



UW PACC

Psychiatry and Addictions Case Conference

UW Medicine | Psychiatry and Behavioral Sciences

BEHAVIORAL ACTIVATION ROLE PLAY

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SPEAKER DISCLOSURES

- ✓ Any conflicts of interest?
 - ✓ None

OBJECTIVES

1. To understand behavioral activation (BA) model for depression
2. To learn to apply BA with patients

BEHAVIORAL ACTIVATION (BA)

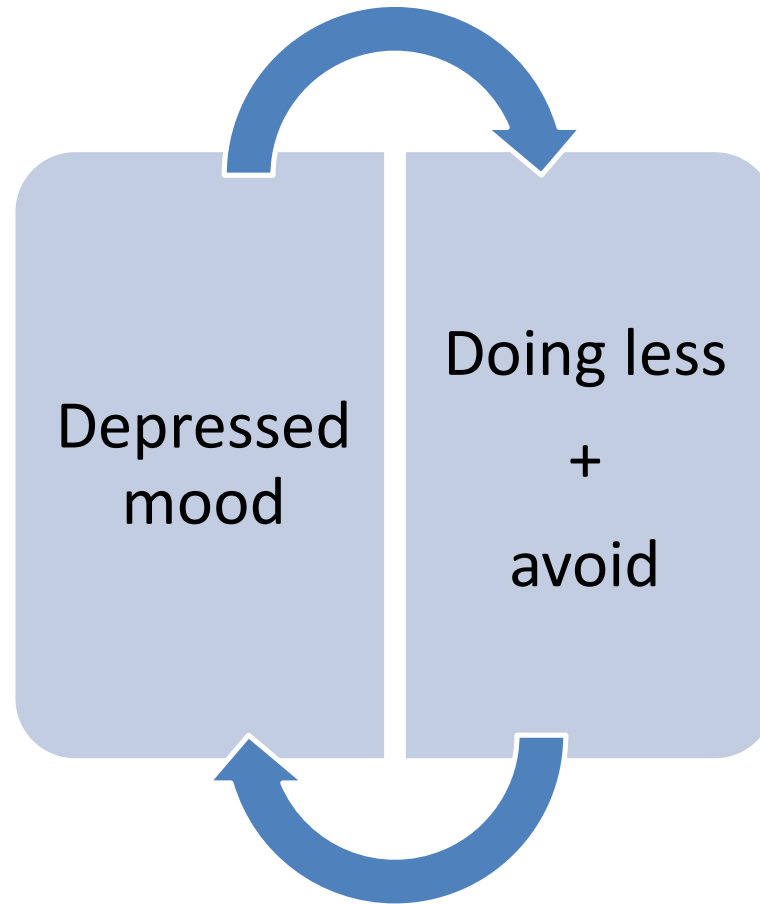
- Goal
 - “help clients modify their behavior to increase contact with sources of positive reinforcement in their lives”
- Efficacy is comparable to cognitive restructuring only, medication only, & CBT
- Structure
 - 1. Explain the BA model
 - 2. Assess the behavior target (with case formulation)
 - 3. Apply and problem solve
 - 4. Maintain treatment gains

DSM 5 CRITERIA FOR MAJOR DEPRESSIVE DISORDER

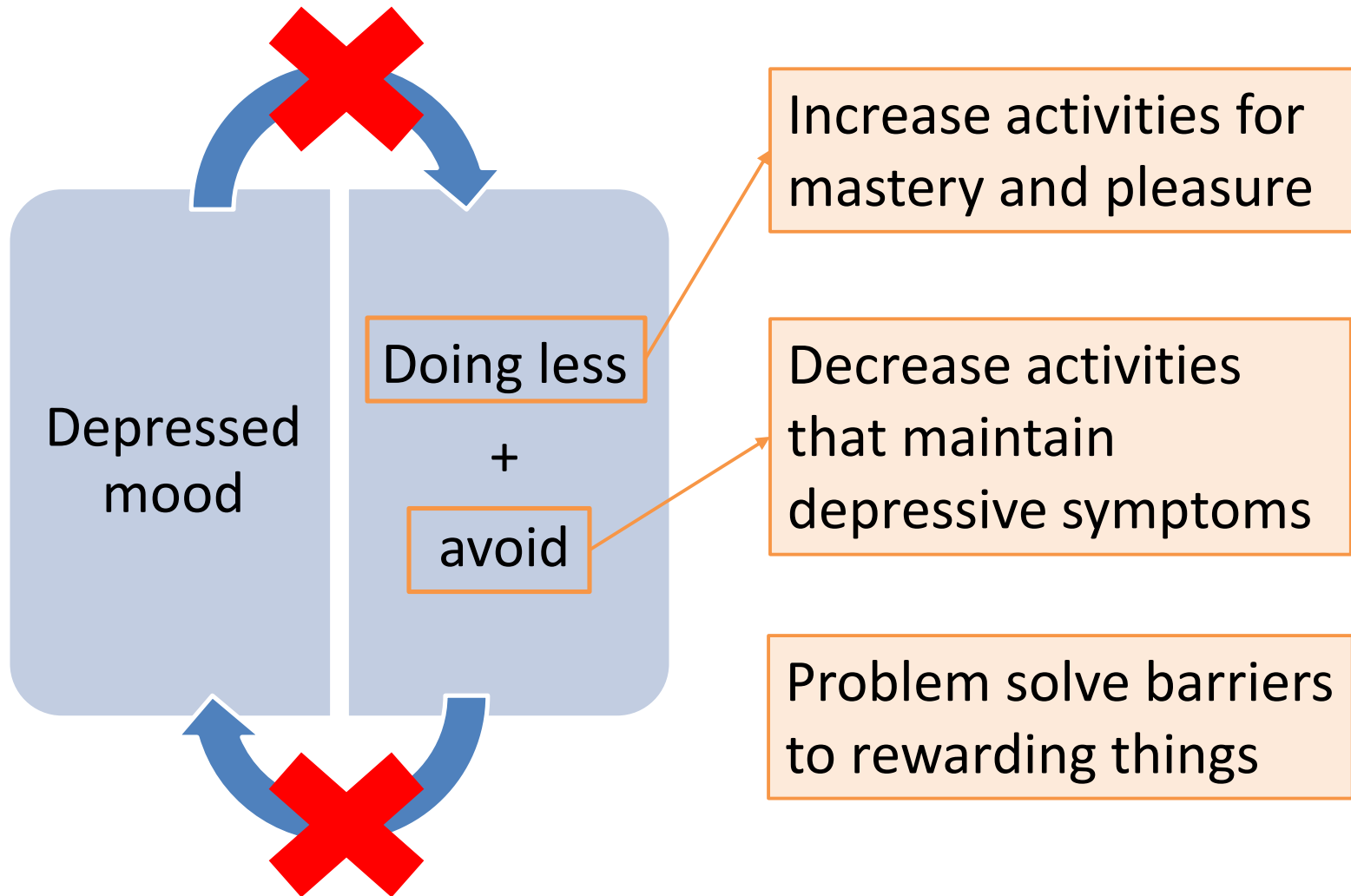
- 5 or more symptoms in the past 2 weeks
 - **Depressed mood**
 - **Loss of interest or pleasure**
 - Weight loss/gain
 - Insomnia or hypersomnia
 - Psychomotor agitation or retardation
 - Fatigue or loss of energy
 - Difficulty with concentration
 - SI, plan or attempt

Symptoms must include at least one of the two

1. BA MODEL



1. BA MODEL: 3 GOALS



2. ASSESS THE BA TARGET

- “What would you be doing more if you were not depressed?”
- “What did you stop doing because of depression?”
- “Is your mood related to specific activities, life contexts, or problems?”
- “What are you doing more because of depression?”
- “What do you avoid doing? How are you avoiding them?”
- “When you avoid, how does that change your depression?”

These gets at behaviors that we want to “activate” or increase

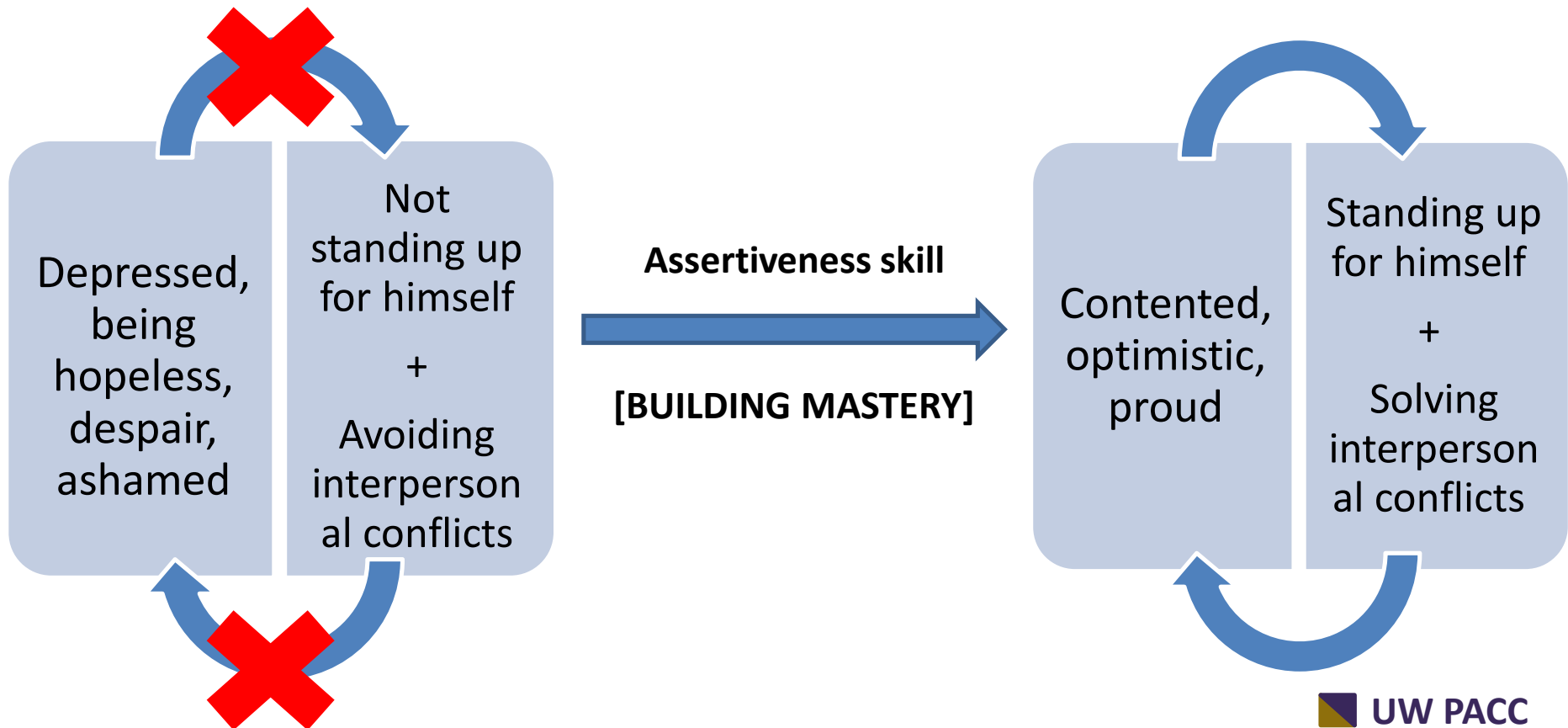
These gets at behaviors that we want to “deactivate” or decrease

2. ASSESS THE BA TARGET

- Role play

2. ASSESS THE BA TARGET

- Case formulation of “T”



3. APPLY AND PROBLEM SOLVE

- Collaboratively develop a specific homework with SMART Goals
 - **S**pecific, **M**easurable, **A**ttainable, **R**elevant, & **T**ime-bound
- Enhance motivation using your Motivational Interviewing skills
 - “How confident are you with this assignment from 1 (not confident at all) to 10 (very confident)?”
 - “What made you rate at [pt rating] than [lower than pt rating]?”

3. APPLY AND PROBLEM SOLVE

- Applying SMART goals on using assertiveness skills
 - **S**pecific
 - **M**easurable
 - **A**ttainable
 - **R**elevant
 - **T**ime-based
- Role play on problem solving

4. MAINTAIN TREATMENT GAINS: ACTION (MARTEL ET AL., 2001)

Assess	Is this behavior approach or avoidance? Will it be likely to make me feel better or worse?
Choose	Either choose to continue this behavior, even if it makes me feel worse, or try a new behavior
Try	Try the behavior chosen
Integrate	Any new behavior needs to be given a fair chance, so integrate new behaviors into a routine before assessing whether it has been helpful or not
Observe the results	Pay close attention and monitor the effects of the new behavior
Never give up	Remembering that making changes can often require repeated efforts and attempts

PITFALLS TO AVOID

- Not checking on homework
- Not customizing target for each patient
 - Focusing on just “doing more”
 - Same “prescription” for every patient
- Not praising ANY movement towards positive direction
- Targeting the behavior that you think is “doable” for the patient
 - Making the target too big
 - Ignoring that there is low engagement or buy-in

HELPFUL RESOURCE

- Brief Behavioral Skills: Behavioral Activation
(Drs. Kari Stephens and Patrick Raue)

<https://www.youtube.com/watch?v=fqk41YZ81uM>

QUESTIONS?