

EXAMINING SOCIOCULTURAL PERCEPTIONS OF MDD SYMPTOMS THROUGH ONLINE EDUCATION

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STUDY OBJECTIVES

Major depressive disorder (MDD) is the most prevalent mental disorder in the United States, yet little is known about the sociocultural perception of mental illness.¹ Recent studies have indicated that certain ethnicities are independent predictors of illness severity at hospital presentation, pointing to the possibility of various thresholds for understanding of symptoms.² This study sought to examine whether there were differences in understanding of MDD in an ethnically diverse audience of online learners engaged in disease-specific education.^{3,4}

METHODS

FIGURE 1. WebMD Patient Education Activities

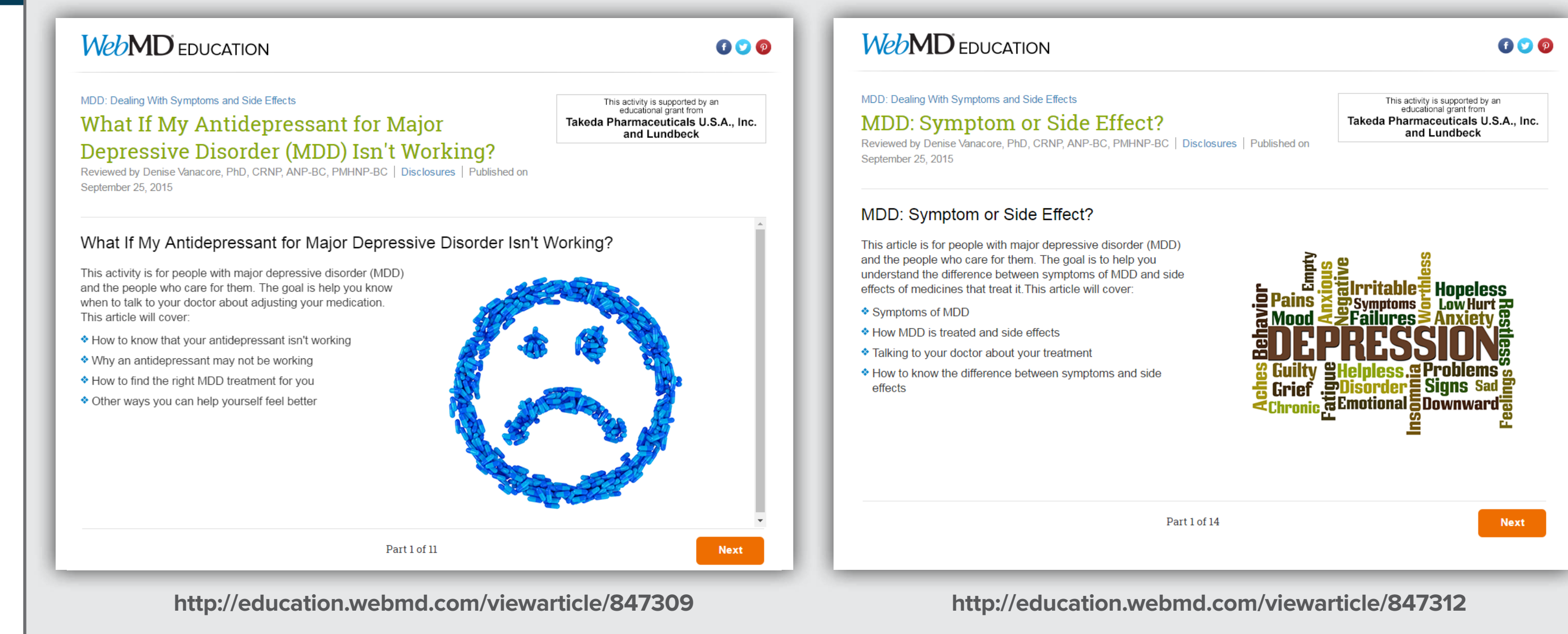
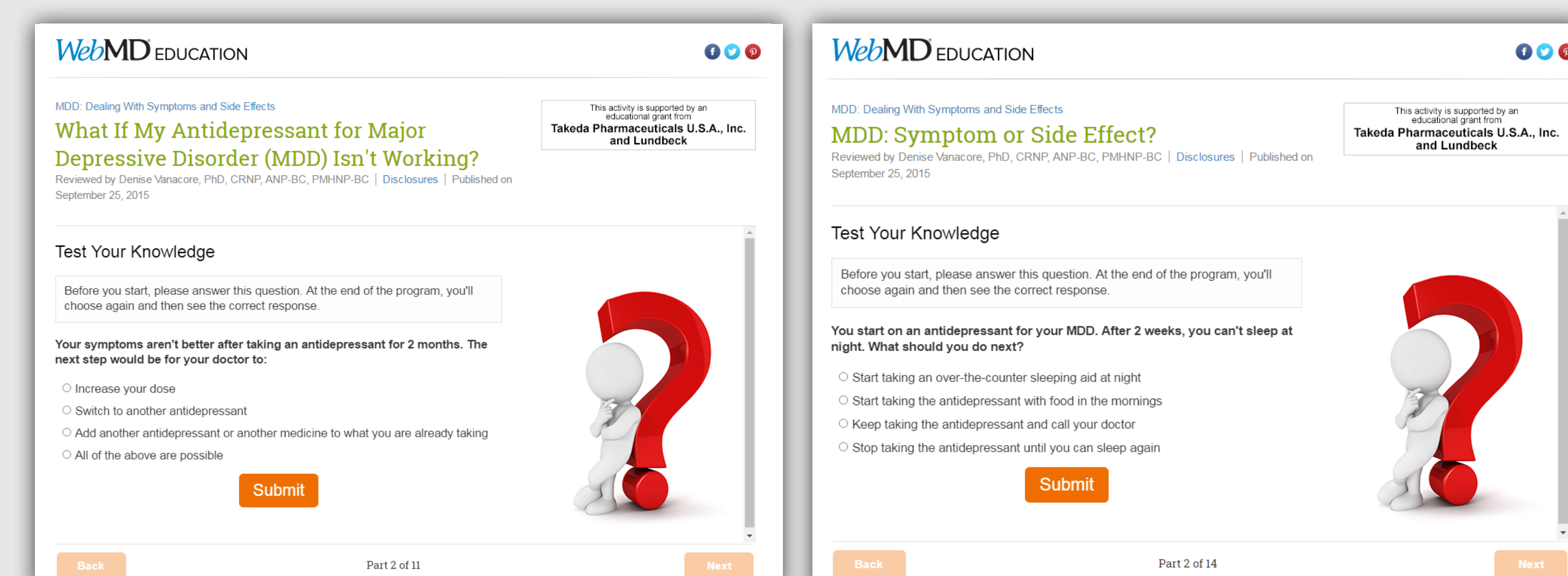


FIGURE 2. Demographic Questions

Help us to better understand your interest in this activity

Are you: Male Female	Why are you interested in this? (Select the one that best applies to you) I have this condition I am a caregiver for someone with this condition I am a family member of someone with this condition I am simply interested in learning more about this condition	What is your race/ethnicity? American Indian or Alaska Native Asian Black or African-American Native Hawaiian or other Pacific Islander White, non-Hispanic Hispanic or Latino I prefer not to answer
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FIGURE 3. Pre-/Post-Activity Assessment Questions



RESULTS

For both activities, differences and improvements in knowledge across ethnicities were seen in recognizing symptoms of MDD, side effects, and therapy options if an antidepressant is not working. Knowledge improvements were as follows:

- White non-Hispanic patients improved from 76% to 83% ($P < .05$; $V = 0.08$), and these patients answered correctly at a significantly higher rate than other groups ($P < .05$) [Figure 4]
- Asian patients improved from 59% to 73% ($P < .05$; $V = 0.15$), however this group answered incorrectly at a significantly higher rate than other ethnic groups ($P < .05$) [Figure 4]
- African American patients improved from 65% to 76% ($P < .05$; $V = 0.12$) [Figure 4]
- Indian patients improved from 53% to 76% ($P < .05$; $V = 0.21$) [Figure 4]
- Hispanic/Latino patients improved from 67% to 75% ($P = .286$; $V = 0.06$) [Figure 4]
- Patients of all ethnicities had an average baseline performance of 64% for the pre-assessment question, improving to 76.6% on post-assessment [Figure 4]
- Caregivers/family members of all ethnicities had an average baseline performance of 70.4% for the pre-assessment question, improving to 79% on post-assessment [Figure 5]
- Asian caregiver/family members answered correctly at a significantly higher rate than other groups ($P < .05$) [Figure 5]

FIGURE 4. Patients Pre-/Post-Activity Assessment Responses

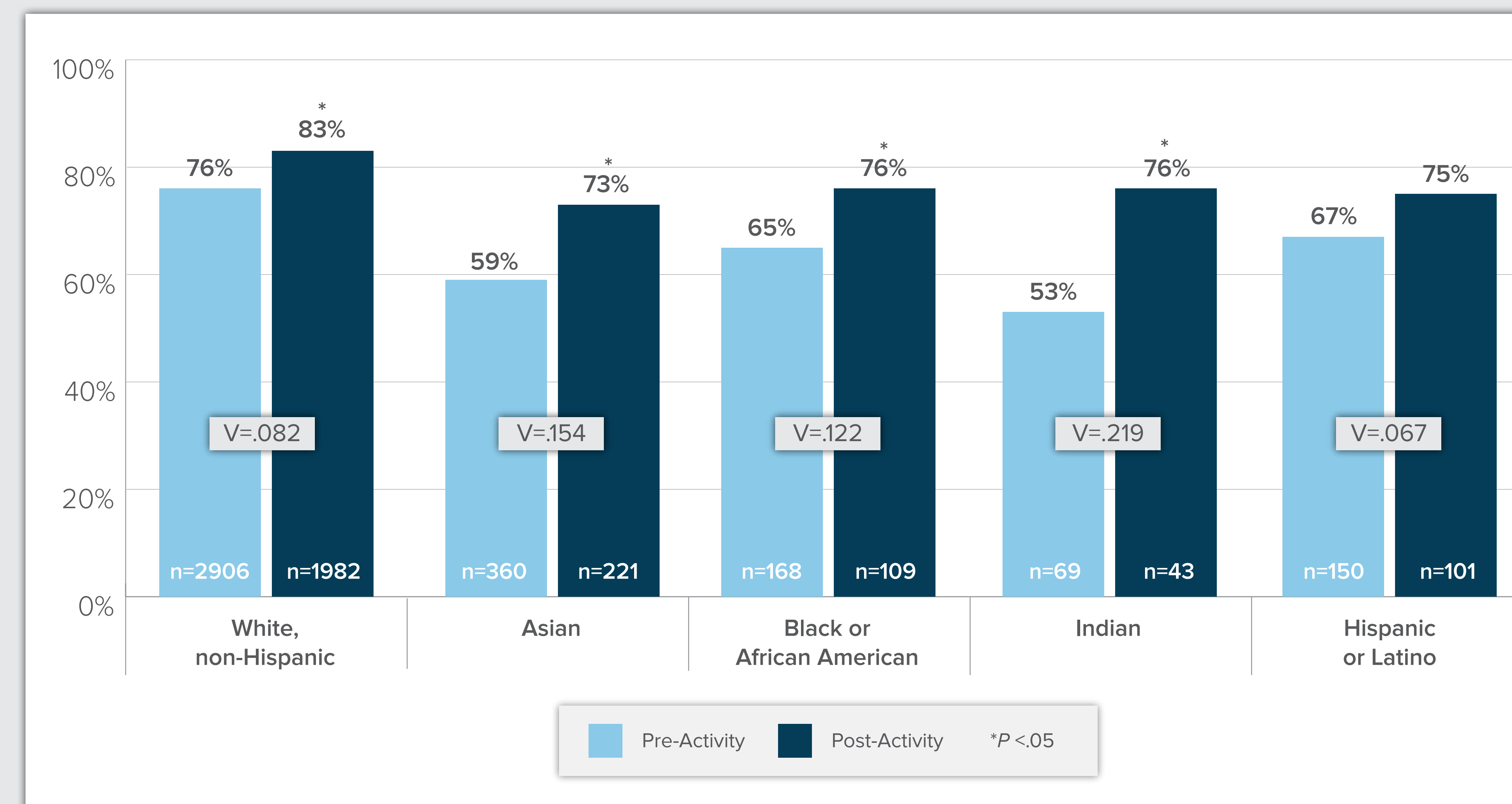
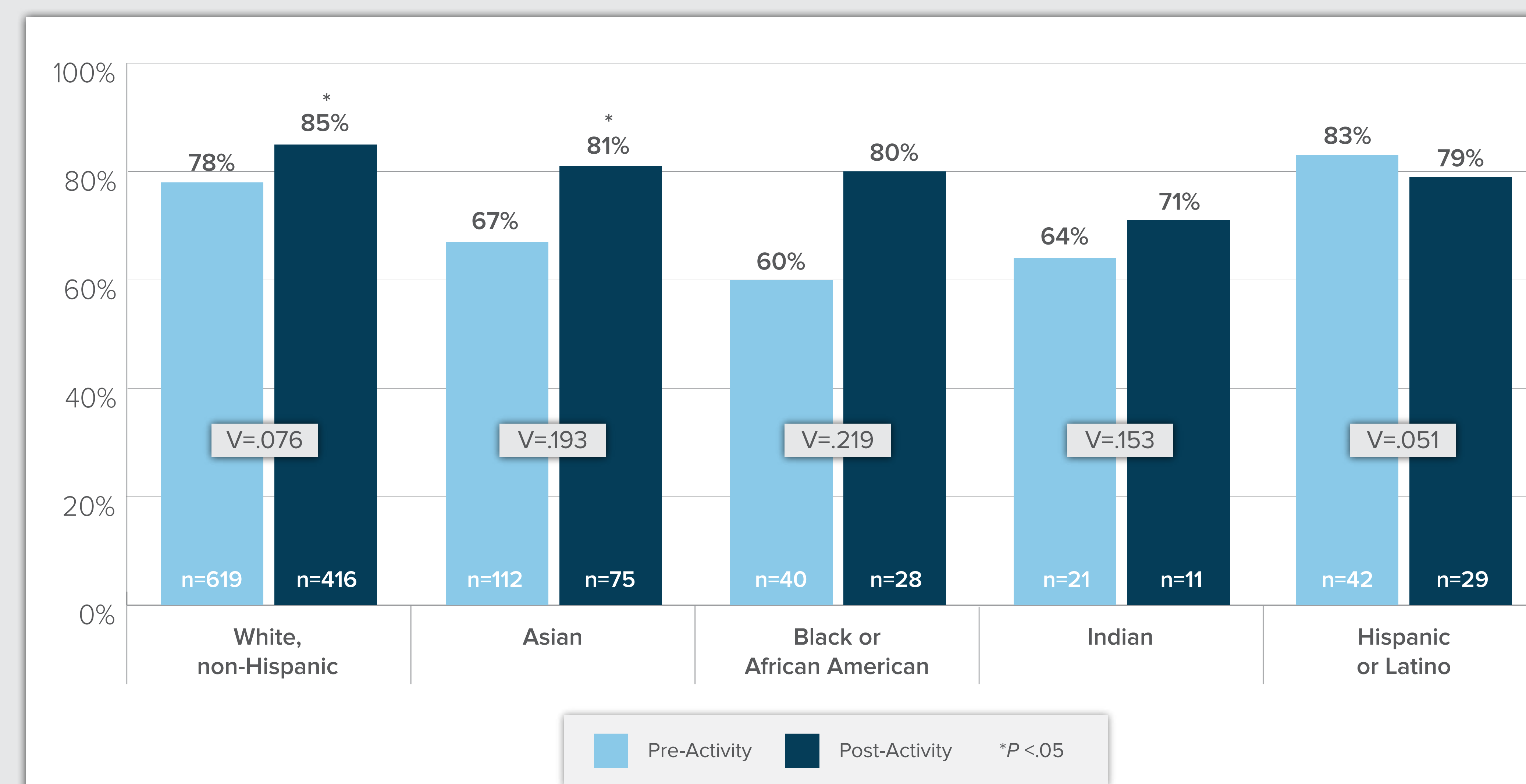


FIGURE 5. Caregiver/Family Member Pre-/Post-Activity Assessment Responses



CONCLUSION

Participation in online patient education led to significant improvements in knowledge on MDD symptoms, side effects, and treatments for most ethnicities examined, with the greatest educational effects observed in Asian and African American patients. Analysis of results demonstrates a need for additional disease-specific education for all groups, with the greatest needs being the in Asian and Hispanic/Latino populations, respectively. This research represents an important step toward informing culturally-specific needs for patient education in mood disorders, in an effort to support improved self-management, enhanced shared decision making, and better patient outcomes.

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