

Depression Treatment Programs (Child & Adolescent)



Depression Treatment Programs (Child & Adolescent) is defined by the CEBC as programs that treat youth with a diagnosis of a depressive disorder, or with elevated symptoms of depression as demonstrated by a standardized screening or assessment tool. Common symptoms may include persistent sad or irritable mood, loss of interest in activities, significant change in appetite or body weight, difficulty sleeping or oversleeping, loss of energy, feelings of worthlessness or inappropriate guilt, and/or difficulty concentrating.

The CEBC has evaluated only replicable programs that do not use medication as an essential component of treatment. The [Pharmacological Treatments for Children and Adolescents with Mental Health Disorders](#) page has links to reputable organizations that list information on medications used to help treat children and adolescents with depression and other disorders.

Depression Treatment Programs (Child & Adolescent) topic area criteria:

- **Target population:** Youth with a diagnosis of a depressive disorder or with elevated symptoms of depression as demonstrated by a standardized screening or assessment tool
- **Services/types that fit:** Typically outpatient services, either individual or group, but occasionally family therapy or services also
- **Delivered by:** Mental health professionals
- **In order to be included in this topic area on the CEBC:** Program must specifically target depression as a goal
- **In order to be rated in this topic area by the CEBC:** There must be research evidence (as specified by the CEBC [Scientific Rating Scale](#)) that examines depression-related outcomes, such changes in symptom levels, behaviors, and/or functioning



The table below provides a summary of the rated programs currently listed in the [Depression Treatment Programs \(Child & Adolescent\)](#) topic area. More detailed information can be found on the CEBC website.

| Program | Overview | CEBC Scientific Rating | CEBC CWS Relevance Level |
|---|--|------------------------|--------------------------|
| Blues Program | Brief manualized cognitive-behavioral prevention intervention for high school-aged adolescents with elevated depressive symptoms | 2 | Medium |
| Interpersonal Psychotherapy- Adolescent Skills Training (IPT-AST) | Group-indicated prevention program that focuses on psychoeducation and general skill-building | 2 | Medium |
| Primary and Secondary Control Enhancement Training (PASCET) | Structured individual psychotherapy intervention for depression | 2 | Medium |
| ACTION | Developmentally sensitive group treatment that follows a structured therapist's manual and workbook, and is designed to be fun and engaging while teaching a variety of skills and therapeutic concepts that are applied to their depressive symptoms, interpersonal difficulties, and other stressors | 3 | Medium |
| Adolescent Coping With Depression Course (CWD-A) | Cognitive-behavioral group intervention that targets specific problems typically experienced by depressed adolescents | 3 | Medium |
| AFFIRM Youth | Manualized affirmative cognitive-behavioral group intervention, designed to reduce depression and improve coping skills and self-efficacy for LGBTQ+ youth | 3 | Medium |
| Attachment-Based Family Therapy (ABFT) | Attachment-based, trauma-informed, emotion-focused intervention for youth with suicide, depression, anxiety, and/or trauma | 3 | Medium |
| Interpersonal Psychotherapy for Depressed Adolescents (IPT-A) | Outpatient treatment designed for adolescents with mild to moderate depression severity | 3 | Medium |
| Stressbusters | Designed to reduce depressive symptoms and improve coping and functioning by combining group cognitive-behavioral therapy with family education | 3 | Medium |

The CEBC operated by Rady Children's Hospital-San Diego (RCHSD): Chadwick Center for Children & Families. The CEBC is made possible with funding from the California Department of Social Services (CDSS): Office of Child Abuse Prevention. Any opinions, findings, conclusions and/or recommendations expressed are those of RCHSD and do not necessarily reflect the views of the CDSS.