

Title: A Hybrid Implementation-Effectiveness Trial of Group CBT for Anxiety in Urban Schools – Training the Workforce in Community Settings

Authors: Billie S. Schwartz<sup>1</sup>, Muniya Khanna<sup>1,2</sup>, Jaclyn Cacia<sup>2</sup>, Shannon Bressler<sup>1</sup>, Rebecca Kanine<sup>1</sup>, Lauren Swift<sup>1</sup>, Andrew Orapallo<sup>1</sup>, and Ricardo Eiraldi<sup>1,3</sup>

Author Affiliation: <sup>1</sup>The Children's Hospital of Philadelphia, <sup>2</sup>The Child and Adult Center for Anxiety and OCD, & <sup>3</sup>Perelman School of Medicine, University of Pennsylvania

**Background:** Anxiety disorders are highly prevalent in youth and can lead to problems with social interactions, academic achievement, and adjustment. Community mental health (CMH) agencies are frontline agents for psychosocial treatment, but often lack knowledge and resources for proper adherence of evidence-based practices (EBP).

**Aims:** The need to focus on training mental health professionals in non-traditional settings on EBPs has increased in recent years (Hershell et al., 2010; Southam-Gerow et al., 2010). However, traditional training methods (e.g., workshops, seminars) have not resulted in broad uptake or improved practice quality (Cartreine et al., 2010). Few studies exist comparing training methods making it difficult to establish best practices. This study seeks to address this gap to improve quality of CMH interventions.

**Methods:** This study is a NIMH-funded 3-arm parallel group, Type 2 hybrid effectiveness and implementation RCT evaluating implementation of CBT for child anxiety in schools. The first aim compares the effectiveness of a brief (8-session) group CBT for anxious youth (CATS) to an existing (12-session) GCBT protocol (FRIENDS) in public schools. Simultaneously, our team is testing the effectiveness two implementation training approaches: (1) train-the-trainer and (2) train-the-trainer plus expert consultation. Implementation outcomes are implementation fidelity and cost-effectiveness.

**Results:** As this is the first year of the study, outcome data are not yet available. We will describe the startup process (e.g., building community partnerships; training workshops) and the use of technology. The key components EBPs will be outlined. Finally, we will discuss challenges and limitations and directions for future research in clinical training in community settings.

**Conclusions:** This study aims to demonstrate that (a) CMH therapists and supervisors can implement an anxiety treatment with fidelity; and (b) use of a briefer, culturally-sensitive group CBT treatment (CATS) can lead to improved outcomes for children with anxiety similar to other evidenced-based treatments (FRIENDS). Results concerning the use of technology to provide remote support could also contribute to the dissemination and implementation of EBPs in schools and CMHs; therefore increasing the training of the nontraditional workforce.

**Acknowledgements/Funding Sources:** National Institute of Health, 1R01MH108555-01