[Poster Presentation]

Mental wellbeing promotion through a mobile application in healthcare workers in the United Kingdom: A Feasibility Study

Mehmet Yildirim[1], Tim Carter[1], Laura Bedford[3], Holly Blake[1,2]

1. School of Health Sciences, University of Nottingham, Nottingham NG7 2HA, UK
2. NIHR Nottingham Biomedical Research Centre, Nottingham NG7 2UH, UK
3. Department of Family Medicine and Primary Care, Li Ka Shing Faculty of Medicine, The University of Hong Kong, Hong Kong SAR, China

Background: For a multitude of reasons, healthcare workers are often at increased risk of poor mental health compared to the general population. Mobile applications, designed to support wellbeing and mental health, offer ease of use, accessibility, and cost-efficiency. However, there is a lack of research exploring whether such applications are beneficial for mental wellbeing promotion among healthcare workers.

Aim: The purpose of this study is to determine the feasibility of a mobile application based self-monitoring intervention for promoting mental wellbeing of healthcare workers.

Methods: This feasibility study was designed and conducted according to the Medical Research Council Framework for developing and evaluating complex interventions. Participants were randomly assigned to the intervention or control group. The intervention group used a mobile application, MYARKEO, for 6 weeks while the control group was signposted to a National Healthcare System (NHS)'s website about mental wellbeing. Pre- and post-surveys including the Warwick-Edinburgh Mental Well-being Scale (WEMWBS) and Depression Anxiety Stress Scales (DASS-21) were applied. Then, interviews were conducted with 13 healthcare workers from the intervention group and analysed using thematic analysis.

Preliminary Results: 49 participants were recruited with the speed of 8.16 participants per month in 6 months. Most of the sample were female (38, 82.6%), aged between 21-40 (36, 78.2%), and worked as a nurse (17, 36.9%). 10 participants dropped out of the study (20.5%; 10/49). The mean number of days that the application was used was 26.8 of 42 days (6 weeks).

Conclusion: The preliminary results suggests that the intervention may be accessible and useful for healthcare workers, and a full Randomised controlled trial to test effectiveness may be feasible according to the recruitment speed, drop-out and retention rates, and intervention engagement.