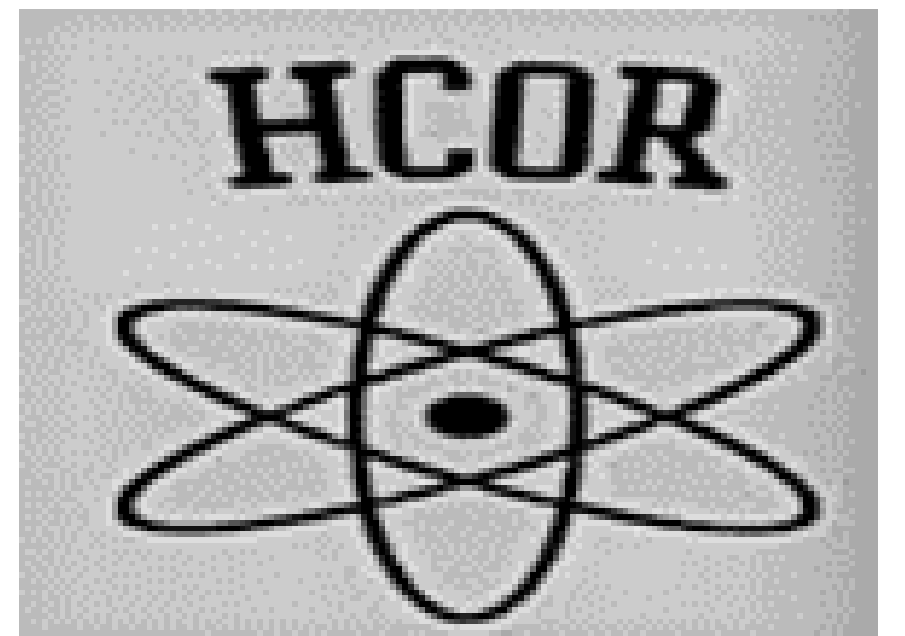


A School-Based Cognitive Behavioral Program to Improve Adolescent Mental Health

Amanda Harper, DNP, RN, CPNP; Tracy L. Brewer, DNP, RNC-OB, CLC, EBP-C; Cassie Fishbein, DNP, APRN, CPNP-PC
The University of Tennessee Knoxville College of Nursing



Background

- Anxiety and depression are prevalent in teens
- Symptoms interfere with the teen’s daily life and can have serious consequences if untreated
- Adequate mental health treatment is rarely achieved due to inequitable access to services

PICOT Question

In adolescents with anxiety or depression, how does participating in a CBT program compared to no program affect anxiety or depression one month after completing the program?

Evidence Synthesis

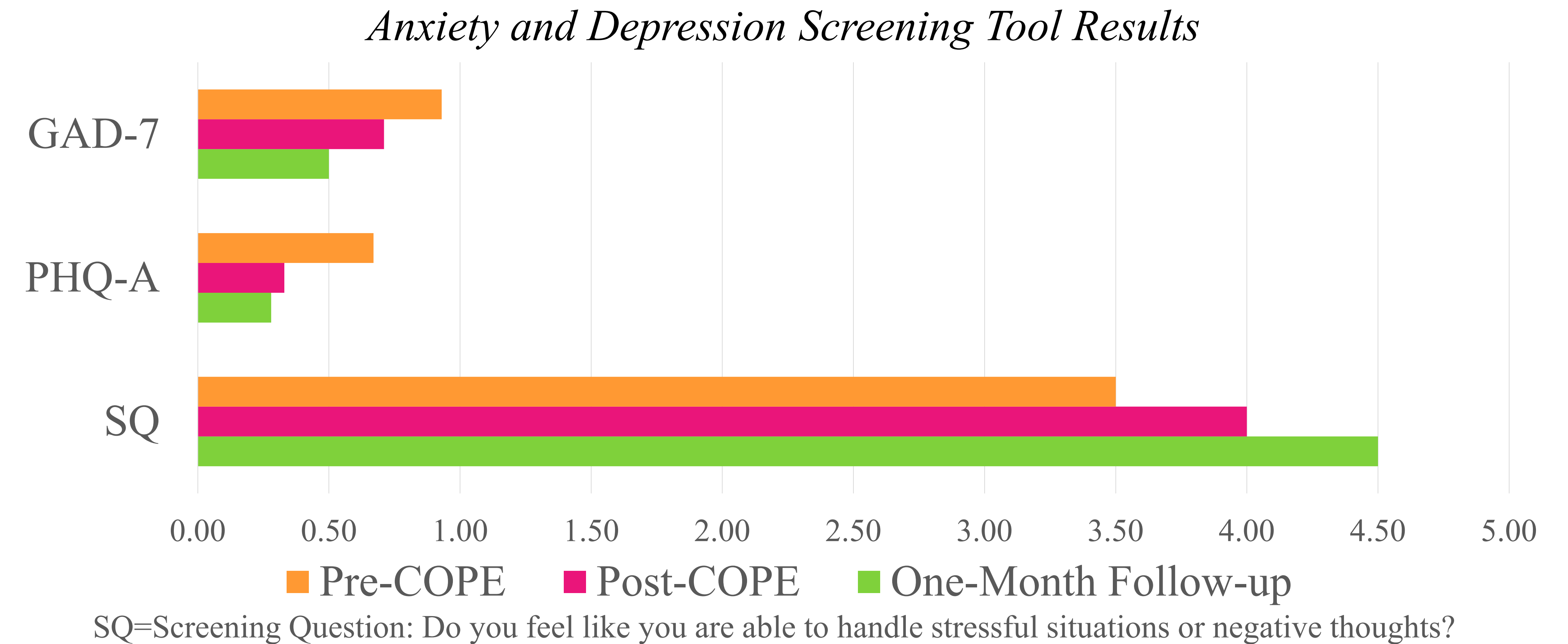
Outcome	Dray et al., 2017	Sigurvinsdottir et al., 2019	Rooksby et al., 2015	Melnik et al., 2014	Carr & Stewart, 2019	Erlich et al., 2019	Duong et al., 2016
Depression (post-intervention)	↓ ^s	—	—	↓ ^s	↓	↓ ^s	↓
Depression (follow-up)	—	—	—	↓ ^s 4 week	↓ ^s 3 month	—	↓ 6 & 12 months
Anxiety (post-intervention)	↓ ^s	↓ ^s	↓ ^s	↓ ^s	↓ ^c	↓ ^s	—
Anxiety (follow-up)	—	—	↓ ^s	↓	↓	—	—
Sample Size	57 studies	81 studies 3386 CBT-based 2527 Control	7 studies (4 RCTs)	16 adolescents	15 adolescents	37 adolescents	120 adolescents
Level of Evidence	I	I	III	II	II	II	I
Quality of Evidence	A	B	B	A	B	B	A
Setting	School-based	φ	Remote	School-based	School-based	PCP	School-based
CBT program/Modality	φ	Manualized/modular Individual/remote	Computer-based	COPE	COPE	COPE	PTA
Screening tool used	φ	φ	Various	BYI	BYI BRIEF	PHQ-A GAD-7	MFQ

↓=decrease; ↓^s=statistical significance; ↓^m=mixed significance; ↓^c=clinical significance; —=not addressed; φ=not specified; BRIEF=Behavior Rating Inventory of Executive Function-Self Report; BYI=Beck Youth Inventory; CBT=cognitive behavioral therapy; COPE=Creating Opportunities for Personal Empowerment; GAD-7=Generalized Anxiety Disorder 7-Item; MFQ=Mood and Feelings Questionnaire; PCP=primary care clinic; PHQ-A=Patient Health Questionnaire modified for adolescents; PTA=Positive Thoughts and Actions

Methods

- COPE was administered virtually in a homeschool cooperative setting with middle school students ages 11-15
- Data collection with self-report anxiety and depression screening instruments pre-, post-, and one month after completion of COPE; post-COPE evaluation
- Data analysis included descriptive statistics and a repeated-measures ANOVA

Results



Open-Ended Questions from Creating Opportunities for Personal Empowerment Evaluation

Questions	Responses
In what ways did you find the COPE program helpful?	• It help me come down • It helped me find new ways to deal with situations • It helped me get away from the problems for awhile • It helped me know how to deal with my feelings • Recognizing the stressors • The COPE program helped me to control my feelings
What, if anything, has changed in your life since starting the COPE program?	• How I interact with others around me • I can handle my feelings better • I have gained a better idea of how to deal with my emotions
What was the most helpful topic in the COPE program? How did it help you?	• Everything • Finding my happy place • It was the stress topic. This was the most helpful as it has helped me calm down and think when I am stressed. • Recognizing the stressors • The abdominal breathing exercise • The breathing technique it helped me to relax/calm down
What new or different thoughts do you have about dealing with things that worry you?	• I think differently when dealing with stressful situations • I think more positively then I used to

Conclusion and Recommendations

- Implementation of a CBT program may improve anxiety and depression in adolescents
- The COPE program is feasible to implement in a school-based setting and can increase access to this resource for students who otherwise may be unable to attend sessions
- Continue to implement COPE at the site as a health class within the curriculum

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