

A novel Acceptance and Commitment Therapy eHealth psychoeducational intervention in students with depression, anxiety, and stress: A feasibility study

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Background: Recent studies have revealed a high prevalence (up to 50%) of depression anxiety, and stress symptoms among university students. These data highlight a need for primary and secondary preventative measures at low cost to better support often overwhelmed support services. **Aims:** This study aimed to determine the feasibility of a short online Acceptance and Commitment Therapy (ACT) psychoeducational course using the ACCEPT and MRC framework guidelines. This included obtaining qualitative feedback from a target population in order to assess whether the psychoeducational programme was effective and whether it would achieve its purpose. In addition to this, to explore quantitatively, whether the intervention would improve wellbeing (primary outcome) and psychological flexibility (process measure), whilst reducing depression, anxiety, and stress (secondary measure). **Method:** 28 participants with moderate to high levels of depression, anxiety and stress completed the 'Bite of ACT' (BOA) psychoeducational intervention over a two-week period (with four psychoeducational sessions). The measures used were the Warwick-Edinburgh Mental Well-being Scale (WEMWBS), the Depression, Anxiety and Stress Scale (DAS-21) to test for depression, anxiety and stress, and the Acceptance and Action Questionnaire II (AAQII). A one-way ANOVA explored the change in these measure

at three time points – baseline, midpoint (just after the intervention) and then two weeks after the intervention. **Results:** The qualitative data was positive, suggesting that the intervention would be effective and achieve its purpose. Pilot data showed overall DASS-21 scores significantly decreased, there was also a significant increase in Warwick-Edinburgh Mental Well-being Scale. In addition to this we found a stabilising effect of psychological flexibility where psychological inflexibility did not increase. **Conclusion:** These pilot results are promising, and in combination with the positive qualitative data we received it is now suggested that a full scale RCT should be conducted.