

# Let's Make It Happen: early help for adolescent depression

---

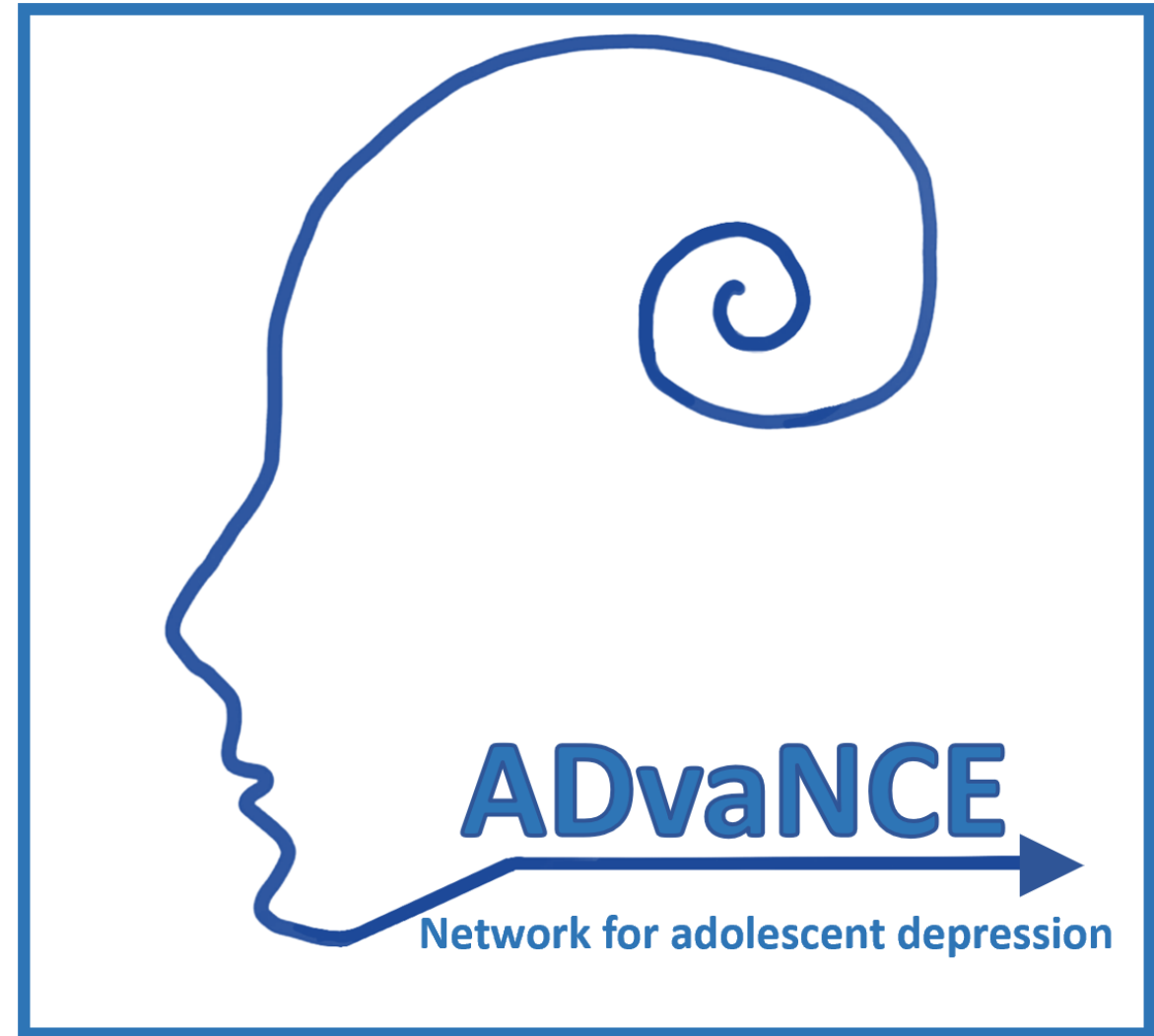
Emerging Minds Summit Workshop

17/10/22

# The Adolescent Depression Network to Consolidate Expertise (ADvaNCE)

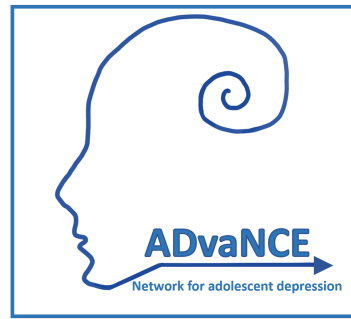
*Dr Maria Loades (clinician, researcher)*

*Georgia Herring & Amelia Talbot (lived  
experience)*



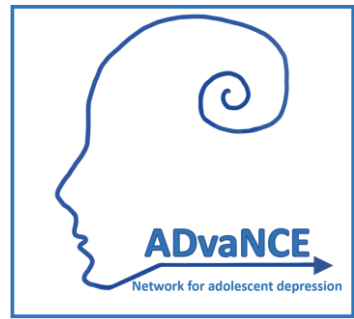
## Who are ADvaNCE?

- Hello and welcome!
- Special interest research group, funded by Emerging minds and the Southwest Doctoral Training Partnership (2020)
- Co-production is at the heart of what we do – why it's important to us.



# Our founding members

*Co-production in our team*



DR VICTORIA PILE



DR MARIA LOADES



GEORGIA HERRING



PROFESSOR SHIRLEY REYNOLDS



DR FAITH ORCHARD

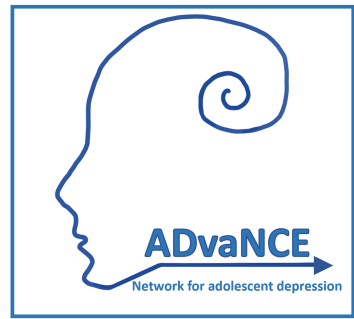


ALEX BULLARD



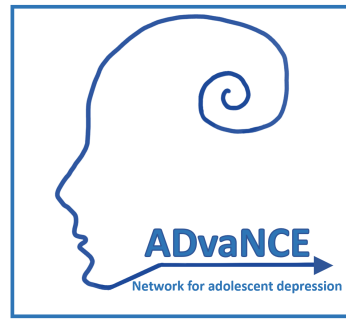
PROFESSOR STELLA CHAN

# What were our aims?



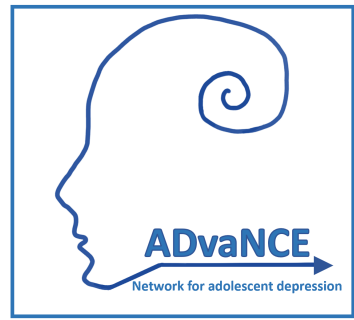
- Build a diverse network of young people, parents, clinicians, charity partners and researchers.
- Together with existing evidence, develop meaningful and relevant solutions to promote action and change to improve the identification and treatment of adolescent depression in the UK.

# What we did: *Where do we start?*



Our founding group identified three key questions from the JLA priorities and ranked these in importance. The three most highly ranked priorities were conceptualised as three key topics:

- Identification: What methods can be used to identify depression in children or young people?
- Intervention: What are the best early interventions (treatments and therapies) for depression? And how early should they be used in order to result in the best patient outcomes?
- Empowerment: What are the best ways to tell young people with depression about treatment options and their effectiveness to help them feel more in control and to manage their difficulties?

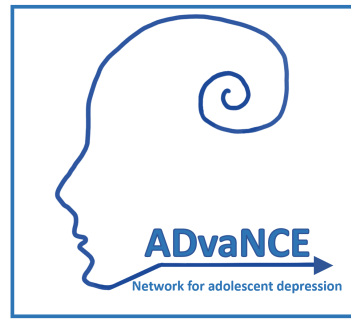


# What we did: *The Workshops*

- To reach as many diverse members as possible to ran three online workshops.
- Each workshop included a guest speaker who spoke about current research in the field related to either identification or treatment.
- We collected young people's responses to our survey.
- In groups, we developed two solutions for how we could improve how we identify depression in young people.
- We reconvened and shared our ideas, we then openly discussed our solutions, building on idea's using the knowledge and expertise from our diverse members.

# What we found...

- Each workshop produced a fantastic collection of solutions!



| Identification  | Intervention   | Empowerment   |
|---|--|---|
| Screening at every opportunity e.g physical health appointments, in schools | Adapt communication style of interventions, using creative strategies to understand and communicate emotions rather than written methods (e.g. drama, art) | Encourage relationship and trust building from the very start of the care pathway e.g referral      |
| Wellbeing workshops in schools led by external practitioners                | Drawing on more accessible human experiences such as sleep, rather than using professional jargon and concepts   | Empowerment at every level, involving young people in decision making at every stage of the journey |





## A multi-stakeholders perspective on how to improve psychological treatments for depression in young people

Victoria Pile<sup>1</sup> · Georgia Herring<sup>2</sup> · Alex Bullard<sup>3</sup> · Maria Loades<sup>2</sup> · Stella W. Y. Chan<sup>4</sup> · Shirley Reynolds<sup>4</sup> · Faith Orchard<sup>5</sup>

Received: 18 November 2021 / Accepted: 30 April 2022

© The Author(s), under exclusive licence to Springer-Verlag GmbH Germany 2022

Meta-analyses of the effectiveness of psychological treatments typically report standardized mean differences (SMD), which can be problematic as they do not necessarily translate into clinically significant change. Cuijpers et al.'s meta-analysis [1] reported instead on response and recovery rates, clinically significant change and deterioration. The meta-analysis found that only 39% of young people receiving psychotherapy for depression responded to treatment (defined by  $\geq 50\%$  symptom reduction) compared to 24% of those who did not receive psychotherapy. These sobering findings make it clear that innovative approaches are needed to reduce the personal and societal burden of depression.

Research could explore various avenues to generate more effective interventions, we believe that some of the most promising avenues include: developing interventions that target key mechanisms which drive and maintain depression [2]; better understanding who might benefit from which type of intervention [3]; and working with young people to design and implement new treatments [4]. More specific 'key questions' for research have also been outlined by several James Lind Alliance (JLA) priority-setting partnerships, which have been funded to co-develop priorities for depression research (e.g., <https://www.jla.nihr.ac.uk/priority-setting-partnerships/depression/top-10-priorities/>) and youth mental health research more broadly (<https://mcpin.org/priorities-for-research-in-children-and-young-peoples-mental-health/>).

Here, we report on our approach to translating some of these priorities into meaningful future directions for research and clinical practice.

### Insights from ADvANCE

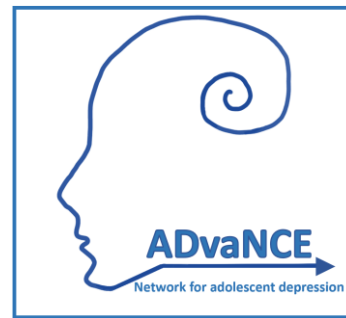
The Adolescent Depression Network to Consolidate Expertise (ADvANCE) is a multidisciplinary network for people with a special interest in adolescent depression. By bringing together researchers, clinicians, young people, parents and charity partners, and drawing on the existing evidence and priority-setting exercises, ADvANCE aimed to co-design solutions to the JLA priorities, to progress this essential work and promote action and change. Whilst the network is led by a core group of individuals from the UK (individuals with lived experience, clinicians and researchers), ADvANCE organized workshops to create a wider international network of individuals to co-design solutions to these priorities.

First, our core group members examined the top 10 priorities for both depression and youth mental health (see links above), and independently rank-ordered priorities to identify three questions from the JLA priorities to be the focus of the ADvANCE workshops (topics included: identification of depression symptoms and diagnosis, intervention, and empowerment). Second, we conducted a survey ( $n = 13$ ) to gather young people's opinions on solutions to these questions. The survey was designed by core members and led

✉ Faith Orchard  
f.orchard@sussex.ac.uk

<sup>1</sup> Department of Psychology, Institute of Psychiatry, Psychology and Neuroscience, King's College London, De

# Reporting what we found





# Aim

- realise steps to the proposed solutions for adolescent depression developed in virtual workshops during 2021.

Getting  
stuck in

---

Groups of 3

---

Introduce yourselves to one another

---

Who?

---

Where?

---

Interest in adolescent depression

# Getting to know your persona

---

- What would enable helpseeking?
- What would get in the way?



# No wrong door

---

- Sketch:
  - Who might they ask?
  - What they need help with?
  - What kind of help they need?







What a did you  
get out of the  
workshop?

And how will this change what you do  
going forwards?



# How can we sustain ADVANCE?

Survey

[https://bathpsychology.eu.qualtrics.com/jfe/form/SV\\_6JbQXaJi1P5ZQto](https://bathpsychology.eu.qualtrics.com/jfe/form/SV_6JbQXaJi1P5ZQto)