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Access Sleep: Improving Access to Insomnia Treatment in the Military

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Increasing Access to Evidence-Based Behavioral Health Treatments for Insomnia in the MHS is a research study led by Dr. Maegan Paxton Willing in collaboration with Walter Reed Army Institute of Research-West (JBLM), Malcolm Grow Medical Clinics and Surgery Center (Andrews), and Tripler Army Medical Center (TAMC).

PROJECT GOAL

The study aims to examine the effectiveness and implementation factors of mHealth apps and group cognitive behavioral therapy for insomnia (CBT-I), delivered by clinicians and behavioral health technicians, for improving sleep among active duty service members.

BACKGROUND

Insomnia is highly prevalent among service members. Poor sleep has deleterious effects on military readiness, physical and psychological health, and is a risk factor for suicide. Although CBT-I is the recommended first-line treatment, access is limited due to a shortage of trained providers. Digital interventions (mHealth apps) and utilizing behavioral health technicans offer a potential solution to expand access to CBT-I.

STUDY DESIGN

This hybrid type 2 implementation-effectiveness study will use a 2x2 factorial design to compare the effectiveness of the Insomnia Coach mHealth app + provider check-ins to group CBT-I, delivered by clinicians or behavioral health technicians. Active duty service members with insomnia will be randomized across four treatment groups. Assessments will be conducted at baseline, mid-treatment, post-treatment, and 3- and 6-months post-treatment.

Treatment Groups

Group 1 (*n*=85)
- Treatment: Group CBT-I
- Provider: Licensed clinician

Group 2 (*n*=85)
- Treatment: Group CBT-I
- Provider: Behavioral health technicians

Group 3 (*n*=85)
- Treatment: Insomnia Coach + Provider Check-in
- Provider: Licensed clinician

Group 4 (*n*=85)
- Treatment: Insomnia Coach + Provider Check-in
- Provider: Behavioral health technicians

CURRENT STATUS

This study is in the preparation phase, with a focus on obtaining all regulatory requirements.

FUNDING

Funding for this research is provided by the Congressionally Directed Medical Research Programs (Total award: $2,336,028). The project will be conducted from September 2025 through September 2029.

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