



Shorter communication

Cognitive-behavioral group depression prevention compared to bibliotherapy and brochure control: Nonsignificant effects in pilot effectiveness trial with college students



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ABSTRACT

Objective: Conduct a pilot trial testing whether a brief cognitive-behavioral (CB) group reduced depressive symptoms and secondary outcomes relative to bibliotherapy and brochure controls in college students with elevated depressive symptoms.

Method: 82 college students (M age = 19.0, SD = 0.9; 70% female, 80% White) with elevated self-assessed depressive symptoms were randomized to a 6-session CB group, bibliotherapy, or educational brochure control condition, completing assessments at pretest, posttest, and at 6- and 12-month follow-up.

Results: Planned contrasts found no significant effects for CB group on depressive symptoms compared to either bibliotherapy or brochure controls at posttest ($d = -.08$ and $.06$, respectively) or over follow-up ($d = -.04$ and $-.10$, respectively). There were no intervention effects for social adjustment and substance use, though CB group participants had improved knowledge of CB concepts at posttest, versus brochure controls. Condition differences in major depression onset were nonsignificant but suggested support for CB interventions (CB group = 7.4%, bibliotherapy = 4.5%, brochure control = 15.2%).

Conclusions: Unexpectedly modest support was found for a brief CB group depression prevention intervention, compared to bibliotherapy or brochure control, when provided to self-selected college students, suggesting that alternative screening or interventions approaches are needed for this population.

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Major depressive disorder (MDD) in adolescence is common, recurrent, and impairing (Klein, Torpey, & Bufferd, 2008), though the majority of depressed adolescents fail to receive treatment (Cummings & Druss, 2011), underscoring the need for effective depression prevention programs. Several depression prevention interventions for adolescents, predominantly focused on high school samples, have been developed, with cognitive-behavioral (CB) prevention interventions having the largest evidence base (e.g., Horowitz & Garber, 2006; Stice, Shaw, Bohon, Marti, & Rohde, 2009). The Stice et al. review found that average depressive symptom reductions by posttest ($d = .30$) and follow-up ($d = .22$) were small, but that 41% of the programs produced significant depressive symptom reductions though only 13% produced significant reductions in future depressive disorder onset. Among the significant moderators, larger effects were found for programs

targeting higher risk participants and samples with older adolescents.

An efficacy trial in which 341 high school students with elevated depressive symptoms were randomized to a brief CB group depression prevention program, supportive-expressive group, bibliotherapy, or brochure control (Stice, Rohde, Seeley, & Gau, 2008) found that CB group participants showed significantly lower depressive symptoms than the other conditions at posttest, with some effects compared to bibliotherapy and brochure control remaining significant through 2-year follow-up. The CB group also showed significant effects on secondary measures of social adjustment and substance use compared to other conditions, with maintenance of some effects through 2-year follow-up, and significantly lower depressive disorders onset versus brochure controls (Stice, Rohde, Gau, & Wade, 2010). Based on these promising results, we conducted an effectiveness trial, in which high school personnel recruited 378 students with elevated depressive symptoms and delivered the CB group intervention, comparing it to

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bibliotherapy and brochure control (Rohde, Stice, Shaw, & Brière, 2014). By 6-month follow-up, CB group participants showed significantly lower MDD onset compared to both bibliotherapy and brochure control, and lower depressive symptoms at posttest (but not 6-month follow-up) compared to brochure controls. Contrary to findings from the efficacy trial, there were no effects on social adjustment and substance use in the effectiveness study.

The goal of this pilot was to explore the impact of this CB intervention in a college sample, using a design that paralleled the high school effectiveness trial. Depression is one of the most common mental health problems on college campuses (ACHA-NCHA, 2009) and college students have been identified as a high-risk population for which effective prevention programs have been understudied (Buchanan, 2012). We examined whether, relative to bibliotherapy or brochure control, CB group reduced depressive symptoms (Aim 1), and improved social adjustment and reduced substance use (Aim 2). Given the limited power, we focused on the magnitude of effect sizes, in addition to statistical significance, when interpreting study results.

Method

Participants and procedures

To facilitate comparison of findings between this pilot and the high school effectiveness study, comparable methodological features were used, including the recruitment procedures and screening approach, the assessment measures, the three intervention conditions and their method of delivery, and participant reimbursement amounts. Participants were 82 college students (69.5% female) between 17 and 22 years of age ($M = 19.0$; $SD = 0.9$)

at pretest. The sample was composed of 11% Asian Americans, 3% African Americans, 81% Caucasians, and 5% other/mixed. Participants were recruited in 2010–2011 from a large state university through direct mailings to a subset of first/second year students; recruitment posters were also hung on campus. The recruitment letter contained a screener assessing depression based on the Center for Epidemiologic Studies-Depression Scale (Radloff, 1977); response options were reduced from 4 to 2, and all items were worded in the same direction. Students who endorsed two or more symptoms were encouraged to enroll. If the student had a current diagnosis of MDD or acute suicidal ideation ($n = 3$), they were excluded and offered referrals. Eligible participants were randomly assigned by the project coordinator using computer-generated random numbers to either: (1) CB group ($n = 27$), (2) bibliotherapy ($n = 22$), or (3) brochure control ($n = 33$).

Participants completed assessments at pretest, posttest, 6- and 12-month follow-up; receiving \$25 for each assessment. A participant flowchart is shown in Fig. 1. Assessors were blind to condition, had a bachelors in psychology, received 40 h of training, and achieved a minimum kappa of .80 with experts before data collection; 10% of interviews were randomly selected for reliability rating. The Oregon Research Institute Institutional Review Board approved this study.

CB group

The group program was identical to the intervention evaluated in the effectiveness trial (Rohde et al., 2014). Each of the 6 weekly 1-h sessions had a portion devoted to thought identification/recording and cognitive restructuring (called “Changing Thinking”) and a portion devoted to increased involvement in pleasant activities (called “Changing Doing”). Five mixed-gender groups of 4–8

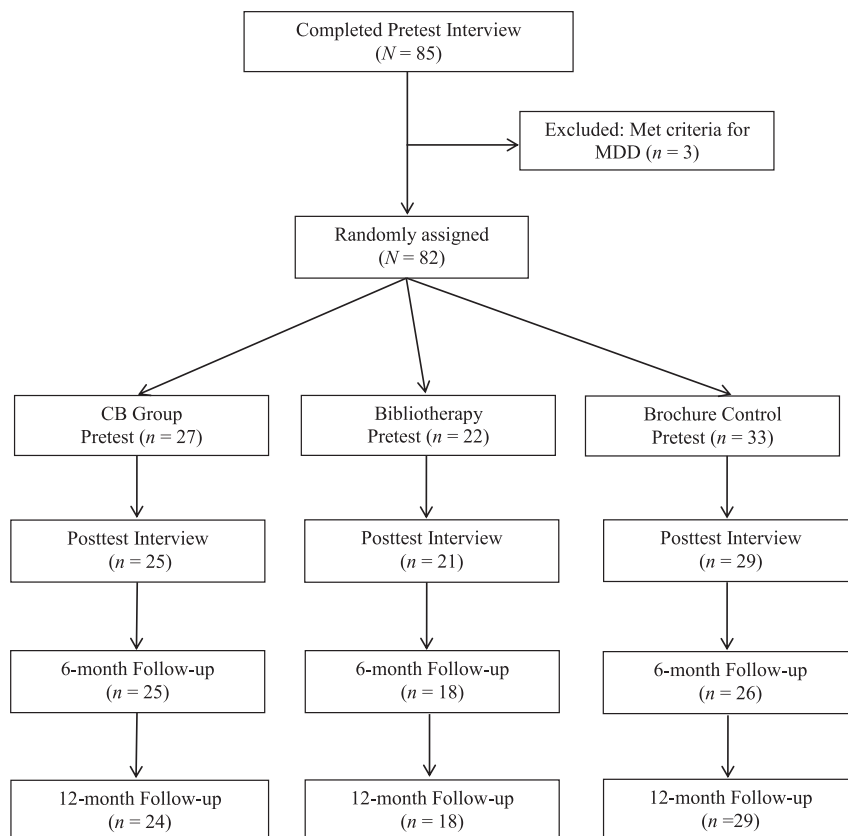


Fig. 1. Participant flowchart.

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