

## **ACCEPTED CONGRESS CONTRIBUTIONS (scheduled September, 13)**

### **ABSTRACT SYMPOSIUM**

#### **Recovery of personal functioning: a behavior analytic treatment approach for depression.**

Paul Andreoli, Bart Bruins & Hendrik Vlamings

*Abstract themes: Behavior analysis in psychotherapy (6), Depression (16), Elderly (21),  
Understanding basic mechanisms in psychological disorders (42)*

Depressive disorders are characterized by diminished successful behavioral activity. Unlike mainstream Cognitive Behavior Therapy (CBT) which targets depressive patterns of thinking, Behavioral Activation (BA) targets the behavior repertoire directly from a contextual perspective. Recently this approach attracts (renewed) attention due to outcome research, which consistently shows that behavioral activation (as a component in CBT or as an independent treatment in BA) may equal or even outperform CBT as a full treatment package (Jacobson et al., 1996; Dimidjian et al., 2006).

BA started with Ferster (1973) and Lewinsohn (1972, 1973, 1974) who recommended activation to diminish passive avoidance and to increase positive reinforcement, but their approach uses a rather general strategy of pleasant event monitoring and scheduling.

Current BA approaches (Jacobson et al., 2001; Martell et al., 2001) advocate the use of person-specific assessment of clients' needs and goals and attention to the unique environmental contingencies maintaining depression. (Hopko et al., 2003). Unless some clear differences (Kanter & Baruch, 2006), Acceptance & Commitment Therapy (ACT) can be considered as a behavioral activating approach as well, because it teaches the client to accomplish value-based goals irrespective of disturbing symptoms. (Hayes et al., 1999).

Constructional Behavior Therapy (Bakker-de Pree, 1984, 1987) may add further refinement to behavioral activation. Firstly, it takes in account functional differences of behavior in recovery from the symptoms. Approach, escape and avoidance behavior contribute in a different way to well-being. Analysis of successful behavior reveals an adaptive role of active avoidance in this respect. Secondly, activation is sensitively attuned to opportunities and limitations of the personal situation. Thirdly, the focus is not on the content of behavior, but on discriminative stimuli regulating successful behavior (=personal functioning). In the symposium these features are explained and illustrated.

### **ABSTRACT PAPER 1**

#### **Restriction of personal functioning: an explanation of the onset and persistence of depressive symptoms.**

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In this introductory presentation to the symposium, the outlines of a quite different view on the onset and persistence of (depressive) symptoms will be elucidated. It originates in the Constructional Behavior Therapy (Bakker-de Pree, 1984, 1987), a contextual behavior analytic approach which can be considered as a third wave behavior therapy. Its focal point is not the topography of behavior, but the environmental stimuli which enable and guide the behavior of the individual. Constructional Behavior Therapy regards behavior successful if it promotes personal well-being. Every individual advances a good personal state by acting on his environment. So, everyone must have an individual-specific behavioral repertoire to manage his situation: personal functioning. However, in order to be successful the environment has to afford the individual suitable opportunities for that behavior. If those opportunities are restricted by some environmental restraint or obstruction,

behavior regulation fails and personal functioning becomes impossible. Clinical behavior analysis and observation with numerous subjects showed that this can cause a state of disorder including depression. This is especially the case if the environmental restraint restricts protecting behaviors and is lasting. We observed different types of behavioral restraints. In this presentation the approach will be elaborated.

## **ABSTRACT PAPER 2**

### **Recovery of personal functioning: clinical practice.**

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In this presentation will be elucidated how in a (functioning-oriented) Constructional Behavior Therapy behavioral activation is used in the treatment of depression (Bruins e.a. 1996). This will be illustrated by a clinical case.

In a Constructional Behavior Therapy the focus is exclusively on behavior which affords well-being. So, this behavior is successful from the perspective of the client. We will explain how the therapist can restore this successful behavior by different novel behavioral activation techniques which have in common that they are sensitively attuned to the client's pattern of successful behavior and to the opportunities and limitations of his situation. By on the one hand bringing the client into contact with conditions which are essential for him to function to his own satisfaction and to feel all right, and on the other hand by not imposing him any specific behavior, the therapist brings about that the client recovers in his own unique way.

So, symptom reduction is realized without targeting the depressive symptoms directly. Instead, a systematic restoration and extension of successful behavior is realized by which the client's well-being is enhanced and consequently symptoms fade away.

## **ABSTRACT PAPER 2**

### **Functioning-Oriented Rehabilitation (FOR): a multi-dimensional approach to individual behavioral activation for the treatment of depression.**

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The current organization of depressive disorders is rather arbitrary: the diagnostic categories are descriptive on the level of symptoms and not based on underlying causal processes. The number of diagnostic categories is increasing over the years which evidences that depression is a phenomenon of complex heterogeneity. For therapists the treatment effects of the two mainstream models for the treatment of depression: cognitive therapy and pharmacotherapy are often confused with causal effects. Cognitive therapist emphasize the primacy of logical errors and underlying convictions as the cause of depressive patterns of behavior (Reus, 1997) and the effects of antidepressants are often erroneously used to explain depression as a defect of the neuronal system. Recent research in neurobiology however has revealed the plasticity of the brain at an advanced age and the continuously changing connectivity of neural networks as a result of the interaction of the individual and the environment (Boer & Glas, 2004). These scientific findings urge the need for more contextual causal explanations of depressive patterns of behavior instead of explanations in terms of functional defects of the organism. Conditioning theory reveals the processes of how organisms learn to look after themselves in an ever changing world (Bakker – de Pree, 2002). Functioning-Oriented Rehabilitation (FOR) (Andreoli, 2000) is based on these principles of conditioning. FOR is providing a wide range of strategies to activate personal successful functioning of individuals with maladaptive patterns of behavior. These strategies all have in common that their general aim is to bring the person suffering from psychic complaints back in contact with discriminative stimuli for personal functioning. They vary to the extent of professional involvement in activating personal functioning in daily life situations. In this presentation we will illustrate how this multi-dimensional approach is applied in a case of severe depression in the elderly.

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