

## Creating Opportunities for Personal Empowerment (COPE) *Evidence-based Programs to Reduce Depression/ Anxiety/Suicidal Ideation and Enhance Healthy Behaviors in Children, Teens and Young Adults*

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## Disclosures

Bernadette Melnyk has a company, COPE2Thrive, LLC, which disseminates the COPE cognitive-behavior therapy-based programs for children, teens and young adults.

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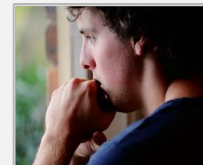
## From a Small Coal Mining Town

*My Story That Fueled a Passion  
to Improve Child & Adolescent Mental Health*



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## Before the Pandemic, One in Five Children and Teens had a Mental Health Problem



Anxiety, depression and AD/HD are the three most common mental health disorders in children and adolescents

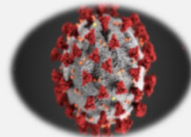
Suicide is the second leading cause of death in 10 to 34 year olds

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## COVID-19 is Triggering Mental Health Problems and Unhealthy Lifestyle Behaviors in Parents, Children and Teens

### *A Mental Health Pandemic Inside the COVID-19 Pandemic*

- Feelings of **despair**
- Fear for **loved ones**
- Decreases in **job security**
- Increases in **loneliness**
- Mindset switch from “**thriving**” to “**survival**”
- **Zoom fatigue** and **burnout**
- **Increases in alcohol use**
- **Unhealthy eating patterns**



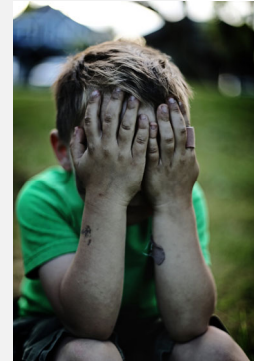
- Feelings of **hopelessness**
- Increases in **anxiety**
- Decreases in **financial security**
- **Social withdrawal**
- **Sleep disturbances**
- **Declines in Physical Activity**

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## The COVID-19 Pandemic Effects on Children

1 in 7 parents reported worsening behavioral health for their children since the pandemic began (Patrick et al., 2020)

1 in 10 parents reported worsening behavioral health in their children (Patrick et al., 2020)



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## How the Pandemic has Impacted Teen Mental Health

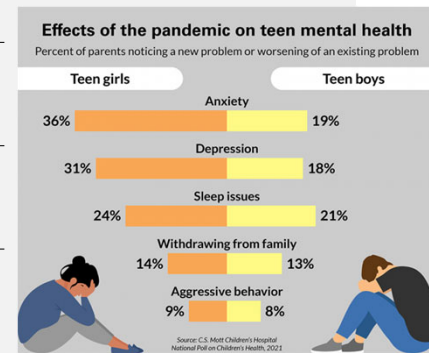
(C.S. Mott Children's Hospital, 2021)

N = 2002 parents of 0–18-year-olds

**3 in 4 parents** say COVID-19 negatively impacted teens ability to interact with friends

**1 in 3 teen girls** and **1 in 5 teen boys** have experienced new or worsening anxiety

Issues with **depression** were observed **more frequently** in teen **girls** than boys.



Retrieved from <https://mottpoll.org/reports/how-pandemic-has-impacted-teen-mental-health>

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## Suicidal Thoughts and Behaviors in Psychiatrically Hospitalized Adolescents Pre- and Post- COVID-19: A Historical Chart Review and Examination of Contextual Correlates

(Thompson et al., 2021)

Sample size = 189 adolescents  
(mean age = 15 years)

Past-month **suicidal attempt** was significantly greater in 2020 compared to 2019 (**31% vs. 19%**)

**47.2% felt suicidal** in relation to COVID-19

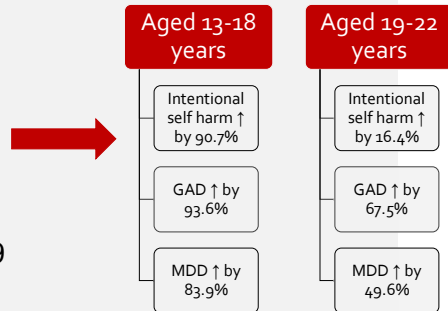


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## The Impact of COVID-19 on Pediatric Mental Health – A Study of Private Healthcare Claims

A FAIR Health White Paper

A database of 32 billion private healthcare claims had all ICD-10-CM diagnosis codes from 2019 to 2020 analyzed for changes in mental health claims related to COVID-19



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## Overweight and Mental Health Problems

- Approximately one-third of youth are overweight or obese
- The prevalence is higher in minority populations
- Depression and anxiety are higher in overweight youth



One in 3 people will have diabetes by 2050

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## Nearly 75% of Children and Teens with Depression also Suffer from Anxiety



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## Co-Morbidity of Anxiety Disorders

- Reported rates of co-morbidity with anxiety disorders

|   |     |
|---|-----|
| Major Depressive Disorder               | 40% |
| Bipolar Disorder                        | 43% |
| AD/HD                                   | 25% |
| Oppositional Defiant & Conduct Disorder | 30% |

- Greater Risk for Substance & Alcohol Use Disorders

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## USPSTF Recommendation for Screening for Depression in Teens

Routine screening of all adolescents 12-18 years for MAJOR DEPRESSIVE DISORDER in primary care



Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up

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## Causes of Depression

- Biological changes in the chemistry of the brain, such as imbalances in serotonin, dopamine, and/or norepinephrine or excess cortisol
- Genetic
- Environmental (e.g., stressful situations)
- Depressogenic cognition
- Physical disorders



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## Remember REACH

**R**ecognize warning signs

**E**ngage with empathy

**A**sk directly about suicide

**C**ommunicate hope

**H**elp suicidal individuals to access care and treatment

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## Evidence-Based Suicide Risk Assessment - NIMH

- PHQ 9 if positive
- ASQ with 6 steps  
Including
- Stanley Brown Patient Safety Plan  
and determining the safest disposition



**ASK Suicide questions ASQ toolkit - NIMH**

<https://www.nimh.nih.gov/research/research-conducted-at-nimh/asq-toolkit-materials/index.shtml>

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## Resiliency: A Key Protective Factor that Can Separate Children and Teens Who Develop Depression and Anxiety from Those Who Do Not



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## In God We Trust, Everyone Else Must Bring Data to the Table!



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## CBT Works for Both Anxiety and Depression

- Findings from an exhaustive literature review of multiple clinical trials indicate that compared to controls, CBT significantly ↓ anxiety and depressive symptoms
- For mild to moderate anxiety and depressive symptoms, the gold standard recommendation is cognitive-behavioral therapy
- If CBT is not effective or there are severe symptoms, an SSRI should be added

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## Evidence-based Interventions for Child and Teen Depression and Anxiety

- Referral for psychotherapy: individual cognitive-behavioral therapy or interpersonal therapy
- The Adolescent Coping with Depression Course by G.N. Clarke and P.M. Lewinsohn: designed as 16 two-hour sessions for small groups
- Stressbusters: delivered in groups of 8 to 12 year old children; A 10-session program: two 90-minute sessions per week for 5 weeks; Also computerized as an eight 45-minute session program
- Coping Cat- for child/teen anxiety (ages 7 to 13): 16 fifty-minute sessions
- COPE-Creating Opportunities for Personal Empowerment)- for depression, anxiety as well as enhancing healthy lifestyle behaviors and academic performance in children, teens and young adults

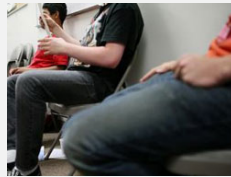
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## The Development and Refinement of COPE across 25 Years

First developed for teens hospitalized on an adolescent inpatient psychiatric unit

Provided as education and incorporated CBT-based skills building program plus nutrition and physical activity with teens who had mental health disorders



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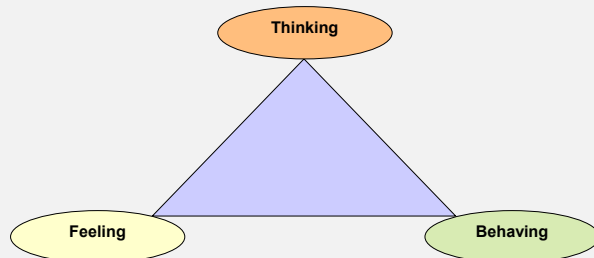
## The COPE Healthy Lifestyles TEEN (Thinking, Emotions, Exercise and Nutrition) Program

- A 15 session cognitive-behavioral skills building program that includes physical activity in each session
- All sessions are manualized and interactive, with an emphasis on the practice of cognitive-behavioral skills building activities and role playing
- Includes many case-based examples

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## Cognitive Behavior Theory Guides COPE

The thinking/feeling/behaving triangle



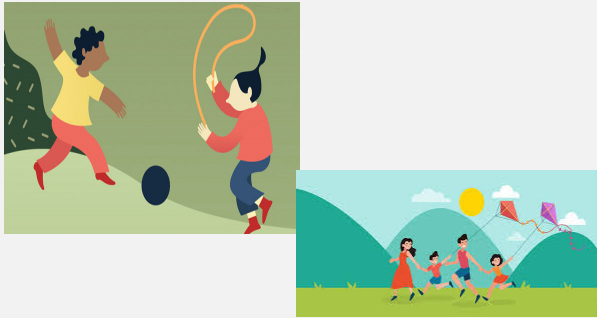
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## Components of Effective Therapy for Depression

- Achieving measurable goals/competency
- Psycho-education
- Self-Monitoring
- Relationship Skills/social interaction
- Communication training
- Cognitive Restructuring
- Problem Solving
- Behavior Activation
- Relaxation
- Emotional regulation
- Relationship

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## Behavioral Activation: An Important CBT Component



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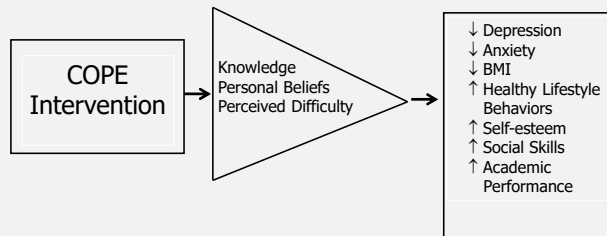
## CBT Skills Building Lays Down New Neuronal Tracks



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 practice of COPE skills (homework/skills building)

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## COPE Model



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## Components of the 15-Session COPE Healthy Lifestyles TEEN Program

- 7 Sessions of cognitive-behavioral skills building
- 8 Sessions of nutrition and physical activity education
- 20 minutes of physical activity in each session



A TEEN  
(Thinking, Emotions,  
Exercise, and Nutrition)  
Healthy Lifestyles  
Program

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## Session 1

### Thinking, Feeling, and Behaving: What is the connection?



When you think positively, you will be happier and have less stress.  
How you think affects how you feel and how you behave.

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## EXAMPLE



15 year old Sara has poor self-esteem.

One of her classmates called her “chubbo.” Sara believes that she is fat, ugly and that no one likes her (negative thinking). As a result, she feels depressed (negative emotion) and isolates herself, never attending any social events with her peers (negative behavior). The trigger event here was that one of her friends called Sara “chubbo.”

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## COPE Teaches the ABCs



**STRESSOR (Activator or trigger)**



**NEGATIVE THOUGHT TO STOP (negative Belief)**



**REPLACE THE NEGATIVE WITH A POSITIVE THOUGHT**



**POSITIVE EMOTION & BEHAVIOR (Consequence)**



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## Mindfulness

**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 lose its flavor
- Bounce a ball 50 times and count along the way
- Make clapping sounds and have your friends repeat the pattern



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## COPE Goal Setting & Self-Monitoring Log

### Goal: Write Two Positive Self-Statements

Goal for Number of times per day to say the positive self statements \_\_\_\_\_

Number of Times You Said Your Positive Self-Statements

Day #1\_\_\_ Day #2\_\_\_ Day #3\_\_\_ Day #4\_\_\_ Day #5\_\_\_ Day #6\_\_\_ Day #7\_\_\_

### Emotions (How have you felt this week?)

Rate your emotions on a scale from 0 "not at all" to 10 "a lot"

|          |       |
|----------|-------|
| Worried  | _____ |
| Stressed | _____ |
| Happy    | _____ |
| Sad      | _____ |

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## Session 1 Skills Building Activities

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





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## The COPE Healthy Lifestyles TEEN Program

| Session # | Session Content  |
|-----------|--|
| 1         | Introduction & goals of the program;<br>Healthy Lifestyles: The thinking, feeling, behaving triangle                         |
| 2         | Self-esteem; Positive thinking/self-talk  |
| 3         | Goal setting; Problem-solving  |
| 4         | Stress and coping                         |
| 5         | Emotional/behavioral regulation  |

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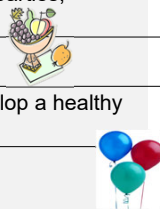
## The COPE Healthy Lifestyles TEEN Program

| Session # | Session Content  |
|-----------|--|
| 6         | Effective communication  |
| 7         | Physical Activity   |
| 8         | Heart rate; Stretching   |
| 9         | Food groups and a healthy body;<br>Stoplight diet; Red, yellow & green  |
| 10        | Reading labels; Effects of the media on food choices   |

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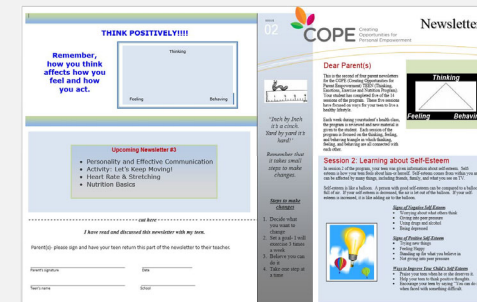
## The COPE Healthy Lifestyles TEEN Program

| Session # | Session Content  |
|-----------|--|
| 11        | Portion sizes; Influence of feelings on eating                           |
| 12        | Social eating; Strategies for eating during parties, holidays, vacations |
| 13        | Snacks; Eating out   |
| 14        | Integration of knowledge and skills to develop a healthy lifestyle plan  |
| 15        | Pulling it all together; Review of course content                        |



## Parent Newsletters

- Four times during the course of the program, teens are provided with a newsletter to review with their parents that covers the content in the program



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## Positive Outcomes of 3 Pilot Studies with the COPE TEEN Program

- Increase in nutrition and activity knowledge
- Increase in healthy lifestyle beliefs
- Decrease in perceived difficulty
- Increase in healthy lifestyle choices and behaviors
- Increase in self-esteem
- Decrease in weight and BMI
- Increase in HDLs
- Decrease in LDLs
- Decrease in depressive and anxiety symptoms

## The COPE Clinical Trial with 779 High School Teens

- 11 Schools were randomly assigned to COPE or the Attention Control *Healthy Teens* Program
- Teachers integrated their intervention program into their health course curriculum once a week for 50 minute sessions over 15 weeks

### Funding Support

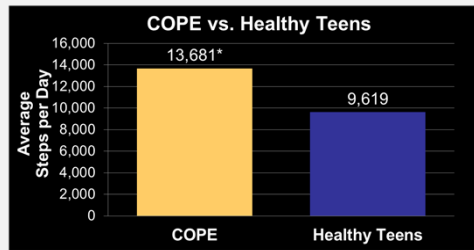
National Institutes of Health/The National Institute of Nursing Research  
R01NR012171

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## Physical Activity

Teens who received the COPE curriculum had significantly greater steps per day than the teens who received the Healthy Teens curriculum

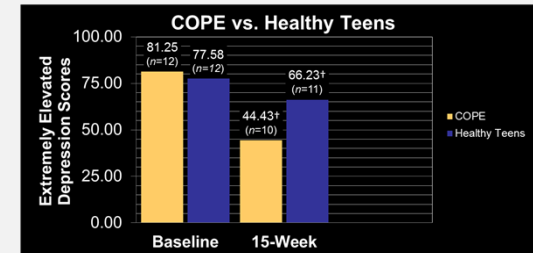


\* Statistically significant

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## Depression Post-Intervention

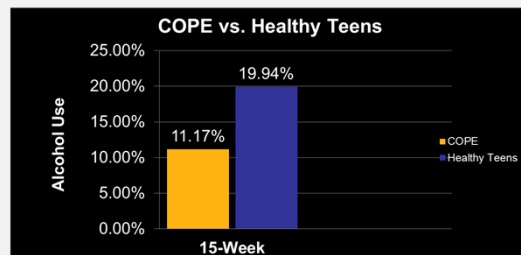
Among teens with extremely elevated depression scores at baseline, those that received the COPE curriculum had on average, a lower depression score than those that received the Healthy Teens curriculum at the 15-Week follow-up



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## Alcohol Use Post-Intervention

Alcohol use was significantly less in the COPE group than in the Healthy Teens group at the 15-week follow-up

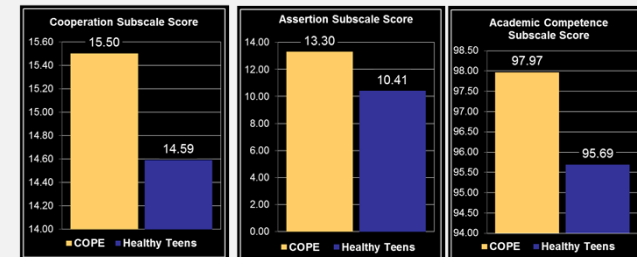


\* Data collected

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## Social/Academic Outcomes

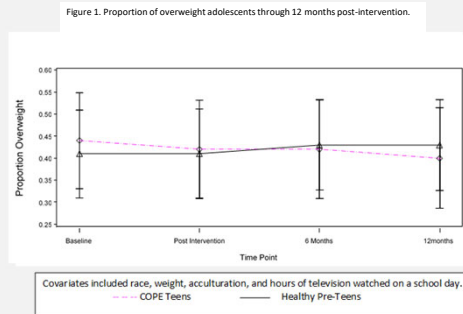
The Social Skills Rating System showed that the COPE group had higher average scores on the Cooperation, Assertion, and Academic Competence subscales



\* Teen Social Skills Rating System was completed by teacher at the end of the intervention (T1).

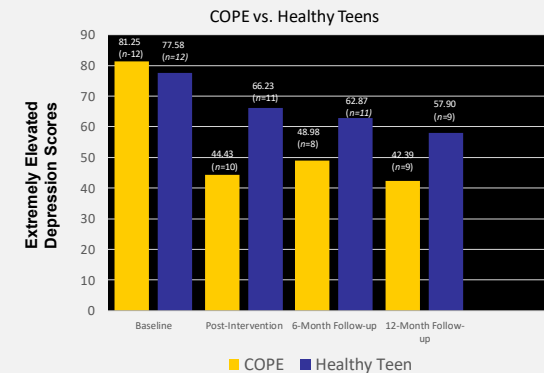
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## Percentage of Overweight for the COPE and Control Groups Across Time



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## Depression 12 months Post-Intervention



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## Specific Teen Feedback

- Exercising when you are sad or angry helps you not get so stressed
- I learned how to control yourself when you're mad
- COPE helped me feel a little better about myself
- Exercise is fun and should be a part of everyday life
- I've actually started walking more and taking longer routes to increase my steps
- I look at food labels
- My motivation has drastically increased
- I learned how to set goals to be more active

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## Specific Parent Feedback

- She learned a lot about how to handle stressful situations
- The program has made my teenager more aware of the need for physical activity to safeguard her health
- It helped me take better care of myself
- It assisted in overall communication with my child
- It helps me to prevent diabetes and overweight
- It has helped me choose better foods for my family and motivate them to exercise regularly

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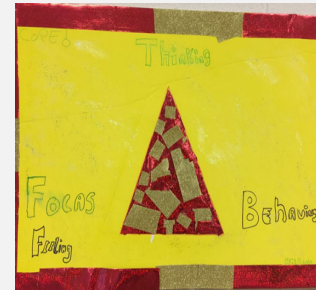
## Daily Positive Affirmations



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## COPE Activities

- A Child's Drawing of the Thinking Feeling Behaving Triangle



- A child's drawing of their "happy place"



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## Session 2: Self-Esteem and Forming Healthy Thinking Habits

- Self-Esteem - Signs of poor and healthy self-esteem
- Change and barriers to change
- Understanding and setting goals for changing negative habits



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## Session 3: Stress and Coping

- Common causes of stressors, depression, and anxiety
- Physical, emotional, and behavioral reactions to stressors, depression, and anxiety
  - How do you feel physically and emotionally when stressed?
- Healthy coping techniques/practice
  - Abdominal breathing
  - Progressive relaxation



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## Session 4: Solving Problems and Setting Goals

- What are your dreams? What do you want to do?
- Believe and Achieve with Small Steps



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## The Four Step Process of Problem Solving

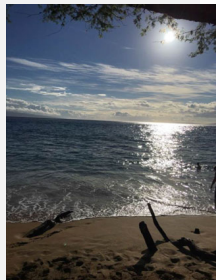
- What is the problem?
- What is the cause?
- What are the best solutions, with their pros and cons?
- What is the best solution? Act on the best solution!



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## Session 5: Dealing with Emotions in Healthy Ways

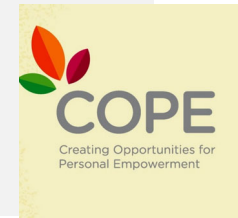
- Mental Imagery
- Self-Control Strategies
- Healthy Coping Strategies
- Effective Communication



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## Session 6: Coping with Stressful Situations

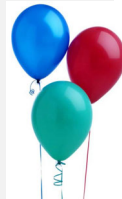
- Effective communication
  - How to ask for help
  - How to say "no" to others
- How to deal with conflict or being teased/bullied
- How to deal with being criticized
- How to deal with peer pressure
- How to accept "no"



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## Session 7: Putting It All Together for a Healthy YOU!

- A review of all important concepts
- A reminder to continue to practice
- A last confidence and self-esteem booster
- A big congratulations: You did it!



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## How Was COPE Helpful?

1) Did you find the COPE program helpful? ☒ yes ☐ no

2) If you found the COPE program helpful, in what ways did it help you? *It made me more confident in myself.*

2) If you found the COPE program helpful, in what ways did it help you? *It helped me take a second and think about things before I react.*

1) Did you find the COPE program helpful? ☒ yes ☐ no

2) If you found the COPE program helpful, in what ways did it help you? *Controlling my anger*

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## What Have You Changed Since COPE?

6) What, if anything, have you changed since starting the COPE program?

*I have become more confident in my abilities and not afraid to make decisions.*

6) What, if anything, have you changed since starting the COPE program?  
*how i deal with anger & anxiety*

6) What, if anything, have you changed since starting the COPE program?

*The way I react to certain things.*

6) What, if anything, have you changed since starting the COPE program?

*My anger problem*

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## What Changes Have You Seen in Your Teen Since COPE?

4) What changes, if any, have you seen in your teen since beginning the COPE program?

*she says she feels happy with who she is. she likes herself.*

4) What changes, if any, have you seen in your teen since beginning the COPE program? *More mellow. He seems to try harder at times. Like when he gets mad I have caught him trying to stop.*

4) What changes, if any, have you seen in your teen since beginning the COPE program?

*she will repeat positive statements about herself instead of the negative ones she repeated frequently when she was placed in my home.*

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## Was COPE a Positive Experience for Your Family?

6) Did you personally find the COPE program helpful to you?

☒ yes (if yes, why?) ☐ no (if no, why?)

Anything that helps a teenage girl with her self image is a help to her mother.

7) Was the COPE program a positive experience for your family?

☒ yes (if yes, why?) ☐ no (if no, why?)

When one member of a family is in bad space it is a hardship on the other members. This program helped by putting the member who was the source of the problem on course.

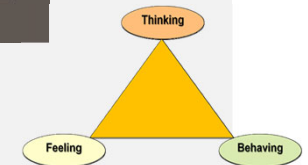
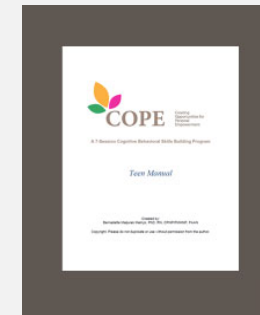
7) Was the COPE program a positive experience for your family?

☒ yes (if yes, why?) ☐ no (if no, why?)

Yes it was. He seemed to enjoy it and it has helped him try to do things differently. So it has helped us.

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- Portable  
Easy to use in busy practice  
High child, teen, and parent satisfaction  
Versions available for:
- 7 to 11 year old children
  - 12 to 17 year old teens
  - 18 to 24 older adolescents/young adults
  - Digitalized interactive on-line version for teens



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## A Cost Analysis of COPE

Melnik, 2020, *Journal of Pediatric Health Care*

The CPT Code 99214, which is used to reimburse primary care providers who are using the 7 session COPE program in primary care was used in this cost analysis along with the most recent reported cost of a pediatric hospitalization of \$15,430.

Findings indicated a cost savings of \$14,262 for every hospitalization that is prevented with COPE

If hospitalizations were prevented for the 10,000 children and teens who received the COPE 7-session program, the cost savings to the healthcare system would be \$146.2 million



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## COPE Use throughout the U.S. and World

- Schools, primary care practices, counseling offices and community mental health clinics are using the COPE programs in all 50 states across the U.S. and 5 other countries, including Canada, the U.K, Australia, South Africa, and Lebanon



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## The Outcomes of Not Preventing, Screening, Identifying and Successfully Treating Mental Health Problems in Our Youth

Severe and persistent mental illness  
 Drug and alcohol abuse  
 Poor academic performance and school drop out  
 Homelessness  
 Decrease in vocational performance  
 Involvement in the criminal justice system

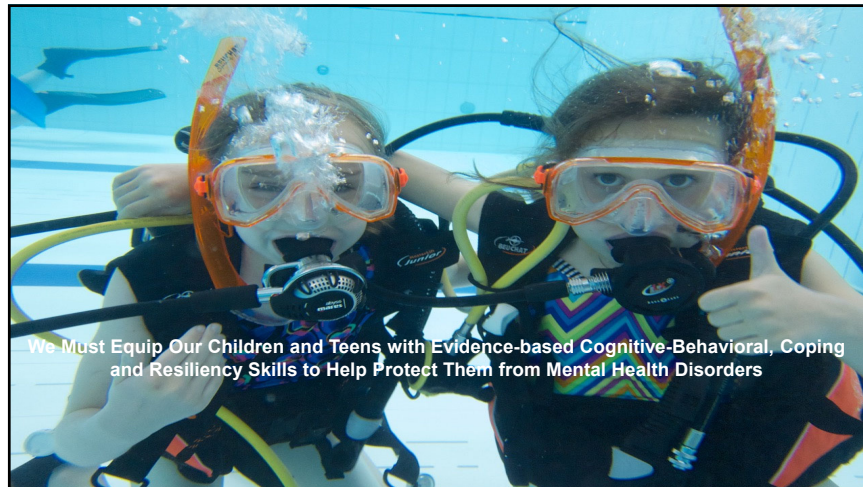
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## The Dream

- Every child, teen and college student the nation learns the skills taught in the COPE Program
- A world for children, teens and young adults that is free from mental health disorders
- A world in which every child, teen and young adult achieves optimal well-being and succeeds academically and in life

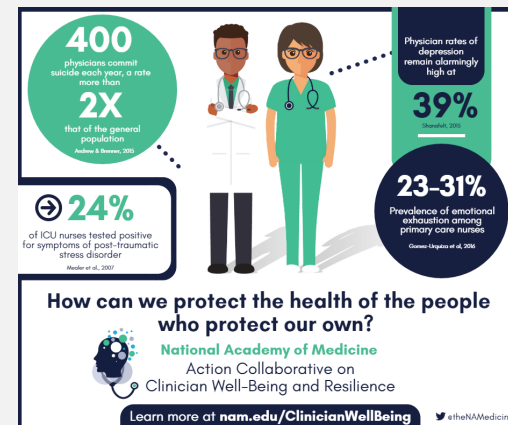


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We Must Equip Our Children and Teens with Evidence-based Cognitive-Behavioral, Coping and Resiliency Skills to Help Protect Them from Mental Health Disorders

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## Self-Care is Necessary for Safe and Great Care of Others



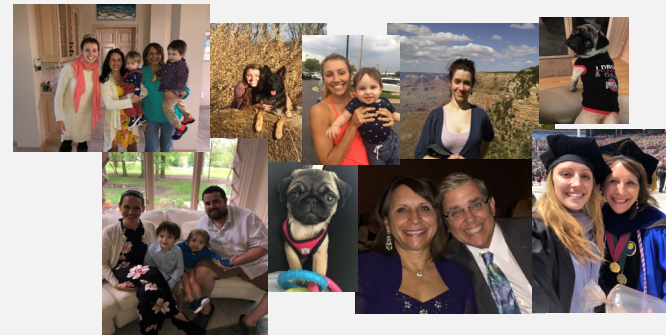
*you can't pour from  
an empty cup*

TAKE CARE OF YOURSELF FIRST



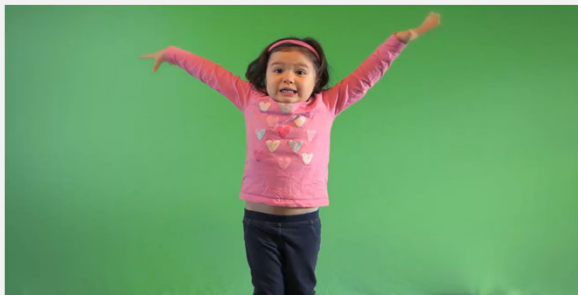
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## My Main Reasons for Taking Good Self-Care and Engaging in Healthy Lifestyle Behaviors: *Who are Yours?*



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## Let's Continue to Help Our Children and Teens to Dream, Discover and Deliver a Bright Future Final Motivational Words: Just Do It!



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