7-27-2023

Effectiveness of an Evidenced-based Cognitive Behavioral Therapy Intervention for Adolescents in a School Setting

Sarah Ellen Gray  
*University of Tennessee, Knoxville, sstric24@vols.utk.edu*

Kimberly Michaela Carter  
*University of Tennessee, Knoxville, kcarte44@vols.utk.edu*

Amanda Harper  
*University of Tennessee, Knoxville*

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**Recommended Citation**

Gray, Sarah Ellen; Carter, Kimberly Michaela; and Harper, Amanda, "Effectiveness of an Evidenced-based Cognitive Behavioral Therapy Intervention for Adolescents in a School Setting" (2023). *Graduate Publications and Other Selected Works - Doctor of Nursing Practice (DNP).*  
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Anxiety and Depression Prevalence in Our Youth

Johns Hopkins Evidence-based Practice Model

To increase youth's access to evidenced-based cognitive behavioral therapy (CBT) interventions to:
- Reduce negative or unhelpful thoughts, increase healthy behaviors, and improve communication and problem-solving skills
- Decrease severity of existing depression and anxiety symptoms
- Prevent symptoms of anxiety and depression

Creating Opportunities for Personal Empowerment (COPE) Program

Access to Mental Healthcare
- From 2016-2019, 9.4% (5.8 million) of children aged 3-17 were diagnosed with anxiety, and 4.4% (2.7 million) diagnosed with depression
- Social restrictions during the COVID-19 pandemic prompted a surge in mental health needs of youth, with 29% of teens stating they seriously considered suicide and 9% attempted suicide
- Suicide remains the second leading cause of death among 10-24 year-olds

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Background

Anxiety and Depression Screening Scores Over Time (n=15)

Further Findings

- Statistically significant decrease in anxiety symptoms from pre-intervention to two-month follow-up in students who scored in the moderate anxiety range at baseline (n=10)
- Suicidal ideation decreased 10.9% from pre-intervention to two-month follow-up (n=22)

Implementation Strategies

Synthesis of Evidence

Creating Opportunities for Personal Empowerment (COPE) Program
- Several studies implementing the 7-session COPE program to children and teens have shown decreases in depression and anxiety symptoms in a school-based group setting
- Generalized Anxiety Disorder 7-item (GAD-7) & Patient Health Questionnaire-Modified for Adolescents (PHQ-A) screening tools demonstrate high sensitivity and reliability when screening for depression and anxiety

 Practice Change

Evaluation

References