

Bridging the Gap: Use of Mental Health Apps in the Adolescent Population

Estabelecendo Pontes: Aplicações Dedicadas à Saúde Mental na População Adolescente

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Dear Editor,

It was with great interest that we read the article "Perspectives on the Implementation of Mental Health Apps on Clinical Interventions in Mental Health" published in the July-August 2024 issue of Acta Médica Portuguesa.¹ In the article, the authors explore the growing interest in mobile mental health apps as a potential tool for managing mental health conditions, but we would like to take the discussion further, focusing on a specific population, namely adolescents.

According to the global assessment of the World Health Organization, one in seven individuals between the ages of 10 and 19 experiences a mental disorder, accounting for 13% of the global burden of disease in this age group.² However, the current mental healthcare infrastructure is not built to support and effectively treat the vast number of young people experiencing mental health challenges.³

As the article highlights, we are at a crucial point in the integration of digital solutions in the healthcare system,¹ and they may be part of an answer to the large gap between the need and delivery of mental health services for adolescents.⁴ However, existing research into the use of mental health apps in the adolescent population indicates that their effectiveness remains uncertain, with most studies focusing on depression and anxiety, and little research into other clinical areas.⁴ Adding to this, research shows that most available mental health apps are not evidence based,

and they will continue to come from multiple companies, lacking scientific validation and without a structured classification that differentiates content according to users' ages.⁵ Even so, as ubiquitous users of new technologies, adolescents will continue to have access to these apps, and we can only speculate about the impact this may have on their mental health, with very few studies tracking the long-term outcomes of digital mental health interventions.⁵

As for chatbots, these software applications can be specially appealing to many youths, since they can deliver information in a conversational, human-like manner, and provide users anonymity, thereby eliminating social stigma as a barrier that often prevents successful linkage with mental health services.⁴ But what is easier for an adolescent in distress: to navigate the internet in search of help, or face the disclosure of their problems with an adult in order to get an appointment with a qualified professional?

In times of disparity between the exponential development of artificial intelligence tools and the lack of human resources, mental health apps seem to hold great promise in delivering accessible interventions in mental health,⁴ but, until then, we cannot forget how vulnerable our adolescents can be.

AUTHOR CONTRIBUTIONS

All authors contributed equally to this manuscript.

COMPETING INTERESTS

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Eduarda COSTA¹, Miguel HENRIQUES²

1. Serviço de Psiquiatria e Saúde Mental da Infância e Adolescência. Unidade Local de Saúde Santa Maria. Lisboa. Portugal.

2. Unidade de Saúde Familiar Conde da Lousã. Unidade Local de Saúde Amadora-Sintra. Amadora. Portugal.

✉ **Autor correspondente:** Eduarda Costa. eduarda.costa@ulssm.min-saude.pt

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