# Big White Wall: Ontario Demonstration Research Project

Paul McGary
Director, Mental Health and Addictions, Lakeridge Health



### **Project Overview**

#### **Context:**

• Mental illness affects 1 in 5 people and is a leading cause of disability, associated with more than \$51 billion in annual direct and indirect costs in Canada. Access to mental health care is limited by specialist availability, geography, and the cost of many non-physician mental health care resources (e.g. psychology) are not covered under the provincial health care plan. The advancement and adoption of virtual care, however, is often in the absence of rigorous evaluation and adequate planning for sustainability and spread.

#### **Potential Solution?:**

• The BWW is an internet-based intervention that incorporates several elements of mental health care that have been shown to be effective, in a virtual environment that provides anonymity. First developed and implemented within the National Health Service (NHS) in the UK in 2007, and is now available in the UK, New Zealand, Australia, and the USA with over 35,000 users since its inception. The service is monitored at all times by "Wall Guides" to ensure that users are responded to and that the content posted is appropriate and safe. The BWW has been evaluated in the UK by an independent company (10) and over 3 months, 50% of users showed a significant reduction on symptom scales

## In the news...

## Wild West' mental health apps offer both gold and 'digital snake oil'

Apps aim to bridge gaps in access to effective care across Canada



## **Big White Wall**

Making better mental health available to anyone, anywhere













## Proven Effectiveness in the UK, US and New Zealand

More than 35,000 people have been reached by Big White Wall since 2007.

The platform has been used by patients (via UK's National Health Service), employees, universities and the Ministry of Defense.

#### Source:

Outcomes and Research Summary Report 2015. Big White Wall Big White Wall helps patients with their mental health.

70%

Users reported improvement in at least one aspect of their well-being 46%

Users reported sharing an issue for the first time ever

**57%** 

Patients move into recovery (when referred into Live Therapy by their primary care provider; 12% above UK's national average)

Big White Wall fills in gaps in current service provision.

66%

Log-in after regular business hours (9-5 M-F) 40%

Users who post at
1 AM are from
people with severe
depression
symptoms (PHQ-9)

- People with higher mental health need use Big White Wall at night, when other services are less available.
- Of people not referred by a HCP, 48% had not received treatment for their mental health the month before joining.



## Methodology

- Study Lead: Ontario Telemedicine Network
- Funder: Canada Health Infoway
- Partners: Lakeridge Health, Ontario Shores Centre for Mental Health Sciences, Women's College and St Michael's Hospitals
- Recruitment: 1000 from an array of outpatient mental health and addiction treatment settings, age 16 and older
- Pragmatic RCT with a delayed treatment crossover control. Immediate treatment group will get access to the BWW at time of enrollment and have continuous access for a period of 3 months. The delayed treatment group (DTG) will have no access for the first 3 months, then receive access to the BWW for 3 consecutive months.

## **Project Overview**

# To determine if the use of Big White Wall is able to demonstrate improvements for patients:

- ↓ levels in anxiety
- ↓ levels of depression
- ↓ # of calls to mental health crisis lines
- ↓ avoidable ED visits for mental health related issue
- ↓ avoidable inpatient admissions to hospital related to mental health issue
- ↑ Patient ability and self-efficacy to self-manage



### In Summary: Key Features













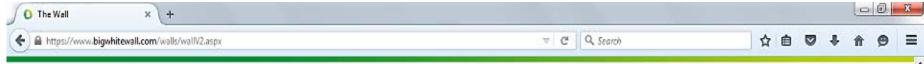








#### **Patient Tools**



#### The Wall

User-generated art therapy through use of image and text to express feelings, and prompt discussion.

#### Users can:

- access materials focused on self-improvement and understanding
- 2. record progress

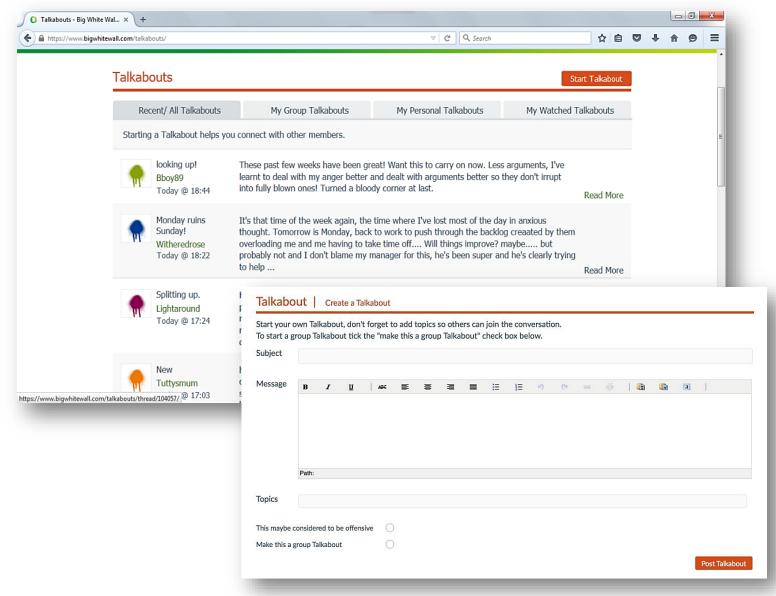




#### **Patient Tools**

#### **Talkabouts**

Members talk to each other about their problems and express themselves in a safe online platform.





#### **Current Status:**

- Anecdotal feedback has been quite positive from participants with respect to accessibility, quality of resources available and peer support
- Data analysis
- Study lead, Ontario Telemedicine Network, working on growth and sustainability proposal
- Future publications and conference presentations on research

