

AIMS CENTER
UNIVERSITY of WASHINGTON
Psychiatry & Behavioral Sciences
Advancing Integrated Care for Over 20 Years

Behavioral Activation 101

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1

Learning Objectives

By the end of this session, participants should be able to:

- Describe the Behavioral Activation model of depressive symptoms
- Describe how to assess the impact of depressive symptoms on a patient's activity level and functioning

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2

What is Behavioral Activation?

- Brief evidence-based behavioral intervention for treating depressive and anxious symptoms
- Structured approach
 - A weekly plan is created with daily activities
- Targets patterns of avoidance, withdrawal, and inactivity
- Helps people improve their mood by engaging in rewarding activities

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3

BA versus In Vivo Exposure & Cognitive Restructuring

- BA emphasis on activities that bring natural reinforcement (meaning, value, pleasure, etc.)
- Process allows for opportunities for relearning/ habituation that could be maintained by reinforcing effects of the activity
- In BA the focus is on the context in which thinking occurs, and attention to current experiences

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4

Priorities in Brief Treatment

- Psychoeducation
- Skill acquisition
 - Not focused on talk therapy
 - Focus on teaching a skill
- Between session plan
 - Emphasis on the work done between sessions
 - Help patient make connections between specific behaviors and mood

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5

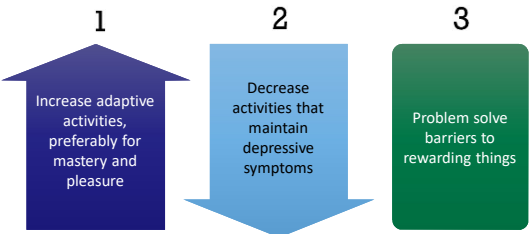
BA Patient Selection Criteria

- Depressive disorder or symptoms
- Mild cognitive impairment
- Alcohol or substance use
- Any life stress
- Loss of loved one
- Comorbid anxiety symptoms

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6

Three Goals of BA



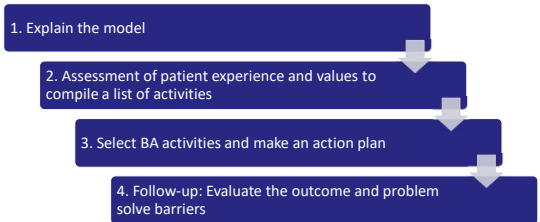
The diagram shows three numbered goals for Behavioral Activation (BA):

- 1** Increase adaptive activities, preferably for mastery and pleasure (represented by an upward-pointing blue arrow)
- 2** Decrease activities that maintain depressive symptoms (represented by a downward-pointing blue arrow)
- 3** Problem solve barriers to rewarding things (represented by a green box)

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7

BA: The 4 Steps



The flowchart outlines the four steps of Behavioral Activation:

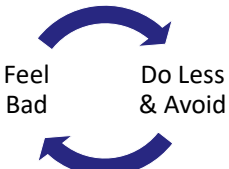
1. Explain the model
2. Assessment of patient experience and values to compile a list of activities
3. Select BA activities and make an action plan
4. Follow-up: Evaluate the outcome and problem solve barriers

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8

Step 1. Explain the Model

- How Depressive symptoms arise
 - Do less, avoidance, isolation, rumination
 - Possible short-term gain
 - Maintains depressive symptoms in the long run



The diagram shows a cycle between 'Feel Bad' and 'Do Less & Avoid', with arrows indicating that feeling bad leads to doing less and avoiding, which in turn leads to feeling even worse.

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How BA Helps Disrupt the Cycle

- Increase activities related to values, pleasure, mastery and goals

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BA: Act First & Observe

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11

Introducing BA

Form A

Facts About Depression

What is Depression?
Depression is a medical illness. When low mood or sadness persists or interferes with everyday life, it may be depression. Depression can last months or even years if not treated.

What Are the Symptoms of Depression?

- **Key Symptoms:**
 - Depressed or sad mood
 - Decreased interest or pleasure in activities
- **Other Symptoms:**
 - Significant changes in appetite or weight
 - Sleep disturbances
 - Restlessness or sluggishness
 - Fatigue or loss of energy
 - Lack of concentration or indecision
 - Feelings of worthlessness or inappropriate guilt
 - Thoughts of death or suicide

What Causes Depression?
Depression is a medical illness with multiple causes including biological, psychological, social and medical factors. The symptoms of depression may reflect an imbalance in brain chemistry and may be brought about by genetics, stress or loss, or other physical changes co-occurring with medical illnesses. Sometimes depression can develop without any obvious cause.

How is Depression Treated?
Depression is treatable. Appropriate treatment, such as medication or psychotherapy, reduces symptoms for most individuals. Engaging in pleasurable and rewarding activities has also been shown to improve depression.

Form B

Why is It Important To Do More Pleasurable and Rewarding Activities?

When people get depressed they don't feel up to doing the kinds of things they typically enjoy. By doing fewer enjoyable and rewarding things, they begin to feel worse. As they feel worse, they do even less and get caught up in a vicious cycle.

As part of our meetings, we will help you set a goal of doing at least one pleasurable or rewarding activity each day. These goals can include physical activity, socialization, or other recreational activities or hobbies that have value and meaning to you. Engaging in pleasurable activities like these will help break the vicious cycle of depression and improve your mood, interest level, and energy.

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Step 2. Assessment

- Evaluate impact of depression on activity level and functioning
- Determine the role of avoidance
- Translate values to activities
- From information gathered, compile list of rewarding activities

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Assessment Questions to Evaluate Impact of Depression

- Describe what you were doing more or less of before feeling depressed?
- What activities or responsibilities are you avoiding?
- How is worry or rumination getting in the way of your daily life?
- What activities would bring you a sense of joy, satisfaction, accomplishment?

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Rumination as Avoidance

- Avoidance is short-term relief from discomfort
- Rumination/worry can function as avoidance and maintain depression
- Focus on context and consequences of rumination/worry, not content

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Step 4. Follow-up

- Evaluate the outcome
 - How did it go?
 - Ask about patient’s experience with activity and level of satisfaction
 - Make connections between activity and impact on mood/symptoms
- Problem solve barriers
 - E.g., lack of buy-in, forgot, too challenging, etc.

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CONSIDERATIONS

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How to Incorporate BA Into Brief Visits

- First BA session
 - Provide psychoeducation (Forms A & B)
 - Introduce Values Checklist
 - Begin developing List of Pleasant and Rewarding Activities (Form C)
 - Between session plan: Complete Values Checklist and continue working on Form C
- Subsequent BA sessions
 - Review between session plan/assignment
 - Schedule activities (Form D)

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24

Bi-Weekly Appointments

- Modify activities for week 2 (as needed)
 - Provide 2 copies
 - Complete in session or as an assignment
- Develop plan B/alternate activities when potential barriers are identified
- Encourage patient to share their plan with a friend or family member
- Check-in by phone or portal between visits

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Adapting the Structure

- Be flexible – consider alternates to paper handouts
 - Fillable forms for virtual visits
 - Phone apps
 - Electronic calendar/alarms
 - SmartPhrases for documentation

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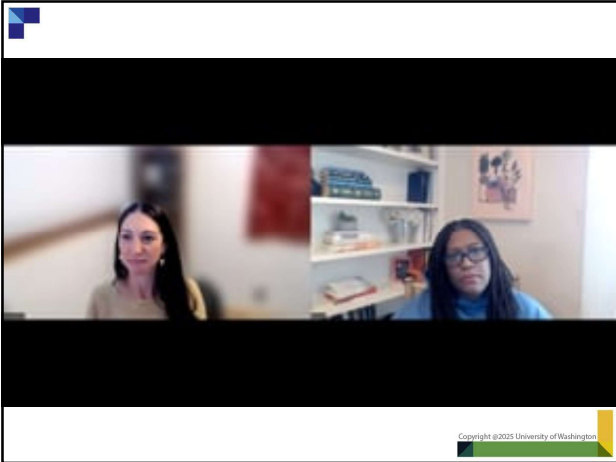
26

Behavioral Activation Groups

- Especially helpful in areas where access to care is limited
- Use of Patient BA Manual important in group settings
- Opportunities for role plays and practice among participants

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27



28



29
