TARGET AUDIENCE
This program is for adolescents who have mild to moderate depression and their parents.

SUMMARY
Interpersonal Psychotherapy for Depressed Adolescents (IPT-A), a community- or school-based program, is designed to relieve adolescents’ depressive symptoms.

EVIDENCE
Results of several randomized trials revealed significant reductions in depressive symptoms for adolescents who had participated in IPT-A compared to youth in treatment as usual, clinical monitoring, or wait-list control conditions. One of these trials assessed maintenance of effects and found that reductions in symptoms were maintained 3-months post-treatment. Another study of IPT-A found that reductions in depressive symptoms were maintained for 1-year post-treatment; however, this study lacked a control group with which to make comparisons. Similarly, a study comparing individual versus group IPT-A found reductions in depression, anxiety, youth-reported internalizing problems, and global functioning in both groups at post-treatment that were maintained 1 year later. Lack of a no-treatment or wait-list control group limits conclusions about the long-term outcomes of this program.

COMPONENTS
IPT-A intends to help participants improve their skills in communication and social problem-solving, deal with current interpersonal problems, and increase their relationship satisfaction. The program is delivered by trained therapists and consists of three treatment phases.

- Initial phase - Sessions 1 to 4: The therapist provides education about depression, encourages hope, conducts an inventory of significant relationships in the adolescent's life using a Closeness Circle diagram, explains connections between relationship challenges and depression, and identifies the adolescent's problem area (e.g., grief, conflicts, transitions, skills deficits) that will be the focus of the remaining sessions.
- Middle phase - Sessions 5 to 9: The therapist and adolescent collaboratively work to improve the targeted problem using communication strategies, role-playing, out-of-session practice and review, and other techniques. The therapist helps the adolescent identify connections between improved mood and constructive problem-solving and positive communication.
- Termination phase - Sessions 10+: The therapist and adolescent review skills learned, discuss the participant's recovery from depression and the end of the therapeutic relationship, and assess the need for further treatment.

Parents are strongly encouraged to participate at three points during treatment. At the first session, parents provide information and learn about treatment. During the middle phase, a parent-adolescent session is offered, if the targeted problem area involves a parent. At the end of treatment, parents learn of the adolescent's overall progress, ways to maintain changes in family interactions, warning signs of relapse, and additional treatment options.

PREVIOUS USE
IPT-A, developed in the mid-1990s, is implemented in schools and outpatient hospital clinics in Connecticut and New York. The intervention has also been used in Canada, Puerto Rico, and the United Kingdom.
Interpersonal Psychotherapy for Depressed Adolescents (IPT-A)

TRAINING
Therapists should have a master's or doctoral degree in clinical or counseling psychology or a master's degree in social work. Training is required to implement IPT-A, occurs on-site for 1 to 2 days, and costs $2,000 to $5,000 per site. An optional training DVD is available for $30. Therapist and supervisor certification are also required and start at $9,000 for two participants and $2,800 for one participant, respectively. Please contact Dr. Mufson using details in the Contact section for more information.

CONSIDERATIONS
Considerations for implementing this program include recruiting therapists who have a suitable educational background and are committed to this treatment model; obtaining funding for training and certification costs; selecting a location for sessions; and understanding that this is a time-limited intervention that is not intended for adolescents who are acutely suicidal or homicidal or abusing substances or who have bipolar disorder, symptoms of psychosis, or an intellectual disability.

The Clearinghouse can help address these considerations. Please call 1-877-382-9185 or email Clearinghouse@psu.edu

IMPLEMENTATION
If you are interested in implementing IPT-A, the Clearinghouse is interested in helping you! Please call 1-877-382-9185 or email Clearinghouse@psu.edu

TIME
IPT-A is delivered in 12 weekly sessions, which are 35 to 50 minutes each. One to three parent sessions may be added. In some settings, treatment may be extended to 16 weeks.

COST
The IPT-A treatment manual is needed for program implementation, and it is $33 per copy; an optional training DVD is $30. Email consultation and therapist competency rating sheets are free.

EVALUATION PLAN
To move the IPT-A intervention to the Promising category on the Clearinghouse Continuum of Evidence, at least one evaluation should be performed demonstrating positive effects lasting at least six months from program completion or one year from the beginning of the program.

The Clearinghouse can help you develop an evaluation plan to ensure the program components are meeting your goals. Please call 1-877-382-9185 or email Clearinghouse@psu.edu

CONTACT
Contact the Clearinghouse with any questions regarding this program.
Phone: 1-877-382-9185  Email: Clearinghouse@psu.edu
You may also contact Laura Mufson, Ph.D., by mail NYSP! Unit 74,1051 Riverside Drive, New York, NY 10032, phone 1-646-774-5791, fax 1-212-543-6660, email lhm3@columbia.edu, or visit www.cebc4cw.org/program/interpersonal-psychotherapy-for-depressed-adolescents/detailed

SOURCE

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This material is the result of a partnership funded by the Department of Defense between the Office of the Deputy Assistant Secretary of Defense for Military Community and Family Policy and the USDA's National Institute of Food and Agriculture through a grant/cooperative agreement with Penn State University.