Problem solving programme implemented by teachers may prevent depression in the short term, but longer term benefits are unclear


QUESTION: Can a teacher-led intervention prevent depression among non-referred adolescents?

Design
Randomised controlled trial, with allocation by school unit. Schools were matched in pairs on the basis of state versus private funding and number of students enrolled. After paired matching, one school from each pair was assigned to the intervention group and the other to the control group.

Participants
1,500 students aged 12–14 years (mean 13 years). 52% were female. Students with scores of 13 or above on the Beck Depression Inventory at baseline were categorised as being at “high risk” of developing depression. Students whose Beck Depression Inventory scores were less than 13 were categorised as “low risk.”

Intervention
The Problem Solving for Life programme was implemented by 28 teachers in 8 schools (751 students). The programme teaches young people to identify thoughts, feelings, and problem situations. It also teaches problem solving skills, including positive problem solving orientation. Teachers in the intervention group attended 6 hours of training on the theory underlying the programme, content, and implementation techniques. The programme comprised 8 weekly self contained sessions, lasting one class period of 45–50 minutes. Teachers were provided with curriculum materials designed to teach problem solving skills, positive problem solving orientation, and optimistic thinking styles. Teaching methods included didactic sessions; cartoons; individual, small group, and class exercises; homework; and diary keeping. Students and teachers at control schools received no intervention.

Main outcome measures
Depressive symptoms were assessed using the Beck Depression Inventory. Four questions were developed to measure dysthymia according to DSM-IV criteria. The Youth Self-Report form of the Child Behavior Checklist was used to measure general psychopathology. The Child and Adolescent Social and Adaptive Functioning Scale was used to assess social functioning and the Social Problem Solving Inventory - Revised Short Form was used to measure problem solving.

Main results
At the end of the intervention period, high risk students who received the programme had a greater decrease in depressive symptoms and increase in problem solving scores compared with high risk controls. Among low risk students, depression scores were slightly reduced and problem solving skills increased over the intervention period compared with low risk controls. Benefits were not maintained at 12-month follow up.

Conclusions
In the short term, this 8-week program reduced symptoms of depression and increased problem solving skills among students at high and low risk of depression. There was no difference between groups after 1 year.
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_Evid Based Mental Health_ 2003 6: 82
doi: 10.1136/ebmh.6.3.82

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