

Journal of the American Academy of CHILD & ADOLESCENT PSYCHIATRY

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AACAP OFFICIAL ACTION

- 105** Clinical Practice Guideline: Assessment and Treatment of Adolescents and Young Adults With Substance Use Disorders and Problematic Substance Use (Excluding Tobacco)

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Carol M. Rockhill, Ujjwal Ramtekkar, Timothy D. Becker, Laurence Greenhill, Munya Hayek, Roma A. Vasa, A. Reese Abright, John M. Diamond, Lelis Nazario Rodríguez, Heather J. Walter

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REVIEW AND META-ANALYSES

171 Systematic Umbrella Review and Meta-Meta-Analysis: Effectiveness of Physical Activity in Improving Depression and Anxiety in Children and Adolescents



Ben Singh, Hunter Bennett, Aaron Miatke, Dorothea Dumuid, Rachel Curtis, Ty Ferguson, Jacinta Brinsley, Kimberley Szeto, Emily Eglitis, Mason Zhou, Catherine E.M. Simpson, Jasmine M. Petersen, Joseph Firth, Carol A. Maher

This study reviewed evidence from 21 review articles, consisting of 375 randomized controlled trials involving over 38,000 children and adolescents, to examine the effects of exercise on symptoms of anxiety and depression. Results show that exercise significantly reduces symptoms of depression and anxiety, with moderate-intensity and resistance exercises being particularly effective. Shorter interventions (less than 12 weeks) had greater benefits for depression. These results highlight the potential of structured exercise programs as a valuable tool for improving youth mental health.

Clinical guidance:

- Clinicians should consider incorporating structured exercise programs, particularly moderate-intensity and resistance training, as part of a comprehensive approach to managing depression and anxiety in children and adolescents.
- Shorter exercise interventions (<12 weeks) may provide greater benefits for depression and could be a practical starting point for integrating exercise into treatment plans.
- Given the broad effectiveness of exercise across various populations, healthcare providers can recommend physical activity interventions regardless of a child's clinical condition, tailoring programs to individual needs and preferences.

187 Systematic Review and Meta-Analysis: Imputing Response Rates for First-Line Psychological Treatments for Posttraumatic Stress Disorder in Youth



Katie Lofthouse, Alana Davies, Joanne Hodgekins, Richard Meiser-Stedman

In this study, the authors analyzed data from 57 randomized controlled trials involving over 5,000 youth assessing psychological therapies for posttraumatic stress disorder (PTSD). 48% of youth with PTSD who received trauma-focused cognitive behavioral therapy (TF-CBT) and 30% of youth who received eye movement desensitization and reprocessing (EMDR) exhibited 50% symptom reduction after treatment, compared to 20% of youth in control conditions. Deterioration was seen in 1% of youth receiving TF-CBT or EMDR, compared to 13% of youth in control conditions.

Clinical guidance:

- Psychological therapies for posttraumatic stress disorder (PTSD) in youth, like trauma-focused cognitive behavioral therapy and eye movement desensitization and reprocessing, can be helpful in symptom reduction and have low likelihood of causing deterioration of symptoms.

206 Systematic Review and Meta-Analysis: Predictors of Relapsing, Recurrent, and Chronic Depression in Young People



Scott D. Tagliaferri, Laura K.M. Han, Muskan Khetan, Joshua Nguyen, Connie Markulev, Simon Rice, Susan M. Cotton, Michael Berk, Enda M. Byrne, Debra Rickwood, Christopher G. Davey, Peter Koval, Aswin Ratheesh, Patrick D. McGorry, Mario Alvarez-Jimenez, Lianne Schmaal

This systematic review and meta-analysis summarized the evidence for factors that can be used to identify relapsing, recurrent, and chronic depression in young people. Data from 76 reports of 46 unique cohorts, including a total of 7,488 young people experiencing depression, found that female sex, more severe depressive symptoms, suicidal thoughts and behaviors, lower global functioning, and longer sleep-onset latency were predictive of a poor course trajectory of depression. This information has the potential to identify youth at risk for a poor course of depression, a life stage in which most of the disability and burden attributable to depression can be averted.

231 Systematic Review and Meta-Analysis: Predictors of Adult Psychiatric Outcomes of Childhood Attention-Deficit/Hyperactivity Disorder



Noa E. van der Plas, Siri D.S. Noordermeer, Jaap Oosterlaan, Marjolein Luman

This study systematically evaluated previous research on risk factors for adult psychiatric outcomes of children diagnosed with ADHD. Results showed that those adults who were treated with stimulant medication were twice as likely to still have ADHD in adulthood. Those adults who still had ADHD were at greater risk for also having a substance use disorder and depressive disorder.

250 Systematic Review: Convergence and Divergence Between Autism Spectrum Disorder and Obsessive-Compulsive Disorder: Genetic, Neuroimaging, and Cognitive Findings



Josepha A. Pereira, Jeremy Veenstra-VanderWeele, Amandeep Jutla

Autism spectrum disorder (ASD) and obsessive-compulsive disorder (OCD) are different diagnoses, but both involve repetitive behavior, and children with ASD are much more likely than neurotypical children to be diagnosed with OCD. But the connection between ASD and OCD is not well understood. This systematic review examined the relationships of ASD and OCD at three levels: genetic, neurobiological, and cognitive. Similarities and differences were identified at all levels, though existing studies have some limitations. Future work is needed to better understand the relationships between these diagnoses.

NEW RESEARCH

269 Symptoms of Depression, Physical Activity, and Sedentary Time: Within-Person Relations From Age 6 to 18 in a Birth Cohort



Silje Steinsbekk, Joakim Skoog, Lars Wichstrøm

Using data from a Norwegian birth cohort ($n = 873$), this study found that from ages 14 to 18, decreased physical activity predicted more depressive symptoms, while increased depressive symptoms predicted decreased physical activity from ages 10 to 12 and 14 to 16. No significant correlations were found for sedentary time. These findings suggest that physical activity may protect against depressive symptoms from middle to late adolescence.

279 Racial and Ethnic Disparities in Treatment of Youth With Bipolar Disorders



Cynthia A. Fontanella, Kristy M. Nguyen, Elyse N. Llamocca, Rui Huang, Danielle L. Steelesmith, Taryn L. Mayes, Eric A. Youngstrom, Susan dosReis

Using Medicaid claims data from 36 states, this study identified low prevalence of receipt of guideline-concordant care among Medicaid-enrolled youth aged 10 to 17 years with a new episode of bipolar disorder. We identified marked differences in receipt of recommended treatment by race/ethnicity. Compared to non-Hispanic White youth, non-Hispanic Black and Hispanic youth were less likely to receive the recommended first-line medications for bipolar disorder (mood stabilizer or antipsychotic). Non-Hispanic Black youth were less likely to receive psychotherapy. These racial/ethnic differences in receipt of guideline-concordant treatment for youth with bipolar disorder underscore the need to identify barriers to recommended care in this population, particularly among minoritized youth.

291 Do Children's Mental Health Symptoms Impact Their Access to Unlocked Guns at Home?



Guangyu Tong, Josie Caves Sivaraman, Michele M. Easter, Naomi N. Duke, Megan L. Ranney, Jeffrey W. Swanson, William E. Copeland

Using data from the Great Smoky Mountain Study, this study found that 66% of parents reported that their child had access to an unlocked gun at some point between the ages of 9 and 16 years. However, parents in gun-owning households reduced firearm access when children exhibited increased symptoms of oppositional defiant disorder or depression, especially in adolescence.

301 Associations Between a Genetic Liability Toward Externalizing and Behavioral Outcomes Spanning Toddlerhood Through Early Adulthood in Five Developmental Cohorts



Maia Choi, Holly E. Poore, Sarah J. Brislin, Peter B. Barr, Fazil Aliev, Stephanie Zellers, Gretchen R.B. Saunders, Jessica E. Salvatore, Scott I. Vrieze, K. Paige Harden, Abraham A. Palmer, Anu Raevuori, Antti Latvala, COGA Collaborators, Danielle M. Dick

This study leverages information from 5 large datasets to characterize behavioral manifestations of a genetic liability toward externalizing symptoms from ages 6 months to 26 years. A genetic liability toward externalizing symptoms was associated with a wide array of externalizing behaviors and psychiatric/substance use outcomes beginning as early as childhood and through emerging adulthood. The early emergence and breadth of behaviors associated with a genetic liability toward externalizing could inform prevention and intervention.

MEDIA FORUM

316 Growing Up in Reverse

Misty C. Richards, Justin Schreiber

317 Sunshine of My Life

Priscilla Li, Timothy Luk, Elizabeth Y. Li, Pooja Jaiswal, Eunice Y. Yuen

319 What's Eating Gilbert Grape

Annie Anushka Thakur

321 CME: *Journal* Continuing Medical Education

322 Podcast: Author Interviews

323 *JAACAP Open*: Volume 4 Issue 1

325 *JAACAP Connect*: All Are Invited!

Contributing Jack L. Turban, MD, MHS, drafted and/or edited the article summaries, clinical guidance, and social media posts for this issue, and conducted the podcast interview.



Article is discussed in an editorial.



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