



ORIGINAL RESEARCH PAPER

Medical Science

BEHAVIOURAL ACTIVATION THERAPY - A PANACEA FOR DEPRESSION – A REVIEW

KEY WORDS: Behavioral activation therapy, CBT, Depression ,Anxiety ,conditioning

Dr Rukmini Singh*

RBH hospital ,Jaipur*Corresponding Author

Dr Anujya Kataria

RBH hospital ,Jaipur

Dr Jaskaran Singh

RBH hospital ,Jaipur

Dr Radhika

RBH hospital ,Jaipur

ABSTRACT

Behavior therapy is defined as a form of psychotherapy that applies the principles of learning, operant conditioning, and classical conditioning to eliminate symptoms and modify ineffective or maladaptive patterns of behavior focusing on the contingencies and environmental factors that reinforce it. It has been researched to be as effective as CBT and effective in depressive and anxiety states. A systematic literature review was done with database search Pubmed, Google scholar, Cochrane database for RCT for Behavioural activation therapy in depression and anxiety states. Final 9 studies were collated and synthesized to summarize the effectiveness being positive or negative. The results showed positive correlation in all studies and effectiveness being demonstrated equal to CBT and medication. Further research and standardized guidelines are needed to make it more inclusive and accessible to a larger population of patients.

INTRODUCTION

Behavior therapy is defined as a form of psychotherapy that applies the principles of learning, operant conditioning, and classical conditioning to eliminate symptoms and modify ineffective or maladaptive patterns of behavior focusing on the contingencies and environmental factors that reinforce it. The techniques used in behavior therapy include behavior rehearsal, biofeedback, modeling, and systematic desensitization(1.)

Behavioral activation (BA) is “a structured, brief psychotherapeutic approach that aims to (a) increase engagement in adaptive activities (which often are those associated with the experience of pleasure or mastery), (b) decrease engagement in activities that maintain depression or increase risk for depression, and (c) solve problems that limit access to reward or that maintain or increase aversive control” (2). They are widely used therapy systems especially anxiety and depression and are endorsed by NICE.

BAT or behavioral activation therapy are also part of NICE guidelines part of NICE recommended psychological therapies for anxiety and depression as in the The IAPT stepped care model as shown below –

Fig 1 -The IAPT stepped care model interventions

Place in stepped-care service	Disorder	Recommended intervention
Step 3: High-intensity service (Primarily weekly, face-to-face one-to-one sessions with a specially trained therapist. In some disorders, such as depression, CBT can also be delivered effectively to small groups of patients. Behavioural couples therapy naturally involves the therapist, the depressed client and his/her partner)	Depression: moderate to severe	CBT or IPTa, each with medication
	Depression: mild to moderate	CBT or IPTa Behavioural activation (BA)a Behavioural couples therapy (if the patient has a partner; the relationship is considered to be contributing to the maintenance of the depression, and both parties wish to work together in the app) Counsellinga (or short-term psychodynamic therapya (consider if patient has desisted CBT, IPT, BA, or behavioural couples therapy)
A	Panic disorder	CBT
A	Generalized anxiety disorder (GAD)	CBT
A	Post-traumatic stress disorder (PTSD)	CBT, EMDR
A	Social phobia	CBT, EMDR
A	Obsessive-compulsive disorder (OCD)	CBT
Step 2: Low-intensity service (Less intensive clinician input than high-intensity service. Patients are typically encouraged to work through some form of self-help programme with frequent, brief guidance and encouragement from a lay or self-help coach)	Depression	Guided self-help based on CBT, CBT, behavioural activation, structured physical activity
A	Panic disorder	Self-help based on CBT, CBT
A	GAD	Self-help based on CBT, psycho-educational groups, computerised CBT
A	PTSD	n/a
A	Social phobia	n/a
A	OCD	Guided self-help based on CBT
Step 1: Primary care	Moderate to severe depression with a chronic, physical health problem	Collaborative care (consider if depression has not responded to initial course of high-intensity intervention and/or medication)

Several studies have investigated the effectiveness of BAT in treating depression. One meta-analysis of 25 randomized controlled trials found that BAT was as effective as other forms of psychotherapy in reducing symptoms of depression(3.). Hunot et al. (2007) conducted a Cochrane systematic review of psychological therapies for generalized anxiety disorder. They found that behavioral therapy was more effective than wait-list control and as effective as other forms of psychotherapy(4)

Behavioral activation therapy has also been studied as a treatment for bipolar disorder. A randomized controlled trial compared the effectiveness of BAT and cognitive-behavioral therapy (CBT) for bipolar depression (5).

Behavioural activation therapy also shows efficacy for reducing anxiety symptoms and increasing activation.in some studies (6.)To further enhance the applicability and effectiveness of BAT a systematic literature review was performed to increase understanding and further future utilization

AIM -To perform a systematic review on effectiveness of Behavioural activation therapy in depressed and anxious patients

METHODOLOGY

A database search was done by 2 researchers independently with predefined inclusion criteria for studies on PUBMED, Google scholar, MEDLINE, for studies in last 20 years, Only RCT were included. A total of 2456 studies were found and duplicates removed, only RCT included in last 20 years. Only Behavioural activation was included. Reviews were also searched for information and literature search

A total of 9 studies met the inclusion criteria. The data study and synthesis was done and tabulated for refining of results and discussion points

RESULTS

Fig 2

S.no	Paper title	Abstract summary	Authors	Study type & year	Correlation pos/neg

1	Randomized trial of behavioral activation, cognitive therapy, and antidepressant medication in the acute treatment of adults with major depression. 10.1037/0022-006X.74.4.658	behavioral activation was comparable to antidepressant medication.	Sona Dimidjian et al	RCT(2006)	p
2	Behavioural activation v. antidepressant medication for treating depression in Iran: randomised trial 10.1192/bjp.bp.112.113696	Behavioural activation is a viable and effective treatment for people with major depressive disorder.	L.Moradveisi, et al	RCT(2013)	p
3	Randomized trial of behavioral activation, cognitive therapy, and antidepressant medication in the prevention of relapse and recurrence in major depression. 10.1037/0022-006X.76.3.468	Behavioral activation may be nearly as enduring as cognitive therapy.	K.Dobson, et al	RCT(2008)	p
44	Cost and Outcome of Behavioural Activation (COBRA): a randomised controlled trial of behavioural activation versus cognitive-behavioural therapy for depression. 10.3310/hta21460	BA is as effective as CBT, more cost-effective and can be delivered by NHS junior mental health workers with no professional training in psychological therapies.	D.Richards, et al	RCT(2017)	p
55	Behavioural activation delivered by the non-specialist: phase II randomised controlled trial 10.1192/bjp.bp.110.079111	Effective behavioural activation appears suitable for delivery by generic mental health professionals without previous experience as therapists.	D.Ekers, et al	RCT(2011)	p
66	Brief behavioral activation and problem-solving therapy for depressed breast cancer patients: randomized trial. 10.1037/a0025450	Behavioral activation treatment for depression and problem-solving interventions are practical interventions that may improve psychological outcomes and quality of life among depressed breast cancer patients.	D. Hopko, et al	RCT(2011)	p
77	Behavioural activation therapy for post-stroke depression: the BEADS feasibility RCT. 10.3310/hta23470	The benefits of conducting a definitive trial would be likely to outweigh the costs.	Shirley A. Thomas, et al	RCT(2019)	p
88	A Pragmatic Randomized Clinical Trial of Behavioral Activation for Depressed Pregnant Women 10.1037/ccp0000151	Behavioral activation is effective for pregnant women.	Sona Dimidjian, et al	RCT(2017)	p
99	Cost utility of behavioural activation delivered by the non-specialist 10.1192/bjp.bp.110.090266	Behavioural activation appears effective in the treatment of depression.	D. Ekers, et al	RCT(2011)	p

There were 9 RCT on effectiveness of Behavioural activation therapy in cases of depression .They were all effective and were also comparable to CBT in 2 studies and to antidepressant medication in 1 study .They corroborated the findings in other studies of the use of BAT .It was effective in cases of depression due to cancer, post stroke and pregnancy The major advantage is the cost utilization by BAT by no requirement of specialist staff so accessibility is easier as training frontline staff increases accessibility also .

DISCUSSION

BAT has proven its effectivity and it's a cost effective and easily accessible form of therapy with known benefits Behavioral activation therapy (BAT) directly addresses daily activities that individuals value most highly.(7) The mechanisms underlying BAT are as follows: (i) individuals suffering from depressive or anxiety conditions experience avoidance and decreased participation in normal activities; (ii) this leads to decreased opportunities for them to experience joy; (iii) they feel that they are overwhelmed by hardships; (iv) the value they place on their lives and themselves is diminished; (v) they pay more attention to negative information; (vi) they eventually experience more distress and depression; (vii) BAT facilitates activities they value and breaks this vicious cycle; and (viii) this improves the depressive condition and (ix) leads to improvement in quality of life. Of note, BAT emphasizes identifying values as a

part of behavioral change [7-9]. Hunot et al. (2007) conducted a Cochrane systematic review of psychological therapies for generalized anxiety disorder. They found that behavioral therapy was more effective than wait-list control and as effective as other forms of psychotherapy. (10) Similar studies have been enumerated in the RCT in the systematic literature review and this is a promising panacea for mental health ailments especially with a underbase of anxiety and depression .In the present age this is a great need to alleviate the suffering caused by mental health issues .

Training in BAT and accessibility to patients will help availability of this important therapy to patients and alleviation of suffering of the afflicted silently carrying the stigma and burden of mental health ailments It will help to reduce the global burden of depression as it is effective, ease of training therapists, ease of implementation, scalable and has proven results in patients across settings and cultures.

More research is needed and definitive guidelines for utilization of this therapy need to be formulated to make full utilization of this useful therapy .

REFERENCES

1. <https://dictionary.apa.org/behavior-therapy>
2. Dimidjian, S., Barrera, M., Martell, C., Muñoz, R.F., Lewinsohn, P.M. (2011). The Origins and Current Status of Behavioral Activation Treatments for Depression. *Annual Review of Clinical Psychology*, 7(1), 1-38.
3. Cuijpers, P., van Straten, A., & Warmerdam, L. (2016). Behavioral activation treatments of depression: A meta-analysis. *Clinical Psychology Review*, 46, 11–22. <https://doi.org/10.1016/j.cpr.2016.04.001>
4. Hunot V, Churchill R, Silva de Lima M, Teixeira V. Psychological therapies for generalised anxiety disorder. *Cochrane Database Syst Rev*. 2007 Jan 24;2007(1):CD001848. doi: 10.1002/14651858.CD001848.pub4. PMID: 17253466;PMCID:PMC7025441.
5. (Deckersbach, T., Peters, A. T., Sylvia, L. G., Urdahl, A., Magalhães, P.V.S., Otto, M. W., & Nierenberg, A. A. (2017). Do comorbid anxiety disorders moderate the effects of cognitive remediation therapy for bipolar disorder? Results from a randomized controlled trial. *Journal of Clinical Psychiatry*, 78(7), e782–e789. <https://doi.org/10.4088/JCP.16m10828>
6. Aliza T. Stein, Emily Carl, P. Cuijpers, E. Karyotaki, J. Smits (Looking beyond depression: a meta-analysis of the effect of behavioral activation on depression, anxiety, and activation *Psychological Medicine*10.1017/S0033291720000239
7. Brown LA, Gaudiano BA, Miller IW. Investigating the similarities and differences between practitioners of second- and third-wave cognitive-behavioral therapies. *Behav Modif*. 2011;35(2):187–200.
8. Ekers D, Webster L, Van Straten A, Cuijpers P, Richards D, Gilbody S. Behavioural activation for depression; an update of meta-analysis of effectiveness and sub group analysis. *PLoS One*. 2014;9(6). <https://doi.org/10.1371/journal.pone.0100100>.
9. Richards D, Ekers D, McMillan D, Taylor RS, Byford S, Warren FC, et al. Cost and outcome of Behavioural activation versus cognitive Behavioural therapy for depression (COBRA): a randomised, controlled, non-inferiority trial. *Lancet*. 2016;388:871–80.
10. Hunot V, Churchill R, Silva de Lima M, Teixeira V. Psychological therapies for generalised anxiety disorder. *Cochrane Database Syst Rev*. 2007 Jan 24;2007(1):CD001848. doi: 10.1002/14651858.CD001848.pub4. PMID: 17253466;PMCID:PMC7025441.