

Effectiveness of Moving Stories, a game-based school program aimed at depression literacy and stigma

No registrations found.

| | |
|------------------------------|------------------|
| Ethical review | Positive opinion |
| Status | Recruiting |
| Health condition type | - |
| Study type | Interventional |

Summary

ID

NL-OMON20353

Source

NTR

Health condition

depression literacy; stigma; help-seeking behaviour; first aid; gezondheidsvaardigheden; hulp-zoek gedrag; eerste hulp;

Sponsors and support

Primary sponsor: Radboud University Nijmegen, Behavioural Science Institute; Trimbos Institute

Source(s) of monetary or material Support: NWO Creative Industries (314-99-115)

Intervention

Outcome measures

Primary outcome

1. Post-test and 3-months follow-up changes in depression literacy, stigma and help-seeking intentions

Secondary outcome

1. 6-months follow-up changes in depression literacy, stigma and help-seeking intentions
2. 3- and 6-months follow-up changes in help-seeking behaviour and first aid behaviour

Study description

Background summary

Elevated depressive symptoms are common among youth in most Western Societies. Yet, most adolescents who are experiencing depressive symptoms do not seek help. Low mental health literacy, high stigma and low social support have been shown to hinder help-seeking. We have developed a game-based school program called Moving Stories that targets mental health literacy, stigma and first aid skills in adolescents with the goal of improving help-seeking and social support. The present randomized controlled trial will test the effectiveness of the program Moving Stories in an adolescent Dutch sample. The targeted sample size is 180 students. Classes of students will be randomly divided to two conditions: the Moving Stories condition and the Control condition. In both condition students will fill in questionnaires at pretest, posttest and 3- and 6-months follow-up. In the Moving Stories condition students will participate in the Moving Stories program which consists of an introduction session, a video game and a discussion session with an experience expert. If Moving Stories proves to be effective, it could be implemented as a school-based program to target mental health literacy and stigma and in turn improve early help seeking. In the long-term, this could lead to better treatment responses and lower relapse numbers, benefiting not only the people suffering from depression, but also society as a whole.

Study objective

Our first hypothesis is that adolescents who've participated in the Moving Stories program will have better mental health literacy and fewer stigmas regarding depression than adolescents who have not participated, both at posttest and at three- and six-months follow-up. Second, we expect a change in help-seeking and first aid behaviour. We expect that adolescents in the Moving Stories group, compared to the control group, will have sought more help if they were experiencing depressive symptoms or provided more appropriate first aid if they were in contact with a peer who was experiencing depressive symptoms, both at posttest and follow-up.

Study design

1. Pre-test (before introduction session): demographics, gaming behaviour, depression literacy, stigma, help-seeking intentions, help-seeking behaviour, first aid behaviour

2. Post-test (after discussion session): program evaluation (only for Moving Stories group), depression literacy, stigma, help-seeking intentions
3. 3-month follow-up: depression literacy, stigma, help-seeking intentions, help-seeking behaviour, first aid behaviour
4. 6-month follow-up: depression literacy, stigma, help-seeking intentions, help-seeking behaviour, first aid behaviour

At all timepoints we assess depressive symptoms as a control variable.

Intervention

1. Participants will be adolescents in the second year of high school (12-14 years old). Schools in the Netherlands will be approached and asked to participate with at least two second year classes, to allow for within-school randomization.
2. After schools have agreed to participate, the classes will be allocated to the Moving Stories condition or the control condition by an independent researcher using computer-generated random numbers. All parents and adolescents in the participating classes will receive an information letter via the school with information about the study. With the letter parents will receive a consent form which they have to sign and send back to give consent for their child's participation. Before adolescents fill in the pre-test, they will also have to give written active consent for participation.
3. To make sure that all students who seek help from teachers during the study receive the help that they need, all mentoring teachers in both conditions are provided with an information booklet with short practical tips on what they can do to help their students. The teachers will also have the opportunity to follow an e-learning program on suicidality and depression in youth. This program, called Mental Health Online (Ghoncheh, Vos, Koot, & Kerkhof, 2013), aims to improve knowledge and self-confidence in people working with youth and is found to be effective. For the present study the developers of Mental Health Online have added an information page on depression to the program, since the training mainly discusses suicidality in youth.
4. The students in the Moving Stories condition participate in the Moving Stories program (a game-based school program) which consists of three parts: 1) an introduction session, 2) a video game and 3) a contact session with someone who has experienced a depressive disorder. The program targets three components of mental health literacy, namely (1) recognition of when a disorder is developing, (2) knowledge of help-seeking options and treatments available, and (3) first aid skills to support others who are developing a mental disorder or are in a mental health crisis (Jorm et al., 1997). Moreover, the program aims to decrease depression stigma in youth. Moving Stories has been developed for high school students and should be offered to an entire class. In the introduction session, the students will download the game and will get a brief introduction about the game itself. In the game,

players interact with a girl, Lisa, who is showing symptoms of a depression. Several help-seeking options and treatments are available in the game, such as contacting a school teacher or calling a phone help-line, and players can choose actions that are all related to good or bad first aid skills (Ross et al., 2012). Players will get feedback on their chosen actions during the day through automated text messages from Lisa. After playing the game for five days (for approximately 10 minutes in the morning each day) the students will participate in a contact session with an experience expert who has suffered from a depression.

Contacts

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Eligibility criteria

Inclusion criteria

1. second year Dutch high school students
2. active consent from parents and students

Exclusion criteria

1. no active consents from parents and/or students

Study design

Design

| | |
|---------------------|-----------------------------|
| Study type: | Interventional |
| Intervention model: | Parallel |
| Allocation: | Randomized controlled trial |
| Masking: | Open (masking not used) |
| Control: | Placebo |

Recruitment

| | |
|---------------------------|-------------|
| NL | |
| Recruitment status: | Recruiting |
| Start date (anticipated): | 21-02-2018 |
| Enrollment: | 180 |
| Type: | Anticipated |

Ethics review

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|-------------------|------------------|
| Positive opinion | |
| Date: | 19-02-2018 |
| Application type: | First submission |

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register ID

NTR-new NL6855

NTR-old NTR7033

Other Ethische commissie van de faculteit Sociale Wetenschappen aan de Radboud
Universiteit Nijmegen : ECSW2017-2306-526

Study results