





Interpretation biases and stress reactivity in youth

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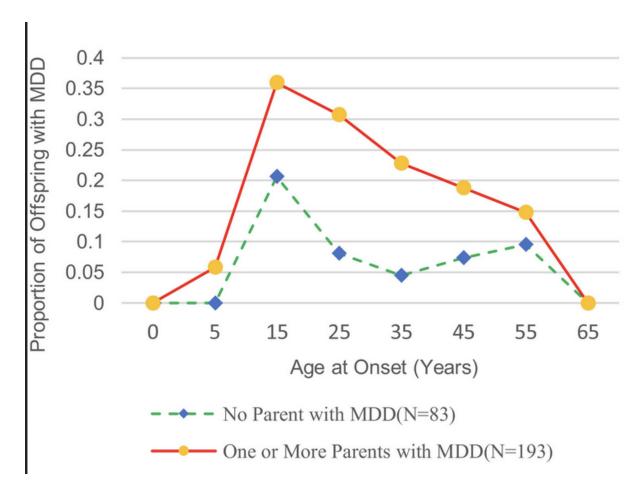




← Slides here



Children of parents with depression Mental health risk



- Large meta-analysis (Uher et al., 2023)
 - RR = 2.3 for depression
 - 50% lifetime prevalence for any illness
- WHO calls for improved preventive interventions
- Existing interventions for this population effective (RR = 0.56)
 (Löchner et al., 2018) but modest

Fig. 1 from: Weissman et al. (2021) EClinicalMedicine

Children of parents with depression The role of cognitions

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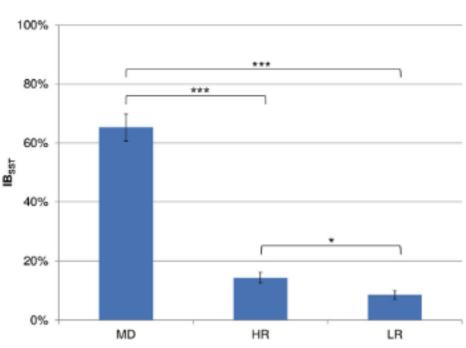


Fig. 4 IB_{SST} scores for the three groups. Error bars represent standard errors. Significant group differences are indicated: *** p < .001, * p < .05

Figure 4: Sfärlea et al. (2020), J Abnorm Child Psychol p. 1344.

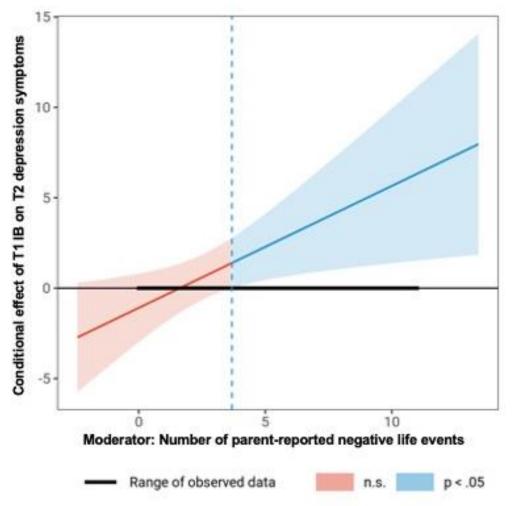


Figure 3: Platt, Sfärlea et al., (2023) Journal of Experimental Psychopathology



Children of parents with depression The role of stress reactivity and recovery

Alterations in stress response characterise children of parents with depression...

- ...even when symptoms of depression are controlled for (Barry et al., 2015)
- ...with a dose-dependant effect (Dougherty et al., 2013)
- ...may be moderated by temperament (Mackrell et al. 2014)
- ...are not always replicated (Gotlib et al., 2015; Waugh et al., 2012)





Children of parents with depression

Does cognitive vulnerability influence stress response?

Cognitive vulernerability and stress response correlate...

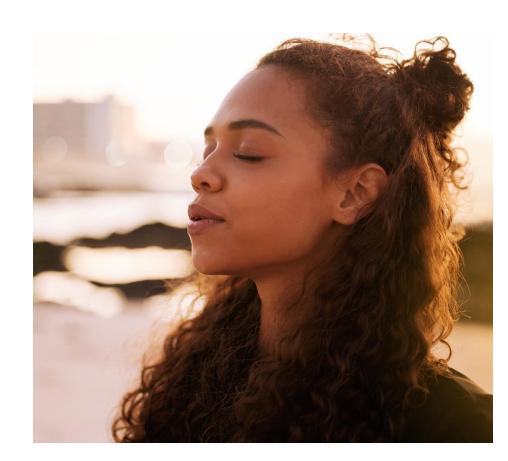
- in adults (e.g. Zoccola and Dickerson, 2012)
- in youth (Bäumler et al., under review)



Predictive role of cognitive vulnerability...

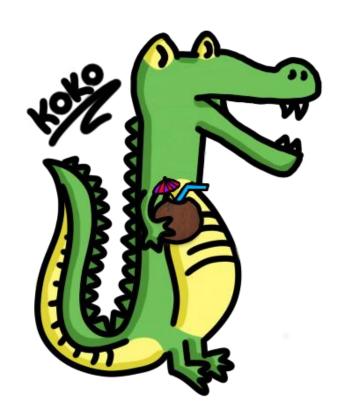
- longituinally in youth (Chen and Mathews, 2001)
- experimentally in youth (Telman et al., 2013)

No studies in children of parents with depression





The CoCo study Research questions



Do children of parents with depression show...

- 1. More **negative interpretations**
 - 2. Heightened stress reactivity
 - 3. Delayed stress recovery

...compared to children of parents with no mental illness?

4. Are **IB** and stress reactivity/recovery (**SR**) associated?





















Interpretation bias: Scrambled Sentences Task (SST) for children. Percentage negative sentences.



Stress reactivity (baseline-adjusted peak by 30 mins)

- Trier Stress Task for Children (TSST-C)
- Mood (SAM) and salivary cortisol



Stress recovery (Baseline-adjusted value at 45 mins)

- Trier Stress Task for Children (TSST-C)
- Mood (SAM) and salivary cortisol





The CoCo study Study sample

Characteristics	HR (n = 80)	LR (n = 77)
Gender (female)	57.5 %	55.8 %
Age M (SD) *	12.0	12.5
Puberty stage	2.69 (1.06)	2.91 (1.00)
Symptoms of depression M (SD) - RCADS	50.2 (9.47)	47.3 (8.61)
Symptoms of anxiety M (SD) - RCADS	44.7 (9.88)	44.0 (8.36)
Childhood trauma M (SD) - CTQ	31.8 (4.81)	31.5 (4.89)

^{*} t(155) = 2.03, p = .044*, 95% CI [0.01, 0.85]



Validation of the stress induction

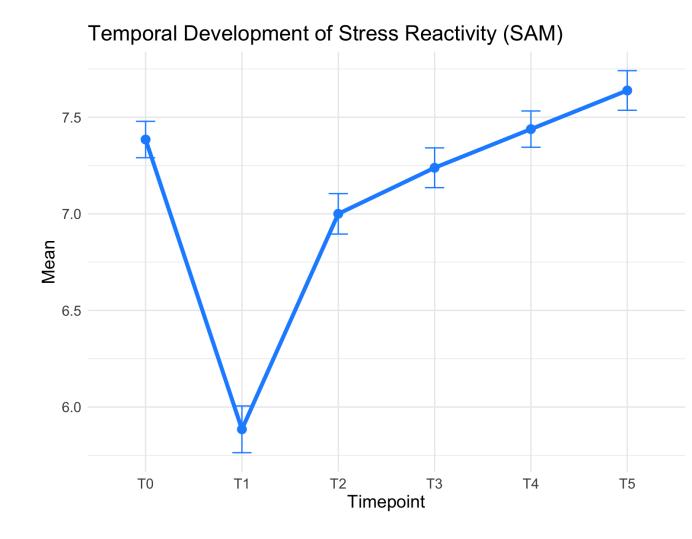
The **TSST-C** was associated with a **significant** stress response:

Change in mood (T0 - T1):

t(156) = 15.95, p < .001, d = 1.27, 95% CI [1.06, 1.48]

Change in cortisol (T0 – T1):

t(155) = 14.24, p < .001, d = 1.14, 95% CI [0.94, 1.34]



Frommelt et al. (submitted)



Group-based differences in IB

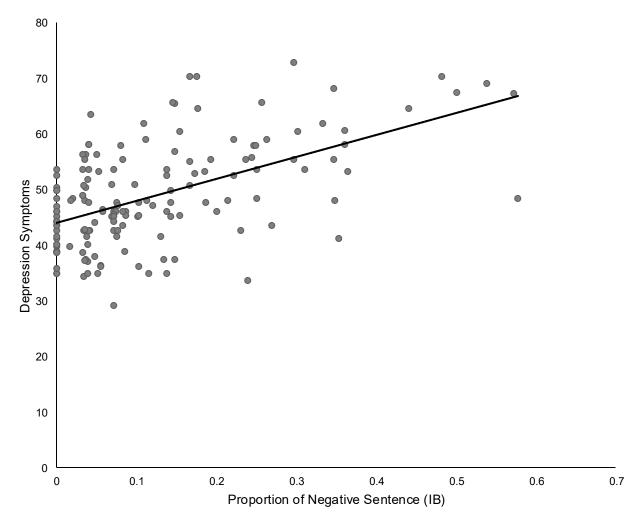
RQ1: Do the groups differ in IB?

No: both groups solved 12.0% of sentences negatively:

$$t(155) = 0.02, p = .982, 95\% \text{ CI } [-0.04, 0.04]$$

However: IB was predicted by depression:

$$\beta = 0.29, p = .002$$



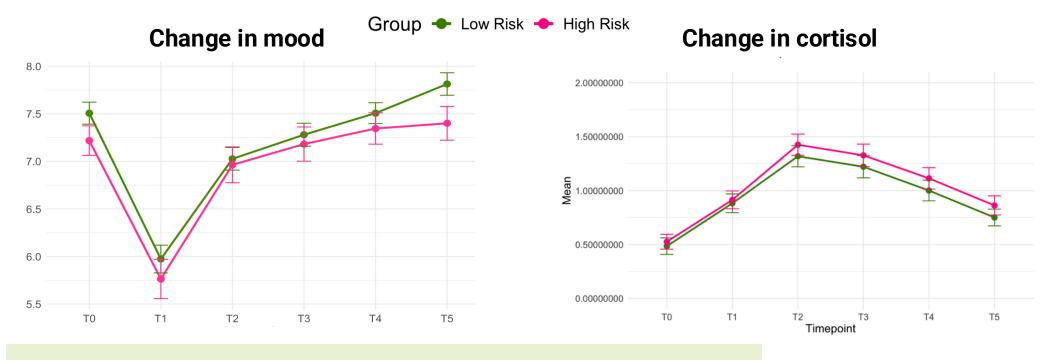
Frommelt et al. (submitted)



Group-based differences in stress response

RQ2 + 3: Do the groups differ in stress reactivity and stress recovery?

No: groups should similar mood and cortisol levels during all phases



→ Across groups baseline cortisol correlated with cortisol reactivity (-.29*), recovery (-.40*) and symptoms of depression (.17*)

Frommelt et al. (submitted)



Association between IB and stress response

RQ4: Are IB and stress response cross-sectionally associated?

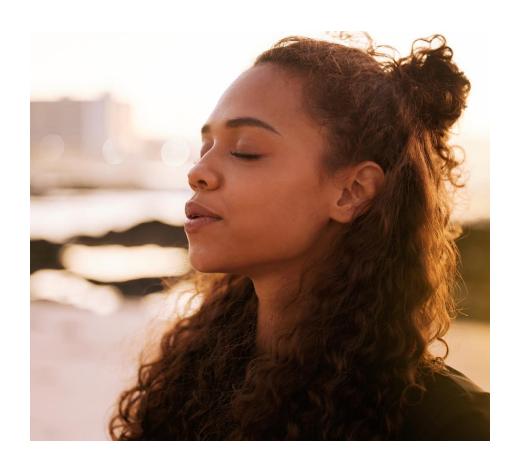
No correlation between IB and:

- Stress reactivity (neither mood nor cortisol)
- Stress recovery (neither mood nor cortisol)

Within the high-risk (HR) group IB correlated with:

cortisol reactivity (-.24*) and recovery (-.28*)

Baseline cortisol moderated IB x Depr.



Frommelt et al. (submitted)



The CoCo study Interpretation of findings

- 1. Cognitive vulnerability better predicted by symptoms of depression rather than parental mental health
- → Questions appropriateness of universal CBM-I training for this population

- 2. No group differences in stress response
- → Unlikely to be a methodological artefact, role of moderators?

- 3. Only partial association between IB and stress response (in HR group)
- → Greater variability in the HR group
- → Unexpected moderating role of baseline cortisol



The CoCo study Strengths and Weaknesses

Strengths

- HR population in developmental period before prevalence increases
- Valid diagnostic instruments for parents and children
- Gold-standard stress task
- Multimodel measures

Weaknesses

- Cross-sectional design
- Homogeneous sample in terms of SES





The CoCo study Summary

- Improved models of transgenerational transmission could help inform more effective preventive interventions for depression
- Current study questions the robustness of previous findings regarding
 - Presence of IB in children of parents with depression
 - Association between IB and stress response
- No evidence for assosciations between IB and SR
- However, findings could reflect high SES of two groups



Thank you!





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Study procedure

Online Diagnostics

204 children and their parents



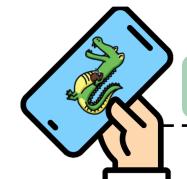
(1 week later)

Session 1



Measure IB and stress reactivity (80 HR, 77 LR)





IB training (45 HR) 1 session in the lab Placebo Training (45 HR) 1 session in the lab





(4 weeks later)

Session 2

Measure IB and stress reactivity

20 training sessions

online



Measure IB and stress reactivity

