Internet-Delivered Treatment for Depression, Anxiety, and Stress in University Students: A Patient Preference Trial

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Abstract

Background: In recent years, University counseling and mental health services have reported an increase in the number of clients seeking services and in yearly visits. This trend has been observed at many universities, indicating that behavioral and mental health issues pose significant problems for many college students. With the move toward the provision of value- and quality-based health care, there is an increasing focus on person-centered health care and patient preference of treatment. A healthcare service that is person-centered considers the specific needs of an individual, and the service is subsequently tailored to meet the person's needs. As a result, health care professionals are giving increased recognition to patients' unique insights into their own health and their preferences for treatments, which is increasing patients' involvement in their own treatment decisions. This increase in patient involvement is an important step towards quality improvements in mental health services as it is associated with improved health outcomes.

Objective: The aim of this study is to assess the acceptability and proof of concept of Internet-delivered patient preference treatment for depression, anxiety, and stress for university students.

Methods: The study is an open feasibility trial of the SilverCloud programs for depression (Space from Depression), anxiety (Space from Anxiety), and stress (Space from Stress). All 3 are 8-module Internet-delivered cognitive behavioral therapy (iCBT) intervention programs. Participants (N=105) are assigned a supporter who provides weekly feedback on progress and exercises. Primary outcome measures are the Patient Health Questionnaire (PHQ-9), Generalized Anxiety Disorder 7 (GAD-7), and stress subscale of the Depression Anxiety Stress Scales (DASS-21) for assessment of symptoms of depression, anxiety, and stress, respectively. Based on these initial measures, patients are given a choice between the 3 intervention programs.

Results: Preliminary results on the current sample (n=62) show that the majority of participants are female (74%). Active engagement (meaning logging on and using the program content) has been high. To date participants have shown significant decreases in symptoms of depression, anxiety, and stress across all 3 groups, indicating a positive effect for treatment across time points. The final results will be available for June 2017.

Conclusions: It is anticipated that the study will inform the researchers and service personnel of the programs' potential to reduce depression, anxiety, and stress in a student population as well as the potential for the protocols to be employed in a future trial. In addition, it will provide insight into students' preference of intervention, their engagement with the programs, their user experience, and their satisfaction with the online delivery format.

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ClinicalTrial: Clinicaltrials.gov NCT02614443; https://clinicaltrials.gov/ct2/show/NCT02614443 (Archived by WebCite at http://www.webcitation.org/6mYdXRWFY).

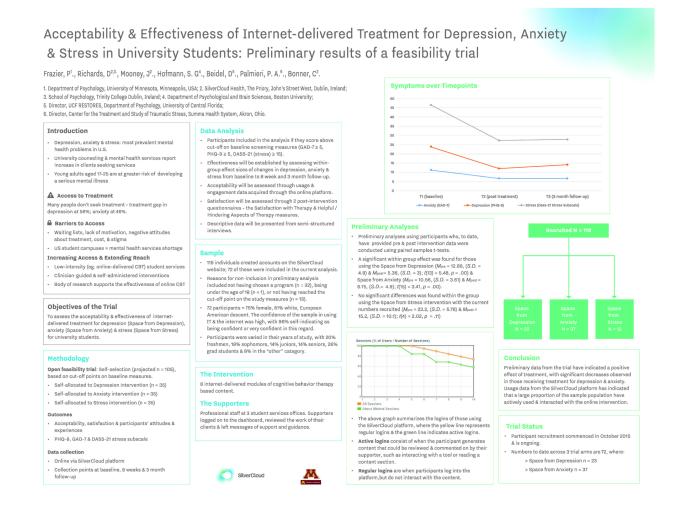
(*iproc 2016;2(1):e5*) doi: <u>10.2196/iproc.6090</u>

KEYWORDS

depression; anxiety; stress; online interventions; university students; cognitive behavioral therapy

This poster was presented at the Connected Health Symposiumis displayed as an image in Figure 1 and as a PDF in Multimedia2016, October 20-21, Boston, MA, United States. The posterAppendix 1.

Figure 1. Poster.



Multimedia Appendix 1

Poster.

[PDF File (Adobe PDF File), 2MB-Multimedia Appendix 1]



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