Behavioral Activation:
Evidence-based Treatment For Depressive Symptoms

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project
ECHO

GENERAL DISCLOSURES

SPEAKER DISCLOSURES

✓ None

BEHAVIORAL ACTIVATION

Learning Objectives

- ➢ **Understand the Behavioral Activation model of depressive symptoms**
- ➢ **Describe how to develop a case formulation for a patient experiencing elevated depressive symptoms**
- ➢ **Understand the role of avoidance in maintaining depressive symptoms**
- ➢ **Describe how to help patients select activities and make a specific weekly plan**
- ➢ **Understand how to evaluate the outcome of patients' efforts and problem solve barriers to action planning**

Case Example: RB

30 y/o Caucasian woman, mother of 2 (ages 8 and 2), 2nd marriage, unable to work since pain began after neck strain at work, some college

Key complaints: my neck hurts; my arm is screwed up; what is wrong with me?; the pain is ruining my life and ability to care for my children

Depressive and anxiety symptoms began after pain onset. Baseline PHQ-9 23 (severe depressive symptoms) & GAD-7 11 (moderate anxiety symptoms); average pain rating 5/10

She was not on medication for depression and was not interested in taking new medications

What Is Behavioral Activation?

An evidence-based, best practice for treating depressive symptoms

BA targets patterns of avoidance, withdrawal, and inactivity

BA is structured - a weekly plan is created

BA is brief and easy to use

BA helps depressed people improve their mood by engaging in rewarding activities

What is the difference between BA and CBT?

CBT
A first line depression treatment

Behavioral Activation
set of strategies at the beginning of CBT treatment

Cognitive
dysfunctional cognitions or "automatic thoughts" → increase flexibility and decrease depressed way the thoughts function

Good evidence for C, B, and C+B

BA: Cuijpers et al 2007, Ekers et al 2008, Mazzucchelli et al 2009; listed as an evidence-based treatment for depression by the National Institute for Health and Clinical Excellence (2009)

3 GOALS OF BA

1 Increase adaptive activities, preferably for mastery and pleasure

2 Decrease activities that maintain depressive symptoms

3 Problem solve barriers to rewarding things
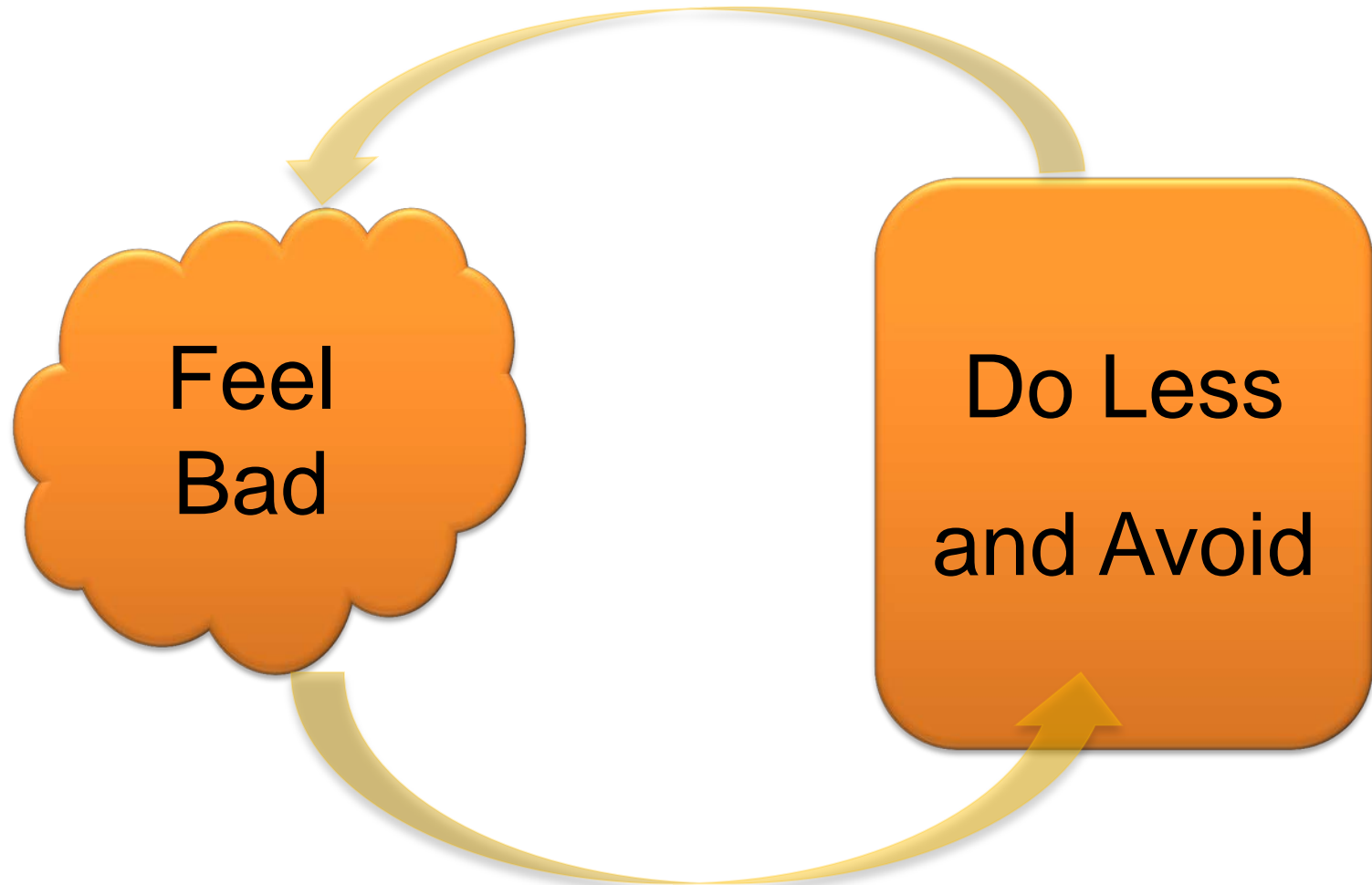
BA: The 4 Steps

1. Explain the model

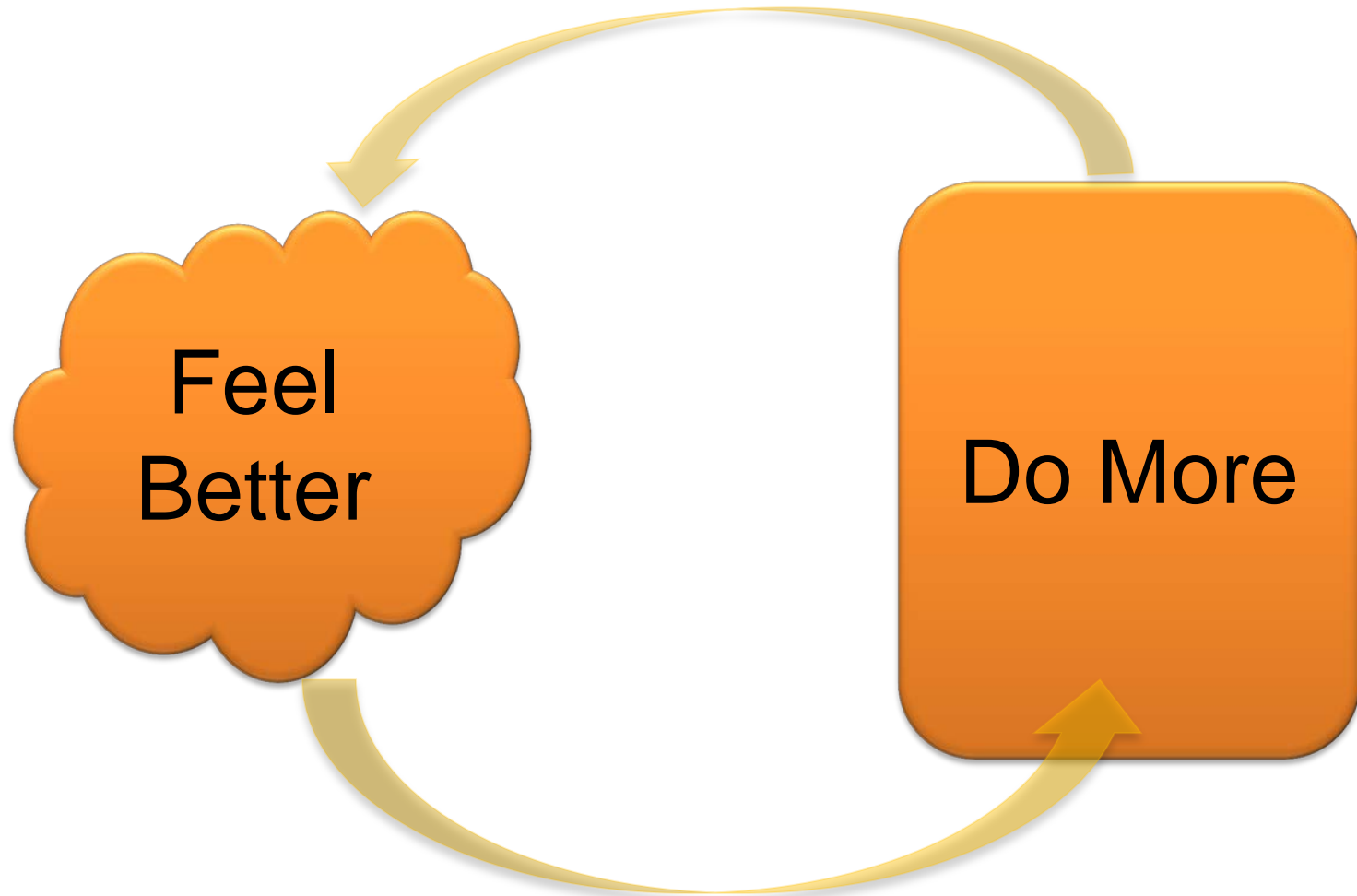2. Ask lots of questions until you have a good formulation

3. Select BA targets and make a plan

4. Follow-up: Evaluate the outcome and problem solve barriers

Step 1. Explain the model: How depressive symptoms arise

Feel Bad → Do Less and Avoid → (cycle)

The model:
How BA helps

Feel Better

Do More

Step 2. Develop a case formulation by asking questions

Guilty, ashamed, frustrated, angry, scared, helpless

Staying in bed, napping, shutting down emotionally with kids and husband

Assess

What was the client doing more or less of before being depressed?

Does the client have immediate goals or long-term goals to address?

Questions to help in the formulation

What would help to have a more meaningful life?

What would the client's life be like if he/she were not depressed?

The Role Of Avoidance

What is it?

Discomfort experienced in a particular situation is followed by behavior to feel better

Why do it?

Short term gain, but long term loss

What to do about it?

Identify the avoidance behaviors and help choose alternative coping behaviors

RB's avoidance:

- She won't talk to her husband about her physical pain or frustrations with the kids: "It always ends in a fight".

- She has stopped doing many activities with her kids, because she hurts too much.

- She won't acknowledge her own accomplishments, because she feels guilty about the negative impact her pain has had on her family.

Form C   **List of Pleasant and Rewarding Activities**

Instructions: List desired activities and rate the difficulty of each.

	ACTIVITY	DIFFICULTY: E = Easy M = Medium H = Hard
1.	Helping kids with schoolwork	E
2.	Taking kids to the park	M
3.	Going on a weekend trip with the family	H
4.	Going on a date night with husband	M
5.	Watching a movie at home with husband	E
6.	Planning family budget with husband	M
7.	Getting together with friends	M
8.	Calling or texting friends	E
9.	Going to the gym	M
10.	Jogging	M
11.	Walking at the park	E
12.	Walking in the neighborhood	E
13.	Organizing paperwork at home	M
14.	Redecorating living room	H
15.	Working on photo album	E

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3 Goals Of BA: RB

1 Mastery and pleasure targets: Parenting and Marriage

2 Decrease activities that maintain depressive symptoms: Napping and emotional disengagement

3 Problem solve barriers: communication skills, activity pacing, relaxation training

# Step 3. Select BA targets and make a *specific* plan

- **The more detailed the plan, the more likely it will be followed.**
- **In the plan, consider:**
  - Date or days of the week
  - What time of day
  - How long
  - With whom
  - What obstacles could come up? What is a Plan B?
- **Ask patient:**
  - How likely are you to do this? What will you do if you don't feel like doing it?
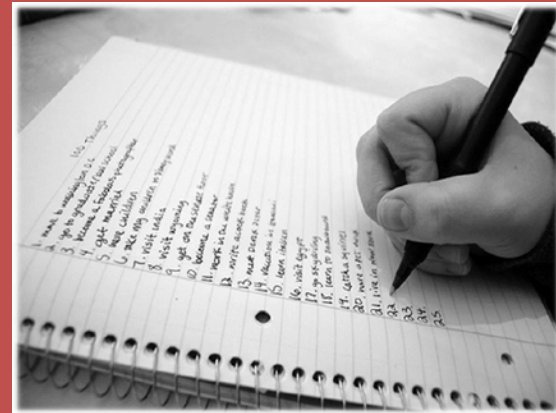
Avoiding Mount Everest

Start simple and move to harder tasks over time → ensures success

- *Help break tasks down*
  - Mastery and success of one small task will increase likelihood of completing other tasks
- *Have them tell you what and how they'll do the task (Details! Details! Details! Have them walk you through it)*
  - Help problem solve and ask how likely it is they will do it.
  - If it seems too challenging, it is! Break it down further.

Complex tasks

Simple tasks
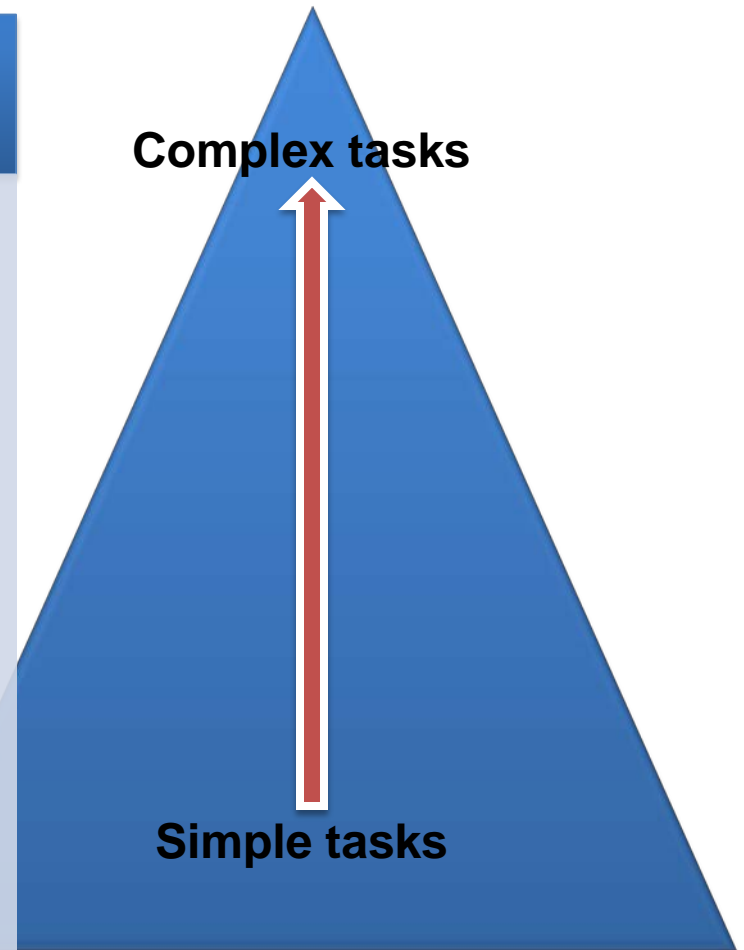
Scaling Back to Ensure Success

Acknowledge "difficult" enjoyable or rewarding activities (e.g., going to the gym for 2 hours), but…

Help patient scale back and set a *feasible* short term plan (e.g., walk around the neighborhood for 15 minutes, walk around the house for 5 minutes).

Success at small goals builds confidence and sense of mastery and control.

Exceeding a goal is great! Encourage patients to note any accomplishments and discuss at next meeting.

RB's BA targets:

- What are some ways to replace these avoidance behaviors?

Won't talk to husband, avoiding emotional expression with her partner	Stopped activities with kids	Won't acknowledge her accomplishments
- ??	- ??	- ??

RB's BA targets:

- What she and I worked on…

Won't talk to husband, avoiding emotional expression with her partner	**Stopped activities with kids**	**Won't acknowledge her accomplishments**

• Talk to husband about frustrations
• Increase physical intimacy
• Problem solve:
  • Take timeouts but plan when you will re-engage when fights happen
  • Try reflective listening
	• Dance with them, moving her neck especially; reduce guarding activity
	• Problem solve:
	  • Pace activities with kids
		• Internal validations for her motherhood and accomplishments
		• Extras she did on her own:
		  • Organize and decorate her house
		  • Improve caring for her appearance (attention to hair, make-up, clothes)

Scheduling Activities
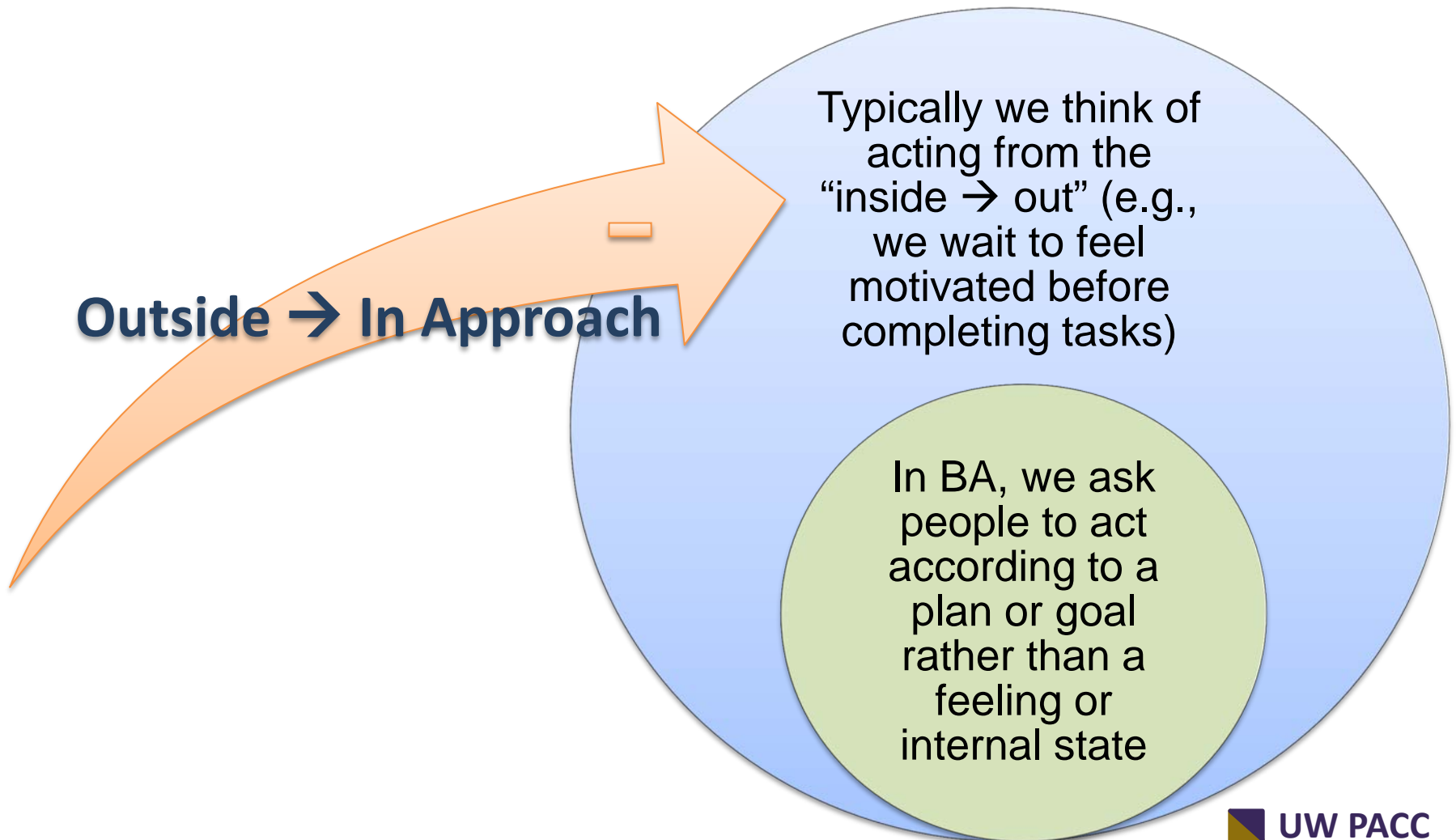## Pleasant – Social – Physical

Plan at least one activity each day. It is an important way to deal with stress and depression. Schedule out a week's worth of daily activities.

Each day should contain at least one activity. These can be pleasant, social, or physical activities. For example, a pleasant activity might be putting together a puzzle or some hobby, a social activity might be having tea with a neighbor, and a physical activity might be going for a walk.

Rate how satisfied you felt after doing the activity.

Daily Activities			How satisfied did you feel? Rate from 0 to 10: 0 = Not Satisfied At All 10 = Extremely Satisfied	Completed ✓
Day	**Date**	**Activity (What? Where? With Whom?)**		
Monday		Dance with kids after school		
Tuesday		Organize paperwork for 30 mins when get home		
Wednesday		Talk with husband about frustrations after dinner; watch movie with husband		
Thursday		Help kids with homework after dinner		
Friday		Walk around neighborhood when get home		
Saturday		Date night with husband; increase physical intimacy		
Sunday		Take kids to the park in the morning		

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But I don't feel like it...

Outside → In Approach

Typically we think of acting from the "inside → out" (e.g., we wait to feel motivated before completing tasks)

In BA, we ask people to act according to a plan or goal rather than a feeling or internal state

Step 4. Follow-up: Evaluate the outcome and problem solve barriers

ALWAYS ask about target behaviors at follow up meetings.

Expect that patients might not do the activities. Do not judge.

If goal not accomplished, ask 3 questions:

Do they have buy in to the treatment?
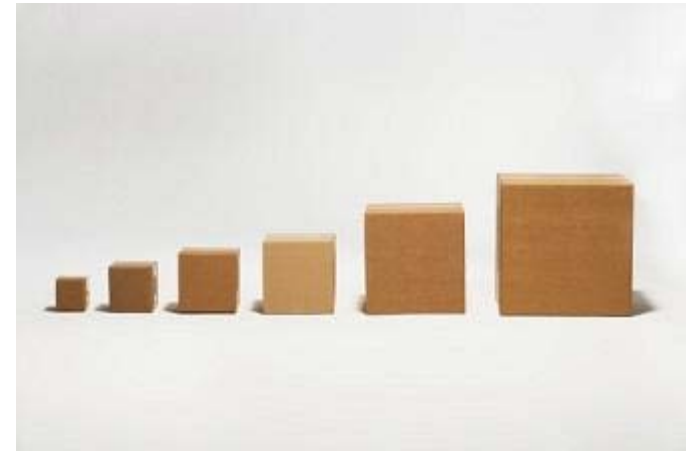
Did they simply forget?

Was it a Mt Everest? (too hard)

Reframing "Failure" is Essential

- **Wrong plan, pick another…learning what worked and what didn't work**

- **"Mistakes are portals of discovery." – James Joyce**

Building Success

It's an experiment, a trial, it's not forever

Suggest patients act first and see what happens

Praise any success they make, even a small success

Go slow and start small

RB's symptoms over 12 weeks

Legend:
- PHQ-9
- GAD-7
- Pain
- Pain Interference