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Project title

Cultivation of self-compassion and mindfulness through mobile applications for the promotion of mental well-being: a randomized controlled trial

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Keyword(s)

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Introduction

According to the World Health Organization (WHO), mental health is defined as an essential part of health that contributes to individuals' overall well-being. In 2009, a telephone survey was conducted with 2,011 Hong Kong residents. Among them, 12.5% reported major depressive episode in recent twelve months and overall distress was at the moderately severe level. Given mental health problems cause tremendous burden to individuals, families, and society, mental health promotion and mental illness prevention should be advocated. As suggested by the NICE guidelines, psychoeducation and active monitoring are two important elements in the first step of the stepped care model for common mental health disorders. With the smartphones' utilization, mobile intervention maybe a viable option to monitor mood, educate individuals about mental health, and promote well-being. It provides an immediate, effective, low-cost, convenient, and anonymous way to promote health that can reach populations who would otherwise not seek help due to cost, inconvenience, stigma, and other help-seeking barriers.

Objectives

To investigate the efficacy of a smartphone app "Living with Heart", which provides three locally-developed mental health training programs: psychoeducation, self-compassion and mindfulness in (1) promoting well-being, and (2) reducing psychological distress.

Methodology

A randomized controlled design was used and participants were assigned to one of the app's three training programs. Each program provided daily 10-minute audio/video resources, exercises, reading materials and homework assignments for 4 weeks. Well-being and distress level were measured at pre-, post-intervention, and 3-month follow-up using WHO Well-being index (WHO-5), Peace of Mind Scale (PoM) and Kessler Psychological Distress Scale (K6).

Result

A total of 236 participants were recruited. 84 were assigned to the mindfulness program (average age: 32.82; SD = 12.2), 73 to self-compassion program (average age: 33.63; SD = 12.11), and 79 to psychoeducation program (average age: 31.42; SD = 11.03). All three programs showed statistical significant improvement on well-being and reduction of psychological distress at post-intervention and 3-month follow-up, WHO-5: ($F(2,446)=23.92, p<0.01$), PoM: ($F(2,446)=17.72, p<0.01$), and K6: ($F(2,446)=12.54, p<0.01$). No statistically significant differences among three conditions were found on all three outcomes. Mobile apps-based programs demonstrated to have promising results and were a cost-effective alternative

to promote mental health and well-being.