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ABSTRACT

Statement of the problem: As part of evaluation of the Heathy Relationships Plus Program (HRPP) in Canada, this study sought to identify individual and group-level predictors of depression and anxiety at pre-test, and rate of change from pre- to post-test. Method: A total of 700 youth (ages 11-21) participated in a 15-week program in 2014/2015 academic year within various classroom or community settings. Overall, 70 groups were included in analyses from four Canadian provinces. In small groups, youth engaged in interactive, skill-building activities, discussed mental health issues and how to build healthy relationships. Youth completed pre- and post-program questionnaires to assess their demographics, attitudes and behaviors related to violence, bullying, drug use, and mental health. Depression and anxiety were assessed by the Depression and Anxiety subscales of DASS-21 scale. The results were analyzed using multilevel modeling (MLM). **Results.** There was a statistically significant decrease in depression from pre- to postintervention. Gender and bigger group size predicted depression scores at pre-test, but these variables did not predict differences in the rate of change from pre- to post-test. The cross-level interaction was significant for group mean age, wherein participants in groups with mean age above 14.86 reported a significant decline in depression over the course of the program. There was no change in anxiety over the course of the program. Gender, group mean age, proportion of white participants and proportion of victims of bullying in a group predicted time 1 anxiety scores but there was no cross-level interaction. A proportion of binge drinkers in a group did not predict pore-test depression and anxiety.

Conclusion. These results show a statistically significant decrease in depression but no change in anxiety over the course of the program. The decline in depression varied as a function of group mean age. These findings did not depend on a community versus school program setting and risk status of groups as measured by aggregate binge drinking. Therefore, they offer preliminary evidence of the robustness of the program for different groups of youth.

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Health

Gender

items

Changes in Depression and Anxiety Among Youth in the Context of a Healthy Relationships Program

INTRODUCTION



* *P* <.05

ANALYSES

Variable	M (SD)	Range
p Size	18.14 (7.73)	4-36
p Mean Age	14.87 (1.86)	11.80-18.75
ortion of Whites	63.08 (31.46)	0-100
ortion of Victims of Bullying e-Test	62.90 (15.81)	0-100
ortion of Binge Drinkers at Fest	20.93 (21.05)	0-85.7





of Victims

Note. * *P* <.05

Depression

post-test

- Anxiety

- change from pre- to post-test.

Implications:

The project was funded by Health Canada.

them safe. Yale University Press https://vouthrelationships.org/hrpr ttp://www.edu.uwo.ca/csmh/research/healthy-relationships.html http://www.edu.uwo.ca/csmh



Figure 4. Group-Level Predictors of Anxiety at Pre-Test



SUMMARY and CONCLUSIONS

Depression was higher at pre-test and declined over time in groups with group mean age of 14.86 and above (N = 39).

Females reported higher depression scores at pre-test than males, with a similar decline in depression from pre-to post-test.

Bigger group size was related to lower depression at pre-test. None of other proposed predictors contributed significantly to pre-test or change from pre- to

No change in anxiety from pre- to post-test.

Females reported higher anxiety at pre-test compared to males.

Older group mean age, greater proportion of White participants, and greater proportion of victims of bullying predicted higher pre-test scores.

Group size and proportion of binge drinkers did not contribute to pre-test or

A healthy relationships / mental health promotion program was shown to decrease depression in a diverse range of groups.

This program could be an effective Tier 1 (or potentially Tier 2) intervention that can be implemented by teachers, thus freeing up school psychology resources to address Tier 3 mental health needs.

Decreasing anxiety among youth may require a more focused approach.

MORE INFO

¹ Adapted from: Wolfe, D. A., Jaffe, P. G., & Crooks, C. V. (2008). Adolescent risk behaviors: Why teens experiment and strategies to keep