

## Preventing depression in children and adolescents

### In short....

Universal programs aimed at preventing depression in children and adolescents are often adopted because they avoid the stigma associated with having a mental health problem. However, there is little or no evidence for their effectiveness.

Selective programs (those targeting high-risk children or teens) and indicated programs (targeting children/teens who already show signs of depression) are more effective, but they are more likely to treat the symptoms of depression and anxiety rather than prevent these symptoms from developing.

**The Issue:** Depression is a serious public health concern. It occurs in up to 3\_ % of children and adolescents and the rate increases with age. These children have difficulty achieving in school and later in life. Evidence shows that the earlier the first episode of depression, the greater the risk of repeated episodes that may become lifelong. So it is especially important that efforts are made to reduce the likelihood of children and teens becoming depressed.

**The Research:** This review assessed 30 studies of programs designed to prevent depression in children and teens. Three different types of programs were assessed: universal prevention programs such as those provided in schools to all students; selective interventions that target children or teens with an elevated risk for depression; and indicated programs that are used with those who already have symptoms of depression.

**The Results:** The authors found very little evidence that any of the program types prevent depression and anxiety. The selective and indicated programs seem to improve existing symptoms, particularly in teenaged girls who have been exposed to parental divorce or loss or whose parents are depressed.

The evidence suggests that selective and indicated programs may also be easier to use and more beneficial in the long term than universal programs.

The authors of the review suggest that treatment programs should focus on encouraging positive thinking patterns, how to get along with others, and how to deal with stress. There is also a need for more research on how age, gender, anxiety, and parental depression contribute to depression in children and adolescents so that prevention programs that are developmentally appropriate and gender and culturally sensitive can be developed.

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The preceding is a summary of: Horowitz JL, Garber J. The prevention of depressive symptoms in children and adolescents: A meta-analytic review. *Journal of Consulting and Clinical Psychology* 2006, 74(3): 401-415.