

An Examination Of The Therapeutic Impact On Adolescents Dealing With Depression And Anxiety

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Abstract

This study focuses on current research as well as evidence-based methodologies to assess the efficacy of various treatment modalities for teenagers who are experiencing depression and anxiety. Adolescents often have mental health issues, such as anxiety and depression, which significantly impact their emotional, social, and academic well-being. The study examines medication, lifestyle adjustments, cognitive-behavioral therapy (CBT), interpersonal therapy (IPT), and other modern therapeutic procedures. Cognitive behavioural therapy (CBT) is an effective and structured treatment that may successfully target the negative thought patterns and behaviours associated with depression and anxiety. Interpersonal Psychotherapy (IPT) has shown encouraging outcomes, particularly in the treatment of depressive symptoms. Its primary objective is to improve interpersonal relationships. Teens with severe or persistent symptoms may be considered for pharmacological treatment, such as selective serotonin reuptake inhibitors (SSRIs). Medication may effectively reduce symptoms, but it is crucial to be vigilant for any negative effects and adjust the dose according to each individual patient. Patients suffering from mild to severe diseases may significantly enhance treatment outcomes by combining medication and psychotherapy. Adolescents afflicted with depression as well as anxiety may experience alleviation via a mix of medication and therapy. Additionally, they can derive advantages from implementing constructive modifications to their lifestyle and seeking assistance from friends and relatives. To provide comprehensive care for adolescents grappling with these challenging mental health illnesses, it is imperative that future research continues to evaluate and enhance these interventions, with the aim of increasing their efficacy and accessibility.

KEYWORDS: *Depression, Anxiety, Adolescents, Therapeutic.*

1. INTRODUCTION

During puberty, a person's physical, emotional, and psychological selves undergo profound changes. Many people's first signs of mental health issues, such as depression and anxiety, appear around this period. Studies show that up to 20% of teens experience depression and 30% deal with anxiety disorders. Adolescents often suffer from these illnesses. Because these issues may have far-reaching consequences for adolescent health and development, it is crucial to have effective treatment methods for them. When an adolescent goes through the signs of depression, which include persistent sadness, loss of interest in activities, particularly disruptions in daily functioning, it may have a negative impact on their academic performance, social relationships, and self-esteem. Anxiety disorders, characterised by an excessive feeling of fear, worry, or unease, may also impair an adolescent's ability to take part in everyday activities and enjoy life. Because these conditions are associated with a higher risk of substance abuse, suicidal ideation, and self-harm, there is an urgent need for better treatment methods. Anxiety and depression in teenagers have seen a dramatic shift in the therapeutic landscape due to the growing body of

research supporting various therapy modalities. It is believed that cognitive-behavioral therapy (CBT) may significantly improve symptoms of anxiety and depression. Cognitive behavioural therapy (CBT) aims to assist individuals undergoing emotional distress in identifying and altering unproductive thought patterns and behavioural patterns. It helps teens develop healthier coping mechanisms for stress and problem-solving, which in turn reduces symptoms, according to the research. Adolescents who struggle with social interaction may benefit greatly from interpersonal therapy (IPT), another useful treatment option **(Creswell, 2020)**.

IPT focuses on enhancing social functioning and relationships. Combinations of psychotherapy and pharmaceutical treatments, particularly selective serotonin reuptake inhibitors (SSRIs), are common for adolescents with moderate to severe symptoms. Selective serotonin reuptake inhibitors (SSRIs) are effective antidepressants and anxiety medications when used as directed. The goal of tailoring medication and treatment plans to each patient is to provide the best possible therapeutic benefit with the fewest possible side effects. Medication and psychotherapy are great ways to help with depression and anxiety, but it's also vital to make changes to lifestyle, such as getting enough sleep, eating better, and exercising regularly. Peer support initiatives and school-based activities aim to reduce stigma and provide a friendly atmosphere, which might enhance the effectiveness of treatment. The purpose of this study is to compare and contrast various therapeutic approaches for anxious and depressed teens by reviewing relevant literature and evidence-based practices. Our study is focused on evaluating the impact of different treatments to optimise care and enhance outcomes for this vulnerable population **(Birmaher, 2019)**.

2. BACKGROUND OF THE STUDY

The formative years of adolescence are marked by changes on many levels, including physiological, psychological, and emotional. From childhood until adulthood, humans undergo a period of immense transformation. Unfortunately, this is also a period when mental health issues, such as depression and anxiety, are more likely to manifest. These disorders are increasingly being recognised as significant difficulties among teens due to the growing body of evidence proving their prevalence and impact on their lives. Mental health disorders, such as anxiety and sadness, are common among adolescents. More than one-third of adolescents suffer from an anxiety condition, and around one-fifth have major depressive episodes annually, as shown in studies. When these disorders start in adolescents, they halt their developmental trajectory, which could have an impact on their social interactions, academic achievement, and overall quality of life. Significant challenges, such as worse academic performance, increased risk of drug abuse, and heightened susceptibility to self-harm, are common among teenagers whose anxiety and depression go untreated. Furthermore, the fact that many individuals deal with mental health issues even after reaching maturity is evidence of the lasting effects of these conditions. To address these challenges, effective therapeutic methods tailored to the unique needs of adolescents are required. The treatment landscape for teenage anxiety and depression has changed dramatically since several evidence-based approaches have become available **(Davidson, 2021)**.

Cognitive behavioural therapy (CBT) is one of the several treatments that has been the subject of extensive research. One of the main goals of cognitive behavioural therapy (CBT) is to help patients see when their thoughts and actions are contributing to their emotional distress, and then to help them alter those patterns. Through the development of more effective means of dealing with stressful situations and resolving problems, cognitive behavioural therapy (CBT) has shown remarkable promise in enhancing overall functioning and decreasing symptoms of anxiety and depression. Another effective treatment option is interpersonal therapy (IPT), which aims to improve patients' communication and social skills. The use of IPT may be a game-changer for adolescent relationships and societal problems. In order to help adolescents cope with interpersonal issues and improve their mental health, IPT focuses on creating support networks and addressing issues with social functioning. To alleviate moderate to severe symptoms, pharmaceutical medications like SSRIs are often prescribed to teens. Because they increase serotonin levels in the brain, SSRIs are beneficial in treating anxiety and depression. Due to the potential for harmful effects and the necessity for proper dosage, it is crucial to thoroughly monitor the use of SSRIs in teenagers, notwithstanding their potential helpfulness **(Hetrick, 2022)**.

In addition to medication and psychotherapy, changing one's lifestyle is crucial in managing mental health conditions such as anxiety and depression. Having a regular exercise programme, eating well, and getting enough sleep all contribute significantly to overall mental health, and they also make other treatments work better. Communities and schools may also undertake peer support programmes and school-based programming that may

help adolescents. These courses may help people overcome mental health stigma and get access to additional services. There is still a need for ongoing research into better and more effective treatment procedures, even as therapy has advanced. A better grasp of the long-term effects of therapy, more access to care, and research into individualised treatment plans are all necessary for better results. This project aims to investigate the effects of different therapy methods on depressed and anxious teens in order to help create more effective and all-encompassing care strategies for this vulnerable population. Looking at current methods and identifying areas that may be improved allowed the research to optimise treatment and increase adolescent mental health (Jorm, 2023).

3. PURPOSE OF THE RESEARCH

The purpose of this study is to determine the most effective therapies for adolescents suffering from depression and anxiety. Gaining a comprehensive understanding of the most efficient strategies for addressing mental health challenges in adolescents is crucial for enhancing results and overall well-being for those affected. This is because these disorders are increasingly acknowledged as significant issues in public health. This study aims to investigate and analyse the effects of different methods of treatment, such as cognitive behavioural treatment (CBT), interpersonal treatment (IPT), pharmaceutical treatments, as well as lifestyle interventions, on symptom relief and overall well-being in this age group. Depression and anxiety may negatively impact the academic performance, social relationships, and psychological well-being of adolescents. Therefore, it is crucial to identify the appropriate therapeutic approaches in order to develop targeted medicines that may effectively resolve these issues. The objective of this study is to ascertain the most efficacious therapy among several available options in addressing the needs of teenagers, specifically in terms of alleviating symptoms, enhancing functionality, and providing developmental assistance. The study aims to fill gaps in the current literature by examining the possible synergistic effects of different therapy combinations and provide fresh insights into the effectiveness of individual therapies. Based on a study of existing data and evidence, clinicians, educators, and lawmakers may anticipate receiving practical recommendations for enhancing therapy for youth suffering from depression and anxiety. The ultimate goal is to enhance understanding of how various therapeutic options might be used to enhance the mental well-being of adolescents. In order to provide optimal care for adolescents facing challenging mental health difficulties, the outcomes have contributed to the establishment of effective protocols, the improvement of treatment approaches, and the guidance of future investigations in this field.

4. LITERATURE REVIEW

The effectiveness of various techniques to treat anxiety and depression in adolescents has been the topic of several research. Anxiety and major depressive disorder (MDD) are common among adolescents; these mental health issues may manifest in a broad range of ways and have a big influence on people's daily lives. Because these diseases are prevalent among teenagers, it is critical to find and assess effective treatments for them. Adolescents suffering from anxiety and depression may find relief via cognitive-behavioral therapy (CBT), according to a large body of evidence. People with emotional distress may find relief via cognitive behavioural therapy (CBT), which focuses on altering maladaptive ways of thinking and behaving. Through the development of more effective coping mechanisms and problem-solving skills, CBT considerably decreased sad and anxious symptoms in adolescents, according to research by Weisz et al. Cognitive behavioural therapy (CBT) has the potential to treat the cognitive distortions and behavioural problems associated with various disorders. This is because CBT is organised and goal-oriented. Consistent with other studies, meta-analyses demonstrate that CBT is useful in reducing symptoms and enhancing general functioning. Teen depression treatment that is well-respected also includes interpersonal therapy (IPT) (Kendall, 2024).

The emphasis on building better relationships and communication skills in IPT may be quite helpful for adolescents who are having difficulty interacting with others. One way in which IPT helps depressed teens is by assisting them in navigating challenging social circumstances and establishing more robust support networks, as pointed out by Mufson et al. Interpersonal processing therapy (IPT) is an appealing option for treating depression in a social and interpersonal issue environment since it improves both mood and interpersonal functioning. In addition to psychotherapy, pharmaceutical medications such selective serotonin reuptake inhibitors (SSRIs) may be prescribed to adolescents with moderate to severe anxiety and depression. One frequent way that SSRIs alleviate symptoms is by increasing levels of serotonin in the brain. Despite the efficacy of SSRIs, Hetrick et al. note in their comprehensive review that their use necessitates careful monitoring due to the possibility of side effects and the need for individualised dose. When medication and psychotherapy are used together, it creates a

more comprehensive strategy for managing symptoms, which often leads to better treatment outcomes. Modifying one's way of life is as essential as medication and psychotherapy for the management of mental health conditions such as anxiety and depression. A balanced diet, sufficient sleep, and regular exercise are the pillars upon which a person's mental health rests. Studies have shown that making changes to one's lifestyle may have a positive effect on one's mood and stress levels, which can enhance the efficacy of therapy. Research shows that a mix of psychotherapy, medication, behavioural adjustments, and supportive environments is the most effective method to treat anxiety and depression in teenagers. But, in order to refine existing procedures and find new ways to improve treatment outcomes, further research is required. By using these findings, practitioners may enhance their mental health care for teens overall and address their individual needs (Murray, 2019).

5. RESEARCH QUESTION

i) How do demographic factors such as age, gender, and socioeconomic status influence the therapeutic outcomes for adolescents undergoing treatment for depression and anxiety?

6. METHODOLOGY

A cross-sectional investigation was carried out by the researchers, and the study was carried out by the researcher for four months to collect the data. For the cross-sectional design to be implemented, it was necessary to gather data at a single moment in time, which was both efficient and inexpensive. China's many different organisations were responsible for carrying out the research. A technique that is quantitative was chosen by the researcher because of the restricted resources and the short amount of time available. Through the use of a random sampling process, each and every respondent was contacted for the survey. Following this, a sample size was determined using Rao Soft, and the total number of samples was 473. Individuals confined to wheelchairs or who are unable to read and write the survey questions read aloud by a researcher, who then records their answers word for word on the survey form. While participants waited to complete their surveys, the researcher informed them about the project and field any questions they may have. On occasion, it is asked that people finish and send back questionnaires simultaneously.

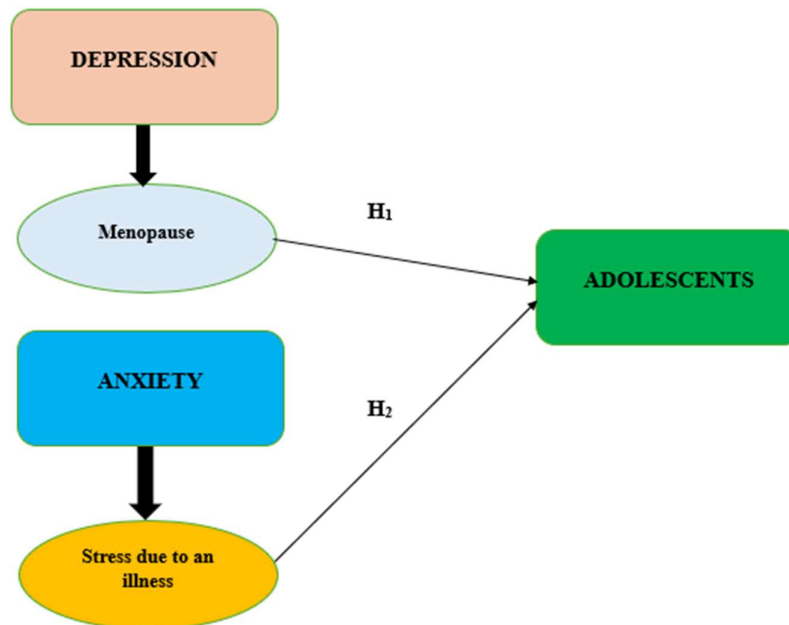
Sampling: Research participants filled out questionnaires to provide information for the research. Using the Rao-soft programme, researchers determined that there were 473 people in the research population, so researchers sent out 580 questionnaires. The researchers got 567 back, and researcher excluded 67 due to incompleteness, so researchers ended up with a sample size of 500.

Data and measurement: A questionnaire survey was used as the main source of information for the study (one-to-correspondence or google-form survey). Two distinct sections of the questionnaire were administered: Both online and offline channels' (A) demographic information, and (B) replies to the factors on a 5-point Likert scale. Secondary data was gathered from a variety of sites, the majority of which were found online.

Statistical Software: SPSS 25 was used for statistical analysis.

Statistical tools: To get a feel for the data's foundational structure, a descriptive analysis was performed. A descriptive analysis was conducted in order to comprehend the fundamental characteristics of the data. Validity was tested through factor analysis and ANOVA.

6.1 CONCEPTUAL FRAMEWORK



7. RESULTS

Validating the basic structure of the measurement battery is a common use of factor analysis (FA). The logic goes like this: These ratings might be linked to hidden or underlying characteristics. The foundation of accuracy analysis is modelling (FA). Showing how data, unknown variables, and measurement errors are all interrelated is the main goal here. When deciding if data is suitable for factor analysis, the Kaiser-Meyer-Olkin (KMO) Test may be used. Scientists have verified that there is sufficient data for the whole model and each of its variables. Statistical analysis allows researchers to ascertain the degree to which many independent variables have a common variance. Factor analysis is quite effective when dealing with very small data sets. KMO returns integers between zero and one. Kaiser-Meyer-Olkin (KMO) values between 0.8 and 1.0 indicate a sufficient sample size. Kaiser-Meyer-Olkin (KMO) measures below 0.6 suggest insufficiency and need a new sample. There is a large gap between 0.5 and 0.6 when certain authors utilise it for this function. It stands for Knowledge Management Officer, which is an abbreviation. When the score is close to zero, partial correlations take precedence over full ones. The existence of large-scale correlations has been a major problem with component analysis that academics have recently faced. Here scholars may see the upper and lower bounds of what is considered acceptable by Kaiser: The following are the absolute minimum and maximum requirements set by Kaiser. An interval of whole numbers, more specifically from 0.050 to 0.059. On the middle school quality point scale, it typically ranges from 0.68 to 0.89, with a lower bound of 0.66 to 0.69. Between 0.90 and 1.00, a wide range of values may be seen.

Table 1: KMO and Bartlett's Test^a

KMO and Bartlett's Test ^a		
Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.863
Bartlett's Test of Sphericity	Approx. Chi-Square	4540.175
	df	190
	Sig.	.000
a. Based on correlations		

In exploratory factor analysis (EFA), the first step is to check whether the data is suitable for factor analysis. According to Kaiser, factor analysis cannot be performed until the KMO (Kaiser-Meyer-Olkin) measure of sample adequacy coefficient value is more than 0.5. The Kaiser-Meyer-Olkin (KMO) test for sample adequacy is

responsible for this. Based on the data that was used, this study produced a KMO value of .863. And according to Bartlett's test of sphericity, the significance level was found to be 0.00.

TEST FOR HYPOTHESIS

Scientific teams often develop informed assumptions, or hypotheses, before discussing the concept with colleagues and conducting tests to determine its viability. In order to come up with a hypothesis that can be tested, scientists conduct a comprehensive literature study. Researchers found that the main hypothesis of this investigation was right. What researchers call a "hypothesis" is really just an assumption that tries to explain something that has happened. In order to conduct a thorough investigation, several theories were put up and tested.

❖ DEPENDENT VARIABLE

ADOLESCENTS

As they go from childhood into maturity, those who are ten to nineteen years old are referred to as adolescents. Major emotional, psychological, and physiological changes occur over this period, including puberty, cognitive development, and the creation of one's identity. Adolescents not only undergo rapid mental and physical maturation, but they also start to form their own unique set of fundamental beliefs and ideals. Gaining independence and trying new relationships may have a positive or negative impact on their psychological and emotional well-being. It is crucial to have a good understanding of adolescence in order to provide appropriate guidance and support throughout this critical time.

❖ INDEPENDENT VARIABLE

DEPRESSION

Depression is a mental condition characterised by gloominess, pessimism, and a loss of pleasure in things that used to bring researchers delight. Along with its psychological and behavioural impacts, it may cause physical symptoms such as lethargy, altered eating habits, and trouble sleeping. There are a lot of factors that go into its formation, such as genetics, biology, psychology, and environmental factors. Effective treatment often incorporates medication, psychotherapy, and lifestyle improvements to tackle the many aspects of the disorder and improve overall health.

ANXIETY

Excessive and persistent unease, dread, or concern that may influence daily functioning and other aspects of life are characterised by anxiety, a mental disease. Common physical symptoms include a beating heart, heavy sweating, trembling, and tight muscles. Any number of stressful events or unexplained causes may trigger the development of an anxiety disorder, including panic attacks, social anxiety, and specific phobias. The ability to go about one's everyday life and one's quality of life are both profoundly affected. The most effective treatment for anxiety disorders is a multi-pronged approach that includes medication, behavioural adjustments, and talk therapy.

❖ FACTOR

Menopause

The biological process of menopause, which usually begins between the ages of 45 and 55, signifies the cessation of an individual's menstrual periods and fertility. After a woman goes 12 months without menstruation, a diagnosis is made. Hot flashes, nocturnal sweats, and mood swings are some of the symptoms of menopause, which is caused by a decrease in oestrogen and progesterone production by the ovaries. It marks the end of the reproductive years and the beginning of the post-reproductive ones. Menopause may have an effect on cardiovascular risk and bone health as well.

Stress due to an illness

As people deal with the physical and mental impacts of a health problem, they may undergo emotional and psychological pressure, which is known as stress due to sickness. Many things might contribute to this stress, such as worries about the diagnosis, the treatment, and how it affected everyday life and relationships. Overall health is negatively impacted by its symptoms, which might include worry, frustration, or despair. Stress management

in the context of sickness requires attending to both the physiological and psychological manifestations of the disease.

RELATIONSHIP BETWEEN MENOPAUSE AND ADOLESCENTS

Being in separate life phases with different physiological processes, the connection between menopause and teenagers is mostly indirect. During menopause, a woman's hormone production drops to a steady state, ending her monthly cycles and her fertility. This transition happens around middle age. When it comes to secondary sexual traits and the beginning of menstrual periods, adolescents are in the midst of puberty, a period when their bodies begin to manufacture sex hormones like testosterone and oestrogen. Hormonal shifts and reproductive health are common themes across all phases, but the effects and challenges of each are distinct. Health and mental issues specific to each group may be better addressed with an understanding of these stages.

On the basis of the above discussion, the researcher formulated the following hypothesis, which was analysed the relationship between menopause and adolescents.

H₀₁: “There is no significant relationship between menopause and adolescents.”

H₁: “There is a significant relationship between menopause and adolescents.”

Table 2: ANOVA(H₁)

ANOVA					
Sum					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	37319.858	358	4415.137	2649.423	.000
Within Groups	414.227	141	5.356		
Total	37734.085	499			

In this study, the result is significant. The value of F is 2649.423, which reaches significance with a p-value of .000 (which is less than the alpha level). This means the **“H₁: There is a significant relationship between menopause and adolescents.”**

RELATIONSHIP BETWEEN STRESS DUE TO AN ILLNESS AND ADOLESCENTS

Adolescents are more susceptible to the emotional toll that health problems may take, so there is an obvious connection between illness-related stress and this age group. The effects on adolescent daily functioning, academic achievement, and social relationships from both acute and chronic diseases may be overwhelming. If researchers already suffer from mental health disorders like anxiety or depression, the stress could make them worse. Their self-esteem and developmental milestones may also be affected by the condition. Adolescents' medical requirements and the psychological assistance they need to deal with the emotional repercussions of disease and keep themselves healthy are both important components of effective stress management.

On the basis of the above discussion, the researcher formulated the following hypothesis, which was analysed the relationship between stress due to an illness and adolescents.

H₀₂: “There is no significant relationship between stress due to an illness and adolescents.”

H₂: “There is a significant relationship between stress due to an illness and adolescents.”

Table 3: ANOVA(H₂)

ANOVA					
Sum					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	41531.595	455	3214.321	2124.615	.000
Within Groups	711.488	44	5.356		
Total	42243.083	499			

In this study, the result is significant. The value of F is 2124.615, which reaches significance with a p-value of .000 (which is less than the alpha level). This means the *“H₂: There is a significant relationship between stress due to an illness and adolescents.”*

8. DISCUSSION

Discussion of this study a comprehensive approach to addressing anxiety as well as depression in teens. Adolescence, a critical stage of development, may be significantly impacted by mental health issues, affecting social, intellectual, and emotional growth. Optimal therapies often include a combination of therapeutic modalities and pharmaceutical interventions. Cognitive-behavioral therapy (CBT) is widely regarded as one of the most extensively studied and effective treatments for adolescent anxiety and depression. Cognitive behavioural therapy (CBT) enables individuals to identify and challenge harmful thought patterns, while acquiring more effective strategies for managing difficulties. Furthermore, it is crucial for adolescents to enhance their communication skills, which may be achieved via the use of family therapy including interpersonal therapy (IPT). If symptoms are severe or unresponsive to therapy alone, medication such as SSRIs may be prescribed. However, medication is often selected after a thorough evaluation due to the associated dangers and the need for careful supervision. Improving mental health may be achieved by modifying one's lifestyle, including participating in consistent physical activity, adhering to a well-balanced diet, and ensuring sufficient sleep. Enhancements to treatment may be achieved by involvement in school-based activities or peer support groups. To achieve optimal outcomes in addressing anxiety or depression in adolescents, it is advisable to use a comprehensive approach that encompasses psychotherapy, pharmacotherapy (if necessary), and lifestyle adjustments. This intervention addressed their unique developmental needs and enhanced their general well-being.

9. CONCLUSION

It is essential to use a comprehensive and individualised strategy when examining the effectiveness of therapy for youth with depression and anxiety. Interpersonal therapy (IPT) aims to improve relationships and communication skills, while cognitive-behavioral therapy (CBT) assists adolescents in developing the ability to control and reframe harmful cognition processes. These two modalities often collaborate to provide successful therapy. There is compelling data indicating that these therapies have the ability to reduce symptoms and enhance coping skills. If psychotherapy is ineffective, SSRIs (selective serotonin reuptake inhibitors) may be considered as an alternative; nevertheless, researchers must be vigilant about their potential adverse effects. Moreover, it is essential to enhance mental well-being and enhance overall health by lifestyle modifications such as regular physical activity, a nutritious diet, and enough sleep. Engaging family members and creating supportive environments within school and social circles may significantly enhance the effectiveness of therapy. School-based activities and peer support groups may also help provide ongoing assistance and reduce stigma. For the effective management of depression and anxiety in teens, it is essential to develop a thorough treatment plan that considers their specific needs. An effective approach should include psychotherapy, pharmacotherapy, lifestyle adjustments, and supportive environments. In order to enhance the long-term psychological well-being and ability to cope with adversity in this susceptible population, it is essential to consistently assess and modify treatment approaches to achieve optimal outcomes.

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