JMIR MENTAL HEALTH Blattert et al

## Original Paper

## Health Needs for Suicide Prevention and Acceptance of e-Mental Health Interventions in Adolescents and Young Adults: Qualitative Study

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## **Abstract**

**Background:** Adolescence is a phase of higher vulnerability for suicidal behavior. In Germany, almost 500 adolescents and young adults aged 15-25 years commit suicide each year. Youths in rural areas are characterized by a higher likelihood of poorer mental health. In rural areas, appropriate support for adolescents and young adults in mental health crises is difficult to access. The general acceptability of digital communication in youths can make the provision of an eHealth tool a promising strategy.

**Objective:** The aim of this study was to explore the health needs regarding suicide prevention for adolescents and young adults in rural areas of Germany and Switzerland and to identify characteristics of suitable e-mental health interventions.

**Methods:** This study reports on a qualitative secondary analysis of archived data, which had been collected through formative participatory research. Using 32 semistructured interviews (individually or in groups of 2) with 13 adolescents and young adults (aged 18-25 years) and 23 experts from relevant fields, we applied a deductive-inductive methodological approach and used qualitative content analyses according to Kuckartz (2016).

**Results:** Experts as well as adolescents and young adults have reported health needs in digital suicide prevention. The health needs for rural adolescents and young adults in crises were characterized by several categories. First, the need for suicide prevention in general was highlighted. Additionally, the need for a peer concept and web-based suicide prevention were stressed. The factors influencing the acceptability of a peer-driven, web-based support were related to low-threshold access, lifelike intervention, anonymity, and trustworthiness.

**Conclusions:** The results suggest a need for suicide prevention services for adolescents and young adults in this rural setting. Peer-driven and web-based suicide prevention services may add an important element of support during crises. By establishing such a service, an improvement in mental health support and well-being could be enabled. These services should be developed with the participation of the target group, taking anonymity, trustworthiness, and low-threshold access into account.

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