



Barriers and Facilitators When Delivering Cognitive Behavior Therapy for Insomnia (CBT-I) in Asian Youths – A Focus Group Study

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INTRODUCTION:

DATA ANALYSIS:

The Epidemiology of Insomnia in Adolescents

In Asian countries, over 30% of adolescents have sleep complaints; Around 18% of them meet the diagnostic criteria of insomnia according to DSM-IV.

Asian Adolescents' Sleep Characteristics As Compared to Caucasian Counterparts from the US

Later bedtime leads to less sleep time and higher rate of daytime sleepiness; Shorter sleep duration

How to better support adolescents with sleep disturbances? - Cognitive Behavioral Therapy for Insomnia

1/ Targets behavioral and cognitive factors that perpetuate insomnia; 2/ Typically includes sleep restriction, stimulus control, cognitive restructuring, relaxation training, and sleep hygiene education; 3/ Usually 6-8 sessions which can be delivered individually or in groups

Treatment adherence of Adolescents

1/Low attendance rate; 2/Low commitment rate; 3/Low compliance to therapist's assigned tasks.

*58% drop-out was found from the Adolescent group intervention (Bootzin & Stevens, 2005)

Qualitative analysis will be conducted.

A codebook will be developed with 5-parental codes (major themes) and with more detailed child codes (sub-themes):

- Motivations to join
- Challenges for attending/complying
- Strengths of current treatment design
- Observed changes after participating in the group
- Suggestions toward future sessions

The codebook and the transcriptions will be imported to a qualitative analysis software, Dedoose, for coding.

OBJECTIVES:

IMPLICATIONS:

In this qualitative study, we aim to explore the experiences of Asian Adolescents after participating in the CBT-I group, including the barriers and facilitators for them to join, actively participate, and complete the tasks from each session.

The preliminary results from this study will lay the foundation for developing culturally adapted CBT-I for Asian populations and will facilitate future development of randomized controlled trials of sleep intervention in adolescents in Asia.

STUDY DESIGN:

REFERENCES:

- Youth participants (aged 12-24 years) who complete 8-session group-based CBT-I will be invited to join this focus group study.
- Focus group format:
 - Focus Group Interview Outlines:
 - Introduction (0-5min)
 - Motivations to attend the group (5-20min)
 - Experiences of currently accepted assessment and treatment methods for insomnia (20-75min)
 - Ways therapy should be delivered (75-90min)

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Chen, T., Wu, Z., Shen, Z., Zhang, J., Shen, X., & Li, S. (2014). Sleep duration in Chinese adolescents: biological, environmental, and behavioral predictors. *Sleep medicine, 15*(11), 1345-1353.

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Manber, R., Bernert, R. A., Suh, S., Nowakowski, S., Siebern, A. T., & Ong, J. C. (2011). CBT for insomnia in patients with high and low depressive symptom severity: adherence and clinical outcomes. *Journal of Clinical Sleep Medicine, 7*(6), 645-652.

Venkatesh, V., Thong, J. Y., Chan, F. K., Hu, P. J. H., & Brown, S. A. (2011). Extending the two-stage information systems continuance model: Incorporating UTAUT predictors and the role of context. *Information Systems Journal, 21*(6), 527-555.

8-10 subjects

≈90mins

Audiotaped