ISRCTN70980706 https://doi.org/10.1186/ISRCTN70980706

Understanding engagement with an app targeting harmful drinking: Development and evaluation of the BRANCH smartphone app

Submission date
23/07/2018

Recruitment status
No longer recruiting

Registration date
26/07/2018

Overall study status
Completed

Last Edited
17/12/2018

Condition category
Other

[_] Prospectively registered
[_] Protocol
[_] Statistical analysis plan
[X] Results
[_] Individual participant data

Plain English summary of protocol

Background and study aims
Excessive alcohol consumption accounts for approximately 3 million deaths per year and is the third highest risk factor for ill-health, behind only smoking and high blood pressure. In the UK when young adults drink at hazardous or harmful levels, their consumption is the highest amongst all age groups. Young adults are reluctant to seek professional help for mental health problems when necessary. When they do seek help via primary care, harmful drinking in younger adults is under-identified by doctors. Therefore, finding ways to reduce harmful alcohol consumption in this population is a challenge. Electronic screening and brief interventions (eSBI) are typically delivered via the internet and smartphone apps, including tools such as alcohol screening, feedback on drinking and information on risks and advice for cutting down, and have shown to be effective in reducing harmful alcohol-use. However, a major issue with the eSBI app is sufficiently engaging individuals with the app, with the app not being used as frequently as necessary.
The aim of this study was to develop a smartphone app called 'BRANCH', which included new strategies to target harmful drinking, and to examine whether it improved use of the app, along with whether it reduced harmful drinking.

Who can participate?
18-30 year olds from the UK who drink alcohol at a harmful level and have a smartphone

What does the study involve?
The study involves comparing a comprehensive version of the app 'BRANCH', to a basic version. The comprehensive version includes screening and personalised feedback for alcohol use, the option to set a goal to reduce alcohol use, and information on alcohol risks and advice for cutting down, along with new strategies such as tailoring to motivations for cutting down reminders and a Twitter style newsfeed. The basic version just includes screening and personalised feedback for alcohol use, the option to set a goal to reduce alcohol use, information on alcohol risks and advice for cutting down. Participants are allocated at random to either the basic or comprehensive version of the app, and asked to use it to record their alcohol use.

What are the benefits and risks of participating?
The possible benefit to participants is that taking part could potentially reduce their harmful alcohol use and therefore reduce their risks of alcohol-related disease. There are no known risks to participants taking part in this study.

Where is the study run from?
King's College London

When is the study starting and how long is it expected to run for?
January 2015 to December 2017

Who is funding the study?
1. Medical Research Council (MRC) (UK)
2. Collaboration for Leadership in Applied Heath Research and Care in South London (CLAHRC) (UK)

Who is the main contact?
Joanna Milward
joanna.milward@kcl.ac.uk

Contact information

Type(s)
Scientific

Contact name
Mrs Joanna Milward

Contact details
ASB
4 Windsor Walk
Denmark Hill
London
United Kingdom
SE58BB
+44 (0)207 848 0437
joanna.milward@kcl.ac.uk

Additional identifiers

Protocol serial number
1

Study information

Scientific Title
Development and evaluation of a smartphone app targeting harmful drinking in young adults: How do we promote engagement to improve clinical outcomes?

Acronym

BRANCH

Study objectives
1. Null hypothesis: The addition of EPSs in an app targeting harmful drinking in young adults would not result in a significant increased use measured by number of logins compared to the same app including only core-components and basic strategies 28 days post randomisation.
2. Null hypothesis: Users of the comprehensive version of the app would not show a significant reduction in harmful drinking score as measured by the AUDIT – C score compared to users of the basic version at 6-month post randomisation.
3. Null hypothesis: Engagers in the intervention arm who logged into BRANCH more than once would not show a significant reduction in harmful drinking as measured by the AUDIT – C score compared to non-engagers in both treatment arms.

Ethics approval required
Old ethics approval format

Ethics approval(s)
King's College London University Ethics Committee, 09/08/2016, RESCMR-16/17-2896

Primary study design
Interventional

Study design
Interventional single-centre randomised controlled trial

Study type(s)
Treatment

Health condition(s) or problem(s) studied
Harmful drinking

Interventions
This trial uses an electronic screening and brief intervention app targeting harmful drinking in young adults aged 18-30. Participants will be randomised into either the intervention or control group using an online automated system.
Participants in the intervention group receive a comprehensive version of the app, including screening and personalised feedback for alcohol use, the option to set a goal to reduce alcohol use, information on alcohol risks and advice for cutting down and novel engagement promoting strategies. These include a social Twitter-style newsfeed, tailoring to motivations for cutting down and goals via the newsfeed, a social teams section based on the principles of gamification, extended infographic information on advice for cutting down and in-app reminders on the newsfeed.
Participants in the control group receive a basic version of the app including screening and personalised feedback for alcohol use, the option to set a goal to reduce alcohol use, information on alcohol risks and advice for cutting down. Minimal engagement promoting strategies included. For example, all participants received an app which was multimedia, interactive, with single exposure delivery of information. The basic version included no tailoring, gamification, reminders or social features. All other features of the app remained the same, including the branding, overall look and feel and aesthetic design.

Intervention Type

Behavioural

Primary outcome(s)
Number of logins over the 28 day study period

Key secondary outcome(s)
Harmful alcohol consumption, assessed using the Alcohol Use Disorders Identification Test for Consumption (AUDIT-C) at the baseline and after 6 months

Completion date
23/06/2018

Eligibility

Key inclusion criteria
1. Aged 18-30 years old
2. Harmful level of drinking (scored ≥ 7 on AUDIT-C)
3. Living in UK
4. Owns a smartphone

Participant type(s)
Other

Healthy volunteers allowed
No

Age group
Adult

Lower age limit
18 Years

Upper age limit
30 Years

Sex
All

Key exclusion criteria
N/A

Date of first enrolment
01/01/2017

Date of final enrolment
30/12/2017

Locations

Countries of recruitment

United Kingdom

England

Study participating centre
King's College London
ASB
4 Windsor Walk
Denmark Hill
London
United Kingdom
SE58BB

Sponsor information

Organisation
King's College London

ROR
https://ror.org/0220mzb33

Funder(s)

Funder type
Not defined

Funder Name
Medical Research Council

Alternative Name(s)
Medical Research Council (United Kingdom), UK Medical Research Council, Medical Research Committee and Advisory Council, MRC

Funding Body Type
Government organisation

Funding Body Subtype
National government

Location
United Kingdom

Funder Name
South London Collaboration for Leadership in Applied Heath Research and Care in (CLAHRC)

Results and Publications

Individual participant data (IPD) sharing plan
The data sharing plans for the current study are unknown and will be made available at a later date

IPD sharing plan summary
Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	qualitative study results	13/12/2018		Yes	No