

Results Summary For Each Participant

Participant 1. Participant 1 (male, 49) presented with *extremely severe* symptoms of depression, *normal* levels of anxiety and *moderate* levels of stress, as measured by the DASS-21, and *moderately high* levels of life dysfunction as measured by the OQ-45.2. He had been diagnosed with depression and posttraumatic stress disorder (PTSD) over 11 years previously. He was not currently receiving counselling, but was taking antidepressant medication. Participant 1 had co-morbid asthma, slept on average for four to six hours per night, and described himself as having an average level of physical fitness. At initial screening, he disagreed that his psychological health was likely to improve as a result of using the app and disagreed that he was motivated to do what the app suggested.

At post-intervention, using the suggested classifications of the DASS-21 and OQ-45.2 scoring manuals, Participant 1's symptoms of depression had improved to *moderate*, anxiety was unchanged at *normal*, and stress was unchanged at *moderate*, as measured by the DASS-21, and levels of life dysfunction had improved to *moderate* as measured by the OQ-45.2. Using the Jacobson and Truax (1991) classifications for clinical significance, Participant 1's depression was *improved*, anxiety was *unchanged*, stress was *unchanged*, and life functioning was *improved* after using the app.

Participant 2. Participant 2 (female, 47) presented with *mild* symptoms of depression, *extremely severe* levels of anxiety, and *extremely severe* levels of stress, as measured by the DASS-21, and *high* levels of life dysfunction as measured by the OQ-45.2. She had been diagnosed with depression and panic disorder over 11 years previously. She was not currently receiving counselling or taking any type of psychotropic medication. Participant 2 had no co-morbid medical conditions, slept on average for seven to eight hours per night, and described herself as having a good level of physical fitness. At initial

screening, she was ambivalent about her psychological health improving as a result of using the app and ambivalent about being motivated to do what the app suggested.

At post-intervention, using the suggested classifications of the DASS-21 and OQ-45.2 scoring manuals, Participant 2's symptoms of depression had improved to *normal*, anxiety had improved to *moderate*, and stress had improved to *moderate*, as measured by the DASS-21, and levels of life dysfunction had improved to *moderate* as measured by the OQ-45.2. Using the Jacobson and Truax (1991) classifications for clinical significance, Participant 2's depression was *unchanged*, anxiety was *improved*, stress was *improved*, and life functioning was *improved* after using the app.

Participant 3. Participant 3 (female, 25) presented with *normal* symptoms of depression, *mild* levels of anxiety, and *mild* levels of stress, as measured by the DASS-21, and *moderate* levels of life dysfunction as measured by the OQ-45.2. She had been diagnosed with anxiety (social, general and agoraphobia) six to ten years previously. She was not currently receiving counselling or taking any type of psychotropic medication. Participant 3 had no co-morbid medical conditions, slept on average for four to six hours per night, and described herself as having a poor level of physical fitness. At initial screening, she was ambivalent about her psychological health improving as a result of using the app and ambivalent about being motivated to do what the app suggested.

At post-intervention, using the suggested classifications of the DASS-21 and OQ-45.2 scoring manuals, Participant 3's symptoms of depression had declined to *mild*, anxiety had declined to *moderate*, and stress was unchanged at *mild*, as measured by the DASS-21, and levels of life dysfunction had improved to *low* as measured by the OQ-45.2. Using the Jacobson and Truax (1991) classifications for clinical significance, Participant 3's depression had *deteriorated*, anxiety was *unchanged*, stress was *unchanged*, and life functioning was *improved* after using the app.

Participant 4. Participant 4 (female, 20) presented with *moderate* symptoms of depression, *extremely severe* levels of anxiety, and *severe* levels of stress, as measured by the DASS-21, and *moderately high* levels of life dysfunction as measured by the OQ-45.2. She had been diagnosed with depression, social anxiety, and panic disorder one to five years previously. She was currently seeing a psychiatrist for counselling and taking antidepressant medication. Participant 4 had no co-morbid medical conditions, slept on average for seven to eight hours per night, and described herself as having an average level of physical fitness. At initial screening, she was ambivalent about her psychological health improving as a result of using the app but agreed that she was motivated to do what the app suggested.

At post-intervention, using the suggested classifications of the DASS-21 and OQ-45.2 scoring manuals, Participant 4's symptoms of depression had improved to *mild*, anxiety had improved to *moderate*, and stress had improved to *moderate*, as measured by the DASS-21, and levels of life dysfunction were unchanged at *moderately high* as measured by the OQ-45.2. Using the Jacobson and Truax (1991) classifications for clinical significance, Participant 4's depression had *recovered*, anxiety was *improved*, stress was *improved*, and life functioning was *unchanged* after using the app.