Building Effective Programs to Prevent Depression

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There is mounting evidence that carefully designed and implemented programs are effective in preventing depression and many of the mental health problems facing children and adolescents (National Research Council and Institute of Medicine, 2009). Moreover, engaging students in their environmental context is the most effective way to produce change (Nation et al., 2003). Including social, emotional, and behavioral components in a school’s curriculum improves student outcomes in those areas and in academic achievement as well.

CHARACTERISTICS OF EFFECTIVE PROGRAMS

Researchers have identified nine characteristics of effective prevention programs (Durlak, Weissman, & Pachan, 2010; Nation et al., 2003). Incorporating these characteristics in school-based programs for the prevention of depression and other mental health problems is likely to improve their effectiveness.

Comprehensiveness

- Does the program include multiple components addressing domains that influence the development of the problem?
- For example, a school-based program to prevent depression could include peer relationships, student social competence and coping skills, and family education.

Varied Teaching Methods

- Are diverse teaching methods involved?
- Effective programs typically use a variety of teaching approaches that focus on increasing awareness and understanding the problem behaviors, as well as acquiring or enhancing skills.
- Each of these—increasing awareness, understanding the problem, and skill acquisition or enhancement—can employ several strategies.

Sufficient Dosage

- What are the program duration, frequency of sessions, and the nature of follow-up sessions?
- Sufficient dosage means that the programs provide enough of the program or intervention to achieve the desired results as well as follow-up to maintain them.

Theory Driven

- What is the theory that frames the understanding of depression and the design of the intervention program?
- Effective programs are based on accurate information and are supported by research, so there is a theoretical justification.

Positive Relationships

- How are positive relationships provided and modeled?
- A key component should be the opportunity to be with adults and peers in ways that promote strong relationships and support positive outcomes.

Appropriate Timing

- Does the program target developmentally appropriate assets or skills that are known to be preventive?
- The timing needs to be appropriate to the developmental needs of the students and early enough to be preventive.
- For example, enhancing social skills is much more preventive for second graders than for high school students, because the earlier intervention prevents an accumulation of negative experiences.

Socio-culturally Relevant

- How involved are members of the school cultural and ethnic groups in the selection of the program, modification of its features, and design of implementation in ways that consider the community and cultural norms?
- Programs need to be tailored to the community and cultural norms of the students and need to include the students in program planning and implementation.
Outcome Evaluation
- What results are reported for the program, and after what period of time?
- Effective programs have clear goals and objectives, and systematically document their results, not just at the end of the program but up to 3 years later or after a developmental transition (elementary to middle school, middle school to high school).

Well-Trained Staff
- How are those that implement the intervention trained to do so? Effective programs are supported by staff members (teachers, administrators, and school mental health professionals), and staff members are provided with the necessary training to implement the intervention.
- For example, if teachers were asked to implement a school-based intervention, they should be provided the necessary training.

CHARACTERISTICS OF EFFECTIVE INTERVENTIONS
Research also provides guidelines for the ways that interventions can most effectively delivered to students. The best student outcomes are obtained when the interventions are monitored to ensure that they are delivered correctly and when they incorporate SAFE (Sequenced, Active, Focused, Explicit) procedures (Durlak et al., 2010):

Sequenced
- The program or curriculum breaks complex skills into more easily mastered steps and comprises a series of activities that are coordinated, connected to each other, and presented in a coherent sequence culminating in the learning of a specific skill.

Active
- The program incorporates active learning approaches (e.g., role-play) that involve the practice of specific social, emotional, or behavioral skills.
- Feedback on performance is built into the teaching process and mastery of one step leads to the next step in the sequence of learning.

Focused
- The program, in whole or in part, has a specific and significant part of the program devoted to improving social, emotional, and behavioral skills.
- Specific and sufficient time is allocated within the program for skills training.

Explicit
- The program is designed to accomplish goals related to improving specific social, emotional, or behavioral skills rather than more general skills or outcomes having to do with general development.
- The goals of the program are clear and explicitly identify the skills students are expected to learn.

School-based programs designed to prevent depression and other student mental health problems will be more effective to the extent that they are designed according to the above guidelines. All members of the community must learn about and disseminate the research showing that depression (and other mental health problems) can be alleviated and that student grades, test scores, and school performance significantly increased by providing programs that teach social–emotional–behavioral skills and support student mental health. Key stakeholders include school administrators, school mental health professionals, teachers, parents, and community leaders.

REFERENCES