Abstract

Hong Kong was embroiled in social unrest and COVID-19 since 2019 and prevalence of depression, anxiety disorders and PTSD has been rising in the local population. We examined the change in profile of help-seekers in a community setting, re-evaluated the effectiveness of LICBT and investigated on the predictors of its effectiveness. Data from 289 patients who received two or more LICBT sessions, produced two or more outcome scores and had finished their LICBT during 2021-23 was analyzed. Outcome was evaluated with the patient health questionnaire depression scale (PHQ-9) and the scale of anxiety (GAD-7). Data completeness was high. All participants who completed LICBT had paired (pre-post) outcome scores. Participants displayed significantly higher severity of depression and anxiety that also correlated with their post-traumatic stress symptoms. Upon LICBT, significant improvements were shown in the comparison of pre- and post-treatment scores on PHQ-9 and GAD-7 with large effect sizes (depression: $d = 0.901$; anxiety: $d = 0.998$). The recovery rates of patients with mild-to-moderate depression or anxiety were 60.6% or 58.6% respectively. Patient's initial severity of depression, anxiety as well as post-traumatic stress symptom factors ("intrusion & hyperarousal", "avoidance") and number of sessions received were predictive of post-treatment recovery. Reliable improvement in or before session two was also predictive of post-treatment recovery. The results gave further support to the effectiveness of LICBT in a local community setting, which was comparable to those found in international studies. Given the increased mental health burden upon social unrest and COVID-19 pandemic, LICBT could be a cost-efficient way forward for current mental health services in Hong Kong.

Keywords: low-intensity cognitive behavioral therapy (LICBT); effectiveness; recovery; depression; anxiety; predictors