while minimizing negative ones.Overall, despite ample evidence relating depression and more gen- eral problem-solving deficits in child and adolescent samples (e.g., Mul- lins, Siegel, & Hodges, 1985; Sacco & Graves, 1984), there is surprisingly little empirical support for the particular stage-related deficits pro- posed by Nezu (1987) other than that found for orientation variables in studies of adolescents.For example, Chorpita, Albano, and Barlow (1996) found that anxious children had a distinct tendency to interpret ambiguous situ- ations as threatening, endorse more avoidant plans in response, and assign higher probability to the occurrence of threatening events.Positive problem orientation has been found to moderate the relation between negative life stress and depression, and, conversely, negative problem orientation and impulsive and avoid- ant response styles predict depression (e.g., Frye & Goodman, 2000; Reinecke, DuBois, & Schultz, 2001).Studies with adults have documented links between anxiety and less effective problem solving (e.g., Dugas, Letarte, Rheaume, Freeston, & Ladouceur, 1995) and evidence of a moderating role for problem- solving ability in the relationship between negative life stress and anxiety (Nezu, 1986).Problem situations are inherently ambiguous, and perceiving them as threats may impede the ability to objectively define them, discourage the .(generation of solutions, and prevent decision making and imple- mentation (Dugas et al., 1995Verification, later referred to as solution implementation and verification (D'Zurilla & Nezu, 1982), involves an assessment of the actual outcome and whether any self-correction is needed (D'Zurilla & Goldfried, 1971).Though the types of deficits proposed by Nezu (1987) may well exist, research- ers have tended not to assess them, instead relying on self-reports of more global attitudes and abilities.Cognitive biases, such as selectively attending to the negative, can lead to the inaccurate assessment of response alternatives and their potential consequences (Nezu, 1987).For youth experiencing depres- sion, biased thinking may preclude objectivity in assessing outcomes.Beyond that, there is some evidencelinking depressive symptoms and the generation of fewer solutions (Frye & Goodman, 2000; Levendosky, Okun, & Parker, 1995).Research examining problem solving and anxiety is much less advanced, but the Nezu (1987) formulation seems readily adaptable.Of course, having fewer quality response options to choose from makes ineffective responding more likely for depressed youth regardless of their decision-making abilities.They may focus on the negative, set very high expectations for them- selves, and be more swayed by the short-term, rather than long-term, consequences of their actions (Nezu, 1987; Rehm, 1977).Anxious youth present with a range of cognitive biases that would appear to adversely impact their problem-solving ability.The final stage of problem solving occurs after the chosen response alternative has been enacted.Depression hampers decision making.The key question is whether the actual consequences of a solution match those anticipated during the decision-making stage (Nezu, 1987).