

Evaluation of the Creating Opportunities for Personal Empowerment (COPE) Program: Adolescent Depression in Primary Care During the COVID-19 Pandemic

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INTRODUCTION:

- Major depression: Most common mental health disorder in adolescents in the United States (U.S.)
- Associated with poor health outcomes, positive predictor of suicide, costly hospital admissions
- COVID-19 pandemic exacerbated already increasing rates of adolescent depression
- Less than 25% of adolescents with depression receive treatment
- AAP and SAMHSA endorse management in primary care
- Non-pharmacological treatment in primary care is underutilized

PURPOSE: Evaluate the COPE program during the COVID-19 pandemic by measuring adolescents' severity of depression before and after completion of the program.

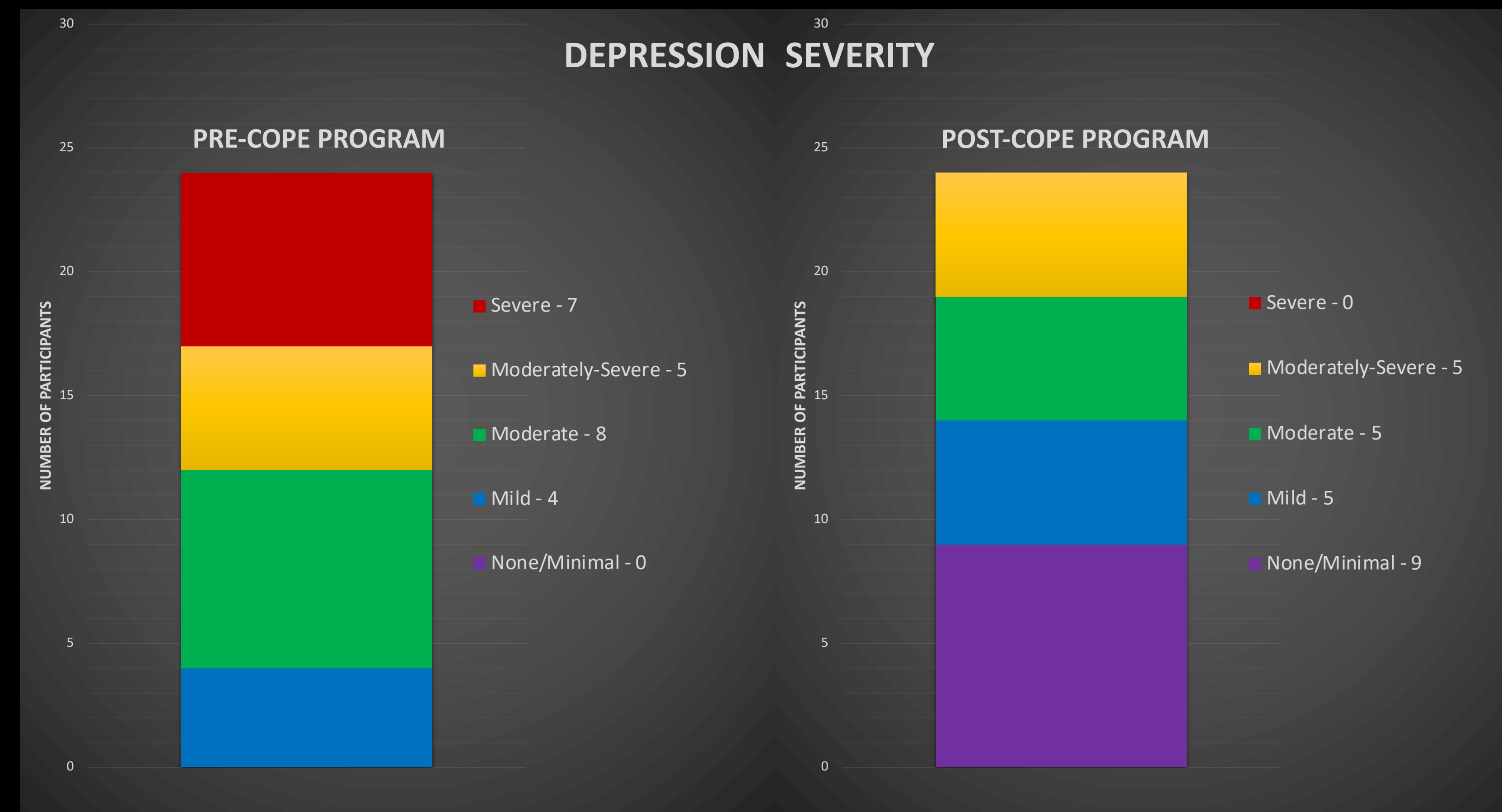
PRACTICE SETTING:

- Privately-owned pediatric primary care clinic in the Pacific Northwest region of the U.S.
- Adolescent depression – increase from 9.33% in 2018 to 15.99% in 2021.
- Limited community access to counseling and CBT
- COPE program implemented in March 2020 – both in-office and telehealth visits

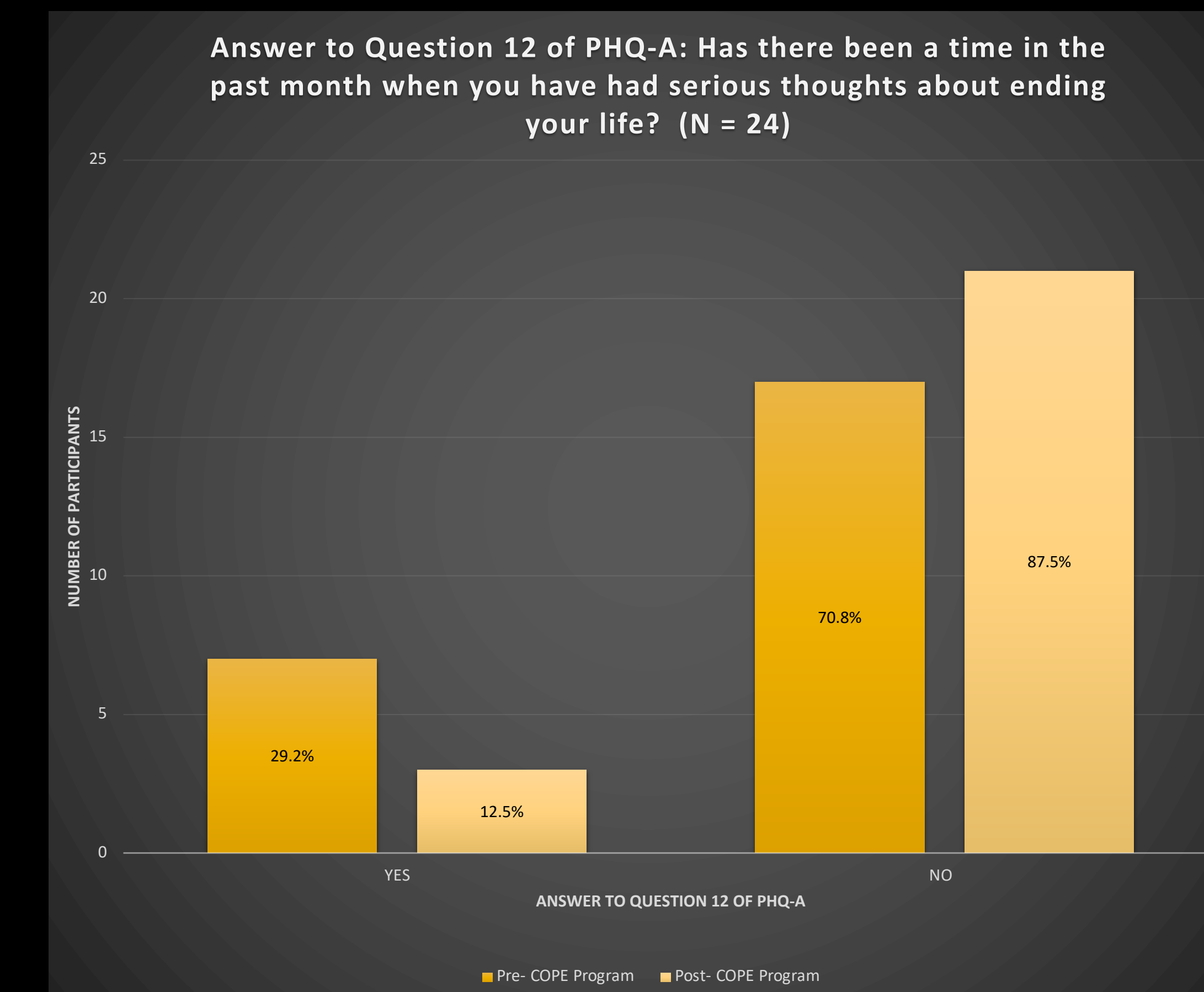
METHODS:

- Program Evaluation
- Participants: Adolescents ages 12-18 years who meet DSM-5 criteria for depression and who initiated and completed the COPE program during the period March 2020 through December 2021
- Data Collection: Retrospective chart review
- Measure of Depression Severity: Patient Health Questionnaire Modified for Adolescents (PHQ-A)
- Data Analysis: Descriptive statistics, Wilcoxon Signed Rank test

Cognitive behavioral skills intervention decreased adolescent depression severity during the COVID-19 pandemic.



A two-tailed Wilcoxon signed rank test showed that PHQ-A scores before COPE program completion ($Mdn = 15.5$, $M = 15.2$, $SD = 1.1$) were statistically significantly different than PHQ-A scores after COPE program completion ($Mdn = 7$, $M = 8.8$, $SD = 1.1$); $W(22) = 13$, $z = 3.672$, $p = 0.00024$. The standardized effect size was large (0.78).



RESULTS:

Sociodemographic Characteristics of Participants

Baseline Characteristic	n	%
Gender		
Female	33	85
Male	6	15
Race		
Asian	2	5
Black	1	3
Caucasian	37	95
Hispanic	3	8
Native American, American Indian, or Alaskan Native	2	5
Ethnicity		
Hispanic or Latino	4	10
Non-Hispanic or Latino	26	67
Other	9	23

Note. $N = 39$. Participants ranged from 12 to 18 years old ($M = 14.6$, $SD = 1.6$).

Time taken to complete the COPE program ranged from 5-18 weeks, $M = 9.4$, $SD = 3.5$

LIMITATIONS:

- Small sample size
- Out of 39 participants who met inclusion criteria, only 24 completed a PHQ-A both before and after COPE program completion
- No control for confounding variables (medications, psychosocial support, concurrent counseling)

CLINICAL IMPLICATIONS:

- Completion of COPE in the primary care setting was associated with a significant decrease in depression severity among 24 adolescents during the COVID-19 pandemic.
- COPE can provide accessible and effective mental health care for adolescents with depression.

MORE ABOUT THE COPE PROGRAM:

- Evidence-based cognitive-behavioral therapy skills building intervention for children and teens with depression and anxiety
- Seven 30-minute sessions
- Various settings including primary care clinics
- Manualized
- Can be delivered by variety of health care providers including primary care providers



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