Depression Prevention Program Failed to Help Black Youth

The LARS&LISA program helped alleviate depressive symptoms in white youth but was not effective for Black youth.

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Some depression prevention programs may not help Black youth as effectively as they do white youth, according to a new study published by the American Psychological Association (APA).

Mental health problems affect millions of children in the United States. Approximately 3.1 million young people ages 12 to 17 experience periods of major depression, according to Mental Health America.

Black youth experience disproportionately high rates of depression and suicide compared with their white peers. What's more, Black adolescents are significantly less likely to receive mental health care compared with other demographic groups.

This is due, in part, to systemic inequities, such as racism and poverty, as well as stigma around mental health and deep-rooted cultural mistrust of the health care system.

"I was very surprised that we couldn't help Black youth as much as white youth, and we don't know why there was such a profound difference in the outcomes," said lead researcher Patrick Pössel, PhD, a professor of counseling psychology at the University of Louisville, in the news release.

About 25 years ago, Pössel and other researchers developed the LARS&LISA depression prevention program in Germany to offer support to and advocate for the mental health of adolescents with depressive symptoms. After being implemented successfully in Germany, researchers extended the program to Tennessee and now to Kentucky.

The new study involved 425 freshman students (57% Black and 43% white) in a Louisville, Kentucky, high school that serves primarily low-income students. Half of the students participated in the 10-week program, while the other half were in a control group.

The LARS&LISA program features two characters named Lars and Lisa and uses group sessions to boost motivation through personal goal setting followed by cognitive behavioral therapy.

The program encourages students to recognize unhelpful thoughts and replace them with more helpful ones. It also teaches students about the pros and cons of assertive, aggressive, passive-aggressive and withdrawing behaviors.

For the study, students completed questionnaires about depressive symptoms before and after the LARS&LISA program as well as a follow-up survey four months later.

Signs of depression in youth can manifest as persistent sadness, low self-esteem, irritability, feeling hopeless and extreme sensitivity to rejection or failure.

White youth who participated in the program reported significantly fewer depressive symptoms after completing the program and at the follow-up period. Black youth, however, experienced no significant benefits after completing the program or after the follow-up period compared with the control group.

Pössel said more research is needed not only to identify why the LARS&LISA program was unsuccessful for Black youth but to uncover whether other depression treatment programs or models result in the same shortcomings.

In fact, a different youth depression prevention program based on cognitive behavioral therapy techniques, the Penn Resiliency Program, was helpful for white and Latino youth but showed no significant impact on depressive symptoms in Black youth, according to the study.

“Psychological theories and treatment programs are largely developed based on white, middle-class, female American clients or college students in psychology courses,” Pössel said. “We need to take a step back and examine the consequences of these limitations. It’s essential to be attentive to cultural and racial differences and not assume there’s a one-size-fits-all approach.”

To read more, click #Depression or #Mental Health. There, you’ll find headlines such as “Green

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