new and emerging technologies and how to use these technologies. In terms of parents’ use of the internet, 22.1 percent of parents stated that they had used the internet to search for mental health information in the past month. One quarter of parents surveyed (24.6 percent) disagreed that they could help their child through a tough time. Parents were most interested in receiving reliable information through an online resource in relation to, what to do if their son or daughter was experiencing a mental health problem, local supports and services available for young people, guidelines about how to promote wellbeing in young people and information about how parents can support their own mental health. Confidentiality, clear, non-medicalised information, ease of navigation and endorsement of the resource by professionals
including general practitioners and teachers were considered important factors that would facilitate parents' use of the resource. Parents also emphasised the need for face-to-face training in combination with the online resource in relation to youth mental health, parenting skills and enhancing parents' use of technologies.

In addition to obtaining the views of parents in Ireland, this programme of research sought to determine the views of professionals working with young people aged 12 to 25. An online needs assessment survey was conducted with youth workers, education health and mental health professionals in order to ascertain their views on the use of online mental health resources to support young people and their needs in relation to using online resources. The results from this study will now be presented.

AIMS

The specific aims of this study were to:

- determine professionals' current use of online technologies
- examine professionals' needs in relation to youth mental health
- explore professionals' views regarding the use of online technologies to assist them in supporting young people's mental health and wellbeing; and
- explore professionals' needs in relation to using online technologies to support young people's mental health.
Methodology

SAMPLE

The sample consisted of a range of professionals across the education and health sectors.

Youth workers selected to take part in the survey worked in Foróige, Ireland’s national youth organisation. Foróige operates in 26 counties in Ireland. Youth workers work with young people aged ten to 18, though 588 volunteer-led clubs. Foróige has 309 staff nationwide.

Education professionals selected to take part in the research included:

• Social, Personal and Health Education (SPHE) teachers in secondary schools
• Guidance counsellors in secondary schools

Health professionals selected to take part included:

• General Practitioners
• Social workers
• Health Promotion Officers.

Mental health professionals selected to take part included:

• Psychologists
• Psychiatrists
• Resource Officer for Suicide Prevention

Table 1 indicates the number of professionals within each profession that the survey was distributed to and the number and percentage of respondents.

Table 1: Professions that took part in survey and response rate

<table>
<thead>
<tr>
<th>Profession</th>
<th>Professional body distributed questionnaire</th>
<th>Number survey distributed to</th>
<th>Number that responded</th>
<th>Response rate (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SPHE teacher</td>
<td>Postal survey to schools</td>
<td>374</td>
<td>93</td>
<td>25.5%</td>
</tr>
<tr>
<td>Guidance counsellor</td>
<td>Institute of Guidance Counsellors</td>
<td>1,150</td>
<td>100</td>
<td>8.7%</td>
</tr>
<tr>
<td>Youth worker</td>
<td>Foróige</td>
<td>271</td>
<td>160</td>
<td>59%</td>
</tr>
<tr>
<td>General practitioner</td>
<td>Irish College of General Practitioners</td>
<td>500</td>
<td>107</td>
<td>21.4%</td>
</tr>
<tr>
<td>Social worker</td>
<td>Irish Association of Social Workers</td>
<td>1,051</td>
<td>138</td>
<td>13.1%</td>
</tr>
<tr>
<td>Health promotion officer</td>
<td>Health Service Executive</td>
<td>16</td>
<td>16</td>
<td>100%</td>
</tr>
<tr>
<td>Scientist</td>
<td>Irish Psychological Society; National Educational Psychological Service</td>
<td>800</td>
<td>217</td>
<td>27.1%</td>
</tr>
<tr>
<td>Psychiatrist</td>
<td>College of Psychiatry Ireland</td>
<td>451</td>
<td>61</td>
<td>13.5%</td>
</tr>
<tr>
<td>Resource officer for suicide prevention</td>
<td>Health Service Executive</td>
<td>8</td>
<td>8</td>
<td>100%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>4,621</td>
<td>900</td>
<td>19.5%</td>
</tr>
</tbody>
</table>

1 SPHE is a mandatory subject in the Junior Cycle of secondary schools supports the personal development, health and wellbeing of young people.
With the exception of SPHE teachers, the online survey was distributed to professions by email through their professional body. For teachers, due to difficulty in directly accessing an email list, a postal questionnaire was distributed to the SPHE coordinator in 374 randomly selected secondary schools in Ireland (50 percent of all secondary schools). In the case of general practitioners, the online questionnaire was distributed to a sample of 500 GPs who were randomly selected by the Irish College of General Practitioners (ICGP) from a total sample of 1800 GPs. For all other professions, the online survey was distributed to all registered professionals within the professional body.

**MEASURE**

An online questionnaire was used to examine professionals’ views in relation to the use of online resources to support young people’s mental health and wellbeing. A questionnaire was chosen over other methods as it permitted the views of a large number of professionals across Ireland to be obtained. The questionnaire was informed by current literature and a similar questionnaire that has been used with mental health professionals in Australia (Blanchard et al., 2011). It was composed of fixed-choice and open ended questions, the majority of which were fixed choice. The questionnaire was divided into three main sections. Section One examined professionals’ current use of computers and the internet. Section Two explored youth worker, education and health professionals’ sources of support in relation to youth mental health and their awareness of local, national and online mental health organisations. Section Three explored professionals’ views regarding the development of online resources to assist them in supporting young people’s mental health. Respondents were also asked about topics that were most relevant to youth mental health. In addition, respondents were asked about factors that would prevent and/or facilitate their use of the online resource. A copy of the online survey is available on request from the Health Promotion Research Centre, National University of Ireland Galway.

**DATA ANALYSIS**

The data from the questionnaire were entered into SPSS and a summary of descriptive statistics was produced. The data were subject to univariate analysis with some bivariate analysis carried out to determine relationships between respondents’ demographics and the respective variables. The open-ended questions were analysed using inductive thematic analysis as described by Braun and Clark (2006). With this method the themes identified emerge from the data thus providing a rich and detailed account of the data set.
Survey Results

DEMOGRAPHICS

A total of 900 professionals completed the questionnaire. This represents 19.5 percent of the total sample that were invited to participate in the survey (n = 4621). The majority of respondents that completed the questionnaire were female (76.9 percent). Figure 1 illustrates the age profile of the respondents across the four professional groupings. As depicted in the bar chart, significantly more youth workers were aged 18 to 35 than education, health and mental health professionals [$\chi^2(6, n=764) = 99.01, p<0.001$]. Just over 66 percent of these youth workers were aged 18 to 35. Health professionals had the oldest age profile with 26.6 percent of GPs aged over 56.

Figure 1: Respondents' age profile

There was a strong representation of professionals from urban services (town or city with population of more than 1500), with 84 percent of those surveyed working in an urban area (Figure 2).

Figure 2: Workplace location of professional
Data regarding the number of years respondents worked in their profession and the proportion of their work that was focused on young people are shown in Table 2. Given the younger age profile of youth workers, this group had less years experience working in their profession than education, health and mental health professionals (<3 percent had more than 20 years’ experience). The proportion of work focused on young people across the three groups varied significantly. Youth workers and education professionals spent more time working with young people than health and mental health professionals. Just over 93 percent of education professionals and 78.6 percent of youth workers reported that the majority of their work (>75 percent) was focused on young people. This is in contrast to 18.6 percent of health professionals and 31.8 percent percent of mental health professionals that reported this.

Table 2: Time working in profession and proportion of work focused on young people

<table>
<thead>
<tr>
<th>Time working in profession</th>
<th>≤ 5 years</th>
<th>6-19 years</th>
<th>20+ years</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>Youth workers</td>
<td>60</td>
<td>43.2%</td>
<td>76</td>
</tr>
<tr>
<td>Education</td>
<td>33</td>
<td>19.8%</td>
<td>76</td>
</tr>
<tr>
<td>Health</td>
<td>59</td>
<td>27.2%</td>
<td>97</td>
</tr>
<tr>
<td>Mental health</td>
<td>48</td>
<td>19.8%</td>
<td>133</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Proportion of work focused on young people</th>
<th>Less than 25%</th>
<th>25-75%</th>
<th>76% or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Youth workers</td>
<td>2</td>
<td>1.4%</td>
<td>28</td>
</tr>
<tr>
<td>Education</td>
<td>3</td>
<td>1.9%</td>
<td>8</td>
</tr>
<tr>
<td>Health</td>
<td>60</td>
<td>27.9%</td>
<td>115</td>
</tr>
<tr>
<td>Mental health</td>
<td>54</td>
<td>22.3%</td>
<td>111</td>
</tr>
</tbody>
</table>

USE OF TECHNOLOGY

Figures related to computer and internet access are shown in Table 3. Almost all of the respondents reported having a computer (>95 percent) and having access to the internet on their computer (>95 percent).

Table 3: Work computer and access to internet on work computer

<table>
<thead>
<tr>
<th>Do you have a work computer?</th>
<th>Do you have internet access?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>Youth workers</td>
<td>158</td>
</tr>
<tr>
<td>Education</td>
<td>192</td>
</tr>
<tr>
<td>Health</td>
<td>257</td>
</tr>
<tr>
<td>Mental health</td>
<td>279</td>
</tr>
</tbody>
</table>

The majority of professionals reported feeling confident / very confident using a computer (Table 4). On average ten percent of respondents felt they could use some help and less the two percent reported feeling ‘not confident’ using a computer. Respondents aged 56 years or older were significantly less confident using a computer than those aged 55 or younger [$\chi^2$(6, n=763) = 19.7, p<0.05].
Table 4: Perceived level of confidence using a computer

<table>
<thead>
<tr>
<th></th>
<th>Very confident / Confident</th>
<th>Could use some help</th>
<th>Not confident at all</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>Youth workers</td>
<td>145</td>
<td>90.6%</td>
<td>14</td>
</tr>
<tr>
<td>Education</td>
<td>167</td>
<td>87%</td>
<td>22</td>
</tr>
<tr>
<td>Health</td>
<td>228</td>
<td>87.7%</td>
<td>30</td>
</tr>
<tr>
<td>Mental health</td>
<td>259</td>
<td>90.6%</td>
<td>26</td>
</tr>
</tbody>
</table>

The level of internet use across the professions was high (Table 5). Over 90 percent of youth workers and education professionals and 82 percent of health and mental health professionals reporting using the internet on a daily basis for professionals use.

Table 5: How often internet is used for professional purposes

<table>
<thead>
<tr>
<th>Use of internet for professional use</th>
<th>Every day</th>
<th>Once or twice a week</th>
<th>Less often</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>Youth workers</td>
<td>151</td>
<td>94.4%</td>
<td>6</td>
</tr>
<tr>
<td>Education</td>
<td>173</td>
<td>90.1%</td>
<td>13</td>
</tr>
<tr>
<td>Health</td>
<td>216</td>
<td>82.8%</td>
<td>37</td>
</tr>
<tr>
<td>Mental health</td>
<td>233</td>
<td>82.6%</td>
<td>39</td>
</tr>
</tbody>
</table>

Respondents were asked to indicate what they had used the internet for in the past month (Table 6). Sending/receiving email and general Google searching were reported with the most frequency. Searching for mental health information was the third most frequently reported use among youth workers (65.6 percent), education professionals (67.7 percent) and mental health professionals (86.4 percent) and the fourth most frequently reported use among health professionals (68.6 percent). A higher percentage of health and mental health professionals used elearning in the previous month when compared with youth workers and education professionals. Education professionals were more likely to watch videos and download music or film for professional use. Youth workers on the other hand were more likely than other professionals to use social networking (35 percent), instant messaging (28.1 percent), post photos or videos or music (21.3 percent) and use file sharing sites (27.5 percent).

Table 6: Respondents’ reported use of internet for professional use in previous month (%)
SUPPORTING YOUTH MENTAL HEALTH

As part of the questionnaire, youth workers, education and health professionals were asked about to indicate how strongly they agreed or disagreed with statements in relation to feeling to support youth mental health (Table 7). Mental health professionals were not asked this question.

Statement 1: “I feel equipped to promote wellbeing in young people’s lives”
Youth workers were significantly more likely than education and health professionals to agree with this statement \( \chi^2(4, n=563) = 14.0, p<0.01 \). Within the education profession, guidance counsellors reported feeling significantly more equipped to promote wellbeing in young people than SPHE teachers \( \chi^2(4, n=180) = 12.16, p<0.05 \). Within the health profession, health promotion officers reported feeling significantly more equipped than social workers and GPs \( \chi^2(4, n=234) = 9.8, p<0.05 \). Just over 87 percent of health promotion officers strongly agreed / agreed with the statement, this is in contrast to 74.8 percent of social workers and 70.7 percent of GPs that strongly agreed / agreed.

Statement 2: “I feel equipped to determine if a young person needs mental health support”
Health professionals were significantly more likely to agree with this statement than youth workers and education professionals \( \chi^2(4, n=562) = 24.6, p<0.001 \). Within the education profession, guidance counsellors reported feeling significantly more equipped than SPHE teachers \( \chi^2(2, n=180) = 39.53, p<0.001 \). Similarly, health promotion officers reported feeling significantly more equipped than social workers and GPs \( \chi^2(4, n=234) = 25.02, p<0.001 \).

Statement 3: “I feel equipped to help a young person if they have a mental health problem”
Youth workers, education and health professionals reported feeling less equipped to help a young person with a mental health problem, than determine if they had a problem or promote wellbeing. Whilst health professionals were more likely than youth workers and education professionals to agree with the statement, the percentage of health professionals that reported feeling equipped was relatively low (65 percent). Within the professional groupings, GPs were most likely to agree with this statement (69.7 percent agreed) and SPHE teachers were least likely to agree that they felt equipped to help a young person if they had a mental health problem (35.9 percent agreed).
Table 7: Professionals’ perceived confidence in supporting young people’s mental health

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree / disagree</th>
<th>Neither agree nor disagree</th>
<th>Agree / strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>I feel equipped to promote wellbeing in young people’s lives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth workers</td>
<td>4</td>
<td>2.7%</td>
<td>12</td>
</tr>
<tr>
<td>Education</td>
<td>13</td>
<td>7.2%</td>
<td>23</td>
</tr>
<tr>
<td>Health</td>
<td>18</td>
<td>7.7%</td>
<td>43</td>
</tr>
<tr>
<td>I feel equipped to determine if a young person needs mental health support</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth workers</td>
<td>12</td>
<td>8.1%</td>
<td>36</td>
</tr>
<tr>
<td>Education</td>
<td>31</td>
<td>17.2%</td>
<td>34</td>
</tr>
<tr>
<td>Health</td>
<td>19</td>
<td>8.1%</td>
<td>25</td>
</tr>
<tr>
<td>I feel equipped to help a young person if they have a mental health problem</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth workers</td>
<td>22</td>
<td>14.9%</td>
<td>41</td>
</tr>
<tr>
<td>Education</td>
<td>52</td>
<td>29.2%</td>
<td>34</td>
</tr>
<tr>
<td>Health</td>
<td>33</td>
<td>14.1%</td>
<td>49</td>
</tr>
</tbody>
</table>

SUPPORT

Youth, education and health professionals were asked about what they were likely to do if a young person was going through a tough time (Table 8). Consulting with a colleague was the most likely point of contact for youth workers (88.1 percent) and education professionals (86.5 percent). This was followed by consulting with the young person’s family and another professional. For health professionals, consulting with another professional was reported with the most frequency (94.9 percent), followed by consulting with a colleague (89.3 percent).

Youth workers were significantly more likely than education and health professionals to look for support on the internet \(\chi^2(4, n=561) = 32.56, p<0.001\) and on a dedicated mental health website \(\chi^2(4, n=559) = 37.12, p<0.001\). Within education, SPHE teachers were significantly less likely than guidance counsellors to look for support on the internet \(\chi^2(2, n=180) = 18.45, p<0.001\) or on a dedicated mental health website \(\chi^2(2, n=180) = 8.21, p<0.001\). A similar pattern was evident within the health profession, GPs were significantly less likely than social workers and health promotion officers to look for guidance on the internet \(\chi^2(4, n=234) = 50.08, p<0.001\) or on a dedicated mental health website \(\chi^2(4, n=234) = 40.85, p<0.001\). Additional analysis revealed a preference for online supports according to age and gender. Respondents aged 18 to 35 were significantly more likely to look for guidance on the internet \(\chi^2(4, n=517) = 29.2, p<0.001\) or on a dedicated mental health website \(\chi^2(4, n=520) = 33.3, p<0.001\) than respondents age 36 years and over. Similarly, females were significantly more likely than male respondents to look for guidance on the internet \(\chi^2(4, n=518) = 19.9, p<0.05\) or on a dedicated mental health website \(\chi^2(4, n=517) = 18.6, p<0.005\).
Table 8: Sources of support that professionals reported being likely to use

<table>
<thead>
<tr>
<th></th>
<th>Youth workers</th>
<th>Education</th>
<th>Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consult with young person’s family</td>
<td>127 85.8%</td>
<td>138 76.7%</td>
<td>-</td>
</tr>
<tr>
<td>Consult with colleague</td>
<td>141 88.1%</td>
<td>167 86.5%</td>
<td>208 89.3%</td>
</tr>
<tr>
<td>Consult with another professional</td>
<td>124 83.2%</td>
<td>107 59.8%</td>
<td>222 94.9%</td>
</tr>
<tr>
<td>Look for guidance on the internet</td>
<td>106 72.1%</td>
<td>78 43.3%</td>
<td>108 46.2%</td>
</tr>
<tr>
<td>Look for help on a dedicated mental health website</td>
<td>120 82.8%</td>
<td>77 52.4%</td>
<td>123 52.6%</td>
</tr>
<tr>
<td>Look for guidance in books/journals</td>
<td>104 57.8%</td>
<td>88 49.4%</td>
<td>141 60.3%</td>
</tr>
</tbody>
</table>

Additional sources of support that professionals reported they might use included:

- Local support service

Some professionals said they would seek guidance from local support services, such as a local counsellor, parent advice centre, the local Child and Adolescent Mental Health Service (CAMHS) team and mental health support services for young people in Ireland including Headstrong.

- Supports within school

A number of SPHE teachers said they would refer the matter to the school guidance counsellor and/or school principal. Another teacher wrote “we have a strong pastoral care system in place for referral of such students” (SPHE teacher ID Number 70).

- Supervision

Social workers and guidance counsellors referred to seeking guidance from their professional supervision support group.

AWARENESS OF YOUTH MENTAL HEALTH ORGANISATIONS

Youth, education and health professionals were asked if they were aware of local or national youth mental health organisations that support young people’s mental health. The majority of respondents (84.6 percent) reported being aware of youth mental health organisations. Just under 95 percent of youth workers reported they were aware of youth mental health organisations. School guidance counsellors were significantly more likely than SPHE teachers to state that they were aware of mental health organisations \( \chi^2(1, n=180) = 14.68, p<0.001 \]. Similarly, health promotion officers and social workers were significantly more likely than GPs to state they were aware of mental health organisations \( \chi^2(2, n=231) = 21.9, p<0.001 \]. Just under half of all GPs (41.7 percent) stated they were not aware of mental health organisations. In total 121 organisations were listed by respondents. The organisations that respondents were most familiar with are listed in Table 9.

These ranged from organisations that are designed to:

(i) assist with youth and adult mental health problems – Letsomeoneknow.ie, Walk in my shoes, Turm2me, GROW, Proyouth
(ii) promote positive youth mental health and wellbeing – Jigsaw, Health Promotion HSE, ReachOut.com, Healthy Minds UK, Squashy Couch Waterford, Kinsale youth support service,

(iii) treat mental health disorders – HSE mental health services, CAMHS, St Patrick’s Hospital, St. John of God’s, Deans Clinic, Detect

(iv) treat eating disorders - Bodywhys

(v) specific interventions implemented in secondary schools - Mindmatters

(vi) family support services – Child and Family Centres, Barnardos

(vii) drug intervention services – Local Drugs Task Force

(viii) suicide prevention services/campaigns – National Office for Suicide Prevention, 1life suicide helpline, STOP suicide, 3ts, b4udecide, Pieta house, Suicide aware, So Sad, SLANU, ASIST

(ix) youth work services – Youthreach, Youth Work Ireland, Youth Council of Ireland, Foroige

(x) counselling services – Teenline, Teen Counselling, Crosscare, Childline

(xi) services to support gay, lesbian, bisexual transgender – GLEN, SHOUT, LGBT.

Headstrong (national centre for youth mental health, Ireland), Aware (provide support for those affected by depression) and Spunout (youth led national charity providing online health information) were the most frequently cited organisations across the professions.

**Table 9:** Reported levels of awareness of mental health organisations by health and education professionals

<table>
<thead>
<tr>
<th>Organisation</th>
<th>No times cited</th>
<th>No times cited</th>
</tr>
</thead>
<tbody>
<tr>
<td>Headstrong</td>
<td>146</td>
<td>Crosscare</td>
</tr>
<tr>
<td>Aware</td>
<td>125</td>
<td>Family support services</td>
</tr>
<tr>
<td>Spunout</td>
<td>124</td>
<td>Console</td>
</tr>
<tr>
<td>Jigsaw</td>
<td>93</td>
<td>Teenline</td>
</tr>
<tr>
<td>CAMHS</td>
<td>71</td>
<td>Barnardos</td>
</tr>
<tr>
<td>Bodywhys</td>
<td>71</td>
<td>Alateen</td>
</tr>
<tr>
<td>ReachOut</td>
<td>68</td>
<td>Beating the blues</td>
</tr>
<tr>
<td>Samaritans</td>
<td>63</td>
<td>Shine</td>
</tr>
<tr>
<td>HSE services</td>
<td>53</td>
<td>Rainbows</td>
</tr>
<tr>
<td>Pieta House</td>
<td>35</td>
<td>Headsup</td>
</tr>
<tr>
<td>Mental Health Ireland</td>
<td>31</td>
<td>MindOut</td>
</tr>
<tr>
<td>Youth Work Ireland</td>
<td>24</td>
<td>ISPCC</td>
</tr>
<tr>
<td>Belong2</td>
<td>21</td>
<td>1life</td>
</tr>
<tr>
<td>Teen Counselling</td>
<td>18</td>
<td>MyMind MAtters</td>
</tr>
<tr>
<td>Foroige</td>
<td>16</td>
<td>Crosscare</td>
</tr>
<tr>
<td>Grow</td>
<td>15</td>
<td>Letsomeoneknow</td>
</tr>
<tr>
<td>Childline</td>
<td>12</td>
<td></td>
</tr>
</tbody>
</table>

**AWARENESS OF MENTAL HEALTH WEBSITES**

All professionals were asked to indicate if they had heard of or visited a range of mental health related websites that are designed to provide support for young people and adults. The percentage of respondents that had heard of (but not visited) and had visited these sites is shown in Table 10. Regarding websites that respondents had heard of, Samaritans, Aware.ie (support for those affected by depression) and Mymindmatters.ie (mental health portal for third level students) were the most frequently cited. The most visited websites included: Aware.ie,
Bodywhys and Headstrong.ie. Spunout.ie was the most visited website among youth workers (83 percent). Bodywhys was the most visited website among education professionals (69.4 percent). Aware.ie was the most visited website among health professionals (57 percent visited) and Headstrong.ie was the most visit website among mental health professionals (57.3 percent).

Table 10: Percentage of respondents that (i) heard of and (ii) visited online mental health websites

<table>
<thead>
<tr>
<th>Website</th>
<th>Have heard of but not visited (%)</th>
<th>Have visited (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inspireireland.ie</td>
<td>23.8%</td>
<td>7.5%</td>
</tr>
<tr>
<td>ReachOut.com</td>
<td>32.7%</td>
<td>33.7%</td>
</tr>
<tr>
<td>Letsomeoneknow.ie</td>
<td>27.3%</td>
<td>18%</td>
</tr>
<tr>
<td>Spunout.ie</td>
<td>23.8%</td>
<td>47.7%</td>
</tr>
<tr>
<td>Yourmentalhealth.ie</td>
<td>33.3%</td>
<td>27.9%</td>
</tr>
<tr>
<td>Turn2me.org</td>
<td>19.1%</td>
<td>8.3%</td>
</tr>
<tr>
<td>Headsup.ie</td>
<td>26.6%</td>
<td>15.3%</td>
</tr>
<tr>
<td>Samaratins.org</td>
<td>60.7%</td>
<td>37.5%</td>
</tr>
<tr>
<td>Aware.ie</td>
<td>43.5%</td>
<td>54.1%</td>
</tr>
<tr>
<td>Bodywhys.ie</td>
<td>34.4%</td>
<td>53%</td>
</tr>
<tr>
<td>Mymindmatters.ie</td>
<td>38.4%</td>
<td>18.9%</td>
</tr>
<tr>
<td>Headstrong.ie</td>
<td>35.6%</td>
<td>52.1%</td>
</tr>
<tr>
<td>Beatingtheblues.co.uk</td>
<td>17.7%</td>
<td>10.5%</td>
</tr>
<tr>
<td>Moodgym.anu.edu.au</td>
<td>12.5%</td>
<td>10.2%</td>
</tr>
<tr>
<td>Mindyourmind.ca</td>
<td>35.5%</td>
<td>8.7%</td>
</tr>
</tbody>
</table>

Respondents were asked to list other mental health websites that they were familiar with or had used. The majority of additional websites listed (53.7 percent) were reported by psychologists and psychiatrists, were of Irish or United Kingdom origin, and provided information or resources in relation to mental health. Examples included:

• Grow.ie
• Youngminds.co.uk
• Getselhelf.co.uk
• Mentalhealthireland.ie
• Pleasetalk.ie
• Shineonline.ie
• Livinglifetothefull.com
• Orygen, Australia
• Lift-depression.com
• Getsomeheadspace.com
• Teenhelp.org
• Mindmatters Australia
• Headspace, Australia

Respondents also listed websites designed to assist with:

• eating disorders: b-eat.com
• OCD: worrywisekids.org
• bullying: watchyourspace.ie, bully4u.ie
• safer internet use: webwise.ie
Several psychiatrists listed mental health websites that provided information for their profession (Medscape, NICE.org, NIMH.org, RCPsych.ac.uk, eppic.org).

RECEIVING YOUTH MENTAL HEALTH INFORMATION

Respondents were asked how they would prefer to get information on youth mental health (Figure 3). The most preferred methods across all three professional groupings were (i) training workshop and (ii) receiving information through my own organisation. SPHE teachers, school guidance counsellors, youth workers, health promotion officers and resource officers for suicide prevention were most likely to choose a training workshop. GPs and youth workers were most likely to prefer receiving information through their own organisation. Receiving information through a website/electronic database was the second most requested method among education professionals and the third most requested method among youth workers. Similarly, receiving information through email/online newsletter was the third most requested method among health professionals. Mental health professionals were more likely to prefer receiving information through conference and academic journals than through an online format.

Figure 3: Respondents’ preference for how they would like to receive youth mental health information
DEVELOPMENT OF ONLINE RESOURCES FOR PROFESSIONALS WORKING WITH YOUNG PEOPLE

Regarding the development of an online resource to help professionals support young people’s mental health, Table 11 presents the percentage of respondents that reported being interested/very interested in the development of suggested resources. There was considerable similarity in the responses across youth workers, education and health professionals. The resources that were most requested across these three groups included:

(i) Guidelines about how to promote positive mental health and wellbeing in young people
(ii) Directory of relevant local services available to support young people
(iii) Guidelines about what to do if a young person is experiencing a mental health problem
(iv) Reliable information provided on mental health issues concerning young people
(v) Guidelines about how to identify mental health problems in young people.

The most requested resource among youth workers was “guidelines about what to do if a young person is experiencing a mental health problem”. SPHE teachers requested “guidelines about how to promote positive mental health and wellbeing in young people” with the most frequency. The most requested resource among school guidance counsellors and GPs was a “directory of relevant local services available to support young people”. Social workers and health promotion officers requested “reliable information provided on mental health issues concerning young people” with the most frequency. Regarding the provision of a directory on relevant local services, several respondents commented on their specific needs in relation to this:

- “List of support services for young people in each region of the country specifically explaining in ‘young people’ friendly language, the roles of different professionals” (Youth worker, 22)
- “I think information on services available that include access criteria and a professional’s name would be key to allowing my profession to link in with services” (Social worker, 88).

Mental health professionals’ needs differed slightly to youth workers, education and health professionals. The most requested resources among this group of professionals included:

(i) Guidelines that your profession could use with young people and parents in relation to promoting positive mental health
(ii) Directory of relevant local services available to support young people
(iii) Reliable information provided on mental health issues concerning young people
(iv) Self-help material, including online evidence-based interventions that can be used by young people to support their own mental health and wellbeing
(v) Online wellbeing course that your profession can use with young people.

Similar to health promotion officers and social workers, resource officer for suicide prevention were most likely to request “reliable information on mental health issues concerning young people”. Psychologists were most likely to request “guidelines that your profession could use with young people and parent in relation to promoting positive mental health” and psychiatrists were most likely to request a “directory of relevant local services available to support young people”. A discussion forum for professionals to discuss youth wellbeing, tips, concerns was the least popular resource across all professions.
Table 11: Development of online resources for professionals: percentage of respondents that were interested/very interested in the suggested resources being developed

<table>
<thead>
<tr>
<th>Resource Description</th>
<th>Youth workers</th>
<th>Education</th>
<th>Health</th>
<th>Mental Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reliable information provided on mental health issues concerning young people</td>
<td>94.2%</td>
<td>97.1%</td>
<td>94%</td>
<td>93%</td>
</tr>
<tr>
<td>Guidelines about how to promote positive mental health and wellbeing in young people</td>
<td>95%</td>
<td>97.7%</td>
<td>91.7%</td>
<td>93.4%</td>
</tr>
<tr>
<td>Guidelines about how to identify mental health problems in young people</td>
<td>93.6%</td>
<td>94.3%</td>
<td>89.3%</td>
<td>-</td>
</tr>
<tr>
<td>Guidelines about what to do if a young person is experiencing a mental health problem</td>
<td>96.4%</td>
<td>96.5%</td>
<td>94%</td>
<td>-</td>
</tr>
<tr>
<td>Directory of relevant local services available to support young people</td>
<td>95.7%</td>
<td>95.9%</td>
<td>96.8%</td>
<td>93.4%</td>
</tr>
<tr>
<td>‘Ask the expert’ – your profession can email in problem situation / concern and will receive guidance from a mental health professional</td>
<td>89.3%</td>
<td>75.7%</td>
<td>78.7%</td>
<td>-</td>
</tr>
<tr>
<td>Discussion forum, professionals can discuss youth wellbeing tips, concerns with other professions</td>
<td>63%</td>
<td>57.6%</td>
<td>59.9%</td>
<td>56.6%</td>
</tr>
<tr>
<td>Online WELLBEING course that your profession can use with young people</td>
<td>85.7%</td>
<td>87.3%</td>
<td>77.3%</td>
<td>84%</td>
</tr>
<tr>
<td>Online PREVENTION course that your profession can use with young people</td>
<td>86.3%</td>
<td>85.6%</td>
<td>79.3%</td>
<td>79.2%</td>
</tr>
<tr>
<td>Online TREATMENT course that your profession can use with young people</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>78.0%</td>
</tr>
<tr>
<td>Self-help material, including online evidence-based interventions that can be used by young people to support their own mental health</td>
<td>87.7%</td>
<td>91.3%</td>
<td>88.9%</td>
<td>91.8%</td>
</tr>
<tr>
<td>List of relevant books that support young people’s mental health</td>
<td>65.9%</td>
<td>76.7%</td>
<td>80.1%</td>
<td>83.5%</td>
</tr>
<tr>
<td>Case studies - examples of real life situations concerning youth mental health problems followed by questions and answers about how to deal with the situation</td>
<td>79.6%</td>
<td>85.5%</td>
<td>71.3%</td>
<td>77.5%</td>
</tr>
<tr>
<td>Reliable information on how you can support their OWN mental health and wellbeing</td>
<td>86.4%</td>
<td>86.1%</td>
<td>80.2%</td>
<td>77.8%</td>
</tr>
</tbody>
</table>

Respondents were also asked if they had any additional suggestions in relation to the development of other online resources to assist their profession in supporting young people’s mental health and wellbeing. Thematic analysis was used to analyse these data and nine main themes emerged:

**INFORMATION REGARDING OTHER ONLINE RESOURCES**

Health and mental health professionals requested information to be provided on other useful websites/online resources and evidence-based interventions that they could use in their work with young people. Comments included:

- “I’d love to have a list of ‘good’ blogs that would be relevant to young people on this issue” (Psychologist, 56)
- “Pooling of evidence base and review data on mental health interventions” (Psychologist, 19)
- “I think it would be useful to have more information and resource sharing between services and for services to be better linked up” (Social worker, 88).
INFORMATION FOR PARENTS
All professions requested the provision of information for parents in relation to supporting their children's mental health, dealing with mental health problems, and supporting young people, and so on. Youth workers and education professionals also requested information on how to communicate with parents. Comments included:

- “In relation to social workers, somewhere where they can direct parents for practical and valuable information” (Social worker, 47)
- “Guidelines on how to support or include parents in plan / intervention” (Youth worker, 68)
- “I find parents are often told of a child’s diagnosis without being given accurate information they can understand. Information to give to parents on their child’s mental health would be useful” (Psychologist, 79)
- “Ways of explaining to parents how their children’s mental health is a reflection of the care they are given, emotional and other needs being met adequately” (Guidance counsellor, 55).

ONLINE TOOLS FOR YOUNG PEOPLE
Responding to one of the suggestions provided in the questionnaire, several respondents referred to the need for a variety of online resources and mental health information for young people themselves to access. Comments included:

- “More online tools for young person themselves is a good resource. Many do not want to engage properly with the mental health services” (Social worker, 17)
- “Clear relevant information for Irish students” (Social worker, 85)
- “The idea of online courses for young people is excellent – it’s a key way of reaching them. I’ve come across online CBT courses in conjunction with the NHS but none for younger people. I think access to psychological support is essential and given that it is so ridiculously difficult to access via the HSE, I think we are going to have to start building it up within primary care and especially through online resources” (GP, 16)
- “Youth friendly articles promoting healthy living in general... a simple learning module for young people about what mental health is and the ways to protect it” (Psychologist, 33).

GROUP WORK MATERIAL
A significant number of youth workers and education professionals requested the provision of mental health and wellbeing material for working with young people. The provision of video clips and lesson plans were requested with the most frequency. Comments included:

- “Classroom resources to use with senior students. Many resources available for 13-16 year olds. More difficult to source resources for use with young adults 16+” (SPHE teacher, 39)
- “Provide proper lesson plans and activities that could be used in class to explore mental health issues” (SPHE teacher, 75)
- “Video material of interviews with real life young people experiencing mental health issues” (SPHE teacher 6)
- “DVDs with topics such as bullying, anorexia, bulimia, stress, depression acted out. Films are good, thought provoking and relaxing” (SPHE teacher, 34)
• “Downloadable printable worksheets to assist promoting mental health during direct work with young people. How to run groups with young people to promote mental health and wellbeing” (Social worker, 43)
• “It would be great to have an easy to use resource pack with session plans and youth friendly activities which would be used or take pieces from for a youth mental health / health and wellbeing programme” (Youth worker, 92)
• “Evidence based programmes that teachers can be trained in” (Psychologist, 21).

FACE-TO-FACE SERVICES
Several education and health professionals raised concerns about online resources replacing face-to-face services. Some respondents suggested the need for face-to-face in combination with online services. Others recommended the use of face-to-face training to share the wealth of mental health knowledge within professions:

• “Can online information/interaction replace face-to-face interactions!!” (Guidance counsellor, 9)
• “Online is great but when faced with a young person who has serious mental health issues, it is the one-to-one engagement that is so important at that time. The online assistance could come after engagement” (SPHE teacher, 47)
• “I think there is a continuum of knowledge in social work about mental health. I think face-to-face interactions and more opportunities for social workers from various disciplines to mix and train are the most advantageous” (Social worker, 55).

YOUTH MENTAL HEALTH TOPICS
As part of the questionnaire, respondents were asked how relevant a number of topics were to youth mental health. The results from this question (Table 12) indicates that youth, education, health and mental health respondents regarded all of the topics as being relevant to young people’s mental health. The topics that were regarded as most relevant to youth mental health across the professions included (i) developing coping skills (ii) positive mental health (v) promoting positive peer relationships (vi) bullying and (v) developing communication skills. Youth workers and health professionals regarded promoting positive family relationships as highly relevant. Additional topics that respondents suggested as relevant to youth mental health centered around seven main themes:

SELF ESTEEM
The theme of promoting young people’s self-esteem and self efficacy was reported with the most frequency. Respondents recommended the need to develop young people’s confidence and belief in themselves and their strengths. Comments included:

• “Acceptance of one’s self. Self-esteem” (SPHE teacher, 67)
• “Practical support to allow young people recognise their strengths and talents in order to make realistic plans and goals maximising their potential but not stressing themselves out” (Social worker, 113)
• “Promoting positive self worth” (GP, 49).
COPING SKILLS
In addition to the theme of coping skills being regarded as the most relevant of all the topics listed, several respondents wrote about the importance of developing coping skills and resilience in young people. Comments included:

- “Goal setting, prioritization of tasks to reduce stress or pressure, talking out problems, seeking help or support from others” (Youth worker, 68)
- “Dealing with difference, disability, peer pressure” (Social worker, 88)
- “Exam stress, coping with family breakups, facing the future” (Guidance counsellor, 83)
- “Stress management” (Psychologist, 115; Health promotion officer, 8).

ANGER MANAGEMENT
Anger management and conflict resolution skills were considered by a number of professionals as relevant to young people’s mental health. Comments included:

- “Understanding their anger” (Guidance counsellor, 8)
- “Managing anger, identifying and expressing their emotions” (Social worker, 37)
- “Conflict resolution” (Health promotion officer, 6).

SELF HARM
Several respondents wrote about their concerns around the rise in self harm among young people:

- “The rise in self harm is very concerning especially among teen girls” (SPHE teacher, 43)
- “Self harm at epidemic levels with young people” (Social worker, 27)
- “Self harm reduction” (Psychiatrist, 6).

BODY IMAGE, PHYSICAL HEALTH AND EXERCISE
Issues in relation to body image and young people worrying about their appearance were noted by a number of respondents. Related to this, some respondents highlighted topics such as healthy eating, obesity and exercise. Comments included:

- “Body image and self esteem” (Psychologist, 95)
- “Worrying about their appearance” (SPHE teacher, 32)
- “Healthy eating and exercise” (SPHE teacher, 22)
- “Weight issues” (Youth worker 78).

FINANCE, POVERTY, UNEMPLOYMENT
Several health and education professionals remarked on the issue of finance and dealing with financial difficulties and unemployment. Comments included:

- “Finances, poverty, employment, education” (Social worker, 84)
- “Budgeting skills, employment, recognising one’s own potential and goal setting” (Social worker, 52)
- “Young people in working class areas suffer greater mental health issues with wider social ramifications than those in more affluent areas. Also less likely to look for help” (Youth worker, 113)
- “Planning for the future i.e. college/employment” (Youth worker, 82).
SEXUALITY

Health and education professionals highlighted the need to provide young people with support in relation to sexuality and sexual health:

- “Sexual health promotion” (Resource officer for suicide prevention, 6)
- “Pregnancy prevention” (Guidance counsellor, 25)
- “Gender identify issues” (Psychiatrist, 10)
- “LGBT, Gay awareness” (SPHE, 73).

Other topics that respondent referred to included:

- Sexual violence, abuse
- Positive communication
- Disability – peer support and dealing with own disability
- Sense of belonging
- Dealing with loss

Table 12: Topics relevant to youth mental health: percentage of respondents that reported the topics were relevant/very relevant

<table>
<thead>
<tr>
<th></th>
<th>Youth workers</th>
<th>Education</th>
<th>Health</th>
<th>Mental health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive mental health</td>
<td>99.3%</td>
<td>98.9%</td>
<td>98.7%</td>
<td>94.3%</td>
</tr>
<tr>
<td>Developing coping skills</td>
<td>99.3%</td>
<td>98.9%</td>
<td>98.3%</td>
<td>97.1%</td>
</tr>
<tr>
<td>Depression prevention</td>
<td>91.9%</td>
<td>92.8%</td>
<td>93.2%</td>
<td>91.4%</td>
</tr>
<tr>
<td>Anxiety prevention</td>
<td>92.6%</td>
<td>95.6%</td>
<td>94.8%</td>
<td>92.6%</td>
</tr>
<tr>
<td>Developing communication skills</td>
<td>97.3%</td>
<td>96.7%</td>
<td>96.6%</td>
<td>93.8%</td>
</tr>
<tr>
<td>Suicide prevention</td>
<td>96.6%</td>
<td>94.4%</td>
<td>97%</td>
<td>91.0%</td>
</tr>
<tr>
<td>Dealing with loss</td>
<td>91.9%</td>
<td>92.8%</td>
<td>96.6%</td>
<td>90.2%</td>
</tr>
<tr>
<td>Addressing School Problems</td>
<td>95.9%</td>
<td>93.9%</td>
<td>95.3%</td>
<td>89.4%</td>
</tr>
<tr>
<td>Promoting positive family relationships</td>
<td>97.3%</td>
<td>92.2%</td>
<td>97.4%</td>
<td>92.7%</td>
</tr>
<tr>
<td>Promoting positive peer relationships</td>
<td>98.6%</td>
<td>95%</td>
<td>97.4%</td>
<td>93.5%</td>
</tr>
<tr>
<td>Bullying</td>
<td>96.6%</td>
<td>96.7%</td>
<td>97%</td>
<td>93.5%</td>
</tr>
<tr>
<td>Cyberbullying</td>
<td>94.6%</td>
<td>95.6%</td>
<td>93.6%</td>
<td>92.2%</td>
</tr>
<tr>
<td>Sexuality</td>
<td>95.2%</td>
<td>93.9%</td>
<td>95.7%</td>
<td>89.8%</td>
</tr>
<tr>
<td>Drug awareness</td>
<td>94.6%</td>
<td>97.7%</td>
<td>94.4%</td>
<td>85.7%</td>
</tr>
<tr>
<td>Alcohol awareness</td>
<td>94.6%</td>
<td>97.2%</td>
<td>94.8%</td>
<td>85.7%</td>
</tr>
<tr>
<td>Smoking awareness</td>
<td>77.7%</td>
<td>92.2%</td>
<td>79.6%</td>
<td>76.3%</td>
</tr>
<tr>
<td>Eating disorders</td>
<td>91.9%</td>
<td>93.9%</td>
<td>92.6%</td>
<td>88%</td>
</tr>
</tbody>
</table>

USE OF ONLINE RESOURCE

Respondents were asked if an online resource was made available to their profession, would they consider using it. The overwhelming majority of respondents (98 percent) reported that they would (Table 13). Several comments were made in relation to the benefit of developing an online mental health resource which professionals could access:

- “It’s more important than ever” (Youth worker, 34)
• “Online material would be great, can go through things at night and prepare work / classes for next day. Also tends to be current, relevant and adaptable” (Guidance counsellor, 40)
• “Probably would use every day” (Guidance counsellor, 29)
• “Especially useful to SPHE teachers who have to deal with these topics” (SPHE teacher, 40)
• “Most definitely, I have had no training in how to deal with mental health problems and such issues are steadily growing in numbers and type” (SPHE teacher, 50).

Table 13: Number and percentage of respondents that reported they would use an online resource if it was made available to their profession

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth workers</td>
<td>139</td>
<td>99.3</td>
</tr>
<tr>
<td>Education</td>
<td>171</td>
<td>98.3</td>
</tr>
<tr>
<td>Health</td>
<td>215</td>
<td>99.1</td>
</tr>
<tr>
<td>Mental health</td>
<td>239</td>
<td>98.4</td>
</tr>
</tbody>
</table>

Some respondents reported that they would use the online resource but raised concerns regarding the role of online resources in their profession. Others noted their concern around the resource being used to replace face-to-face interaction with young people:

• “My time is very limited, I’m a GP not a psychiatrist or psychologist, biggest issue is quality and quantity of data on resource – relevance to my role respecting the limitations of my daily workload” (GP, 50)
• “As a SPHE teacher I would be very concerned that teachers must follow school protocol and do not consider themselves experts in the field” (SPHE teacher, 31)
• “Only in conjunction with talking face-to-face with vulnerable students” (Guidance counsellor, 81)
• “As a source of information, not a replacement for human interactions” (Guidance counsellor, 9).

In addition to highlighting the importance of the resource and some concerns, respondents commented on aspects of the resource that they would be particularly interested in:

FOCUS ON MENTAL HEALTH PROMOTION AND PREVENTION

Youth workers, education and mental health professionals wrote about their interest in the use of an online resource that was designed to develop professionals’ competencies in relation to mental health promotion and prevention

• “It would be brilliant, I feel strongly about promoting mental health in young people” (Guidance counsellor, 23).
• “Particularly interested in ideas for promoting positive mental health and identifying mental health problems in young people” (Youth worker, 114)
• “I think an online resource could be very useful but that its scope should be limited to general, evidence-based guidelines on promoting mental health and factual information on mental health problems” (Psychologist, 45)
• “I think promoting the idea of positive mental health is vital” (Psychologist, 16)
• “Positive strength based information” (Psychologist, 179).
ONLINE COURSES FOR YOUNG PEOPLE TO USE
Several respondents highlighted their interest in the development of an online resource that provided a mental health and wellbeing course for young people to engage with:

- “I would be particularly interested in an online course – wellbeing and prevention” (Youth worker 123)
- “It would be fantastic to have an online course for prevention and wellbeing. This is the medium that young people are using more and more. And to provide the correct information would be vital to turning the tide of youth depression/suicide and cyber bullying” (Social worker, 5).

In addition to identifying aspects of the resource respondents would be particularly interested in, factors that would facilitate or encourage their use of the resource were also highlighted:

PROVISION OF RELIABLE INFORMATION
The need for reliable, evidence-based, culturally relevant information and resources was emphasised repeatedly. Several respondents stated they would like to know where the information for the online resource was sourced:

- “Information sites that have reliable evidence-based information to refer parents, young people and teachers to would be most helpful” (Psychologist, 21)
- “I’d like a website or online resource that I can trust and has reliable information about a range of topics and which are relevant to an Irish population. Often I find great online resources which have been evidence based in the UK or Australia. An Irish focus would be very helpful” (Psychologist, 172)
- “Have a list of contributors to the website and / or references” (Psychologist, 135)
- “Provide details on the website of who is supervising the information” (Guidance counsellor, 1).

UPDATED REGULARLY
The provision of an online resource that was updated regularly was considered an important factor:

- “I would use it if it was updated regularly” (Youth worker, 31)
- “The availability of an adequate mental health / wellbeing programme in schools is lacking up-to-date resources” (SPHE teacher, 86).

USER FRIENDLY
A number of professionals highlighted the need for a user friendly resource that was easy to access and navigate. The provision of lesson plans and interactive activities was considered important to education professionals in particular:

- “Make it as easy as possible to navigate” (Youth worker, 129)
- “Of course I would use it, provided it was simple to follow and not over cluttered jargon and extraneous information” (SPHE teacher, 76)
- “Webpage layout and accessibility important” (GP, 81)
- “Resource needs to be easy to use and has readymade session plans and resources/activities” (Youth worker, 92)
- “Yes, I would use it, if the resource was (i) short and to the point (ii) supported with film clips and (3) additional information could be called upon if needed” (SPHE teacher, 84).
PRIOR TRAINING

Some respondents wrote about the need for face-to-face training prior to engaging with the online resource. One guidance counsellor noted a workshop would assist in putting the suggestions and guidelines provided by the resource into action in the real world. Additional comments included:

- “Would like to be given some guidance in using the resources in a training seminar” (SPHE teacher, 10)
- “I believe all (parents/professionals) need to receive training prior to using this online resource, this may break down barriers” (Youth Worker, 88)
- “Need to support teachers to use the information” (Psychologist, 21)
- “If I had problems accessing information that there would be a helpline/helpdesk available” (Psychologist, 110).

SUPPORT FROM MANAGEMENT

Support from management was considered an important issue in relation to professionals' use of the resource. Respondents emphasised the need for management firstly, to approve or certify the resource and secondly, to provide time to staff to engage with the resource:

- “Support of management” (Social Worker, 120)
- “A recommendation from my professional association” (Social Worker, 108)
- “The importance of allowing time for resource / information collection being promoted within organisations” (Youth Worker, 107)
- “Setting aside time each week to access and explore new material. This can be a challenge in an emergency driven service such as CAMHS” (Psychologist, 171)
- “Ideally in conjunction with [Irish College of General Practitioners] ICGP mental health programme” (GP, 6).

ACCESS TO THE ONLINE RESOURCE

In relation to who should have access to the resource, respondents were asked if it should be restricted for use among their profession only or could be used also by other professions, parents and young people. The number and percentage of respondents that agreed/disagreed with the statements are shown in Table 14. The majority of professionals thought that the resource should not be restricted for use among their profession only and that it should be made available for other professions working with young people. In addition, the majority of respondents agreed that the resource should provide information and guidance for parents (>86 percent) and young people (>83 percent). Respondents, however, commented on the need for the information and resources to be tailored to professionals, parents and young people’s needs and for these resources to be provided within different sections of the one site:

- “The danger is trying to provide a resource for such diverse needs across the groups is that you end up satisfying none of them. Perhaps you could have some clearly indicated sections for professionals, parents and young people” (Guidance counsellor, 84)
- “I feel that young people need a different forum to social workers” (Social worker, 120)
- “Maybe limit the type of information, with information geared specifically geared toward certain groups that is suitable for each group” (Psychologist, 135).
Table 14: Respondents’ views on who should have access to the online resource

<table>
<thead>
<tr>
<th>The online resource should...</th>
<th>Strongly disagree / Disagree</th>
<th>Neither agree not disagree</th>
<th>Agree / Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td><strong>Be restricted for use among MY PROFESSION only</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth workers</td>
<td>100</td>
<td>73.5%</td>
<td>24</td>
</tr>
<tr>
<td>Education</td>
<td>98</td>
<td>60.5%</td>
<td>33</td>
</tr>
<tr>
<td>Health</td>
<td>147</td>
<td>69.3%</td>
<td>35</td>
</tr>
<tr>
<td>Mental Health</td>
<td>166</td>
<td>67.8%</td>
<td>54</td>
</tr>
<tr>
<td><strong>Be available for use among ALL PROFESSIONS working with young people</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth workers</td>
<td>2</td>
<td>1.4%</td>
<td>9</td>
</tr>
<tr>
<td>Education</td>
<td>4</td>
<td>2.3%</td>
<td>15</td>
</tr>
<tr>
<td>Health</td>
<td>12</td>
<td>5.6%</td>
<td>25</td>
</tr>
<tr>
<td>Mental Health</td>
<td>18</td>
<td>7.3%</td>
<td>28</td>
</tr>
<tr>
<td><strong>Provide mental health information and guidance for PARENTS resources for adults working with young people</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth workers</td>
<td>2</td>
<td>1.4%</td>
<td>12</td>
</tr>
<tr>
<td>Education</td>
<td>4</td>
<td>2.3%</td>
<td>5</td>
</tr>
<tr>
<td>Health</td>
<td>12</td>
<td>5.6%</td>
<td>18</td>
</tr>
<tr>
<td>Mental Health</td>
<td>13</td>
<td>5.3%</td>
<td>16</td>
</tr>
<tr>
<td><strong>Provide mental health information and guidance for YOUNG PEOPLE (age 12-25) to access</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth workers</td>
<td>4</td>
<td>2.9%</td>
<td>9</td>
</tr>
<tr>
<td>Education</td>
<td>7</td>
<td>4.1%</td>
<td>10</td>
</tr>
<tr>
<td>Health</td>
<td>18</td>
<td>8.3%</td>
<td>17</td>
</tr>
<tr>
<td>Mental Health</td>
<td>13</td>
<td>5.3%</td>
<td>20</td>
</tr>
</tbody>
</table>

In relation to a professional resource, several respondents cautioned against the notion of a ‘one size fits all’ online resource for professionals. In particular mental health professionals commented on their needs and how they differed to the needs of health and education professionals:

- “Some restrictions would be needed around mental health resources that would need to be supervised by a mental health professional. Other self-help and psycho-education resources should be available to all relevant parties” (Psychologist, 27)
- “I think the resource should be available specifically to people qualified to work with young people with mental health problems, so not restricted to my profession but restricted access to professionals working in this area, with additional space for parents and young people” (Psychologist, 65)
- “To have it available for all professions working with young people might mean that it would be too basic for those of us with considerable training in guidance and counselling. I would prefer if it was at a level that would help build my competence. Otherwise it would be of little use” (Guidance counsellor, 67).

Related to this, several respondents raised concerns about professionals, parents and young people using the online resource inappropriately:
• “I have a small concern about professionals that are not qualified in mental health drawing conclusions about a young person’s mental health. I am also concerned about young people self diagnosing” (Social worker, 2).
• “Important families don’t use resources to try to self diagnose” (Social worker, 12)
• “I think that by making information available to all professions there is a danger that people step beyond the limits of their competence” (Psychologist, 184).

Other respondents emphasised the importance of an online resource not replacing face-to-face support:
• “Cannot be seen to replace services that should be available to all young people experiencing difficulties” (GP, 9)
• “Nothing can replace the caring empathetic one-to-one counselling for young people” (GP, 83).

In relation to a parent resource, several professionals commented on the importance of this type of online resource:
• “Working with parents is essential as they are the primary educators – in fact the work should be done with them more than with educators in schools etc” (Guidance counsellor, 55)
• “Parents / young people almost always report ‘googling’ their difficulties and find all sorts of unreliable info. It would be great for them to have access to good info. I would prioritise that over information accessible for professionals” (Psychologist, 179)
• “This resource might be of more value to carers and family members” (Social worker, 12)
• Parenting skills need to be enabled” (GP, 5).

Regarding a resource for young people, respondents referred to the differing needs of young people aged 12 to 25 and the implications of this for a resource designed to meet their needs:
• “Needs re 12-25 age span is wide, may be hard to achieve a one size to fit all” (Health promotion officer, 10)
• “There is a considerable difference between information for 13 year old and the 22 year old so any website would have to have tiered access and be age dependent regarding usage to be of real value to the consumer” (Psychologist, 136).

Other professionals wrote about the benefits of using online resources to provide information and support to young people:
• “All information is moving towards electronic means and a very useful way to allow updates and to use the forum that young people are most comfortable with” (Psychiatrist, 13)
• “Young adults will try and seek help themselves first so making a resource available online as a self help guide would be useful” (Social worker, 49).

**BARRIERS TO USING THE ONLINE RESOURCES**

Thematic analysis was used to analyse the professionals’ responses to the question “What if anything, would prevent you from using an online resource that is designed to help professionals support young people’s mental health and wellbeing?”. Eleven main themes emerged:
INFORMATION PROVIDED ON ONLINE RESOURCE

Youth workers and education professionals cited the issue of providing too much information for professionals to read through and a lack of concrete resources as a significant barrier. Mental health professionals on the other hand cited the provision of generic information that lacked clarity and did not take cultural context into account as a barrier. Education and health professionals’ comments included:

- “If the resource contains too much literature and lacks clear instruction and advice, this would prohibit use among busy professionals. The resource must also be relevant and realistic” (Youth worker, 18)
- “Too much information about studies etc. And not enough practical strategies and ways to implement and actively promote positive health and wellbeing” (SPHE teacher, 55)
- “Too much information. Masses of theory to wade through. Dull, tedious, explanations and long, aspirational statements. We need clear, concise, human-case focused materials. We have plenty of awareness of the basis about mental health (most of us are parents or are not much older than young people being taught). We just need clear, precise, concise information” (SPHE teacher, 76).

Mental health professional comments included:

- “Information being too generic and repetition of what can be found from other sources, or what the professional already knows” (Psychologist, 178)
- “A website that didn’t take cultural issues in to account. For example a model based on American teens which was not adapted for use in Ireland” (Psychologist, 125).

RELIABILITY

All professions highlighted the need for reliable evidenced based information and guidelines:

- “Quality control. I would need to know that all content is evidence-based” (Psychologist, 100)
- “If the source is trustworthy and supported by my Institute then I am very happy to use this resource” (Guidance counsellor, 38)
- “If it wasn’t certified by a professional body. I would be afraid that the advice might be incorrect” (SPHE teacher, 51).

DIFFICULT TO NAVIGATE

The layout of the online resource and its user friendliness was noted as an important issue. Respondents commented that they would not use the resource if:

- “Site was scattered, disorganised and difficult to use” (Health promotion officer, 5)
- “Site was not user friendly and practical” (Youth worker, 128)
- “[Site] had complicated login” (Psychologist, 168)
- “[Site] had unwieldy, prolonged registration process, long/difficult to remember domain name, excessive text in introductory page” (GP, 60).

NOT RELEVANT

The importance of the resource addressing current issues, providing practical resources for working with young people and not merely replicating the information provided by other sites was highlighted by several respondents:

- “Would need to be something which is different or has added value than existing websites. There is absolutely no point in producing more of the same” (Youth worker, 118)
• “I really think it would be great to have session plans and ideas freely available, the things youth workers use and do on a daily basis” (Youth worker, 14)
• “The resources need to address the realities of modern life, solid guidelines and strategies need to be included that deal with actualities” (SPHE teacher, 90).

TIME
Lack of time to review the content and materials provided by the online resource was referred across all professions. Some comments included:
• “Time, as work is very busy but I would have to make the time if the resource was good and user friendly” (Youth worker, 1)
• “No time during work hours to log in, no time to use the material directly with young people. Don’t understand why more group work with young people is not done” (Social worker, 43)
• “Time, my guidance hours are cut, I’m in the classroom most of the time” (Guidance counsellor, 67).

RESPONSIBILITY
Education respondents highlighted their concerns regarding their profession taking responsibility for young people’s mental health and not feeling qualified or equipped to deal with issues as they arose:
• “The thing that would prevent me is the knowledge that I am not trained professionally to deal with mental health issues in young people. Prevention, discussion, group work is fine in the context of SPHE but I am not equipped to deal with students who have developed mental health issues. Some young teaching professionals might feel that they are equipped to deal with such issues and may make the situation worse” (SPHE teacher, 31)
• “Fear of taking responsibility for young person’s wellbeing” (SPHE teacher, 52).

LACK IT SKILLS
Some respondents stated that their insufficient IT skills would pose as a barrier to using an online resource:
• “Lack of computer skills” (Social worker, 103)
• “Not confident about my computer skills” (Psychiatrist, 28).

PERSONAL INFORMATION
Concern over confidentiality and professionals’ personal information being identified through the use of the online resource were raised by some respondents:
• “In relation to asking a question online, who would see it? As even without using names, someone could recognise it as their situation” (Social worker, 137)
• “Privacy, security and ethical considerations” (GP, 100).

LACK FACE-TO-FACE
Respondents again referred to the need for face-to-face contact with young people and their families. There was a concern among respondents that the resource might be used to replace face-to-face contact:
• “Belief in the primacy of the human relationship as the best way to keep young people in connection with their peers and adults around them” (Social worker, 112)
• “There is nothing like face-to-face contact” (Youth worker, 60).
LACK OF AWARENESS

Lack of awareness about the availability of this online resource was also cited as a potential barrier to its use:

- “Lack of knowledge about it being available” (Psychologist, 164)
- “Not thinking of it in the instance when I need advice” (Psychologist, 106)
- “Lack of knowledge or awareness of its existence” (SPHE teacher, 20).

ROLE OF TECHNOLOGY IN ASSISTING PROFESSIONALS

The final set of questions that respondents were asked were related to the role computers and the internet play in helping professionals, parents and young people in terms of promoting positive youth mental health. The results from these questions are shown in Table 15.

Table 15: Respondents’ views on the role of computers and internet in supporting young people’s mental health and wellbeing: percentage that agreed/strongly agreed

<table>
<thead>
<tr>
<th>Computers and the internet have a role to play in helping...</th>
<th>Youth workers</th>
<th>Education</th>
<th>Health</th>
<th>Mental health</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professionals support and enhance young people’s mental health and wellbeing</td>
<td>89.3%</td>
<td>90.1%</td>
<td>80.8%</td>
<td>89.8%</td>
<td>87.5%</td>
</tr>
<tr>
<td>Parents support and enhance young people’s mental health and wellbeing</td>
<td>81.4%</td>
<td>88.4%</td>
<td>84%</td>
<td>92.7%</td>
<td>86.6%</td>
</tr>
<tr>
<td>Young people support and enhance their own mental health and wellbeing</td>
<td>87.1%</td>
<td>89.6%</td>
<td>89.2%</td>
<td>92.2%</td>
<td>89.5%</td>
</tr>
<tr>
<td>My profession link with parents and other professions working with young people</td>
<td>84.9%</td>
<td>86.6%</td>
<td>78.2%</td>
<td>86.9%</td>
<td>86.2%</td>
</tr>
</tbody>
</table>

The majority of respondents (>84 percent) across the four professional groupings agreed that computers and the internet have a role to play in helping (i) professionals (ii) parents and (iii) young people support and enhance youth mental health and wellbeing. Similarly, the majority of respondents agreed that the internet can play a role in assisting professions to link with parents and other professions working with young people. Health professionals were significantly less likely than other professional groups to agree that computers and the internet have a role to play in helping professionals support and enhance young people’s mental health and wellbeing \[\chi^2(6, n=770) = 14.01, p<0.05\]. Within the education profession, SPHE teachers were significantly less likely than guidance counsellors to agree that computers and the internet have a role to play in helping young people support and enhance their own mental health and wellbeing \[\chi^2(2, n=173) = 5.98, p<0.05\]. Several respondents commented on the benefit of online resources:

- “With the right online programmes, computers and the internet should act as a resource to parents and professionals and young people alike” (Social worker, 118)
- “Everything is online and certainly that’s where you find most young people, so the rest of us have to ‘get with the programme!’” (Psychologist, 160)
- “I feel the internet allows multiple users to access the same information so having something inclusive feels right ethically and also practically. The internet can provide a safe community for people experiencing mental health issues and a website could assist with this” (Psychologist, 33).
Again, some health and mental health professionals emphasised the need for face-to-face support in combination with online resources:

- “I think access to skilled and knowledgeable people should be the front line approach not something abstract and impersonal” (Social worker, 55)
- “I acknowledge that computers and internet are a part of society today and is very positive. However, I feel the personal touch e.g. talk to someone face-to-face, make time, listen to young people, send a card is just as important” (Youth worker, 77)
- “IT is great for information, where young people are otherwise isolated and for educating parents. But drop in face-to-face services is fundamentally what’s most needed for young people in difficulty” (Psychologist, 66)
- “I would have some reservations about access by parents and young people as possible individual vulnerabilities which could be dealt with in a face-to-face situation with a professional are not highlighted and managed appropriately. However, the benefit of the great good probably outweighs this flaw” (Psychologist, 14).
Discussion

This section addresses the main findings from the youth worker, education, health and mental health professionals’ responses to the “Bridging the Digital Disconnect” needs assessment survey and considers their implications. A total of 900 professionals including youth workers, SPHE teachers, guidance counsellors, GPs, social workers, health promotion officers, psychologists, psychiatrists and resource officers for suicide prevention completed the survey. The specific aims of the survey were to:

- examine professionals’ use of online technologies
- explore professionals’ views regarding the development of online mental health resources to assist them in their work with young people
- explore professionals’ needs in relation to using online technologies.

USE OF ONLINE TECHNOLOGIES

The results from the survey indicated that the majority of respondents reported having a work computer and having access to the internet on their computer. The perceived level of confidence in using a computer among respondents was high, with less than two percent of the sample reporting no confidence using a computer. Use of the internet for professional use was high across all professions, in particular youth workers and education professionals. Searching for mental health information was the third most frequently reported use of the internet for professional use among youth workers, education professionals and mental health professionals. Health and mental health professionals were more likely to use the internet for e-learning than other professions. Teachers were more likely to watch videos and download music/films for professional use. Youth workers showed the greatest range of online activities, with on average 30 percent of youth workers using social networking, instant messaging, posting photos and using file sharing for professional use in the previous month. It is likely that the age profile of the different professionals and the type of interaction with young people influenced respondents’ use of the internet for professional use. Within this sample, youth workers had the youngest age profile (66 percent aged 18 to 35) and engaged with young people in an informal manner on a variety of social community-based programmes.

YOUTH MENTAL HEALTH

In relation to youth mental health, the majority of youth workers, education and health professionals agreed that they felt equipped to promote wellbeing in young people’s lives. Youth workers, however, felt significantly more equipped (89.3 percent agreed) than education (80 percent) and health professionals (73.9 percent). GPs and SPHE teachers felt the least confident to promote wellbeing in young people’s lives. In terms of feeling equipped to determine if a young person needs mental health support and help a young person if they have a mental health problem, health professionals were most likely to agree with these statements, however the percentage of health professionals that reported feeling equipped to help a young person was relatively low (65 percent agreed). Within each professional grouping there were also significant differences in professionals’ perceived level of confidence in supporting young people. Guidance counsellors and health promotion officers felt significantly more equipped than SPHE teachers, social workers and GPs to promote wellbeing and determine if a young person needs support. These results highlight the different levels of confidence and skills across the professions and the
potential for sharing of resources and skills within and across professional groupings in order to up-skill professions in the area of youth mental health.

The potential of online resources as a source of support was highlighted by the high percentage of respondents who indicated that they would look for guidance on the internet or on a mental health website. Over 70 percent of youth workers, guidance counsellors, social worker and health promotion officers reported they use one or other of these resources as a source of support if a young person was going through a tough time. Both age (18 to 25) and gender (female) correlated with the potential use of online sources of support. These results were supported by findings in relation to how respondents would like to receive information on youth mental health. The provision of information through an online source (website, database, email or online newsletter) was the third more preferred option after a training workshop and professionals receiving information through their own organisation. Whilst study participants expressed a clear preference for face-to-face education and training workshops, the results point to the potential of delivering training and resources on youth mental health through face-to-face training in combination with online technologies.

The level of awareness of youth mental health organisations was high among respondents. Over 84 percent of youth, education and health professionals reported being aware of organisations. Similar to the results regarding respondents feeling equipped to promote wellbeing in young people, SPHE teachers and GPs were least likely to report being aware of youth mental health organisations. A range of organisations (N=121) were listed by respondents including mental health promotion, prevention and treatment services, physical health services, school and youth work interventions, suicide prevention campaigns, family support services. In terms of the online resources that respondents had visited, over 50 percent of respondents had visited Aware.ie (provide support for those affected by depression), Bodywhys (provide support for people with eating disorders) and Headstrong.ie (national centre for young mental health), however, respondents were not familiar with the majority of other online resources listed. These results indicate that despite respondents’ awareness of mental health organisations, many professionals had a low level of awareness of online mental health resources that they could use in their practice with young people. These findings are comparable to results reported by Blanchard et al. (2011) from the Australia youth health workforce study. Whilst 39.1% of respondents in the Australian study reported actively using the beyondblue website, awareness, visitation and use of other online services such as BluePages, Climate and eCouch were found to be relatively low.

DEVELOPMENT OF ONLINE MENTAL HEALTH RESOURCES

The participants in this study expressed positive views on the use of technologies to improve the mental health and wellbeing of the young people they work with. Resources requested by youth workers, education and health professionals centred around the need for accurate information and guidelines in relation to promoting positive mental health and wellbeing in young people and identifying and dealing with youth mental health problems. This group of professionals also requested reliable information on mental health issues concerning young people and the services and supports that are available locally. Mental health professionals’ needs, as expected, differed slightly. Guidelines around working with young people and their parents in the promotion of positive mental health was requested with the most frequency, this was followed by information on locally available supports and services for young people, reliable information on mental health issues concerning young people and self help material that young people can use to support their own mental health.
All professions envisioned the online resource as being a resource that pooled information from the evidence base and linked professionals with other online resources and interventions. Related to this, respondents in the current study suggested that the online resource could assist with resource sharing across professions. Similar recommendations were made in a separate study of education, health and mental health professionals’ needs in relation to using the ReachOut Pro online mental health resource in Australia (Inspire Foundation, 2012). These findings highlight the need to increase awareness and knowledge among the youth health workforce of existing strategies with regards to using technological resources both nationally and internationally. Additionally, all professions in the current study noted that technologies have an important role to play in mental health promotion. The need for a strengths-based approach in developing the resource was further highlighted by the topics respondents chose as being most relevant to mental health. These included developing coping skills, positive mental health, promoting positive peer relationships and developing communication skills. Furthermore, health and mental health professionals cautioned against the provision of guidelines, information and resources around the treatment of mental health problems for professionals not qualified to deal with mental health problems. Education professionals also indicated a concern in relation to some teachers taking on too much responsibility in the area of youth mental health and stepping beyond their professional qualifications as a result of the resource. A needs assessment survey conducted with the youth health workforce in Australia (Blanchard et al., 2011) revealed similar findings, in that respondents viewed the field of mental health promotion as an area where technology had great potential in terms of reach and scale.

Additional suggestions that were common across all professions included the need for an online resource for parents that provided accurate information and guidelines in supporting young people’s mental health. Mental health professions raised concerns about parents accessing inaccurate information online and emphasised the urgent need for the development of a parent website that provided parents with reliable information and practical guidelines and advice on the promotion of young people’s mental health and wellbeing. Health professionals, in particular GPs, pointed to the need to support and enhance parenting skills. The development of an online parent resource is the first resource to be developed as part of this study (Clarke et al., 2013).

Of the 900 respondents that completed the survey, 98.8 percent reported that they would use the resource if it was made available. All professionals recognised the importance of bridging the digital disconnect between young people and adults, given that online technologies are a part of young people’s everyday lives. Professionals who were younger (18 to 35) and female were more likely to indicate that they would look for guidance in relation to youth mental health on the internet than their counterparts. This finding highlights the digital disconnect within professional groups according to age and gender and the need to address this issue in developing online resources and supporting professionals to use them.

Three main concerns in relation to the resource were repeatedly raised across all professions. Firstly, professionals emphasised the need for the online resources to be relevant to their specific roles in working with young people and that a “one size fits all” resource would be in danger of not meeting any professions’ needs sufficiently. Given the differing resource needs across youth, education, health and mental health profession that emerged through this survey, the use of different platforms for groups of professionals within the one site needs to be considered. Youth workers and education professionals pointed to the need for activity-based online resources including lesson plans and youth friendly online activities, as opposed to theoretical information on youth mental
health. Mental health professionals on the other hand did not request a need for basic mental health information and resources but rather more specific information in relation to current trends, changes in behaviours and successful interventions based on the latest youth related evidence-based research. Mental health professionals emphasised the need for information that would add to their existing knowledge and skills in the field of youth mental health and didn’t merely replicate the range of information and resources that are currently available. Similar findings concerning the varying needs of different professional groups have also been reported by the Inspire Foundation (2011).

Secondly, respondents reported concerns about an online resource being used to replace face-to-face services with young people. Youth, education, health and mental health professionals pointed to the necessity of face-to-face support services for young people and that a skilled and knowledgeable professional should be the front line approach. Some professionals pointed to the potential of online resources when used in conjunction with face-to-face services. Others recognised the potential of the online resource in up-skilling professionals and providing them with the necessary information and skills in the promotion of positive mental health and prevention of mental health problems in young people.

Thirdly, professionals raised the issue of the age range for which the resources were being developed (young people aged 12 to 25). It was suggested that it would be difficult to develop an online resource that caters for the needs of this broad age range and that in order to be of real value to a professional, the resources needed to take into account the age of the young person and to provide relevant resources accordingly. Developing the online resources in response to both topics and age is an important consideration.

In reviewing the findings from this needs assessment, it is important to acknowledge the limitations of this research. The results from the survey are limited by the low response rate from some of the professions including guidance counsellors and social workers (<20 percent). This limits the extent to which the study findings can be generalised for these professions. In addition, given the fact that the survey was an online questionnaire, it is likely that the study sample was biased in terms of professionals with low computer literacy skills not completing the online survey. It would have been useful to obtain information from this group of professionals in order to understand their specific needs in terms using of online resources. Future research should aim to identify and include this group of professionals.
Implications

Based on the findings from this study, the following recommendations may be made about how online technologies can serve the needs of professionals working with young people:

- Participants in this study expressed positive views concerning the use of technologies in the promotion of positive mental health and maintaining wellbeing. This finding combined with evidence regarding the role of technologies in young people’s lives, underline the need for the field of mental health promotion to build on the potential of online technologies and to harness it more effectively.

- In planning and developing online mental health resources, it is important to acknowledge that the youth mental health workforce is not a homogenous group. There were significant differences between professionals’ reported needs, which has implications for the types of resources that should be developed. Youth workers and education professionals requested activity-based online mental health resources for use with young people. Mental health professionals requested additional information in relation to youth mental health and evidence-based online interventions for young people to use. Future developments must focus on those tools and strategies that are going to add the most value to a practitioner’s work.

- This study has demonstrated that whilst professionals are aware of mental health organisations, many professionals have low levels of awareness of online mental health resources. There is a need for comprehensive evaluation of new and existing technology-based resources as well as a hub for the dissemination of evidence to inform practice.

- The findings from this study demonstrate that there is an immediate need, from the perspective of professionals working with young people, to build the capacity of parents to enable them to better support young people’s mental health and wellbeing. This suggests that this is a critical area for future development in terms of meeting parents’ needs and also providing professionals with a resource to which they can refer parents.

- Consideration should be given to the dissemination strategies preferred by those surveyed. Whilst receiving information about youth mental health through an online resource was highly requested, face-to-face training and training through professional bodies were the most preferred options. These strategies need to be considered a fundamental part of developing any new online resource in order to ensure appropriate buy-in, uptake and sustainability.

- There is a need to address potential barriers that would prevent or hinder professionals’ use of online resources. Barriers related to the resource itself include information being too generic and not suited to professionals’ specific needs, overload of information, being unsure about the reliability of the information provided, the information not being updated regularly and a complicated site that is difficult to navigate. Additional barriers related to respondents’ personal skills and their profession included inadequate IT skills and lack of time to access the resource. Further training is thus needed to develop youth professionals’ digital literacy skills. In addition, it is essential to work with professional associations and management to ensure that issues and concerns in relation to their workforce using online resource are addressed.
Conclusion

This needs assessment is the first study to be carried out in Ireland on youth, education, health and mental health professionals’ views concerning the use of online technologies in supporting young people’s mental health. Overall, participants in the study were supportive of the development and use of online resources in their work with young people. The nature of these resources differed according to profession. All professionals recognised the role of online technologies in the promotion of positive mental health. Participants in this study also expressed a desire for an online resource for parents to assist them in supporting young people’s mental health. In addition to receiving information through an online resource, all professionals showed a preference for face-to-face training on youth mental health and expressed concern about the possible replacement of face-to-face services with online interventions. The findings from this needs assessment demonstrate that there is a desire among professionals to utilise technologies in combination with face-to-face supports in further educating professionals and in the provision of mental health resources for use with young people. In addition there is a need to address the knowledge gap in relation to professionals’ awareness of technology-based services, tools and resources.
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