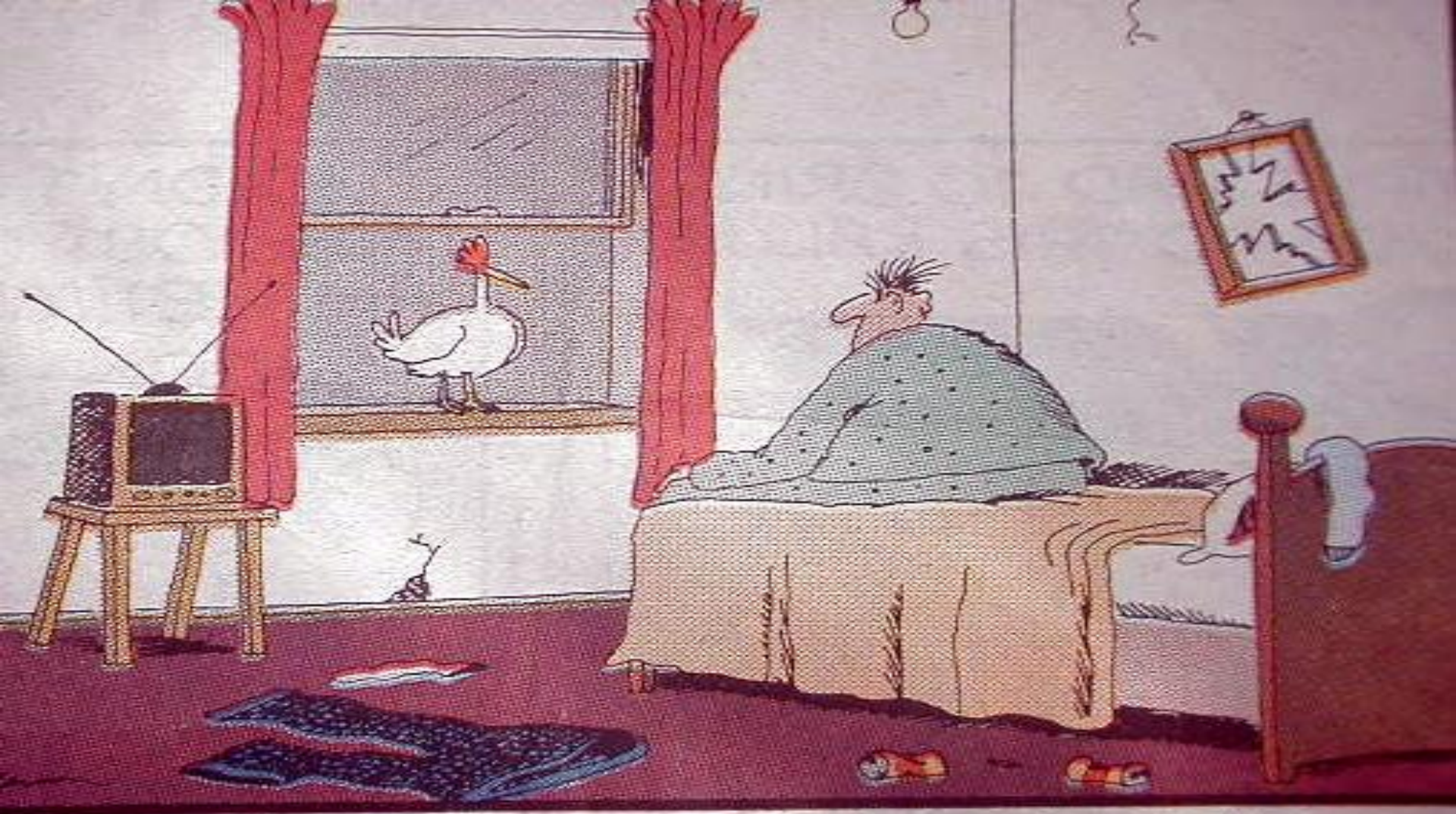


Behavioral Activation

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**The Bluebird of Happiness long absent from his life,
Ned is visited by the Chicken of Depression.**

Ancient Cure of the Greeks & Romans



Psychotherapy: 1960-70s

- No recognized evidence-based treatments
- Multiple schools of therapy/approaches to depression
- Psychodynamic approaches most widely used
- Behavioral therapies being developed
- Early work on cognitive therapy
- Other approaches (e.g., Client-Centered, Gestalt, Family Systems, etc.)

Emergence of Evidence-Based Treatment



3 Evidence-Based Psychological Treatments for Depression

1. Cognitive Therapy
2. Interpersonal Psychotherapy
3. Behavioral Activation

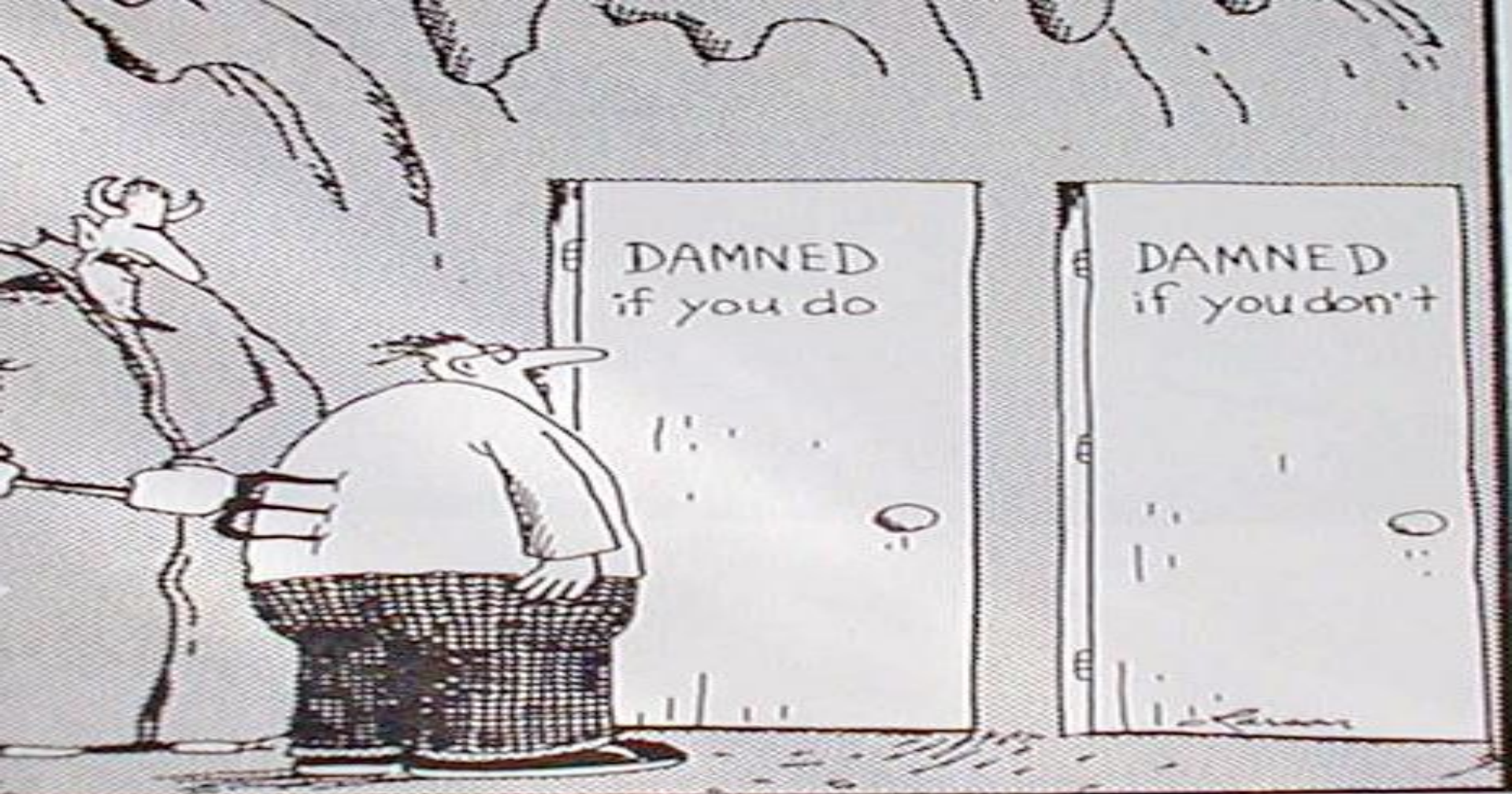
Special Challenges Presented by Severe Depression

DSM-IV Symptoms

- 5. Psychomotor agitation or retardation...
- 8. Diminished ability to think or concentrate, or indecisiveness...

Other Issues

Memory impairment



"C'mon, c'mon—it's either one or the other."

Behavioral Activation

- Based on early work of Lewinsohn (positive reinforcement) and Rehm (self-control)
- Depression caused by deprivation of positive reinforcement
- Developed by Martell, Dimidjian, Herman-Dunn & others
- Focus on increasing contact with sources of reward/reinforcement via graded steps of activation
- Includes problem-solving & countering avoidance to remove obstacles to reinforcement

Why BA for Severe Depression?

- Focus on simple behavior change
- Less reliant on insight/memory due to use of schedules/prompts
- Directly addresses psychomotor retardation
- Step-wise approach sensitive to patient's current functioning

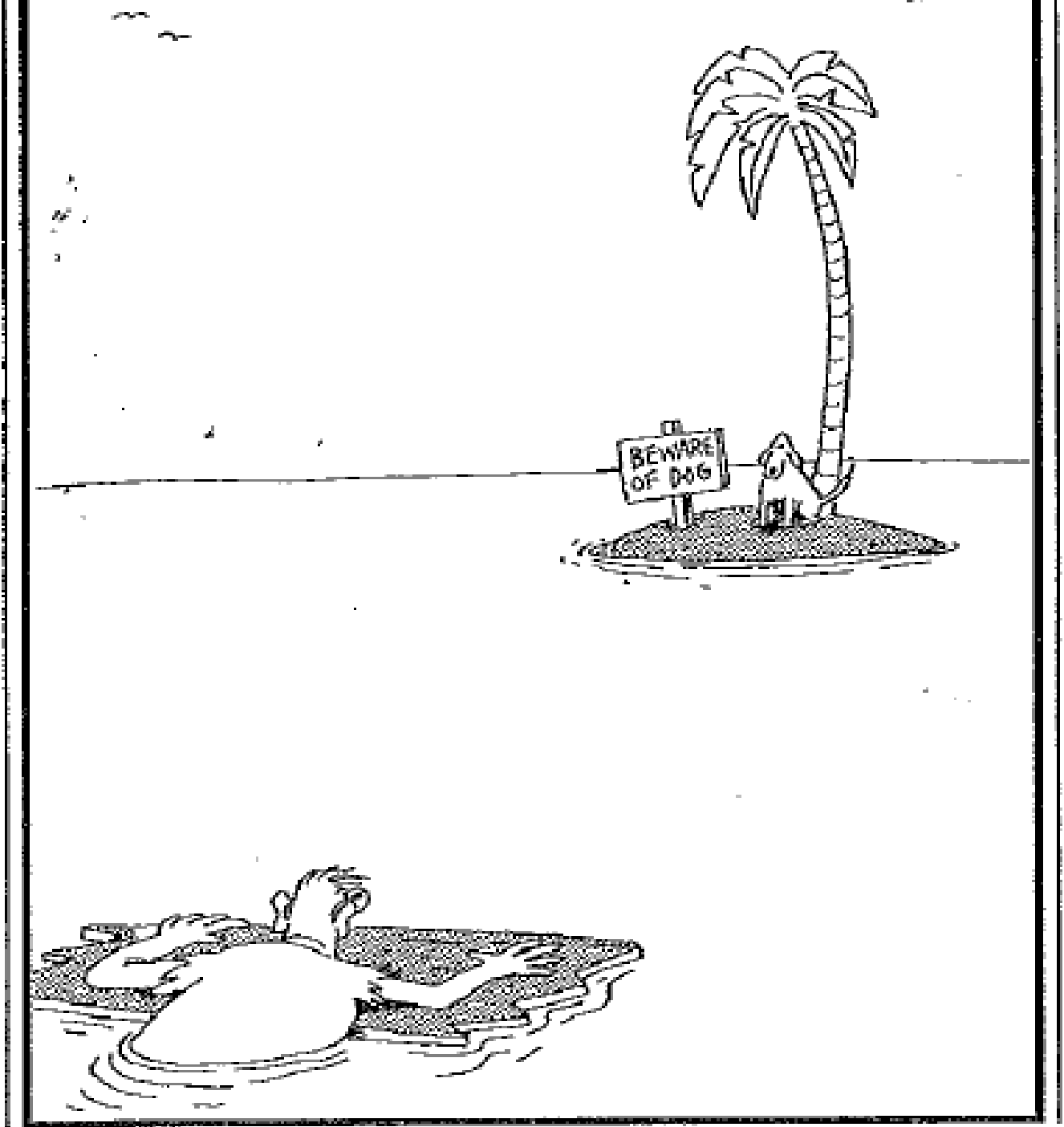
Elements of BA in other psychological Treatments

- Cognitive therapy
- Interpersonal Psychotherapy
- Problem-Solving Therapy
- Mindfulness/Acceptance & Commitment Therapy

Outcome Research

- Substantial evidence supports older, related behavioral treatments of Lewinsohn & Rehm
- BA = CT (Jacobson et al., 1996)
- BA = CT = Antidepressant (Dimidjian et al., 2006)
- BA = Antidepressant > CT for severe depression (Dimidjian et al., 2006)
- BA = CT > Antidepressant: long-term outcome (Dobson et al., 2008)

Description of Behavioral Activation



Things To Remember About BA

1. The key to changing mood is to change behavior
2. Behavior to reflect patient values & priorities (vs feelings)
3. Changes in life can trigger depression – avoidant coping can keep the patient stuck
4. A careful formulation focuses on antecedents and consequences of important behaviors
5. Structuring and scheduling activities is strategic – not based on mood
6. Change occurs in small steps
7. Emphasize naturally reinforcing activities
8. Therapist acts as a “coach”
9. The approach is problem solving.
 - Outcomes of experiments are considered empirically.
 - Relationship is collegial
 - All results are useful.
10. Homework is the key to successful treatment
11. Trouble-shoot barriers to follow through

Patient vs BA View of Recovery

Patient's View

Feel Better



Behavior Changes

BA View

Behavior Changes



Feel Better

Take Home Message

- Initiate behavior incompatible with your feelings
 - At a pace you can handle
- Build from there, a step at a time

The structure of the Session

- Check-in
- Maintain focus on activation
- Agenda
- Assess symptoms
- Review homework
- When appropriate, re-orient to treatment approach and solicit feedback about patient's understanding
- Refine homework assignment

Activity Scheduling

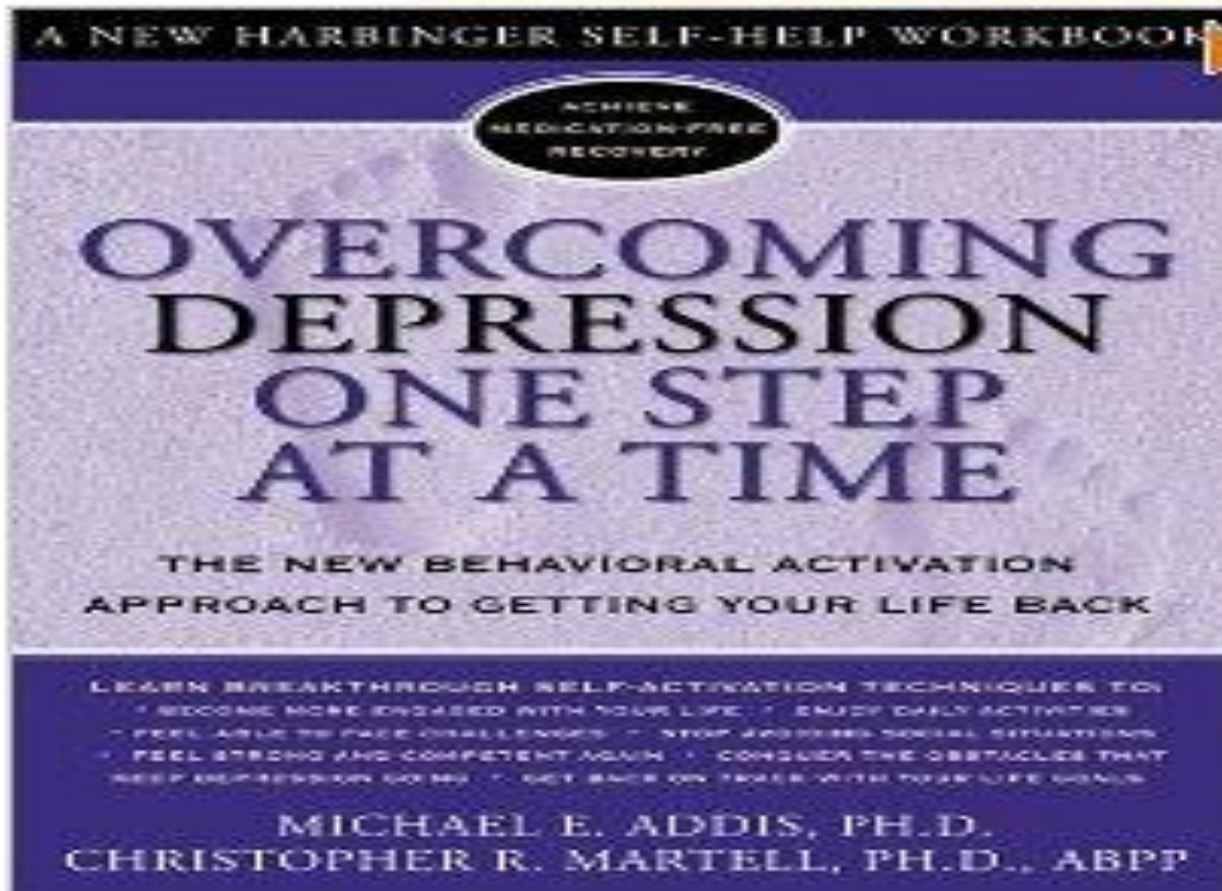
- Plan activity that is likely to be positively reinforcing and activity that assists with decreasing stress
- Start small
 - Educate on risk of all-or-nothing.
 - Consider baseline.
- Be specific
 - When
 - Where
 - Which days
 - How often
 - How long
 - ...

What about Cognition?

- Thoughts are considered to be a private behavior
- Focus on the form of the cognition, its function, and the process (not on content)
 - Highlight consequences of rumination
 - Focus on problem solving
 - Attend to sensory experience
 - Refocus on the current situation and task
 - Distract from rumination

Self-Help

Click to **LOOK INSIDE!**



Case Discussion and Review of Forms

Professional References

1. Dimidjian et al. (2006). Randomized trial of behavioral activation, cognitive therapy, & antidepressant medication in the acute treatment of adults with major depression. *J Consulting & Clinical Psychology, 74*, 658-670.
2. Dobson et al. (2008). Randomized clinical trial of behavioral activation, cognitive therapy, & antidepressant medication in the prevention of relapse and recurrence of depression. *J Consulting & Clinical Psychology, 76*, 468-477.
3. Jacobson et al. (1996). A component analysis of cognitive-behavior therapy for depression. *J Clinical & Consulting Psychology, 64*, 295-304.
4. Martell et al. (2010). *Behavioral activation for depression*. NY: Guilford.
5. Sturney (2009). Behavioral activation is an evidence-based treatment for depression. *Behavior Modification, 33*, 818-829.