Comparing Two Ways to Treat Serious Worry among Older Adults from Underserved, Racial or Ethnic Minority Communities

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What was the research about?
Serious worry is a problem for up to 30 percent of adults age 55 or older. Serious worry is worry about everyday problems that happens often and is hard to control. It may make people feel restless, tired, or tense. Serious worry can be part of another anxiety condition or a problem on its own.

Compared with other older adults, those adults with serious worry are more likely to have poor physical health, and they often have depression and sleep problems. They are also more likely to have trouble thinking clearly. Doctors don't always recognize or treat serious worry, especially in older adults who live in neighborhoods with few resources. Compared with white adults, African American adults are less likely to be diagnosed and treated for serious worry.

In this study, the research team compared two treatments for older adults who had serious worry. People received one of two treatments from social workers or community health workers, or CHWs. CHWs are trained to teach about health and link people in their community with health and social services.

• In one approach, called Calmer Life, people received up to 12 training sessions for three months to learn healthy ways of thinking and acting. They also learned how to get help with needs such as food or housing. Social workers and CHWs matched trainings to each adult's needs. They included religion or spirituality if requested. The trainers followed up by phone every month for another three months.

• In the other approach, enhanced community care, social workers and CHWs gave each person a customized list of food, housing, mental health, and other services. The social workers or CHWs also called clients every month or more often to offer support and check on symptoms.

What were the results?
Both treatments worked about the same. At the end of the study, people receiving either treatment had

• Less worry
• Less anxiety
• Fewer symptoms of depression
• Better sleep
• More ability to do social activities
• More ability to do daily activities despite disability
• Better quality of life related to mental health

Physical health stayed the same with either treatment.
More people in Calmer Life than in enhanced community care had hospital stays during the second three months of the study. People in Calmer Life were more satisfied with their program six months after the study began than were adults who got enhanced community care. There was no difference at nine months.

**Who was in the study?**
The study included 148 adults, age 50 and older, with significant worry who lived in neighborhoods with few resources. Of these adults, 76 percent were African American, 17 percent were white, 5 percent were Hispanic, and 2 percent were other races. The average age was 67, and 82 percent were women.

**What did the research team do?**
The research team assigned the older adults to one of the two groups by chance. At the start of the study and six and nine months later, the team surveyed the adults about worry, anxiety, depression, and other symptoms.

Clients, counselors, and managers from social service and faith-based agencies helped plan, design, and conduct the study.

**What were the limits of the study?**
The study compared two treatments to each other, but not to usual care. The research team can't be sure the changes in the study are a result of those treatments.

Future research could look at whether these treatments could be delivered to groups instead of one-on-one. Studies could also look at whether the treatments work for people who speak Spanish.

**How can people use the results?**
Social service agencies or health systems can consider using either Calmer Life or enhanced community care or both approaches to help older adults with serious worry.

To learn more about this project, visit www.pcori.org/Stanley087.