

Preventing Adolescent Depression Through Personalized Programs

Statement of Problem

About 10-20 percent of adolescents ages 12-17 report experiencing depression, an illness that affects many aspects of a youth's health and well-being. Interventions that prevent depression are essential to reducing the burden of the illness on youth. Prevention efforts are particularly important in adolescence since many individuals experience their first episode of depression during this critical developmental period. Researchers have developed and tested a number of depression prevention programs with adolescents. While these programs are effective, their benefits have been more modest than we would hope.

One explanation for prevention programs' relatively moderate impact is that they have not been individualized based on known risk factors for depression. In other words, these programs are designed in a one-size-fits-all approach and don't provide individual adolescents with targeted interventions that could address specific risk factors they might experience. We need to determine whether the effects of these programs can be enhanced by matching adolescents to interventions that take into account their unique vulnerabilities for depression.

Description

Along with collaborators at the University of Illinois, we are conducting a randomized controlled trial to examine the efficacy of personalized depression prevention programs. In this National Institutes of Mental Health-funded study, called the Personalized Depression Project (PDP), we match and mismatch youth to two evidence-based depression prevention programs that target different risk factors for depression:

- Coping with Stress, a cognitive-behavioral based prevention program that focuses on reducing negative thinking patterns, and
- Interpersonal Psychotherapy-Adolescent Skills Training, an interpersonal program that aims to increase support and reduce conflict within one's relationships.

The five-year PDP study examines whether youth who receive a prevention program that targets their individual risks experience fewer depression symptoms and diagnoses over time as compared to youth who receive non-personalized prevention. In addition, we will collect data on the mechanisms through which these prevention programs work and examine whether the delivery of these programs in adolescence can alter the developmental trajectories of first onset depression.

Next Steps

If personalized prevention approaches are effective, this research can inform clinical practice by helping clinicians identify which adolescents would benefit from a specific preventive intervention. By providing effective prevention interventions, we can substantially reduce the prevalence and burden of depression at this important stage of development and help youth transition into healthy, productive adults.

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Related Tools & Publications

- [Two-year Impact of Prevention Programs on Adolescent Depression: An Integrative Data Analysis Approach](#)
[Article](#)
Feb 2018
- [Cognitive and Interpersonal Vulnerabilities to Adolescent Depression: Classification of Risk Profiles for a Personalized Prevention Approach](#)
[Article](#)
Oct 2018
- [Developmental Trajectories of Attachment and Depressive Symptoms in Children and Adolescents](#)
[Article](#)
May 2019
- [Identification and Management of Adolescent Depression in a Large Pediatric Care Network](#)
[Article](#)
Mar 2020
- [Personalized Depression Prevention: A Randomized Controlled Trial to Optimize Effects Through Risk-informed Personalization](#)
[Article](#)
Nov 2020
- [Effects of Personalized Depression Prevention on Anxiety through 18-month Follow-up: A Randomized Controlled Trial](#)

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- [Cognitive and Interpersonal Moderators of Two Evidence-based Depression Prevention Programs](#)

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