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**MULTIFAMILY PSYCHOEDUCATION GROUPS: COMPARING EMAIL PSYCHOEDUCATION TO LIVE GROUPS**

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**INTRODUCTION:** Mood and anxiety disorders are common in youth and are associated with reduced quality of life and high costs. Access to effective treatment is limited due to long waitlists, high costs and perceived social stigma. Given the high prevalence and treatment barriers, there is a need for brief, inexpensive and effective interventions.

Psychoeducational interventions are inexpensive, easily administered and more accessible than conventional interventions. There is some evidence that these are effective in treating or preventing mental disorders.

**AIMS:** To compare knowledge acquired by participants via email or live psychoeducation groups, to measure symptom change and to compare effectiveness of each modality.

**METHODOLOGY:** Psychoeducation (live or via email ) in multifamily groups will be offered. Forty participants in each group will be enrolled. There will be six 40-minute sessions. Primary outcome measures are: change in parental knowledge about the child's disorder and level of expressed emotion in the parent-child relationship. Measures are Understanding of Mood Disorders Questionnaire and Expressed Emotion Adjective Checklist. To measure changes in symptoms the Children's Depression Inventory and Multidimensional Anxiety Scale for Children will be used. Questionnaires will be administered before, after and at 4 months.

**RESULTS:** Data entered in Excel format. ANOVA used to compare effectiveness of group versus email psychoeducation. Both methods equally effective in delivering psychoeducation.

**CONCLUSION:** Ontario has long waitlists for youth with mood and anxiety disorders. Psychoeducation is effective in increasing understanding of illness, improving symptoms and problem-solving skills of the family. Multifamily group versus email psychoeducation will facilitate access.