# **Peer Review Report**

# Review Report on Assessing changes in anxiety, empowerment, stigma and wellbeing in participants attending an Online-Based Recovery College in Quebec during the Covid-19 Pandemic: a pre-experimental study

Original Article, Int J Public Health

Reviewer: Roberto Mediavilla Submitted on: 04 Apr 2022

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### **EVALUATION**

## Q1 Please summarize the main findings of the study.

The authors conducted a single-group, pre-post study, using the Quebec Recovery College (RC) programme in a sample of 107 participants. They analysed the change in four outcomes (anxiety, empowerment, stigma, and general wellbeing) one and four months after completing the programme. They reported a statistically significant but low decrease in anxiety scores, as measured by the GAD-7, at T1 and T2. In terms of within-person change, they found that 10% improved and 2% worsened at T1 and that 12% improved and 8% worsened at T2

# Q 2 Please highlight the limitations and strengths.

The main strength of the study is that it analyses an online version of the RC programme in a fairly large sample of participants. I also identified three major limitations. First, the research design is insufficient to draw any conclusion about treatment effects. Second, the study sample is massively heterogeneous, including healthcare workers, administrative staff from education or health systems, university students, people with lived experience of illness, relatives of people with mental health problems. I assume that classifying the sample based on variables other than mental health diagnosis is in line with the RC programme, but it hinders results interpretation even more. Last, the authors do not provide enough information to replicate the study, especially in terms of the intervention programme (how was it adapted? What was the facilitators' background?).

Please provide your detailed review report to the authors. The editors prefer to receive your review structured in major and minor comments. Please consider in your review the methods (statistical methods valid and correctly applied (e.g. sample size, choice of test), is the study replicable based on the method description?), results, data interpretation and references. If there are any objective errors, or if the conclusions are not supported, you should detail your concerns.

My major concern is to what extent can the authors draw any conclusions about treatment effects based on this research design. Even though they do two complementary analyses, namely linear mixed modelling and reliable change index calculation, it does not seem fit enough to support conclusions such as "Overall findings showed at T1 a small but significant effect over anxiety and empowerment" (line 189) or "First, the study assesses efficacy in the real-world setting, but without making a comparison with a control group" (line 224). I would ask the authors how this study actually contributes to our current understanding of RC programmes? It does certainly not provide any real-world effectiveness evidence (see

https://www.nejm.org/doi/full/10.1056/NEJMsa020660), but perhaps it might somehow expand our current understanding of RC. For instance, can the authors say something about implementation outcomes, such as acceptability, penetration, satisfaction? Or maybe they could say how this impacts the Canadian health system? Are there any policy recommendations to be made?

Minor points:

- Please provide effect size estimators and 95% confidence/compatibility intervals
- Please provide some interpretation of the scores. What does a 1-point decrease in the GAD-7 tell us? What does an RCI of 4 mean?
- Please expand the Methods section and provide more detail of the intervention programme and the assessment tools. You might find it useful to follow either the STROBE or the SPIRIT guidelines for observational and intervention studies
- The Discussion section must be toned down and should not mention treatment effects/effectiveness/efficacy
- A stronger rationale is required: why is this study important? How did COVID-19 affect the Canadian people? Which were the incidence rates at the start of the study period?
- I would also like to know a bit more about the recruitment strategy and, in general, I think the manuscript might benefit from more rationale on the RC epistemology -may be useful for lay people like myself.

| PLEASE C                              |   |
|---------------------------------------|---|
| Q 4                                   | Is the title appropriate, concise, attractive?  |
| The title                             | should be more concise. Now it just reads "outcome evaluation", but which outcome(s)?   |
| Q 5                                   | Are the keywords appropriate?   |
| Yes                                   |   |
| Q 6                                   | Is the English language of sufficient quality?  |
| Yes                                   |   |
| Q 7                                   | Is the quality of the figures and tables satisfactory?  |
|                                       |   |
|                                       |   |
| Q 8                                   | Does the reference list cover the relevant literature adequately and in an unbiased manner?   |
|                                       | Does the reference list cover the relevant literature adequately and in an unbiased manner?  This more references should be included to support an also required stronger rationale |
| No, I thin                            |   |
| No, I thin                            | nk more references should be included to support an also required stronger rationale  |
| No, I thin                            | ASSESSMENT  |
| No, I thin                            | ASSESSMENT Originality  |
| No, I thin  QUALITY  Q 9  Q 10        | ASSESSMENT Originality Rigor  |
| No, I thin QUALITY Q 9 Q 10 Q 11      | ASSESSMENT Originality Rigor Significance to the field  |
| No, I thin QUALITY Q 9 Q 10 Q 11 Q 12 | ASSESSMENT Originality Rigor Significance to the field Interest to a general audience   |

Major revisions.