

Effectiveness of Cognitive Behavioral Treatment Among African Americans



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Background

Gambling harms are more prevalent among individuals who identify as African American compared to other subgroups (Welte et al., 2015). Yet, the representation of African American participants in randomized controlled trials on psychological treatments is low (Peter et al., 2021).

The current study aimed to understand the effect of cognitive-behavioral treatment on pre- and post-treatment changes in gambling disorder symptoms, gambling frequency, and self-efficacy among African American individuals.

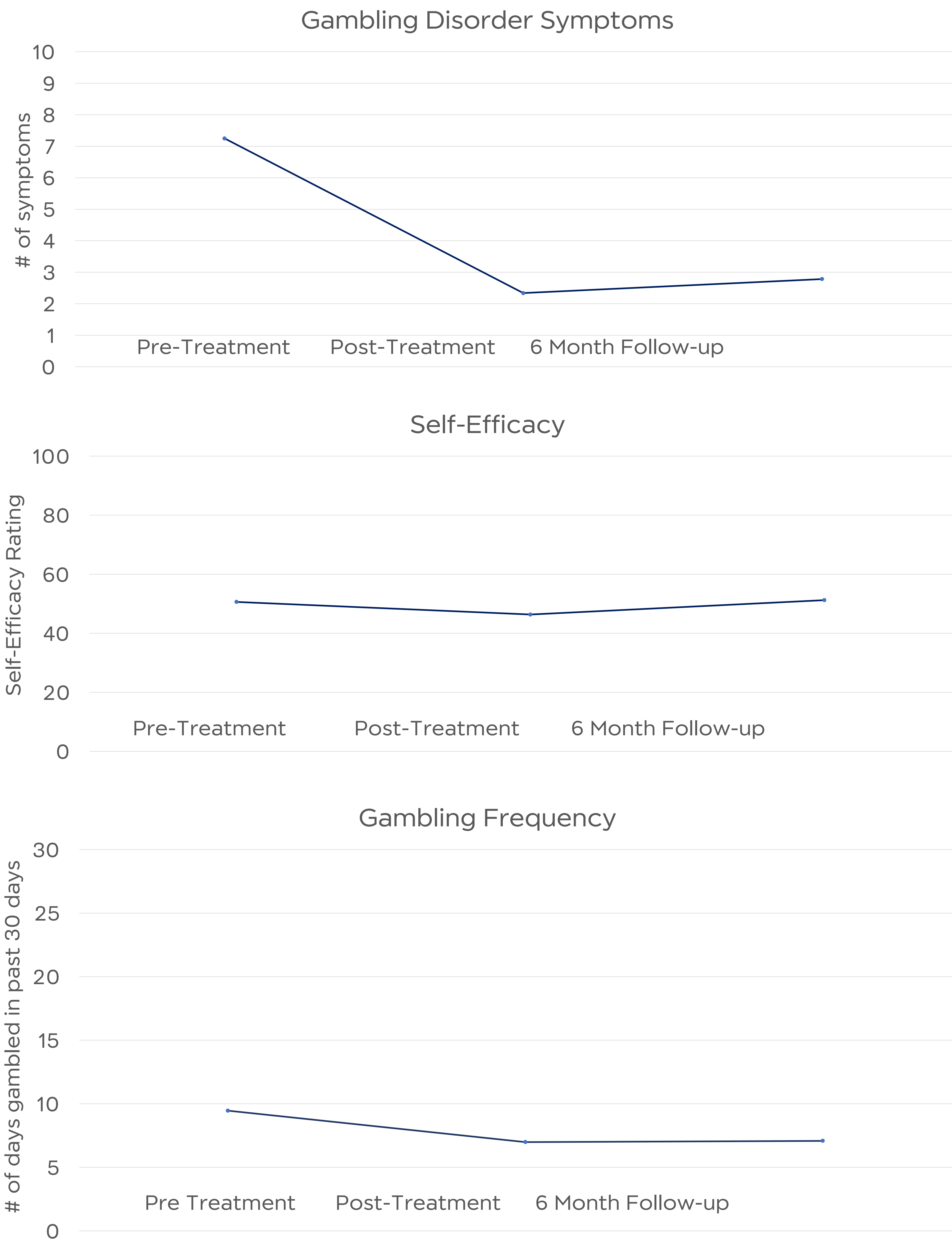
Method

Participants

An archival sample of 37 who identified as African American and sought treatment for gambling harm was used ($M_{age} = 43.2$). The majority identified as men (51.4%) and average monthly income was \$2,746. Almost (97%) participants met DSM diagnostic criteria for gambling disorder at intake.

Procedure

The mean number of sessions attended was calculated. Paired samples t -tests were conducted to examine changes in gambling disorder symptoms, days gambled in the past 30 days, and gambling self-efficacy.



Results

Individuals who sought treatment attended an average of 10 sessions.

The number of days gambled in the past 30 days and the number of gambling disorder symptoms significantly decreased from pre-treatment to post-treatment and pre-treatment to 6-month follow-up (all p 's < .03).

There was no significant difference in gambling self-efficacy at pre-treatment, post-treatment, and 6-month follow-up.

Discussion

Notably, the average number of sessions attended in this sample was higher than the average number in treatments across a meta-analysis of randomized controlled trials ($M = 6.8$) among primarily White participants.

Consistent with the larger outcome literature, participants reduced the number of gambling disorder symptoms and gambling frequency from pre-treatment to post-treatment (Pfund et al., 2023).

Future research should examine the underlying role of self-efficacy in treatment among individuals who are African American.

There is promise that treatment effects from predominately White samples generalize to African American samples.



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