

Supporting children and young people's mental health in a digital world



With 98% of the UK population now online,

it's no secret that we are rapidly moving towards a more digital world.¹ Accelerated by Covid-19, many of our essential daily services and systems are now available in an online capacity. For children and young people (CYP) especially, a large proportion of crucial learning, socialising and entertainment now happens digitally, and we are seeing young people spending an ever-increasing amount of time on phones and other devices.

At the same time, young people are struggling more than ever before. Parents, health professionals and governments alike have raised concerns around the wellbeing of younger generations. But unprecedented challenges and disruption in the last few years has left child and adolescent mental health in crisis, with a record-breaking number of people asking for help. It's no surprise that services are overwhelmed, lacking in the staff, resources and support needed to meet demand. The result is that many young people are simply unable to access help. This pressing need for more wellbeing support, combined with high engagement in the digital world, points to the potential that digital interventions could have for closing the gap in youth mental health support. This white paper investigates how digital can be harnessed to support young people better. We explore the reasons for the current challenges within services, attitudes towards the online world, and crucially, how digital interventions can effectively support young people.

Unprecedented challenges and disruption in the last few years has left child and adolescent mental health in crisis.

Part 1 Children and young people's mental health: the current landscape

In 2022, a follow up to NHS Digital's 2017 Mental Health of Children and Young People (MHCYP) survey, confirmed what many health professionals have already seen and felt: the number of young people experiencing mental health challenges is rising.²

One in six children and young people between the ages of 7 and 16 in England have a probable mental disorder*, compared to one in nine back in 2017. With 17- to 19-yearolds, the numbers are even more concerning: one in four now have a probable mental disorder*, compared to one in ten in 2017. Alongside continued increased prevalence of affective disorders like anxiety and depression, the report found the problem is growing in many ways:



34%

5%

69%

60% of 17- to 19-year-olds now have possible eating problems.

34% of young people aged 7 to 16 have problems with their sleep more than three times a week.

5% of 11- to 16-year-olds feel lonely all the time.

69% of young people with a probable mental disorder have tried to harm themselves before.

Source: MHCYP Survey, NHS Digital 2022

The picture is similarly bleak in Ireland. Between 2019 and 2022, referrals to the Child and Adolescent Mental Health Service (CAMHS) increased by 16%.³

Why is the problem growing?

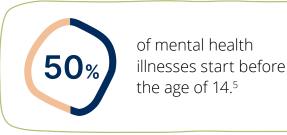
Worries around childhood mental health existed long before Covid-19. From the influence of social media, to societal, political, and economic polarisation, to expanding educational pressures, a wealth of emerging challenges have been linked to mental health struggles in young people.

However, the disruption of the pandemic, with schools closed and children isolated, undoubtedly increased the stresses faced by young people. Many were exposed to risk factors they would otherwise not have experienced. According to the MHCYP survey, a fifth of 7- to 16-year-olds in England experienced a reduction in household income between 2021 and 2022, resulting in problems such as cold homes or not enough food. And with safeguarding services reduced, the NSPCC reported an increase in rates of child abuse throughout the UK.⁴

Challenges to accessing treatment

Running parallel to the increased challenges faced by young people are the barriers to accessing support.

With 50% of mental health illnesses starting before age 14, clinicians and professionals are acutely aware that early intervention is essential to prevent problems escalating.⁵ But increased demand, and under-supported systems, means clinical thresholds are consistently rising and support is usually reserved for the most vulnerable.



Sadly, this leaves a large number of children in need on waitlists, jumping between services, or even turned away, deemed "not severe enough" to access treatment.⁶ Those with less understood challenges, who don't fit standard diagnostic criteria, are also likely to be slipping through the net.⁷ As a result, more than half (58%) of young people left waiting experience worsening symptoms and often end up in crisis, thus putting even more pressure on services.⁸

Geography presents further barriers to support. The "postcode lottery" of youth mental health services means there are huge disparities in spending, offerings and referrals throughout the UK. This can leave some parents and young people unable to access crucial support based simply on where in the country they happen to live.

*Defined as someone who is likely to have a mental disorder, based on high scores of a mental health questionnaire.

Part 2 Living in a digital world: how children and young people live through their phones

Children and young people in the UK and Ireland today have grown up in a digitally attuned society; most young people are online in some capacity. In 2021, 99% of 7- to 24-year-olds in England went online via a mobile phone (72%) or tablet (69%).⁹

The rate at which young people are using phones and devices is growing, too. A 2021 report from CHILDWISE, leading specialists in research with young people, found children spent roughly 3.8 hours a day online.¹⁰ This is a stark increase from a 2018 report by Ofcom, which found young people spent an average of 2.1 hours online, each day.¹¹

It's a similar picture in Ireland, where children spend an average of 2.1 hours online on weekdays and 3.4 hours online per day during weekends. Using a smartphone to access digital content is a daily occurrence for 70% of 9- to 17-year-olds.¹²

Lynsey Eland, Children and Young People's Service Manager at Carlisle Eden Mind.

I'm aware that it's widely believed that young people's mental health is in crisis, but I think there is a combination of factors behind that. A lot of young people really need support and services but are finding them difficult to access, either through lack of resource, lack of funding, lack of awareness or lack of professionally trained individuals to be able to offer them the help they need. That's clearly a problem.

But I also think there is a difficulty when it comes to young people being aware of everyday emotions and how they can feel. It's great that there's been a push to become more mentally aware and reduce the stigma around mental health illness. That's important. But if every time you turn on the radio or scroll through your social media you are constantly seeing information about depression and anxiety, there can be a tendency towards self-diagnosis. And we may feel that when you have a diagnosis for something, you need help from a professional. It can leave young people feeling disempowered.

When we go into schools and deliver workshops about mental health we spend a lot of time talking about what emotions fall within the typical realms of how we might feel. We're very honest, for example saying that the state of happiness doesn't exist for very long. And that's not about making young people feel like the world's rubbish. But it is about being realistic. And then we talk a lot about the resources and strategies that you need in order to have good mental health.

Why are young people going online?

As the digital realm grows, so does the wealth of opportunities for young people online. Some of the key reasons why young people use the internet include:

Entertainment

Video-sharing platforms: Whether to make or watch videos, 95% of 3- to 17- year-olds report using a video platform, with 89% watching YouTube and 50% watching TikTok.

Gaming: 60% of 3- to 17-year-olds play games online, increasing to 75% of 12- to 17-year-olds.

Social Media

Social media: 91% of people aged 12 to 15, and 97% of those aged 16 to 17, use social media. Younger children are also starting to use social media as a form of entertainment or a way to connect with others. 33% of 5- to 7-year-olds have a social media profile, and 60% of 8- to 11-year-olds also have at least one.

Learning

Online education: Young people are using the internet to develop skills or learn. 77% use digital devices to help with homework. 43% also use it to gain creative skills, or improve reading and number skills (39%).

Source of information: 44% go online to gather information or to learn about things that are going on in the world.

Seeking support

Problem solving: 58% of young people use the internet to find support with issues they have. 39% also go online to see how other people feel about these issues.

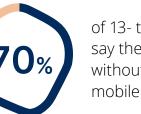
For wellbeing: 80% of 13- to 17-year-olds used a service online to get written or video wellbeing support. Searches were most commonly around sleep, relaxing, and mood.

Source: Ofcom¹³

Only connect: why are mobiles so important to young people?

Despite sometimes getting a bad reputation, it's clear that for many young people, being online is really important. 70% of 13- to 16-year-olds reported they couldn't live without their mobile phone , and 62% of those who owned a smartphone had access to their device at all times.¹⁴

What's more, most young people really value their online use and tend to see it as a positive experience. Over half (53%) of children and young people report that being online is good for their mental health, and only 17% disagree with this.¹⁵ The digital world is something that many young people rely on to connect with others, find their community, learn about themselves and the world, relax, explore, become inspired, and seek support. Not only are all these factors of huge benefit to mental health, but having a high level of autonomy can be empowering, helping young people to take agency in their health and behaviour. Such high acceptability and positive attitudes of the digital world presents an opportunity for mental health services. By meeting young people where they already are and utilising digital, they have the potential to identify and support many more children, at a much faster rate. This isn't to replace existing pathways, but to integrate with them, supporting a proportion of young people who are currently getting overlooked.



of 13- to 16-year-olds say they can't live without their mobile phone.¹⁴

The digital double-edged sword

Despite the value that being online can bring, parents, teachers and health professionals have rightly raised concerns about how the digital world can negatively impact young people.

Some research has found a link between using internet technology and mental health or behavioural problems in children and young people.¹⁶ While moderate phone use can be good for mental wellbeing, problematic smartphone use, such as excessively frequent and/or long usage, or being online late at night, has been linked to outcomes such as:¹⁷

- Conduct problems¹⁸ and hostility¹⁹
- Hyperactivity²⁰ and attention challenges²¹
- Anxiety²² and depressive symptoms²³
- Higher perceived stress
- Suicidal feelings and self-harm²⁴
- Poorer sleep quality²⁵ including reduced sleep time²⁶ and altered circadian rhythms²⁷

Experts believe that children who show signs of problematic smartphone use have formed a behavioural addiction, characterised by withdrawal symptoms when the battery dies, preoccupation, or an unwillingness to engage in other activities.²⁸ This kind of behaviour, which as many as 1 in 4 children show, poses a challenge to those seeking to support young people via their phones.²⁹

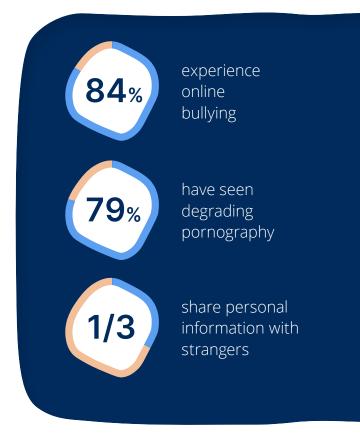
Online platforms

As well as the tech itself, online platforms that allow young people to share, learn and connect, do bring some challenges.

7 in 10 parents are concerned about the content their under-16-year-old may view, with greatest worries centring on age-inappropriate information such as bad language, violence, or adult content.³⁰ Half of children have seen pornography by age 13 and by 18, 79% of all young people will have encountered pornography depicting degradation, sexual coercion, aggression and exploitation. When publishing the data earlier this year, the Children's Commissioner for England Rachel de Souza expressed deep concern about "the normalisation of sexual violence in online pornography, and the role that this plays in shaping children's understanding of sex and relationships".³¹ Moderate phone use can be good for mental wellbeing but excessive use can lead to behavioural problems and addiction.¹⁷

Safety and privacy can be challenging too, with parents worried about who their children are talking to and what information is being shared. Over a third of 8- to 17-year-olds played online games with people they didn't know, and almost a third of 8- to 13-year-olds admit to sharing personal information with people they meet online.^{32, 33}

Online platforms also present opportunities for bullying or distressing communication. 84% of 8- to 17-year-olds report being bullied or "trolled" via the internet compared to 61% being bullied in person.³⁴



A report by the National Advisory Council for Online Safety in Ireland suggests that parents may be unaware of how often their child is bothered or upset by their experiences online. 72% of parents and carers believed they talked to their children about what they are doing online, while only 44% of children agreed.³⁵

Online information

The reliability of information that children view online has become one of the largest concerns.

Young people use the internet as a trusted source of information, but worryingly, content can be filled with misinformation, fake profiles, advertisements, and unreliable evidence. Just 39% of 12- to 15-year-olds and 48% of 16- to 17-year-olds could spot sponsored posts from influencers. What's more, only 11% of 12- to 15-year-olds and 13% of 16- to 17-year-olds could identify reliable indicators that online content was genuine.³⁶

In a world where more and more young people are turning to the internet for support with their health and wellbeing, the legitimacy of information is a major concern. Reading information that is rooted in an evidence-base and led by clinical professionals has immense power to help young people and aid services. And poor quality, unreliable health information is not only ineffective, but could even hinder wellbeing.



of 16- to 17-year-olds could identify reliable indicators that online content was genuine.³⁶

Keeping children and young people safe online

A number of solutions have been developed to manage the risks of being online, helping young people and children to reap the benefits of the digital world in a safe way.

Solution	Evidence
Technological	Various tools have been developed to monitor screen use and prevent excess, with many manufacturers enabling users to set limits and access their usage data. ^{37, 38} Many older children are now beginning to self-regulate how much time they spend online. ³⁹ Parental control software is also widely available, helping parents to regulate screen time and platform access. However, most parents are still not aware of these options. ⁴⁰
Guidance	There is limited evidence for specific online use guidelines for children. The Royal College of Paediatrics and Child Health in the UK recommends that parents should negotiate guidelines based on individual needs and any symptoms of excess. ⁴¹
	When it comes to digital mental health and wellbeing interventions, the National Institute for Health and Care Excellence (NICE) has developed an evidence standards framework (ESF) for digital health technologies, helping to ensure that new interventions are clinically effective, safe, and evidence based. ⁴²
Education	Teaching more about online safety in school has endless potential to improve challenges around privacy, harmful or unreliable content, and online bullying. Over two-thirds (67%) of children under 12 would welcome more education around this, but online safety is not yet taught consistently throughout the UK. ^{43, 44}
	Still, researchers highlight the importance of this education, suggesting it can foster "digital resilience" in young people, helping them to identify, deal with and learn from risks on the internet. ⁴⁵

Part 3 Changing the mental health landscape: how digital mental health interventions are meeting young people where they are

With the majority of young people displaying a high level of acceptance and positivity around being online in general, it's perhaps no surprise that young people are very open to digital mental health interventions.⁴⁶

In fact, attitudes go far beyond openness, with young people reporting they would be more inclined to seek treatment for mental health issues if support was via digital tools.⁴⁷

What kind of tools are being used to support young people's mental health?

Usually rooted in principles of cognitive behavioural therapy (CBT) and cognitive or social skills training, a wealth of interventions with various clinical targets have been developed over the years. These offer a range of support, including:

Self-help

A popular option amongst online interventions – perhaps due to low costs and ease of access – is to provide self-help, letting young people work through supportive CBT material at their own rate.⁴⁸ Some studies find limited uptake for self-help interventions, but when young people do adhere, online self-help can improve symptoms of anxiety and depression in young adults, as well as improving disruptive or challenging behaviour in childhood.^{49, 50, 51}

Therapist intervention

Whether through 1:1 CBT or therapist-guided support, working directly with a professional is becoming a popular method of supporting young people online, with human intervention shown to be more effective than self-help.⁵²

Therapist involvement has shown some promising results in various disorders: Two CBT interventions (Salud BN and My Body, My Life) that are facilitated by a professional demonstrated long-term effectiveness in reducing eating disorder psychopathology and behaviours.⁵³ A variety of online interventions have also used therapist involvement to successfully manage affective disorders like anxiety and depression.⁵⁴

Discussion groups or forums

Being able to connect with other users via an anonymous forum or community is another way that online interventions are supporting young people. For example, teens who had access to an online discussion group demonstrated significantly reduced concerns around weight and eating.⁵⁵ A large review of online platforms also found those who formed a good social connection via a digital intervention experienced up to a 26% reduction in depressive symptoms.⁵⁶

Programmes for parents

Parents and carers play a vital role in helping young people to manage their mental health, especially younger children. Some programmes, such as SilverCloud[®], offer education and support to caregivers, as well as to the children. These programmes provide adults with strategies and ideas for how to respond to a child's worry and anxiety. Parents and carers can work through the tools with their children both on- and offline. As they themselves may be experiencing anxiety too, parents and carers can also be offered support.

> Some programmes, such as SilverCloud[®], provide parents and caregivers with strategies and ideas for how to respond to a child's worry and anxiety.

Brain training

Computerised brain training has been developed to support (mainly young) children with a range of disorders such as psychosis, attention deficit hyperactivity disorder (ADHD), and autism spectrum disorder (ASD).⁵⁷ Brain training usually involves games or reward-based activities, centred around improving key deficits in emotional regulation and social understanding, memory processing, and general psychopathology. Although young people and parents generally report positive experiences with brain training, long term results remain inconclusive.



Helen McGlinchey,

Head of Service and Clinical Lead for School Services, Northpoint.

The SilverCloud[®] CYP programmes have been so helpful to have as an additional offer of support within our service model. It's not a replacement for face-to-face therapy. It just allows more choice and some young people prefer it.

Predominantly, the programmes are offered for low to moderate anxiety and low mood presentations either as a sole intervention, or for initial support whilst waiting for face-to-face therapy. If the young person is open to the idea, we can offer SilverCloud pretty much immediately from the point of the referral. It's great to be able to respond as swiftly as that.

Sometimes, a therapist might be working with a child or young person in face-to-face therapeutic work and the parent might be completing the Supporting An Anxious Child programme; the two interventions will run alongside each other. Or we might offer SilverCloud at the end of a piece of therapeutic work. And there's the option for the Supporter to personalise the programmes and make them more bespoke by unlocking further modules, for example bereavement, peer relationship or exam stress modules I think that really reflects the flexibility a digital platform offers.

We work to suitability criteria, to decide if it's appropriate to offer a SilverCloud programme as a support offer. We will sometimes offer it to support more heightened anxiety presentations for young people and where there are presentations of self-harm or clinical risk factors, but we'd be assessing those on a case-by-case basis. We've found that clinical risk tends to be extremely low. We have supported over 1,050 users that have engaged and worked through the programme offer and we've never had to bring anybody off the platform because of a safeguarding or clinical risk concern.

Are interventions effective?

Digital mental health interventions are showing promising results, with an average retention rate of 79% and some positive outcomes.⁵⁸ That's particularly the case in CBT interventions for anxiety and depression, and for those that have a human element, like therapist involvement or an online community.

Where online platforms fall short – with low engagement and high turnover – it usually falls down to lack of co-production and a failure to understand and integrate what young people really want from online solutions.⁵⁹ This is an audience learning about mental health via fast-moving TikTok videos or visually engaging Instagram posts. They simply won't relate to a clinical digital space with limited interaction or visual appeal. Amongst the wealth of emerging digital interventions and research on their efficacy, it's become clear there are several factors that influence young people's engagement and acceptance. In order for digital interventions to be effective, it's crucial these key needs are fulfilled:

1. Anonymity

Young people are much more likely to seek help or discuss their mental health when an online intervention allows them to be anonymous.⁶⁰ Being able to avoid stigma, exclusion, or embarrassment by remaining unknown lets young people feel more comfortable compared to face-to-face meetings with professionals, and empowers them to seek help.⁶¹

2. Flexibility

Interventions which seamlessly fit into a young person's life are essential. Digital platforms that are time restricted, have waiting lists or require using unfamiliar media (like emails or desktop computers), do not have as much uptake as more convenient interventions – such as those that can be accessed at the right time and place, through a platform suited to the individual.⁶²

Being able to share personal data quickly also encourages young people to use online interventions; people are put off by technical issues or restrictive platforms that slow this process down.⁶³

3. Usability

One of the most important determinants of acceptability and engagement is how easily young people are able to interact with and understand the platform.

Interventions that are user friendly, with straightforward, self-paced and clear instructions, are favoured the most.⁶⁴ Children and young people also prefer features such as videos, which allow accessing information to be as easy, stress free and entertaining as possible, further motivating them to continue seeking support.⁶⁵

4. Suitability

It is vital for young people that their support is personalised. When an intervention is viewed as too general or not helpful to the specific needs of an individual, young people are much less likely to engage.⁶⁶

Every young person will have a unique set of experiences and circumstances that influence their mental health. The most effective and respectful interventions, including those that are online, take a person-centred approach to support, tailored to the needs and preferences of each person.

5. Connectedness

Being able to connect with others – either a professional or a service user – encourages acceptance of digital mental health interventions. While connecting with others online can cause concerns, providing a space for young people to safely communicate with others, can:

- Foster a sense of community and shared experience.
- Help young people feel safer.
- Support people to feel less alone.
- Normalise feelings.
- Empower children and young people to support one another.⁶⁷

6. Parental involvement

Digital health scientists at SilverCloud[®] by Amwell[®] recently published a systematic review of all the existing research literature conducted in the field of digital interventions for CYP worldwide to date.⁶⁸ The review included 6,981 participants from 23 studies conducted across different countries. It found that digital interventions are safe and potentially beneficial for use with children and young people who have symptoms of depression and anxiety. Critically, the review highlighted the importance of a systemic approach for the treatment of depression and anxiety that includes active parental participation to maximize the effects of the intervention.

7. Trustworthiness

Credibility holds the utmost importance when children and young people are seeking support online. Perhaps down to various educational or technological solutions, the younger generation are becoming increasingly aware of the risks associated with being online. Children and young people are reluctant to use online health platforms that demonstrate privacy or validity concerns, and instead look for trusted brand names, transparency, and supportive evidence.⁶⁹

A systematic review by digital health scientists at SilverCloud[®] by Amwell[®] found that digital interventions are safe and potentially beneficial for use with children and young people who have symptoms of depression and anxiety.⁶⁸



Lyndsey Bradley,

Digital Support Outreach worker, Calderdale Mental Health Support Team (MHST).

A lot of young people don't want to face-to-face, but they need something. Digital appeals because it's in the moment and they can do it on their own terms. But there are barriers, for example, needing parental consent can be a red flag for young people and can be the difference between them trying it or saying no. Young people want that sense of ownership and privacy and it can put them off when their parents need to be consulted.

Another barrier is that you need to own a digital device and as schools found during lockdown, not everyone does. Also, you need to be literate and have an email address. So, if a family is struggling, I say to schools, 'Can you help to make that access easier? Can you open up your school ICT suite? Can you set aside 20 minutes during assembly or lunchtime to support the child or their parent/carer?'

You do still get people who think that they are being fobbed off with online support. The research behind SilverCloud, and the data we get from the platform, is really important to show families and young people that they're not and build that trust in giving digital a go. SilverCloud[®] by Amwell[®] was recently recommended by NICE and that will make a big difference when it comes to convincing people to come on this digital journey.

A new era for digital mental health

As it becomes clearer what works for digital mental health interventions for children and young people, as well as where energy needs to go to help minimise the risks of being online, we are seeing immense progress in solutions.

For the first time ever certain digital interventions, such the SilverCloud platform, are now being formally recommended as a type of mental health support for children and young people. In February 2023, the National Institute for Health Care and Excellence (NICE) recommended four CBT technologies as effective initial treatment options for children and young people with mild to moderate anxiety or low mood.⁷⁰

The SilverCloud programmes for teenagers, tackling anxiety and low mood, were all given NICE approval. Structured around traditional CBT, users are offered modules on anxiety, feelings, fears, challenging thoughts, managing worries, and reflecting on learning. Support can be provided online from practitioners via regular check-ins. Motivational messages are also provided throughout the course.

As with the other NICE recommended programmes, these trusted interventions have the power to expand services beyond what traditional structures have capacity for, making support more accessible and effective for young people.

While it's important to understand and mitigate the risks of a digital world, with young people so accepting of being online, the power of online interventions in doubling down on the youth mental health crisis offers a genuine opportunity for change.

By delivering effective support at scale, digital mental health platforms have the power to not just bridge the gap in support, but to revolutionise youth mental health services for good.

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