

BEHAVIOURAL ACTIVATION FOR DEPRESSION

BOOKLET ONE

Introduction to Behavioural Activation for Depression

1

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TALKING THERAPIES SOUTHWARK

revised September 2020

South London and Maudsley
NHS Foundation Trust



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Improving Access to Psychological Therapies

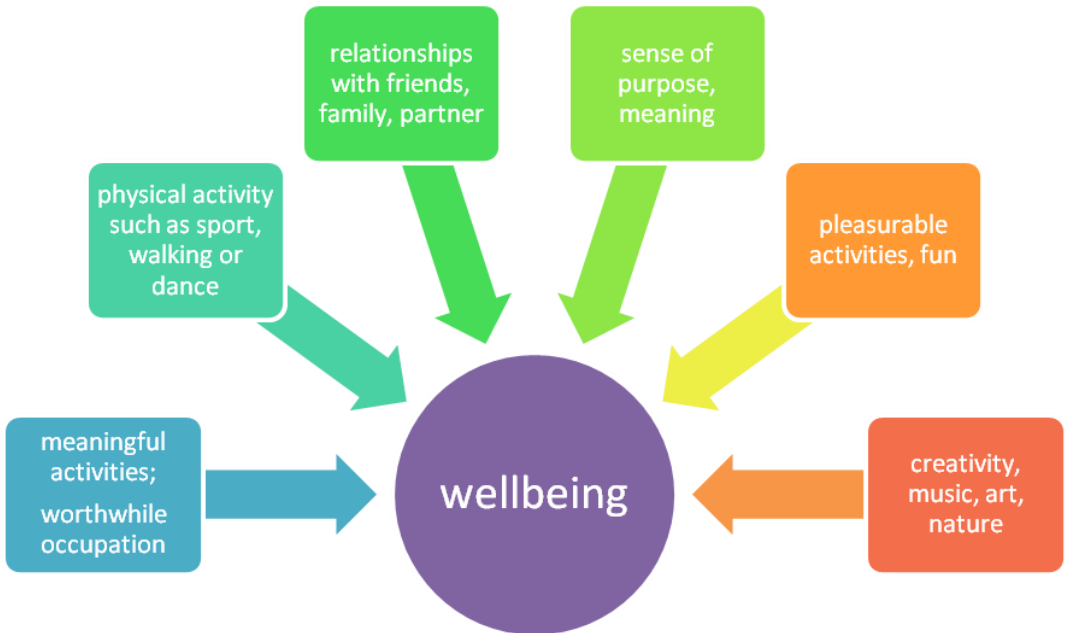


Understanding depression 1

Missing sources of wellbeing

Depression is often a result of what is missing in our lives. Look at the diagram below. It shows some of the things that help give a sense of wellbeing.

People usually thrive when their lives contain a range of these sources of wellbeing. You can probably think of other things that are or have been important to you.



It isn't that we need ALL these areas of our lives to be going well, but it is not unusual for depression to develop if too many are missing for too long.

If this seems to apply to your experience of depression, you might like to consider how far each of these are missing, or in short supply, in your life at the moment.

Source of wellbeing	MISSING? Please Tick
Physical activity such as walking or sport	
Friendships	
Company of family, partner	
Sense of purpose or meaning in life	
Pleasurable activities, fun	
Music, art, creativity	
Time outdoors, connection with nature	
Meaningful job or occupation	
Other	

If quite a few are in short supply, then it is not surprising if you are feeling depressed. It is perfectly normal to feel bad if life is unrewarding. This might happen, for example, if you have been doing less of the things that are important to you, due to other demands on your time, or to health problems.

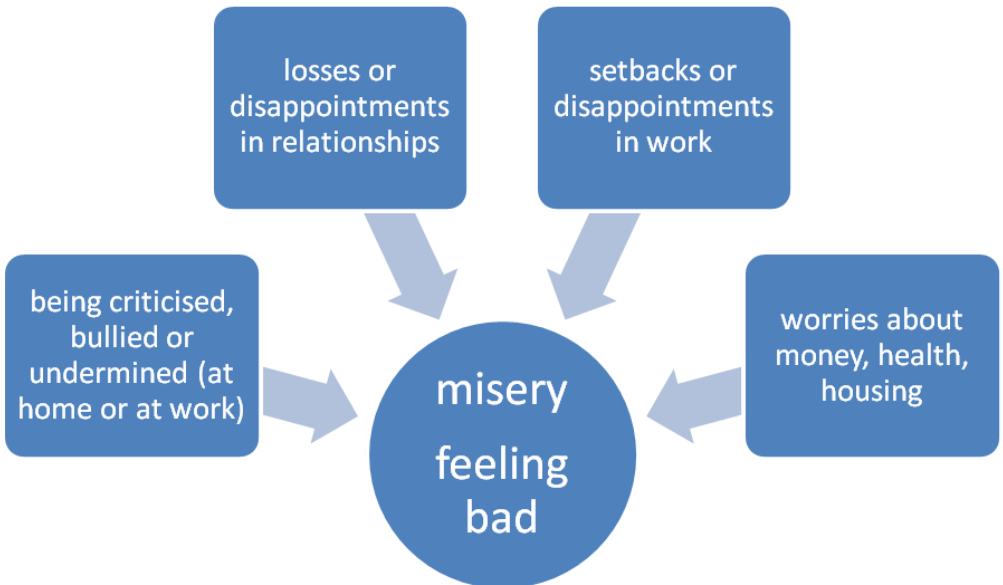
We can think of depression as a signal from our minds and bodies that there is something wrong with our lives; a signal that we need to make changes in the way we are living our lives.

One part of this may be about putting back some of the sources of wellbeing that are missing and this is one of the things explored in the behavioural activation programme.

Understanding depression 2

Sources of misery, sadness, stress

Feeling sad and down is a natural, normal human response to disappointments and setbacks in life; to losses such as bereavement or relationship break-up; to experiences of being bullied, discriminated against, undermined or criticised; to the ongoing stress associated with ill-health or pain; or with worries about health, money, housing, job security, etc.



Is it possible that some of these sources of misery have played a part in your depression? Put a tick beside those that might have contributed.

Sources of misery, sadness, stress	PRESENT? Please tick
Being criticised, bullied or undermined at home	
Being criticised, bullied or undermined at work	
Losses or disappointments in relationships	
Setbacks or disappointments at work	
Money problems	
Health problems	
Housing problems	
Other sources of worry	
Other	

If you have experienced a major loss or significant worry in one of these areas, or less significant worries across several areas, then it is perfectly understandable that you would feel down.

Sometimes it may be that tackling some of the problems could make a difference. It can be difficult to draw on our usual problem solving abilities when we feel depressed. Therefore part of the behavioural activation programme will be to help you with problem solving if that seems relevant to your situation.

Of course sometimes depression occurs when none of these has happened. More about that later.

Understanding depression 3

What we do when we feel down

When we feel down or generally defeated by life, we usually also experience a loss of motivation and energy. When things have been going badly, it is perfectly normal to want to hide away and escape from our difficulties. It is as if we are trying to protect ourselves from anything that might cause further distress, which is very understandable.

Here are some common ways people react when they feel sad and down:



These are sometimes called ‘depressed behaviours’.

Which of these are you likely to do when feeling down?

Responses to feeling down	PRESENT? Please tick
Going back to bed	
Withdrawing and isolating from other people	
Putting off doing chores	
Not opening letters; not answering the phone	
Staying in instead of going out	
Doing things that feel easy ways to pass the time but bring little satisfaction (e.g. TV that you are not really interested in)	
Stopping regular activities such as exercise	
Sitting dwelling on problems	
Using alcohol/drugs to escape from thinking about problems	
Comfort eating	

If you have ticked several of these, you may also be familiar with thoughts such as: *I'm not up to it; Can't be bothered; Haven't got the energy; What's the point; I won't enjoy it anyway; No one really wants to see me, certainly not like this; I'll only mess up and make things worse;* and so on.

At the time, these can feel like powerful reasons to isolate, withdraw, escape, avoid, procrastinate.

But are they really?

And what are the consequences?

There will be opportunities to look at this more closely as you work

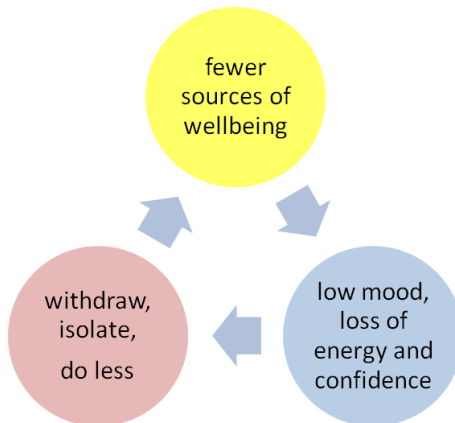
Understanding depression 4

The consequences of what we do when we feel down

Effect on sources of wellbeing

When you looked at the sources of wellbeing that might be missing in your life, were there some things that you stopped doing *after* you started to feel depressed?

It often happens that the natural response to feeling down of withdrawing from usual activities, after a while, reduces sources of wellbeing. And then it is all too easy to fall into a vicious cycle of worsening mood - **a depression TRAP**.



Of course, the loss of sources of wellbeing may first come about through relationship break-up, working too hard, moving to a new city away from friends and family, or from bereavement, redundancy, serious or long-term illness, etc. What we explore in behavioural activation is how to respond in ways that counter this so as to avoid falling into the depression trap.

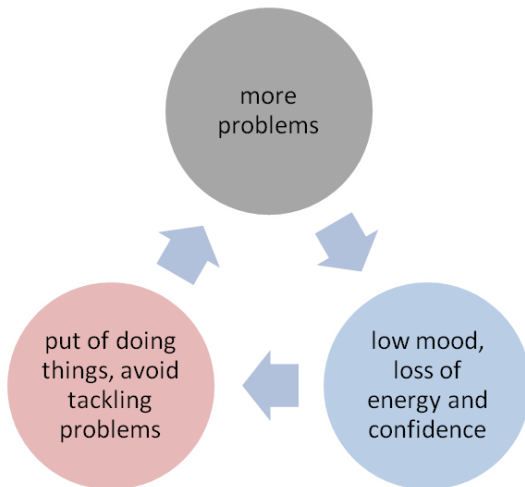
Effect on problems, worries, stress

And what happens to the problems in our lives when we put off doing things?

Quite often the problems get bigger, or there are new problems that wouldn't have arisen if we had dealt with things earlier.

Also, knowing that there are things we are not dealing with can cause a lot of worry and stress.

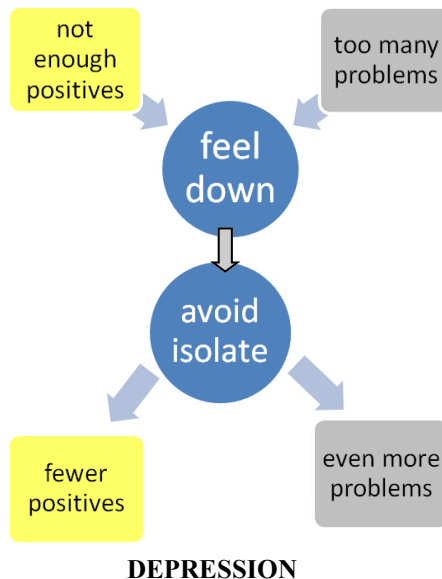
Of course the more the problems build, the worse we feel and the harder it is to tackle them. This is **another depression TRAP**.



Understanding depression summary so far

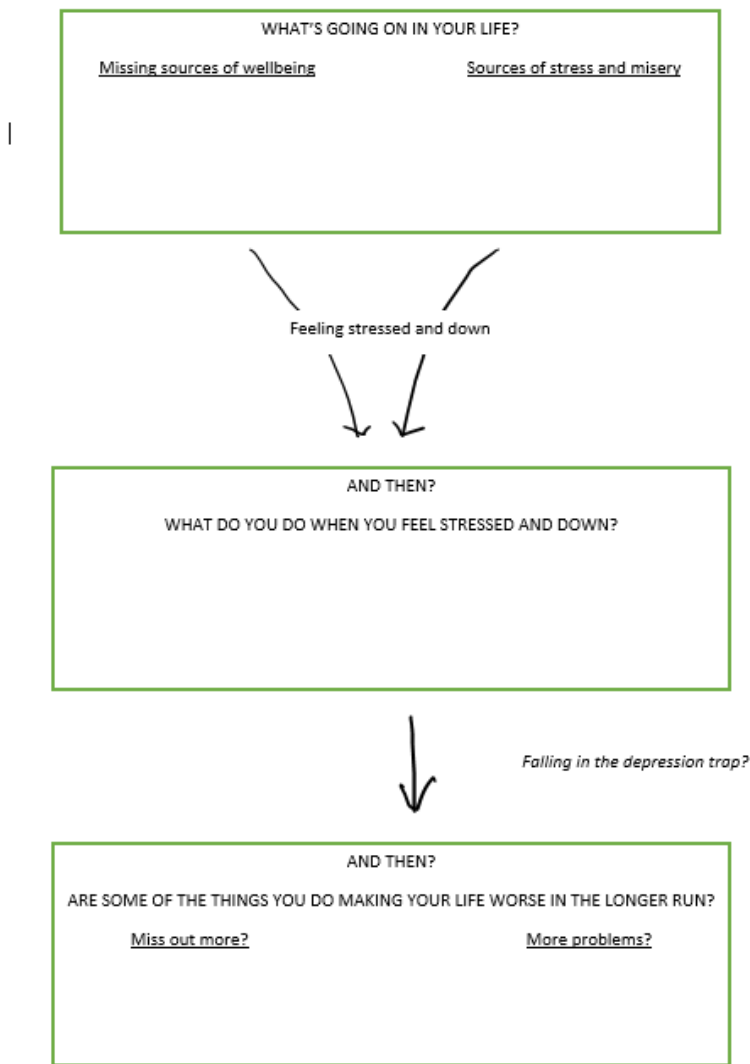
To summarise, depression can be caused by a combination of not enough sources of wellbeing and too many sources of misery. It is normal to feel down in this sort of situation.

However, we also see that our very natural responses to a life that is not going well can in fact make things worse, and can lead us to fall into a depression trap.



Behavioural activation is designed to help you get out of the trap

Use this space to summarise how the ideas so far might apply to your own experience of depression.



More depression traps

Fear of depression

If you have experienced very severe depression, or been depressed several times in the past, there is another trap that is easy to fall into:

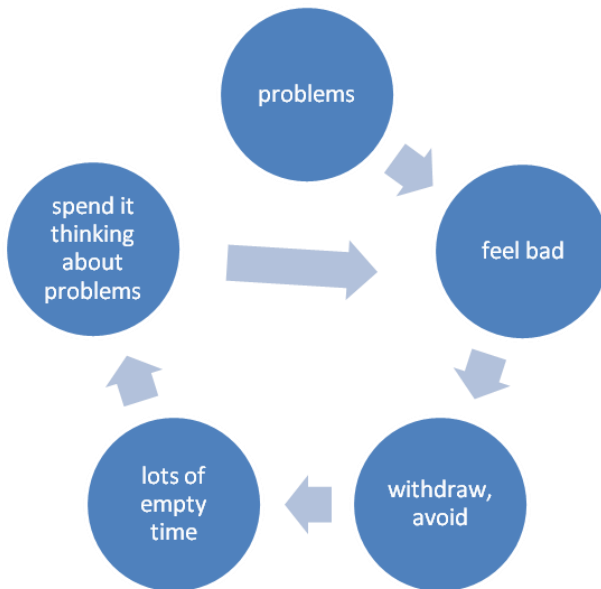


Here a normal dip in mood very understandably triggers fear that this is the start of depression returning. This can lead to a lot of worry and the depressed behaviours of avoiding and withdrawing.

This way, depression is set off by small disappointments or upsets - it does not need a major event of any kind.

Unhelpful Thinking

Spending a lot of time thinking and talking about problems can be another depression trap.



Of course thinking about problems in a way that solves them is useful, but it is easy to get stuck in thinking that goes round and round without achieving anything. This tends to undermine confidence and just make us feel worse. If this sort of thinking (sometimes called rumination) becomes a habit it also explains how relatively small upsets can trigger depression.

You can learn more about helpful and unhelpful thinking later.

Outline of the Behavioural Activation programme

Monitoring activity and mood

The first stage is to get a detailed understanding of the ways in which your life is and isn't working for you at present. In particular you will explore the relationship between activity and mood by keeping a daily record (using Booklet 2). It is easy to assume that we know how we spend our time and how we feel, but most people never really look that closely, and a detailed record nearly always reveals useful information to help with the next stage:

Developing an Activation Plan

You will then start to develop your Activation Plan, a roadmap for making changes in your life (Booklet 3). This is the core of BA. To support this, you will have the opportunity to look more closely at sources of wellbeing (in Booklet 4) and also learn more about depression traps (in Booklet 5).

Putting the Activation Plan into practice

You will start setting yourself activity goals for each week for four weeks using the sheets in Booklet 3. Booklet 6 covers problem-solving, Booklet 7 looks at thinking habits, and Booklet 8 helps you develop a plan to help avoid depression in the future.

FAQS

This sounds too simple?

Yes, the ideas are simple, but they are also powerful. The BA model of depression is based on a well-researched theory of human behaviour.

It sounds too difficult?

True, it is not easy because BA tackles the core problems of depression. It is important to go step-by-step and problem-solve obstacles as they arise.

Will it work?

There is only one way to find out. However, there is very good evidence that behavioural activation works for lots of people, with severe as well as milder depression.

**Good luck with the rest of the
Behavioural Activation programme!**

BEHAVIOURAL ACTIVATION FOR DEPRESSION

LIST OF BOOKLETS

- 1. Introduction to BA for Depression**
2. Monitoring activity and mood
3. Roadmap: The Activation Plan
4. Finding direction: values, flow and strengths
5. Avoidance and the depression TRAPs
6. Problem solving
7. Thinking habits
8. Next steps

We hope you have found this booklet helpful. We welcome your feedback.

You can give comments to your therapist or by emailing us at slm-tr.SPTS@nhs.net

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