

Evidence-Based Intervention Related to: Behavioral Health

Title	Racial Differences in the Effectiveness of Internet-Delivered Mental Health Care
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Aim	Primary care physicians from 26 primary care clinics in Pittsburgh, PA conducted a randomized controlled trial to determine if computerized cognitive behavioral therapy (cCBT) was as effective for African American patients as it is for white patients.
Study Design	Randomized controlled trial
Population	African American and white adults with elevated mood and/or anxiety symptoms
Sample Size	Participants (n=704) were randomized into one of three conditions: cCBT only (n=301), cCBT plus access to a moderated Internet Support Group (ISG) (n=302), or their PCP's usual care (UC) (n=101).
Intervention	<p>Participants in either of the intervention conditions completed the cCBT program "Beating the Blues" which consists of eight 50-minute interactive sessions composed of text and audiovisual clips, with assignments to complete between weekly sessions. College graduates with mental health research experience served as care coaches. The care coaches monitored the cCBT patients' progress for 6 months, providing support and encouraging engagement with the cCBT program. Care coaches emailed or called participants who reported worsening symptoms, had not completed a session in over 2 weeks, or had technical issues accessing the program. Care coaches reviewed their patient panel with a clinical specialty team consisting of a psychiatrist, psychologist, and general practitioner during weekly team supervision meetings.</p> <p>The Internet Support Group consisted of discussion boards created by the care manager moderator and participants, links to resources such as crisis hotlines and videos on topics such as insomnia and exercise. Participants were assigned usernames and reminded not to post identifying information to protect confidentiality. The care manager moderator reviewed posts for suicidal ideation or inappropriate content, and users could flag posts as well.</p>
Results	At 6 months, there was no significant difference in depression or anxiety scores for white participants in either cCBT group compared to UC. African American participants showed a significantly greater decrease in depression ($p < 0.01$) and anxiety ($p < 0.01$) scores compared to UC.
Conclusion	This study suggests that cCBT may be an efficient and scalable first step to eliminating disparities in mental health care.