

Leveraging Smartphones for the Detection of and Scalable Interventions for Depressive Symptoms in Adolescents

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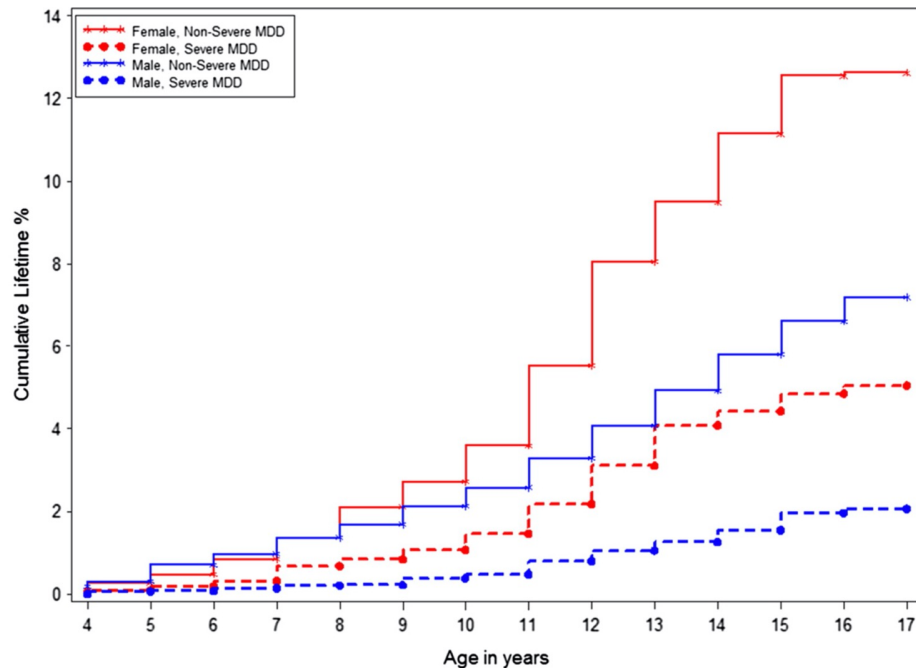


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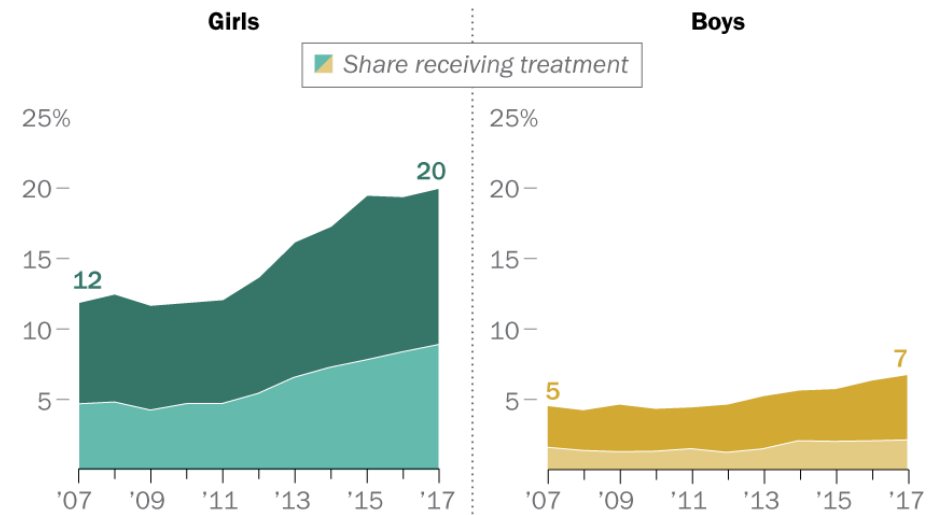
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Depression in Adolescence



Avenevoli, 2015

% of teens ages 12-17 who have had at least one major depressive episode in the past year, 2007-2017



Pew Research Center, 2019

see also Griffith et al., 2021; Bailen et al., 2019; Borghuis et al., 2017

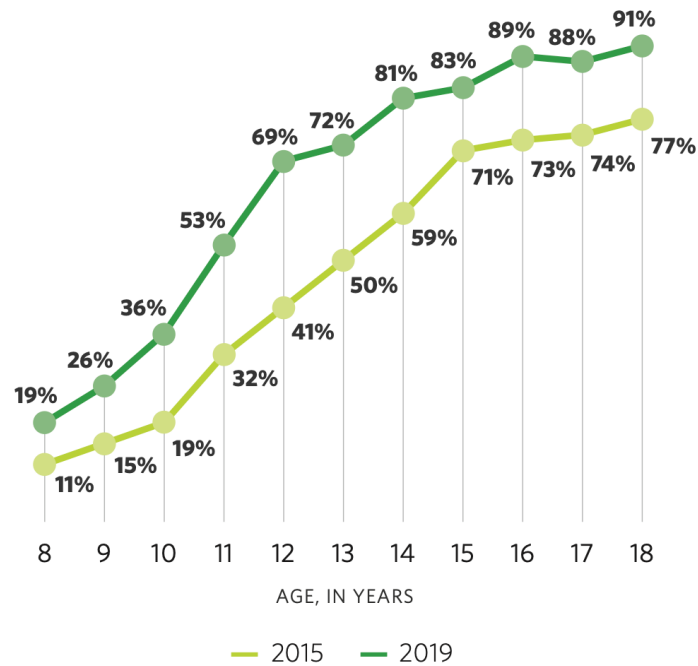
Rumination

- Rumination (i.e., repetitive and negative self-focused thinking) is a transdiagnostic risk factor involved in the development of depression and anxiety (Aldao et al., 2010; Nolen-Hoeksema et al., 2008; Nolen-Hoeksema & Watkins, 2011; Watkins & Roberts, 2020).
- Rumination prospectively predicts the onset of depressive and anxiety symptoms in adolescents (e.g., McLaughlin & Nolen-Hoeksema, 2011; Muris et al., 2004; Gibb et al., 2012; Rood et al., 2009).
- Mindfulness training, with its emphasis on cultivating metacognitive awareness and present-moment attention, may be effective at reducing rumination in teens.



Youth Smartphone Ownership

FIGURE D. Smartphone ownership, by age, 2015 vs. 2019



Rideout & Robb, 2019

Table 1: Online health seekers

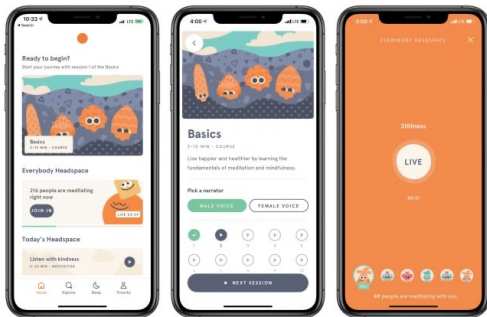
Among 14-22 year-olds, percent who have gone online for information about:

Fitness and exercise	63%
Diet and nutrition	52%
Stress	44%
Anxiety	42%
Depression	39%
Birth control	30%
Pregnancy	28%
Sleep disorders	27%
Sexually transmitted diseases	26%
Drug or alcohol abuse	24%

Rideout & Fox, 2018

Mindfulness Apps

- Most frequently used apps for depression (Headspace; 5 million monthly active users) and anxiety (Calm: 9 million monthly active users) are mindfulness apps
- > 260 mindfulness apps available on the Apple App store and Google Play
- Headspace > 42 million users and 250k downloads per month
- 11% teens use mindfulness apps
- 38% of teens w/ elevated stress or depressive sx's have reported using mental health apps (18% used a mindfulness app)



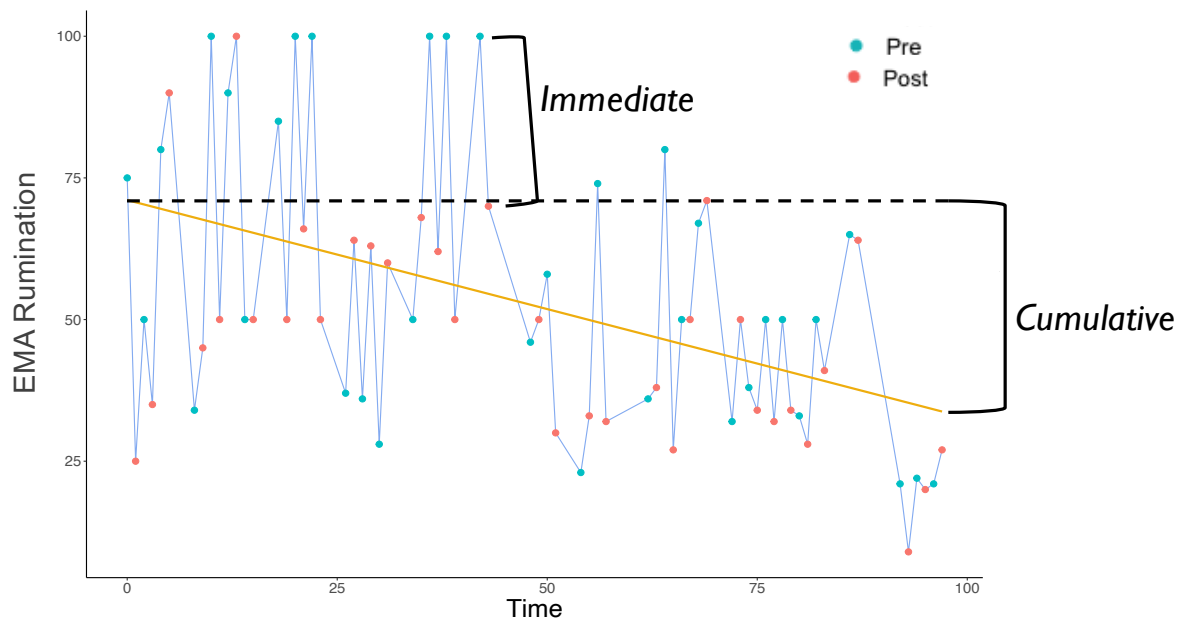
Rideout & Robb, 2019; Wasil et al., 2020

App-Based Mindfulness Training for Ruminating Adolescents

- Study 1: Single-arm trial of mindfulness app (Hilt & Swords, 2021; Webb et al., 2021)
- Study 2: RCT of mindfulness app vs. mood monitoring app (Webb et al., 2022)
- Mindfulness app for 3 weeks w/ a higher likelihood of receiving mindfulness exercise (1-12 mins in duration) if report higher sadness/anxiety
- Mean # of mindfulness exercises completed over 21 days
 - Study 1: 28.7 (avg 1.4/day)
 - Study 2: 33.7 (avg 1.6/day)



“Immediate” vs. “Cumulative” Effects of Meditation on Rumination



App-Based Mindfulness Training for Ruminating Adolescents

- Outcome is change in rumination (EMA)
 - Problem-focused and emotion-focused rumination
- Study 1 (n = 80):
 - Significant reduction in prob-focused rumination ($b = -.10, p < .001$).
 - Significant reduction in emo-focused rumination ($b = -.13, p < .001$).

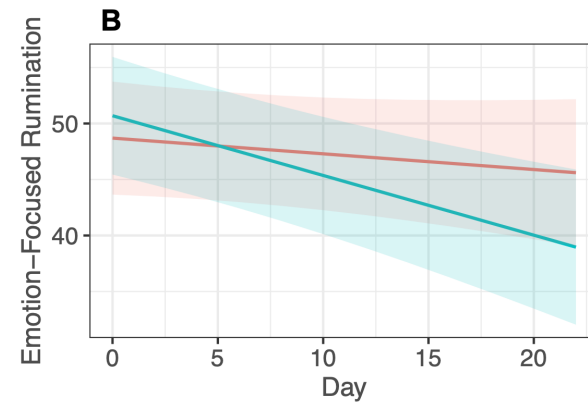
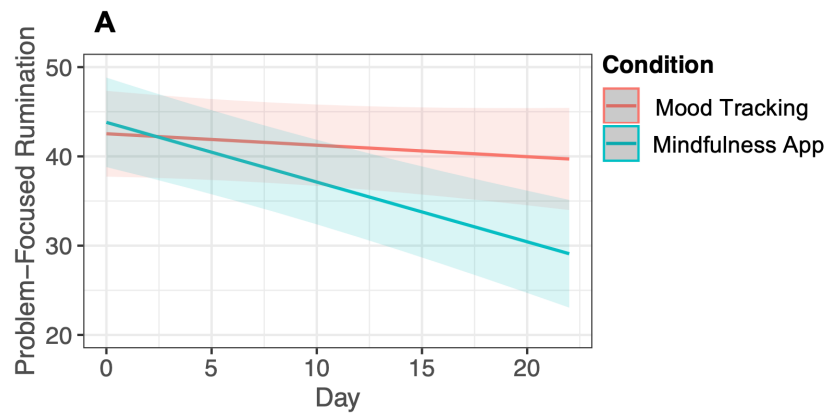


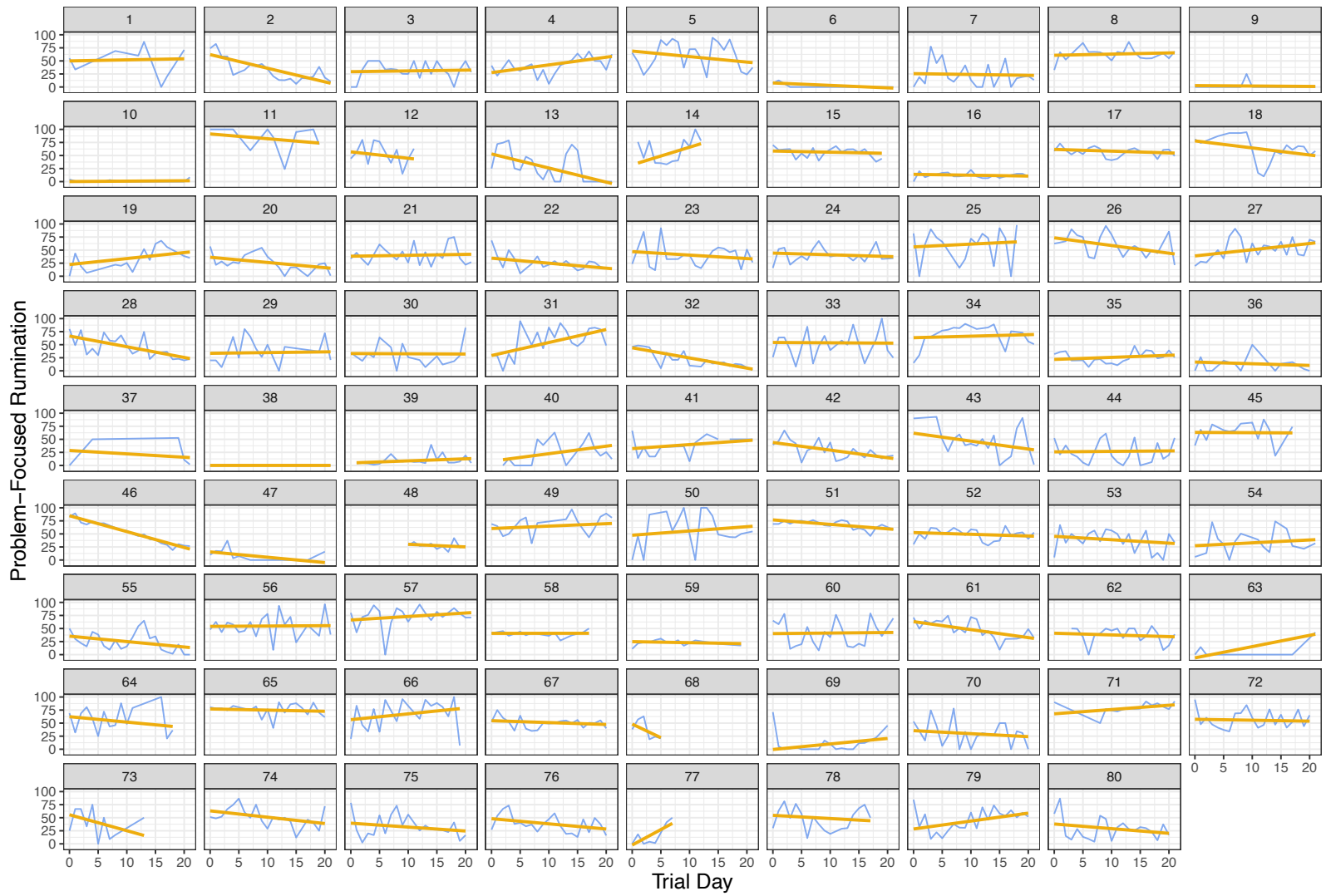
Hilt & Swords, 2021

Webb et al. 2021

Overall Outcomes

- Study 2 (n = 152):
 - Group x Day interaction for prob-focused rumination ($t = -3.22, p = .001$).
 - Group x Day interaction for emo-focused rumination ($t = -2.14, p = .03$).

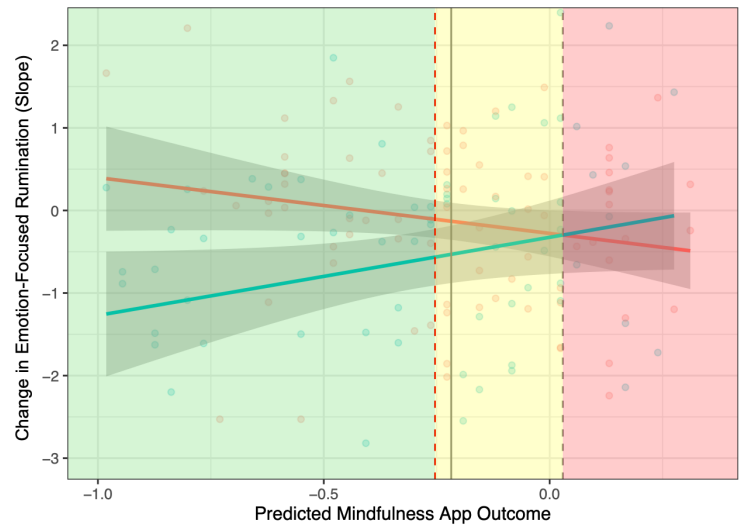




Study I Predictive Model

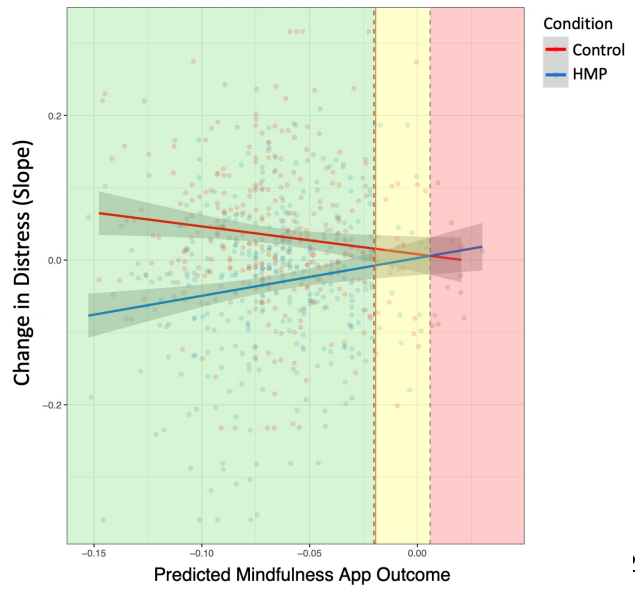
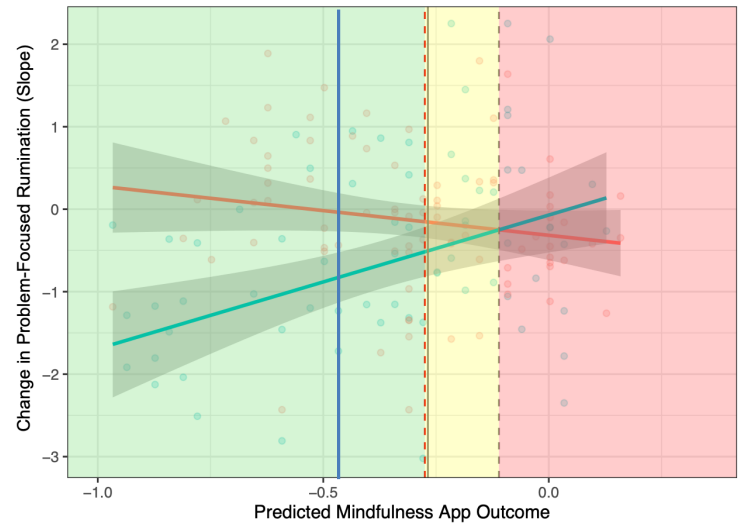
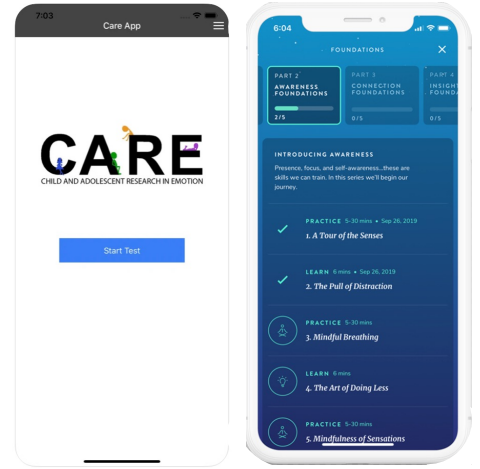
Results of Elastic Net Regularization Models

<i>Predictors</i>	<i>Immediate Effects of Mindfulness Exercises</i>		<i>Cumulative (3-week) Intervention Effects</i>	
	Rum_{Prob}	Rum_{Emo}	Rum_{Prob}	Rum_{Emo}
<i>Age</i>	0.31			
<i>Gender</i>	1.29	1.50		
<i>ERQ Suppression</i>		-3.77	-0.42	-0.09
<i>ERQ Reappraisal</i>		-0.92		0.19
<i>CRSQ Rumination</i>		2.49		0.15
<i>CRSQ Distraction</i>		2.56	-0.12	-0.38
<i>CRSQ Problem Solving</i>			0.12	0.17
<i>FFMQ Observe</i>	1.66			
<i>FFMQ Describe</i>				-0.20
<i>FFMQ Awareness</i>		0.68		
<i>FFMQ Nonjudgement</i>			-0.28	
<i>FFMQ Nonreactivity</i>		-0.80	0.22	
<i>CDI Total</i>				
<i>MASC Total</i>				0.05
<i>History of NSSI</i>				
<i>History of Suicidal Ideation</i>				
<i>Prior mindfulness exposure</i>				
R-Squared (RMSE)	.14 (10.9)	.22 (14.4)	.25 (1.3)	.17 (1.3)



Condition

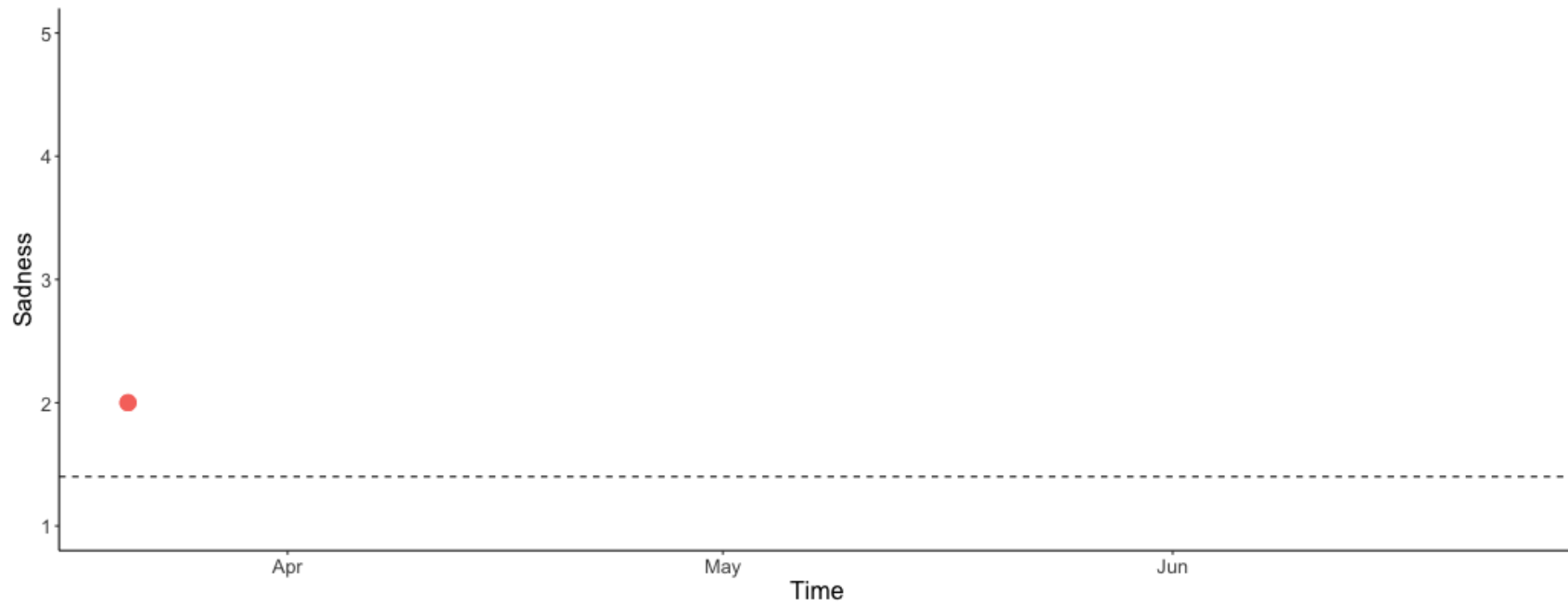
- Mood Tracking
- Mindfulness



Condition

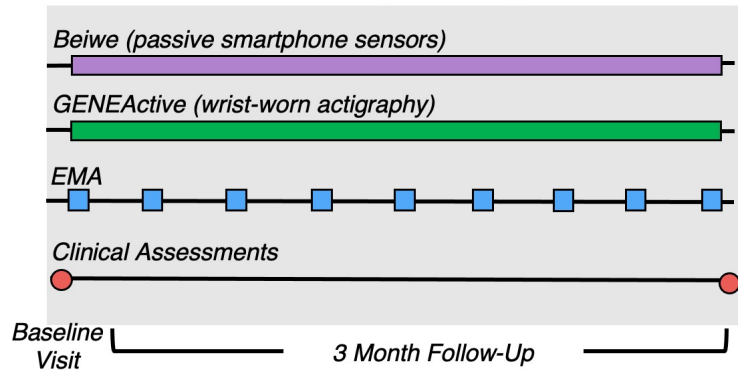
- Control
- HMP

Using Smartphones to Predict Negative Emotions

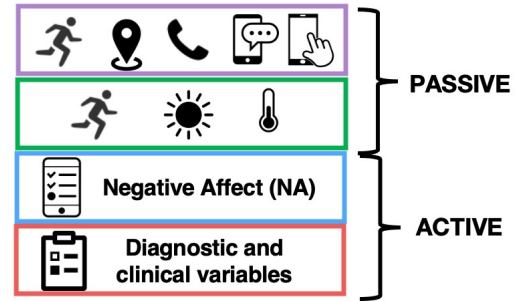


Study Design

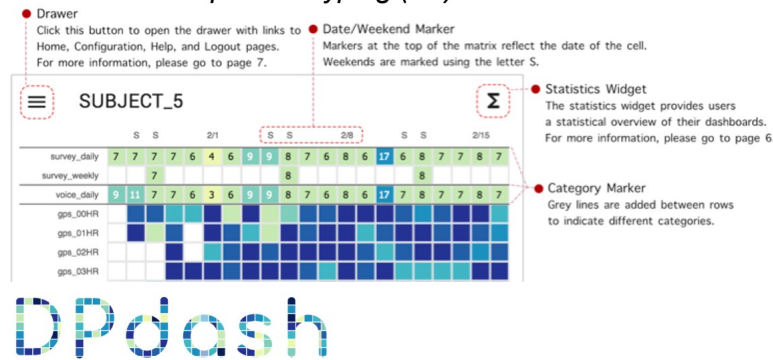
A Individual Participant Study Timeline



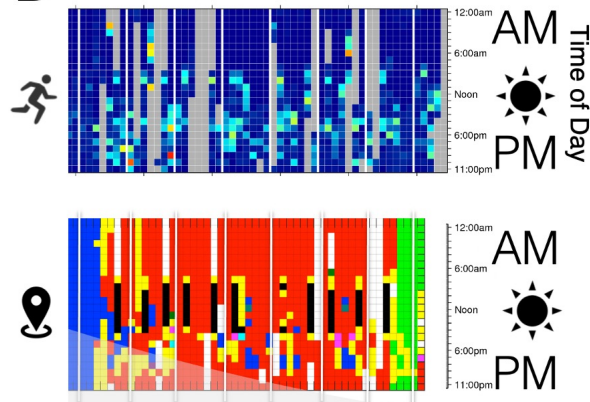
B Variables Assessed



C Quality Control and Study Management Deep Phenotyping (DP) Dashboard



D Processed Individual-Level Data



Features Extracted



- Daily % Home
- Distance from Home
- Places Visited Hourly
- Places Visited Daily
- Daily Mobility Area
- GPS Available



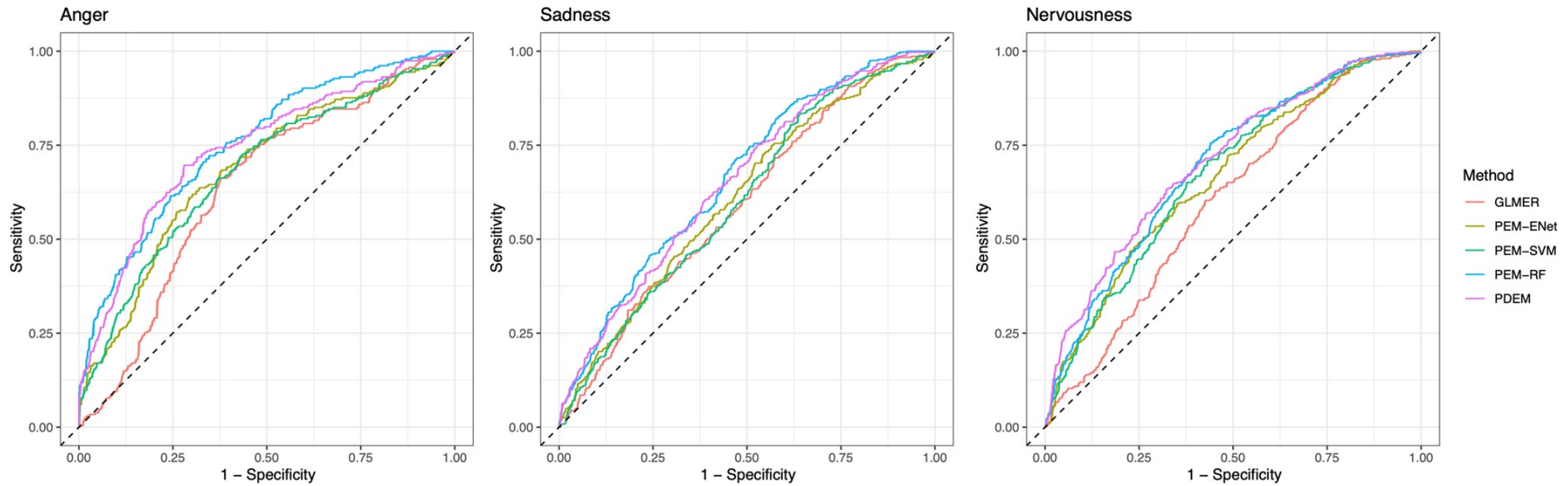
- Hourly activity score

- Time of Day



- Phone Use (hr)
- Phone Use (MinsDay)
- Phone Use (MinsHr)
- Sleep Onset Time
- Wake Time
- Sleep Duration

Results



Method	AUC			Accuracy		
	Anger	Sadness	Nervousness	Anger	Sadness	Nervousness
GLMER	0.64	0.59	0.60	0.63	0.56	0.58
PEM-ENet	0.69	0.61	0.67	0.67	0.59	0.63
PEM-SVM	0.70	0.60	0.67	0.64	0.57	0.63
PEM-RF	0.73	0.66	0.70	0.69	0.63	0.66
PDEM	0.74	0.66	0.71	0.71	0.65	0.67

Limitations & Future Directions

1. Limited set of smartphone-derived variables
 - i. Other features may improve predictive performance (e.g., meta-data on calls/texts, teen social media use, recorded vocal tone/characteristics, peripheral measures of physiological arousal from wearable)
2. Sample size was small (although focused on within-person predictions)
 - i. 80 subjects w/ 1 year of data collection (w/ Justin Baker, MD, PhD)
3. Denser EMA sampling strategy (i.e., more surveys per day) would provide more granularity in assessments of affect fluctuations and a larger within-person dataset for modeling
 - i. But careful not to overburden teen participants (e.g., careless, random or stereotyped responding)

Thank You

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The Tommy Fuss Fund

A private foundation established by the Fuss family
to promote medical research of mental illness.
Early diagnosis = Better Outcomes



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