ReachOut's Social Impact Framework:

The evidence base for our

Theory of Change

REACHOUT

Contents

Introduction

Young people need support for their mental health

Globally, depression and anxiety are the leading sources of disease burden among adolescents, with suicide being the fourth-leading cause of death among young people aged 15–29 (WHO, 2021). The Australian Bureau of Statistics' (ABS) *Study of Mental Health and Wellbeing* reported that almost two in five people aged 16–24 experienced mental ill-health[1] in 2020–21 (ABS, 2022). Mental health issues are underdiagnosed and undertreated among young people, with adolescence being a particularly vulnerable time for mental health challenges to emerge (WHO, 2021). Failure to identify and address mental health conditions during adolescence has serious implications for an individual's ability to lead a fulfilling life as an adult (Zhao & Hu, 2022). Early identification of risks or symptoms and early access to support is critical, as it offers the greatest potential for improving young people's health and wellbeing (Estradé et al., 2022; Productivity Commission, 2020) and is an important preventative measure for serious long-term implications (Rickwood et al., 2007; Zhao & Hu, 2022).

ReachOut's support services

ReachOut is Australia's leading online service supporting young people's mental health and wellbeing during tough times. ReachOut has more than 20 years' experience in delivering free digital mental health and wellbeing resources for young people using a strength-based prevention and early intervention model. From one-to-one support provided by experienced peer workers, to online communities, as well as tips, stories and resources, ReachOut has a wide range of support options that allow young people to engage in ways that are relevant to them.

ReachOut Parents and ReachOut Schools provide valuable information, resources and advice to help parents, carers and educators better understand the young people in their lives and play an active role in their wellbeing.

ReachOut's digital suite of services supports young people who would not otherwise engage with, or who cannot access, other formal mental health supports, or who are in the early phases of needing support and information.

Mental health issues are underdiagnosed and undertreated among young people, with adolescence being a particularly vulnerable time for mental health challenges to emerge.

[1] In this document, we use the terms 'mental ill-health' and 'mental health condition'.

Social impact

at ReachOut Australia

ReachOut's Social Impact Framework captures the areas where we can deliver social value to support the mental health and wellbeing of young people in Australia. The Framework guides the collection and reporting of data that shows how our information and support services make a difference to the lives of Australian young people. The Social Impact Framework can be found on our website.

ReachOut's Social Impact Framework rests on a strong evidence base that connects the work that we do with the outcomes for young people who use our services. This evidence base points to the importance of understanding what mental health challenges look like when one is going through tough times, and the value of learning how to support oneself or to get support from others. There is strong evidence that services need to be where young people are: online and connecting with their peers.

Our Theory of Change

A key component of our Social Impact Framework is our Theory of Change model for ReachOut's services, which links our information and support services to the impacts outlined in the Framework. It shows us the logical connection between the work we are doing and how engaging with our services can lead to positive mental health impacts.

Our Theory of Change is captured in the diagram on the next page.

ReachOut's Social Impact Framework has been built on solid research-to-practice foundations. The connections in our Theory of Change lead back to the evidence base that underpins what we do. This evidence informs our assumptions about impact and consists of our own research and evaluation work, consultations with young people, and other studies in the field.

Purpose of this document

This document captures the key areas of evidence that support our Theory of Change. It helps to build clarity about the ways in which ReachOut can support the wellbeing of Australian young people and provides rigour for our social impact work. We focus on key studies that demonstrate the value of the kinds of interventions that ReachOut offers across:

- psychoeducational resources (accurate information about mental health and wellbeing)
- peer connection
- the role of parents/carers and schools in promoting young people's mental health.

In a world where young people are bombarded with information and where their online lives *are* their lives, the robust evidence base behind our work is critical in ensuring that ReachOut can be the trusted source of support for Australian young people facing tough times.

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ReachOut's
Theory of Change

The **need**

- Almost 40 per cent of young people in Australia had a mental health difficulty in 2020 [1]
- Many young people are unable to access mental health services due to waiting lists, lack of services in their region, cost barriers and shame/stigma [2]
- Universally accessible, youth-friendly digital services, providing information and support around the clock, help to fill this gap [3]

ReachOut delivers digital and wellbeing services for young people (and those that support them). Our **key support services** are:

YOUTH* **Content**	PARENTS/CARERS* **Content**	SCHOOLS **Content**
YOUTH **Online Community**	PARENTS/CARERS **Forum**	
1:1 PeerChat	**1:1 Coaching**	*Includes social media content.

We focus on these services because we **know** that:

- Psychoeducational support that's accessible 24/7 can reduce the impact of mental health challenges [4]
- Online communities can help people who are facing mental health challenges [5]
- Targeted social media content can help to create positive behaviour change [6,7]
- Increased parent/carer mental health literacy and knowledge increases support for young people [8]
- One-to-one peer support, including digital chat, can help to relieve distress [9]

We also **know** that:

The right reach **+** meaningful engagement

= can create positive change in the lives of young people (and supporters) in six key outcome areas.

Our **key outcome areas** are:

1. Mental health literacy
2. Connection
3. Better understanding of self
4. Sense of agency
5. Relief from negative feelings
6. Validation

Which helps ReachOut to achieve our **purpose**:

To be the trusted and safe digital space empowering young people to feel better.

[1] ABS, 2022; [2] Productivity Commission, 2020; [3] ReachOut, 2020; [4] Creek et al., 2015; [5] Newgate Research, 2020; [6] Thorn et al., 2020; [7] Sala et al., 2021; [8] Mizzi et al., 2020; [9] Atujuna et al., 2021

Connecting

ReachOut's services to impacts

ReachOut's Social Impact Framework identifies three areas of impact that are uniquely relevant to our work as an anonymous, non-clinical, digital service provider: **outcomes**, **reach** and **engagement**. These three key areas are foundational to our Theory of Change and are explained and supported below.

Outcomes

ReachOut's Social Impact Framework identifies positive mental health outcomes for young people using our services. These outcomes occur across the following six domains:

- mental health literacy
- connection
- better understanding of self
- sense of agency
- relief from negative feelings
- validation.

The evidence base around the effectiveness of psychoeducational interventions, peer connection and parent/carer support in building youth mental health provides the logical connection between ReachOut's services and these outcome domains. This evidence base is summarised below.

Building mental health literacy, understanding of self, agency and validation: Psychoeducation across the intervention spectrum

ReachOut resources and services adopt a psychoeducational approach to supporting young people's mental health, providing reliable information that helps young people to understand their experiences of mental health challenges and to develop self-help strategies. We do this through our website, online communities, social media, and campaigns. Our mental health and wellbeing resources are designed to help young people learn about mental ill-health and to understand their struggles. Psychoeducational interventions are easily adaptable to different forms of delivery, including digital delivery. As an online service, ReachOut is ideally placed to provide young people with access to a range of resources that help them to understand and make sense of their mental health difficulties.

Psychoeducational interventions play a key role in supporting mental health and wellbeing across all stages of mental health challenges, from the early onset of difficulties, to diagnoses of mental health conditions (Brown et al., 2020). Other therapeutic approaches are also supported by psychoeducation, including cognitive behaviour therapy and trauma-informed practice (Mental Health Australia, 2014). The effectiveness of psychoeducation in building mental health has been demonstrated in both clinical trials and community settings (Dysthe et al., 2021; Lukens & McFarlane, 2004). Psychoeducational interventions have a role in preventing or managing adolescent depression either as a first-line response or as a supplement to treatment (Bevan Jones et al., 2018).

Psychoeducation plays a key role in building mental health literacy. Accurate information about mental health–related topics supports the understanding of mental health issues and conditions by/for individuals, families, parents or carers by increasing knowledge around challenges, diagnoses, management and prevention (Brown et al., 2020).

> By providing information and increasing understanding, psychoeducational resources can challenge stereotypical negative beliefs surrounding mental health conditions and validate an individual's experiences.

Research has also shown that psychoeducation can alter the course of depression through the delivery of accurate information to improve mental health literacy, which affects compliance with treatment, self-management and social functioning, and increases help-seeking behaviour (Donker et al., 2009; Dysthe et al., 2021).

Increased understanding of mental health struggles has additional benefits, as it has been shown to support more positive personal beliefs, social expectations, self-evaluation and self-efficacy (Prescott et al., 2020). In turn, this can increase an individual's perception of possible positive outcomes for them and help to motivate behavioural changes (Estradé et al., 2022; Hurley et al., 2020; Prescott et al., 2020).

Alternatively, lack of understanding of what is going on for someone experiencing mental health challenges can contribute to their feelings of isolation and reinforce stigma around mental health conditions (Gulliver et al., 2010). The provision of resources relating to mental health reduces feelings of isolation through recognition and normalisation of experiences and symptoms (Lukens & McFarlane, 2004; Nicholas, 2010). Many people with mental health conditions experience some level of stigma and consequent discrimination from their community or are judgemental of themselves ('self-stigma') (Productivity Commission, 2020; Shepherd et al., 2021).

Some communities may also experience deeper levels of stigma due to religious or societal beliefs (Productivity Commission, 2020). Stigma regarding mental health can reduce young people's willingness to seek help and may create other barriers to health care by reducing their desire to understand what is happening to them, limiting their social networks (leading to loneliness) and, in extreme cases, impacting their employment and housing opportunities (Estradé et al., 2022). By providing information and increasing understanding, psychoeducational resources can challenge stereotypical negative beliefs surrounding mental health conditions and validate an individual's experiences (Estradé et al., 2022).

Mental health educational resources can also support the development of positive help-seeking behaviours by providing information about how and where to seek help (Kauer et al., 2014; Patel et al., 2007; Rickwood et al., 2007). In addition, psychoeducation supports personal agency and self-efficacy. This can empower those struggling with mental health conditions, and family members who support them, to take steps towards receiving care (Birhamer & Brent, 2007). When young people believe in their ability to take action to address their mental health struggles, they are able to set goals and work towards achieving them despite potential setbacks or failures (Bandura, 2012).

Self-efficacy and agency are particularly important with young people (Kauer et al., 2014). Experiences of empowerment in crucial developmental stages such as adolescence can impact future life choices, including the choice to seek treatment for mental health (Bombard et al., 2018). In contrast, a low sense of self-efficacy is associated with low self-worth, which may contribute to the development of depression and anxiety (Bandura, 1977).

Helping young people by increasing parent/carer mental health literacy

Parents and carers have a significant influence on their young person's mental health and have even been described as 'gatekeepers' to adolescent mental health (Davids et al., 2017; Hurley et al., 2020; Maiuolo et al., 2019; Matthews et al., 2022). Building mental health literacy in parents through education about mental health conditions is therefore an important way to support young people (Hurley et al., 2020). Parental responses and reactions to mental health issues impact their young person's behaviour, feelings and wellbeing (Mizzi et al., 2020). Importantly, information and education about mental health can help families to recognise early warning signs and symptoms and to learn about other aspects of mental health prevention and intervention (Mizzi et al., 2020). Psychoeducational materials can assist parents and carers to develop insight and acceptance, and to improve communication skills with their young person, by helping them to understand the issues their teen is facing and by validating their experiences (Mizzi et al., 2020).

Providing parents with resources to better understand their young person's struggles also helps to promote appropriate help-seeking behaviours. The personal views of parents and carers on help-seeking directly impact on young people's help-seeking behaviours (Hurley et al., 2020). For example, research shows that when caregivers don't recognise or acknowledge a young person's depression, that person is less likely to seek help (Radovic et al., 2015). Parents have reported feeling helpless, powerless or uncertain when it comes to getting help for their child's mental health (Hurley et al., 2020; Mizzi et al., 2020). As parents gain knowledge about mental health issues, negative attitudes diminish and young people feel validated and supported to seek help (Hurley et al., 2020; Radovic et al., 2015).

Building connection and reducing feelings of isolation and distress through providing online communities and PeerChat

Young people have a need for autonomy and are often self-reliant, believing that they can, or should be able to, tackle their own problems themselves (Grealish et al., 2013; Ishikawa et al., 2022; Rickwood et al., 2007). ReachOut provides online communities or forums where young people facing mental health challenges, and parents/carers who support them, can connect with people experiencing similar challenges. These spaces give users a chance to read about others' experiences, share their own experiences, have a conversation, or seek advice about mental health challenges. Users can choose to remain anonymous, either by contributing to the forum with an alias or by passively reading the forum content. Interaction with others in online communities provides a unique avenue for social connection for young people (Prescott et al., 2020; Smith-Merry et al., 2019).

Our Theory of Change rests on the assumption that our online communities produce positive mental health impacts through the provision of social connection.

Social participation and inclusion are important in reducing the risk of developing mental health conditions (Productivity Commission, 2020). Connection with others, which can also be experienced as 'bonding', 'social integration' and 'social support', can reduce feelings of anxiety and depression (Bauer et al., 2021). Social support is regarded as a protective factor for mental health across all ages, including adolescence (Ferguson, 2006). There is a growing body of evidence that shows the short-term and long-term impacts of social connection on health outcomes, including mental health outcomes (Holt-Lunstad, 2022). For people with mental health conditions, social interactions can help with recovery and reduce the likelihood of relapse (Productivity Commission, 2020). Young people prioritise social and practical support over treatment and monitoring of symptoms (Byrne et al., 2010). Connecting with others in a similar situation can also contribute to improved recovery, wellbeing and social integration among people with mental health conditions (Naslund et al., 2016; Productivity Commission, 2020).

Online communities provide an accessible, informal and informative community, and can create a safe space for communication and sharing of impartial advice (Prescott et al., 2020). Online communities or forums provide an opportunity for social 'modelling', where incremental exposure to experiences and solutions through the exchanges that occur between users can promote a sense of self-efficacy – or the ability to deal with their own concerns (Prescott et al., 2020). The value of this kind of support is particularly critical for rural young people who experience greater barriers in seeking help for mental health concerns (Carlisle et al., 2024). There is an established link between activity on ReachOut's Online Community by rural young people and the building of key resilience factors, such as social connection and self-efficacy, that are beneficial to young people in the context of prevention and early intervention (Carlisle et al., 2024). Sharing experiences also encourages empathy, reduces feelings of isolation, and provides emotional support, validation and belonging (Hu et al., 2020; Prescott et al., 2020). The anonymous nature of online communities also encourages disinhibition, allowing the sharing of personal experiences, which can benefit all users (Prescott et al., 2017; Pretorius et al., 2019). It can be a validating experience for the sharer, and the reader has autonomy in selecting what information is relevant to them. Online community members choose their own path in deciding what information is relevant to them (Hirvonen, 2022; Savolainen, 2011) and what to follow and comment on. This can be empowering in the same way that is apparent following the exploration of online psychoeducational resources (Ishikawa et al., 2022; Rickwood et al., 2005; Rickwood et al., 2007).

Validation also occurs because young people see others with similar struggles in online communities. Research suggests that young people develop hope, are empowered to challenge stigma, and gain new understanding of or perspectives on issues from hearing about the strengths and lived experience of their peers (Naslund et al., 2016). Young people place high importance on being validated in terms of their personal views and their choices about how they should live their lives, especially during times of mental distress (Kauer et al., 2014). Online forums provide young people with both information and emotional support (Hanley et al., 2019), which helps to normalise their experiences and foster belonging (Hanley et al., 2019; Prescott et al., 2020). In addition, online community participation can support positive help-seeking behaviour, which is crucial for young people, who often prefer not to seek therapeutic support, given that they are at a life stage where independence is paramount (Dysthe et al., 2021). Talking to peers or friends on the internet about mental health is often a first step towards accessing professional help (Pretorius et al., 2019). Where there is support and encouragement from social networks, attitudes towards mental health help-seeking can be positively impacted (Hurley et al., 2020). Forums can highlight avenues for obtaining different types of formal or professional support (Hanley et al., 2019).

Connecting with peers can help to relieve distress

ReachOut's online communities and PeerChat service both provide opportunities for peer connection. Discussing sensitive issues with a peer in an informal setting enables young people to feel they are part of a conversation (Grealish et al., 2013) and are being listened to. This helps to reduce the distress that comes from feeling they are not being heard, which has been shown to exacerbate symptoms of mental ill-health (Grealish et al., 2013). The sense of social support provided by online communities can foster emotional connection; in turn, emotional connection can relieve distress that the user may be experiencing (Barak et al., 2006; Dodemaide et al., 2019; Storman et al., 2022).

Peer work (or lived-experience work), such as that provided by ReachOut's PeerChat service, aims to encourage the recognition of individual strengths and to generate personal growth through the sharing of stories and experiences (Lukens & McFarlane, 2004). Peer workers are trained to draw learnings from their own lived experience of mental health challenges as a way to deliver support (Simmons et al., 2023). Peer work improves people's wellbeing through participating in open discussions that can reduce the stigma surrounding mental health and promoting social connectedness (Byrne et al., 2021). Lived-experience work reflects the same values that young people place on their own mental health journey, which is to respect different views and be open to different perspectives (Byrne et al., 2021). Connection through peer platforms has also been found to improve effectiveness and engagement with other digital mental health interventions (Garrido et al., 2019).

Reach

ReachOut's Social Impact Framework also identifies reach as an important precursor to helping achieve positive mental health outcomes for young people using our services.

Young people are now digitally connected more than ever (Productivity Commission, 2020; UNICEF, 2017). Online services are therefore uniquely placed to address the non-clinical needs of young people seeking support for mental health concerns (Davenport et al., 2020; Lehtimaki et al., 2021). Online platforms can reach those who are at the early stages of their mental health challenges and who don't yet require the level of tertiary support offered by clinical services (Davenport et al., 2020; Lehtimaki et al., 2021). Digital, non-clinical services can also address some of the determinants of and contributors to mental health in ways that may not be available through clinical interventions (Davenport et al., 2020; Gulliver et al., 2010; Lehtimaki et al., 2021; Patel et al., 2007; Rickwood et al., 2007). These include the significant role of family, kin and schools, all of which have been found to assist with an individual's functional recovery within their community (Productivity Commission, 2020).

By providing free, accessible and anonymous support through digital platforms, ReachOut is able to reach large numbers of young people. An online support service such as ReachOut provides a convenient and attractive option for individuals with busy school or work schedules (Eassom et al., 2014). Through responsive targeted campaigns and content, and social media that adapts to their needs, ReachOut can also address the concerns of unique cohorts of young people and reach targeted audiences such as LBTQIA+, young men and First Nations young people.

Online platforms can reach those who are at the early stages of their mental health challenges and who don't yet require the level of tertiary support offered by clinical services.

Reaching young people through social media

The 'digital first' service approach adopted by ReachOut allows us to reach young people in the places they frequent. For this reason, ReachOut utilises social media platforms such as Instagram, TikTok and Facebook to reach young people, support their mental health literacy and promote psychoeducational materials on-site in a way that is familiar to them. As with traditional digital health interventions, social media can deliver mental health messages to large audiences, as well as target smaller cohorts or communities. As young people are often heavily connected via social media, there is huge potential for platforms such as Instagram, TikTok and Facebook to provide information highlighting intervention opportunities and potential avenues for formal and informal support (Thorn et al., 2020). While in its infancy, research suggests that social media can be a tool for positive behaviour change in mental health (Mehmet et al., 2020). Social media can also provide a platform for safe communication about mental health among young people (Thorn et al., 2020). Population-wide suicide prevention campaigns delivered via social media have the potential to reduce suicidality, as well as to increase awareness, knowledge and attitudes towards help-seeking (Thorn et al., 2020).

In addition to psychoeducational materials, social media campaigns can contain personal narratives and inspire young people through lived experiences. There is emerging evidence that social media can build social connection to support people with mental health needs (Mehmet et al., 2020).

Reaching young people through ReachOut Schools

This review of evidence also points to the importance of other providers of social connection, support and influence for the development of young people's wellbeing (Holt-Lunstad, 2022). Through ReachOut Schools, we are able to increase our reach to a greater number of young people than would be possible by focusing on youth services alone. Teachers are a key resource for delivering sustainable psychoeducational lessons/programs to a wide range of students, not just those who show an interest (Ekornes et al., 2012). Furthermore, the classroom provides an optimal environment for psychoeducation (Ekornes et al., 2012). Mental health education in schools can produce long-term positive impacts on mental, social and behavioural development and reduce barriers to help-seeking (Marinucci et al., 2022). Psychoeducation in schools can reduce stigma associated with mental health, as well as highlight help-seeking pathways for students (Marinucci et al., 2022).

Providing psychoeducational resources to teachers and schools is yet another avenue for producing positive mental health outcomes among ReachOut's audience of young people.

> ReachOut offers young people a self-directed, anonymous service that increases empowerment and encourages engagement at their own pace and to the depth they require in order to learn about mental health.

Engagement

Engagement is another important precursor highlighted in ReachOut's Social Impact Framework that helps young people using our services to achieve positive mental health outcomes.

Evidence suggests that online or digital health interventions provide opportunities for engagement with psychoeducation resources, as well as promoting engagement with social opportunities that may not be available in 'real life' (Ashcroft et al., 2016). ReachOut offers young people a self-directed, anonymous service that increases empowerment and encourages engagement at their own pace and to the depth they require in order to learn about mental health (Kauer et al., 2014; Lehtimaki et al., 2021).

To build engagement, the design and delivery of psychoeducational interventions is as relevant to young people as the content itself (Bevan Jones et al., 2018; Garrido et al., 2019; Kauer et al., 2014; Liddle et al., 2021). There are many ways in which psychoeducation can be tailored and presented to different audiences – including young people, and parents and carers – such as visuals, engaging content, and opportunities to interact (Bevan Jones et al., 2018; Garrido et al., 2019). ReachOut produces youth-specific resources, co-designed with young people, and a safe, online community to engage young people in their help-seeking journey.

ReachOut's service model facilitates engagement because we address specific barriers that young people experience in relation to mental health care. ReachOut is a service *for* young people, *by* young people. Services and resources provided by ReachOut are free of charge, easily accessible on any computer or smart device with internet connectivity, and enable a sense of agency, as young people can choose how and when to engage with their help-seeking process.

A positive impact on youth
mental health

At ReachOut, we are guided
by a clear, simple ambition:
helping young people feel better.

At ReachOut, we are guided by a clear, simple ambition: helping young people feel better:

- better in the moments when they most need help
- better about who they are and their place in the world.

This also means supporting young people to be:

- better able to cope with the challenges they are facing today
- better set up and equipped to manage when life doesn't go as planned.

The evidence put forward in this document as underpinning our Theory of Change highlights the importance of providing relevant and engaging mental health psychoeducational content to young people (and those that care for them) and reiterates why it is critical to provide digital resources for these users. We also acknowledge that social media is now a part of the psychoeducational landscape, and that ReachOut recognises both the salience and significance of social media in engaging young people in the future. Our PeerChat service is also based on current evidence that peer-to-peer support is beneficial for mental health and wellbeing.

ReachOut has developed its Social Impact Framework with a clear grounding in the literature that supports the assumptions underpinning our Theory of Change. Our work aimed at increasing our impact is ongoing and responds to our engagement with young people now and in the future. We will continue to stay across innovative research on how digital services can help young people, and those around them, feeling supported when times are tough, so that we can achieve the outcomes we have articulated in our Theory of Change.

For more information about our Social Impact Framework or our Theory of Change, please email the Research and Impact team at research@reachout.com.

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