Behavioral Activation

Decrease in Pleasant Events

Lewinsohn (1974)
- Depression arises when one’s actions do not result in positive reinforcement
- One’s environment is filled with low rates of positive reinforcement and increasing rates of punishment
- Treatment focuses on increasing rate of pleasant events as well as an appreciation for the contingencies that lead to the arising of those pleasant events

Functional analysis of depression

Ferster (1973)
- Proposed functional analytic model for the arising and maintenance of depression
- Emphasized that depression arises and is maintained through negative reinforcement as behaviors
  - Behaviors gain strength in a repertoire for their escape and avoidance function
  - These behaviors are emitted to the exclusion of behaviors likely to result in positive reinforcement
  - Like anxiety disorders, depression based on avoidance
History: BA/BT as a part of Cognitive Therapy (CT)

Beck and colleagues (1979)

- Purely behavioral approaches did not endure and over time, cognitive interventions were integrated.
- Explicit aim of modifying internal cognitive structures (automatic thoughts, schema, core beliefs).
- BA strategies within CT package: "the ultimate aim of these techniques in cognitive therapy is to produce change in the negative attitudes" (p. 118).

Cognitive Therapy of Depression

Beck, Rush, Shaw, & Emery (1979)

- First manualized treatment
- First few sessions of CT are behavioral activation
  - Suite of behaviorally oriented, non-cognitive skills
    - monitoring of daily activities
    - assessment of pleasure and mastery
    - role-plays and cognitive (imaginal) rehearsal of activities

Cognitive Therapy of Depression

- Cognitive therapy (CT) has been shown to be a highly effective, short-term therapy for the treatment of depression
- Investigators are starting to question whether cognitive interventions are actually responsible for positive outcome
Dismantling CT of Depression


Dismantling CT of Depression

- Equivalent post-treatment recovery rates across conditions (62%; Jacobson et al., 1996)
- Equivalent well weeks through 2 years post-treatment (75%; Gortner et al., 1998)
- Flexibility confers more protection over relapse as compared to optimism (Fresco et al. 2005)

Implications

- CT components equivalent in recovery from- and prevention of MDD

Behavioral Activation: Depression in Context

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Rationale for Behavioral Activation

• BA assumes a behavioral explanation for etiology of depression (Ferster, 1973)
• Life has gone awry- adverse life circumstances viewed as critical causal factors
• Examine events and individual’s response
• Behavior functions as avoidance behavior (withdrawal, inertia)
• Tx had to be “outside-in”
Key areas of expansion

- Distinctly behavioral case conceptualization
- Emphasis on avoidance patterns
- Emphasis on routine regulation
- Focused activation approach
- Behavioral strategies for targeting rumination

Jacobson, Martell, & Dimidjian, 2000
Martell, Addis, & Jacobson, 2001

Targets of BA

- Inertia
- Avoidance behaviors
- Routine disruptions, connection between routine and mood
- Individual environments and relationship between activity and mood
Course of BA

- Establish good therapeutic relationship
- Present model of BA
- Monitor relationship between situation/action and mood using activity logs and functional analysis
- Apply new coping strategies to "larger-life issues"
- Treatment review and relapse prevention

Key Elements of BA

BA Activity Chart

- Baseline assessment of activity
- Understand range of feelings
- Mastery and pleasure ratings
- Observe breadth or restriction of activity
- Guided activity
- Monitor avoidance behaviors
- Evaluate progress toward life goals
Outside In

- Typically we think of acting from the “inside/outside”
- We wait to feel motivated before completing tasks, or we respond to our internal states such as sitting in front of the television when we feel bored
- In BA, we ask people to act according to a plan or goal rather than a feeling

Increase acting from the “outside”

- Follow a written plan (e.g., activity schedule)
- Monitor progress
- Highlight consequences of increased activation
- Express your intention to another person; public support can help to get a task done
- Use of arbitrary self-reinforcement is sometimes useful (e.g., allow yourself to have a small snack only after completing housework or yard work)
Graded Task Assignment
• Based on functional analysis and goals
• Assign increasingly more difficult tasks to move toward full participation in activities
  – Help break tasks down into manageable components
    • Mastery and success of one component will increase likelihood of completing other components
  – Engage in mental rehearsal
    • Troubleshoot by anticipating obstacles and evaluating whether likely to be successful
    • If too challenging, can break down further

Avoidance Modification
• Understand the discomfort experienced in a particular situation that is then followed by some action on the part of the client to extinguish aversive experience
• Avoidance serves adaptive function in short-run but is problematic in long-run
• Assist the person in identifying the function of various avoidance behaviors and helping choose alternative coping behaviors
  – TRAP (Trigger, Response, Avoidance Pattern)
  – TRAC (Trigger, Response, Alternative Coping)

TRAP/TRAC
• T- Trigger (demands at work)
• R- Response (depressed mood/hopelessness)
• AP- Avoidance Pattern (stay home in bed, don’t answer phone)
• T-Trigger (demands at work)
• R- Response (depressed mood/hopelessness)
• AC- Alternative Coping (approach behaviors using graded tasks)
Routine Regulation

• Work with patient to develop and follow regular routine for basic life activities—eating, working, school, sleeping.

• Can only evaluate new behaviors after implemented for a period of time—make them routine, then evaluate
  – Use activity logs
  – Use the ACTION strategy
ACTION Strategy

Assess
• How will my behavior affect my depression?
• Am I avoiding? What are my goals in this situation?

Choose
• Activating myself will increase my chances of improving my life situation and mood.
• Choosing not to self-activate = choosing to take a break.

Try the behavior I have chosen.
Integrate any new activity into my daily routine.

Observe the Result.
• Do I feel better or worse?
• Did this action help me improve my situation?

Never Give up

Targeting Rumination

• Depressed individuals often think about misery of life, ruminate about symptoms, and do not problem solve
• Rumination often leads to withdrawal, inactivity, and ultimately more rumination
• Function may be escape or avoidance
• BA treats ruminating as a behavior rather than engaging or challenging the content of ruminative thoughts
A Focus on the Content of Thinking (Cognitive Therapy)
"I was depressed all day yesterday because I was thinking about how my sister really doesn’t love me."
- What is the evidence that this thought is accurate?
- What would it mean if it were true?
- Can you think of another way to interpret what your sister said?
- Why must everyone love you?

A Focus on the Context and Consequences of Thinking
"I was depressed all day yesterday because I was thinking about how my sister really doesn’t love me."
- When did you start thinking that?
- How long did it last?
- What were you doing while you were thinking that?
- What consequences did it have? What might be the function?
- What else could you have done during that time?

Targeting Rumination
Block avoidance function of ruminating
- Attention to Experience Interventions:
  - Notice colors, smells, noises, sights, relation to others etc. (Mindfulness)
  - Notice elements of tasks (parenting, work)
- RCA: Rumination as a Cue to get Active
  - Rumination
  - Cues
  - Action
Mindfulness Meditation

Mindfulness means paying attention in a particular way . . . .
- on purpose
- in the present moment
- non-judgementally.

Jon Kabat-Zinn

This being human is a guest house.
Every morning a new arrival.
A joy, a depression, a meanness,
some momentary awareness comes
as an unexpected visitor.

Jelaluddin Rumi (1207-1273)
Welcome and entertain them all! Even if they are a crowd of sorrows, who violently sweep your house empty of its furniture, still, treat each guest honorably. He may be clearing you out for some new delight.

The Guest House
Jelalludin Rumi (1207-1273)

The dark thought, the shame, the malice, meet them at the door laughing, and invite them in.

Be grateful for whoever comes, because each has been sent as a guide from beyond.

Mindfulness
Mindfulness

Mindfulness Based Stress Reduction

• Thich Nhat Hanh (1926– )
• Vietnamese-born Buddhist Monk living in exile in France following his protests of the Vietnam War
• Often credited with coining the term Mindfulness
• Has written many popular titles in English
• Holds many retreats in the US and Europe
• Runs a Buddhist community in Bordeaux called Plum Village

Mindfulness Based Stress Reduction

In 1979, Jon Kabat-Zinn gives up career as a molecular biologist to open the Stress Reduction Clinic at UMASS Medical School

• Creates 8-session group therapy program where individuals suffering from pain and disability learn meditation and yoga as an adjunctive treatment for their standard allopathic treatments called Mindfulness Based Stress Reduction (MBSR)
• Catalyst for the era of complementary and alternative medicine
Mindfulness-based Cognitive Therapy for Depression

Zindel V. Segal
J. Mark G. Williams
John D. Teasdale

Kindling in Recurrent Depression

First episode  Second episode  Third + episode(s)

Stress  Stress  Stress

Each new episode of mood disorder

Why Mindfulness?

Mindfulness training in MBCT

- Intentionally moves out of an "automatic pilot" processing mode to a "being" mode
- Cultivates a decentred relationship to negative thoughts/feelings
- Anti-avoidant — turn towards the difficult
- Anti-ruminative — direct experience not "thinking about"

Segal, Williams, & Teasdale, 2002
The Raisin Exercise

Mindfulness Based Cognitive Therapy

- Eight weekly classes plus 4 follow-up sessions.
  - Each 2-hours in length.
- Pre-class interview with instructor to explain, motivate and point out the commitment that will be necessary
- Up to 12 in each class
- Homework, up to one hour per day, 6 days a week - mostly audiotapes of mindfulness practice + generalization practice
  - First half – mindfulness skills
  - Second half – wider awareness; relapse prevention

Recovery from Depression

The endless battle of judgemental voices in my head had caused me so much pain that I'd go to great lengths to suppress them ... I began to learn that, however many thought buses came past ..., I didn't have to catch any of them. I began to let the buses go by, just watching them. This was the single most important thing I learned in this bout of depression. It seems like nothing, but its effects were huge. Ghosts can't harm you, and neither can depression - unless you believe they can.