## Targeted Interventions for Students at Risk for Depression By John E. Desrochers & Gail Houck

Targeted interventions are designed to support students who are at risk for depression and need more intensive interventions than are available in the general education program. Within a response-to-intervention (RTI) framework, these would be considered Tier 2 interventions. These interventions help prevent depression by treating students' individual vulnerabilities (including risk factors that may predict or contribute to depression) or addressing contextual risk factors that affect students (e.g., loss and bereavement or divorce).

## **CHARACTERISTICS OF TARGETED INTERVENTIONS**

- Targeted programs are most effective when offered to at-risk youth, over a relatively brief duration, using homework assignments to facilitate application of skills to everyday life.
- Services are most often delivered in a small-group format.
- Students require little formal assessment. In many cases, a life event or specific vulnerability will define the need for intervention.
- Targeted interventions generally require few additional resources and can be implemented by any of the school mental health professionals.

## TARGETED PROGRAMS FOR ADDRESSING INDIVIDUAL RISK FACTORS

Intervention for individual risk factors or vulnerabilities for depression are largely based on the premise that addressing those vulnerabilities will prevent the onset of depression. Such targeted intervention involves teaching at-risk students new ways of thinking, social and emotional problem-solving skills, and strengthening their repertoire of coping strategies. A variety of programs are available that are effective in contributing to preventing depression among at-risk students. Examples are provided in Table 1.

Table 1. Examples of Targeted Intervention Programs Addressing Individual Risk Factors

Name	Age/Grade Range	Access
Penn Resiliency Program	Ages 8–15	http://www.ppc.sas.upenn.edu/prpsum.htm
Based on principles of cognitive behavior therapy and teaching of social problem-		
solving skills. Students learn impact of		
thoughts on emotions and behavior, as well		
as assertiveness, negotiation skills, decision-		
making, social problem-solving, and		
relaxation skills.		
Strong Kids Series	Grades	http://www.brookespublishing.com
Teaches social, emotional, and coping skills	preK–12	
and promotes resilience through an		
integration of behavioral, affective, and		
cognitive approaches.		
Adolescent Coping With Stress Class (ACWS)	Ages 9–18	http://www.kpchr.org/research/public/acwd/
Teaches coping skills and new ways of		acwd.html
thinking. Designed for the classroom setting		
during school hours, as an adjunct to health		
class, or as an after-school workshop or		
group.		





## TARGETED PROGRAMS FOR ADDRESSING CONTEXTUAL RISK FACTORS

Although the focus of targeted interventions is on the prevention of depression in children and adolescents with individual risk factors for depression, general principles of these programs have been applied to the prevention of depression and other negative outcomes in students who face difficult life events such as parental death and divorce. Table 2 provides an example of some of these kinds of programs.

Table 2. Examples of Targeted Intervention Programs Addressing Contextual Risk Factors

Name	Age Range	Access
New Beginnings Program Divorced parents learn skills to improve parent-child relationship quality, improve effectiveness of discipline, reduce exposure to conflict between parents, and increase access between the nonresidential parent and child.	Ages 3–17	http://www.nrepp.samhsa.gov/ViewIntervention
Children of Divorce Intervention Program (CODIP) The key components of the program are group support and coping skill enhancement. Program provides skills that enhance children's resilience and healthy adjustment over time.	Ages 5–13	http://www.childrensinstitute.net/programs/codip
Cognitive-Behavioral Intervention for Trauma in Schools (CBITS) Group sessions allow students to process the traumatic memories and express their grief. Six cognitive-behavioral skill areas are addressed. Improves depressive symptoms and posttraumatic stress symptoms.	Ages 9–18	http://www.soprislearning.com



