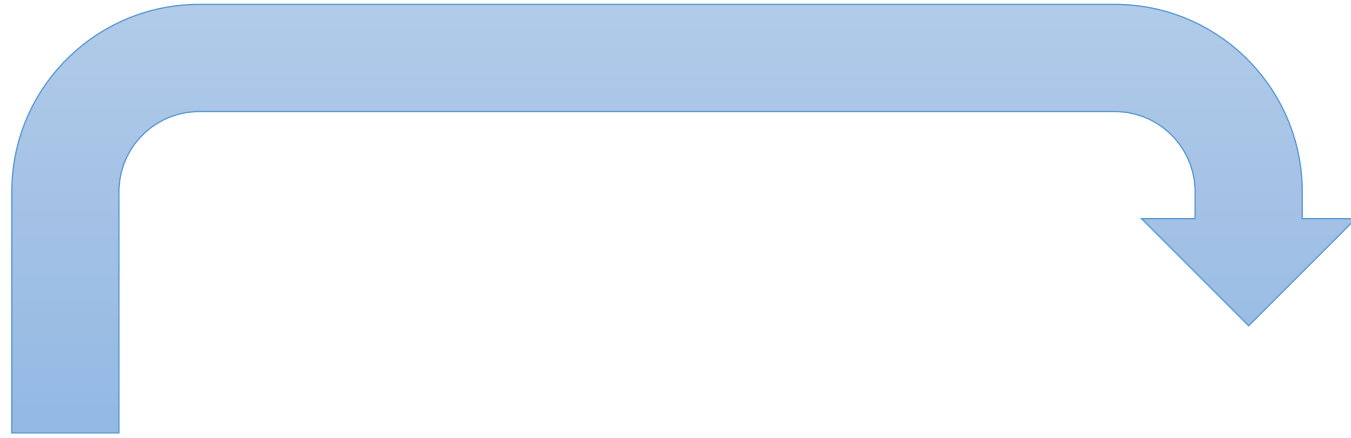


# Behavioral Activation

# Behavioral Activation

- Evidence-based brief intervention for depression
  - Research shows outcomes to be similar or superior to CBT
  - Comparable outcomes to medication for depression(Dimidjian et al. 2006)
- Aim is to reverse patterns of avoidance and re-engage in reinforcing activities
- Focused on “external” factors rather than internal deficits of individuals
- Cost effective



**DO LESS**

**FEEL BAD**



# How Does it Work?

- Encourages re-engagement in enjoyable activities, thus decreasing depression
- Interrupts the cycle of depression
- Breaks pervasive patterns of avoidance
  - Withdrawal, isolation, and not participating in activities
- Helps to re-establish routines

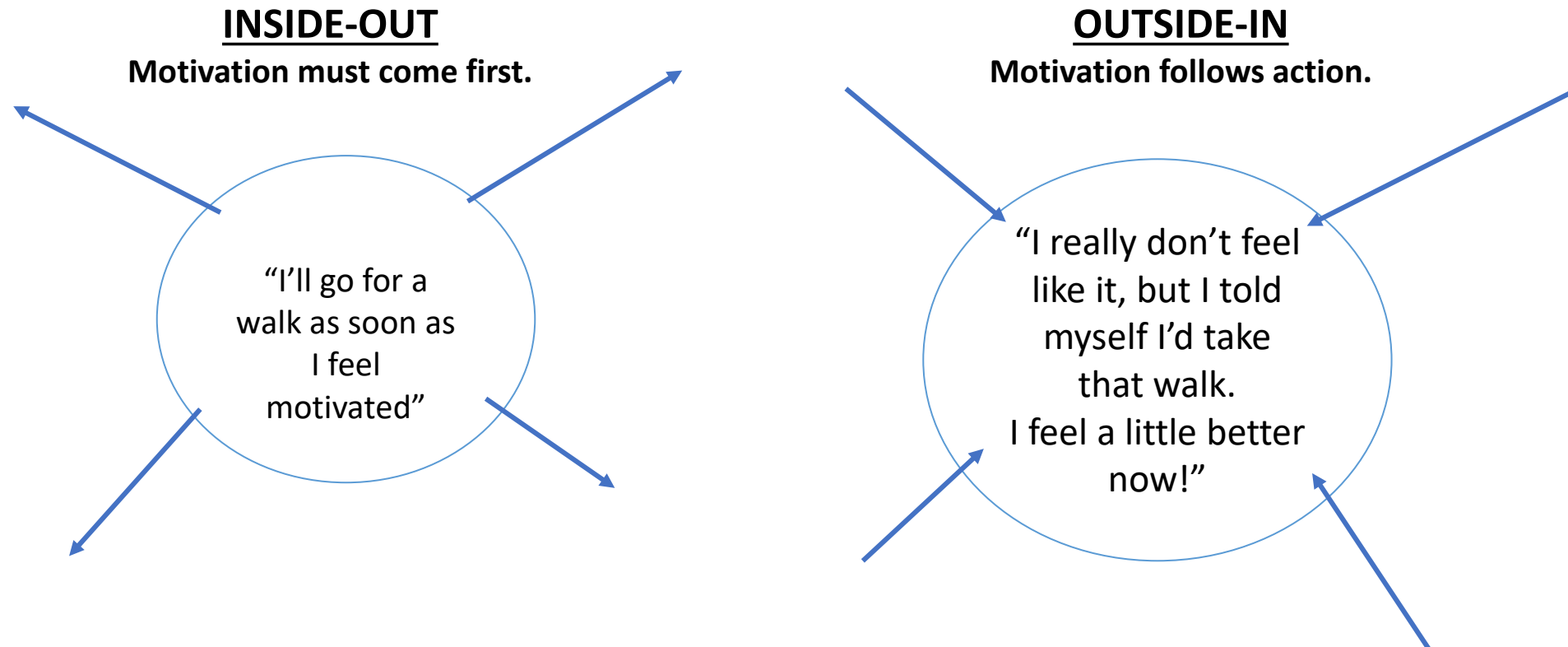


**FEEL A LITTLE BIT  
BETTER**

**DO A LITTLE  
BIT MORE**

# BA follows the “Outside-In” versus the “Inside-Out” approach

*Focus is on altering behaviors that maintain and reinforce depression*



# Components of Behavioral Activations

1. Orient the patient to treatment
2. Explore values and priorities
- 3. Set activity goals**
4. Anticipate and discuss barriers
5. Follow up on the patient's progress
6. Incorporate successes into the Relapse Prevention Plan

# Understanding Avoidance

## TRAP & TRAC

- TRAP
- Trigger
  - *Demands at work*
- R – Response
  - *Depression, hopelessness*
- AP – Avoidance Pattern
  - *Skip work, stay in bed*

- TRAC
- T – Trigger
  - *Demands at work*
- R – Response
  - *Depression, hopelessness*
- AC – Alternative Coping
  - *Approach the situation with graded behaviors, such as starting with a small, manageable to-do list or talking with boss*



# Explore Values & Priorities

- BA is not *just* about getting active – it's about doing so in a meaningful way that provides positive re-enforcement
- *Imagine you woke up tomorrow and the (depression/anxiety) were behind you. Life is exactly as you wish. What would that look like?*
- *What is most important to you in life?*
- *What are you doing more or less of since (e.g., you started feeling sad)?*
- *What gives you meaning?*
- *What do you see other people doing that you wish you could?*

# Setting Goals

- Key part of behavioral activation
- Work together to brainstorm a list of activities
  - Tool 1: Activity charting
  - Tool 2: Behavioral analysis
  - Tool 3: Understanding avoidance
- Remember, the patient is the expert – If they generate the activities, they're more likely to be successful

# Activity Charting

## An Important First Step!

- In order to know how to fix a problem, we need to know what's going on!
- Links behavior and mood
- To many, this might feel meticulous or unnecessary
  - However, people tend to learn a lot about themselves
  - Particularly helpful for patients who lack insight

# Activity Monitoring Worksheet

Instructions: Record your activity for each hour of the day (what you were doing, with whom, where, etc.). Record a rating for your mood as you were doing each activity. Mood is rated between 0-10, with "0" indicating "low mood" and "10" indicating "good mood."

	Sun	Mon	Tues	Wed	Thurs	Fr	Sat
5-7:00am							
7:00 am							
8:00 am							
9:00 am							
10:00 am							
11:00 am							
12:00 pm							
1:00 pm							
2:00 pm							
3:00 pm							
4:00 pm							
5:00 pm							
6:00 pm							

## Tips:

- Provide worksheets
- Documentation can be simple
- Complete for ~1 week
- Review worksheet together

# Behavioral Analysis

- A step-by-step analysis of a specific behavior
  - Can be done quickly in a primary care setting
  - Compliments activity charting
  - Patient and BHCM explore together in a nonjudgmental manner about the role a behavior serves
  - Helps determine anti-depressant behaviors from behaviors that reinforce depression or function as avoidance

# Types of Activities

## Pleasure

- This includes activities that we enjoy just for the sake of the activity itself (there is typically no greater goal or learning attached)
- Hobbies, games, nature, friends, and some sensory activities (e.g. a warm bath)

## Mastery

- Skill development in a particular area
- Example areas include career, sports, learning an instrument, or art

<u>Pleasure</u>	<u>Mastery</u>
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____
5. _____	5. _____
6. _____	6. _____
7. _____	7. _____
8. _____	8. _____
9. _____	9. _____
10. _____	10. _____

<u>Valued Activities</u>
1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

**Work together to create a “Master List” of activities. This will help prepare for the next step: Activity Planning!**

Use brain storming and write down immediate activities such as listening to music, and more long range activities like making a photo album

# Setting Goals

- Some activities are more accessible than others and may seem “easier” to the patient.
- Have patients rank activities by number, easiest to hardest to complete
- Develop an activity planner. Use a SMART approach to develop a short term goal related to an activity with a low number of difficulty on the activity sheet.
- Continue to increase activity goals both short term and long term as successes are gained.



# Don't Forget to Follow UP!

- Checking in communicates importance and value
- In the case of success, praising efforts can be very reinforcing and rewarding
- In the case of falling short:
  - This can be hard, and it's also okay! Try not to get discouraged
  - Opportunity to troubleshoot further:
    1. "What got in the way?"
    2. "What might work better?"
- Now what?
  - This is a systematic, gradual process – keep scheduling!
    - Continue doing the things that worked
    - Incorporate new activity goals to keep it fresh and to graduate up

# Questions?