The COPE On-line Intervention for Prevention of Depression & Anxiety in College Freshmen

Implications for Future Research and Clinical Practice

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Despite the high prevalence of stress, anxiety and depression in college students, there are

few experimental studies testing preventive interventions in this population





Purpose of This Symposium

- Describe the baseline and immediate postintervention findings from the COPE Program for College Freshmen randomized controlled pilot trial.
- Discuss the implications for routine implementation and future research with the COPE Program.



College students are stressed and experience a substantial amount of anxiety





Important Facts about Depression and Stress

- Suicide is the 3rd leading cause of death in adolescents and young adults
- Stress and depression negatively impact attendance and academic performance in college students
- Results of the American College Health Association-National College Health Assessment I and II (ACHA-NCHA) over the past ten years indicate that the academic performance of more than 25% of college students is negatively affected by stress (American College Health Association, 2012).



Stress in OSU Students

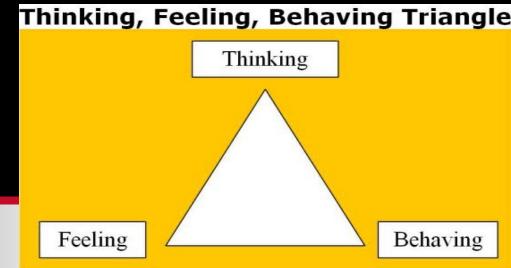
- 53.9% reported having more than average or tremendous stress over the last 12 months
- 27.5% of students reported that their academics were negatively affected because of stress
- Correlations found significant relationships between stress and sleep





Cognitive Theory Guides COPE

- CBT principles apply to everyone. We all have cognitive distortions at times, automatic negative thoughts
- In COPE, students are taught why changing their thoughts from negative to positive changes their feelings and behaviors





Cognitive Behavioral Skills Building Lays Down New Neuronal Tracks



When we learn to cope in positive ways, myelin lays down new tracks. The young person's brain is pruning and growing new neuronal connections. It is a prime opportunity to establish new healthy neuronal connections with practicing of COPE skills (homework)



The 7 Session COPE Topics

- 1. Thinking, Feeling, and Behaving: What is the connection?
- 2. Positive Thinking and Forming Healthy Thinking Habits
- 3. Coping with Stress
- 4. Problem Solving & Setting Goals
- 5. Dealing with Emotions in Healthy Ways through Positive Thinking and Effective Communication
- 6. Coping with Stressful Situations
- 7. Pulling it all together for a Healthy You



Findings from Prior Studies Testing COPE

(Melnyk et al., in press; Melnyk et al., 2013;

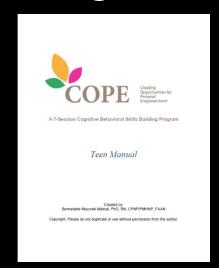
Lusk & Melnyk, 2011; Melnyk et al, 2009)

Adolescents who have received COPE had

- A decrease in depressive symptoms
- A decrease in anxiety symptoms
- An increase in self-concept
- Enhanced social skills
- Decreased alcohol use
- Higher academic performance and grades
- Prevention of overweight/obesity



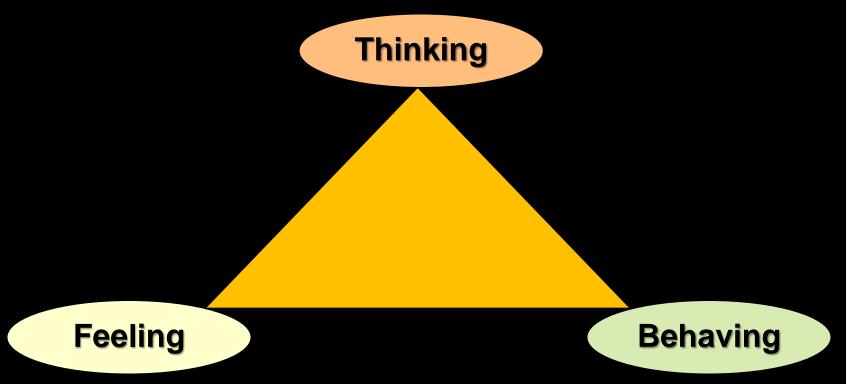
The COPE Program includes those 12 components of effective therapy in a 7 session manual for Teens and Young Adults





Content from the COPE Manual

CBT Consists of cognitive restructuring, problem solving and behavioral change



The thinking/feeling/behaving triangle



Practice: Mindfulness Integrated CBT

Fun things that you can do to stay in the present moment

- Chew a piece of gum and count how many chews it takes to loose its flavor
- Bounce a ball 50 times and count along the way
- Make clapping sounds and have your friends repeat the pattern



COPE Homework/Skills Building

An essential component of CBT, allows the individual to put into practice the skills they are learning

Homework reinforces the content and allows practicing of the skills



Session 1 Homework Example

Name three situations in the past few days of how thinking negatively affected how you felt and how you behaved. Then, write down how you could have changed your thinking to feel better and act differently



Session 3 Stress and Coping

What is stress?

Stress is when you do not have the ability or skills to deal with things that you see as frightening or unpleasant (like taking a test that you didn't study for or missing your curfew)



Positive Ways to Deal with Stress

- Talking about how you feel
- Exercise
- Seeking out family and friends for support and help
- Writing your thoughts and feelings in a journal
- Turning a negative thought in response to a stressor into a positive one
- Taking one bite of the elephant at a time when you start something new





COPE Teaches the ABCs

STRESSOR (Activator Evident)



REPLACE THE NEGATIVE WITH A POSITIVE THOUGHT

POSITIVE EMOTION & BEHAVIOR (Consequence)



COPE Goal Setting & Self-Monitoring Log

Goal: Write Two Positive	Self-Sta	tements			
Goal for Number of times	per day to	say the pos	itive self state	ements	
Number of Times You Said	d Your Po	sitive Self-St	atements		
Thinking Day #1 Day #7	ay #2	Day #3	Day #4	Day #5	Day#6
Emotions (How have yo	u felt thi	s week?)			
Rate your emotions on a scale from 0 "not at all" to 10 "a lot"	Worried Stressed Happy Sad	d			



Regulation of Emotions

- Positive self-talk
- Counting to 100
- Deep breathing (take a deep breath and hold it for 2 seconds, then breath out slowly through your mouth)
- Walk away and find a quiet place to put your head down and practice relaxation breathing
- Find a friend who will listen and support you
- Leave and go for a walk/ bike ride/ work out



The Intervention Pilot Study with OSU College Freshmen

Purpose: To determine the feasibility, acceptability and preliminary effects of the on-line COPE program on personal beliefs, stress, depressive, anxiety symptoms and academic performance

Sample: Freshmen students enrolled in a required one credit survey course in 4 OSU colleges

Methods: This was a randomized controlled pilot study. Sections of students taking a required one credit freshman survey course were randomly assigned to COPE or non-COPE. Freshmen in these sections were invited to participate in this study.

The Experimental Groups: The survey course with COPE, and the survey course without COPE



Valid and Reliable Measures Used in the Study

- The Patient Health Questionnaire-9 (PHQ-9)
- The Generalized Anxiety Disorder (GAD) Scale
- The Personal Beliefs Scale

Demographics and student life questions also were obtained



Demographic Data from the Pilot Study

- 102 females, 19 males
- 99 White (89.2%)
- At baseline, 28.9% had mild anxiety, 9.1% had moderate anxiety, and 2.5% had severe anxiety
- At baseline, 23.1% had mild depressive symptoms, 5% had moderate depressive symptoms, .8% had moderately severe depressive symptoms and 2.5 percent had severe depressive symptoms



Demographic Data from the Pilot Study

- 9.9% have been diagnosed with a mental health disorder, including 2.5% with AD/HD, 5.8% with an anxiety disorder, 7.4% with depression; 0 with an eating disorder; 0 with bipolar disorder
- 27.3% reported consuming alcohol once a week or greater
- 9.9% reported being currently treated for a mental health disorder
- 99 White (89.2%)



Demographic Data from the Pilot Study

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Significant Baseline Correlations Among Variables (p<.001)

- Depression and Anxiety: .75
- Cognitive Beliefs and Depression: -.45
- Cognitive Beliefs and Anxiety: -.42
- Depression and Coping Well with Stress: -.45
- Anxiety and Coping Well with Stress: -.51



Implications for Practice and Research

- All college students should be screened for depression, anxiety and stress
- Those who have elevated symptoms should be provided with interventions
- College freshman should be educated regarding depression, anxiety and stress and provided preventive interventions and resources to manage these symptoms
- Randomized controlled trials testing interventions are needed with cognitive beliefs targeted



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