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Cognitive-Behavioral Therapy for Mood Disorders in Young Adults

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Disclosures

My spouse/partner and I have the following relevant financial relationship with a commercial interest to disclose:

Oxford University Press (royalties)

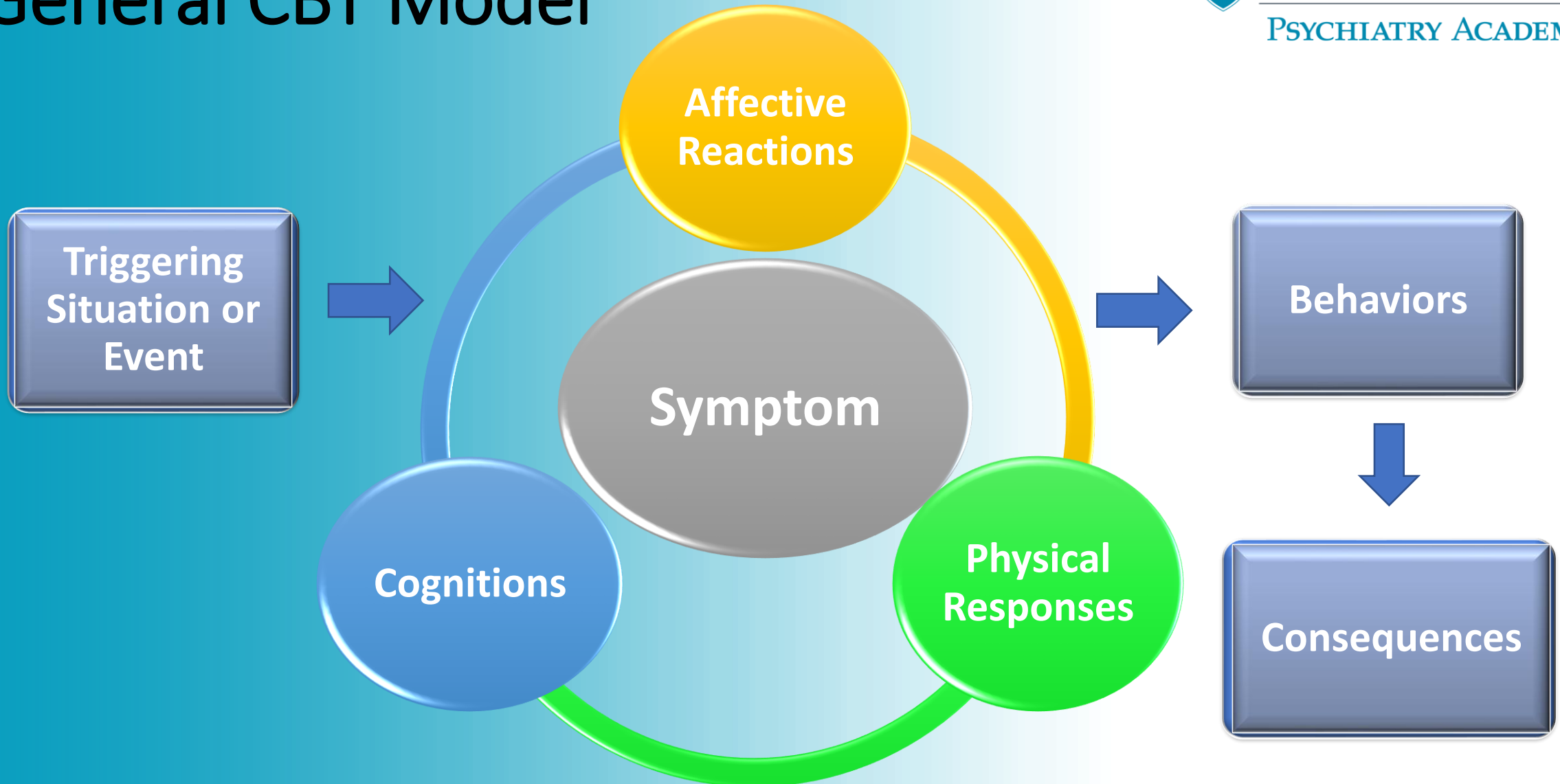


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Cognitive Behavioral Therapy: General Principles

General CBT Model

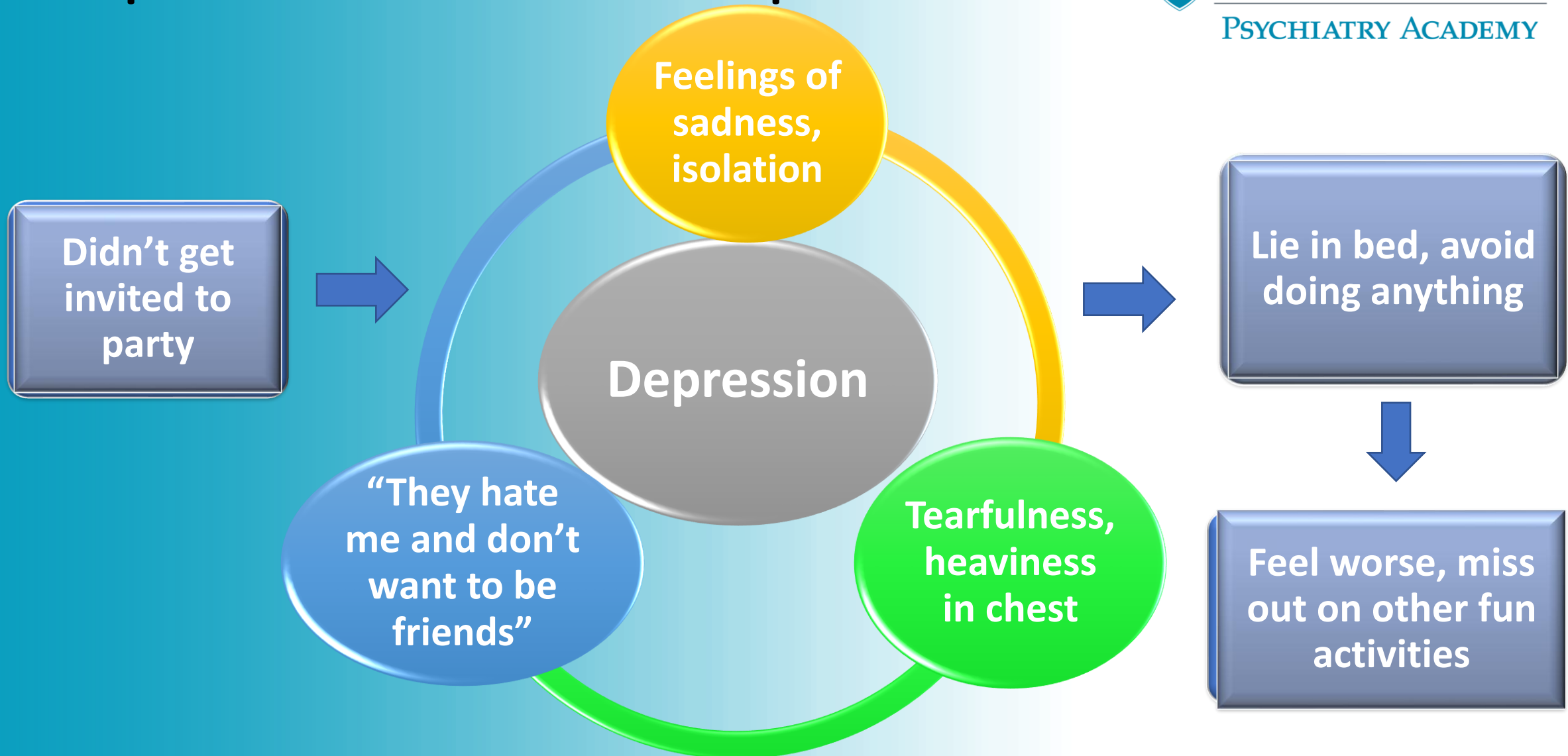


Example of CBT Model: Depression



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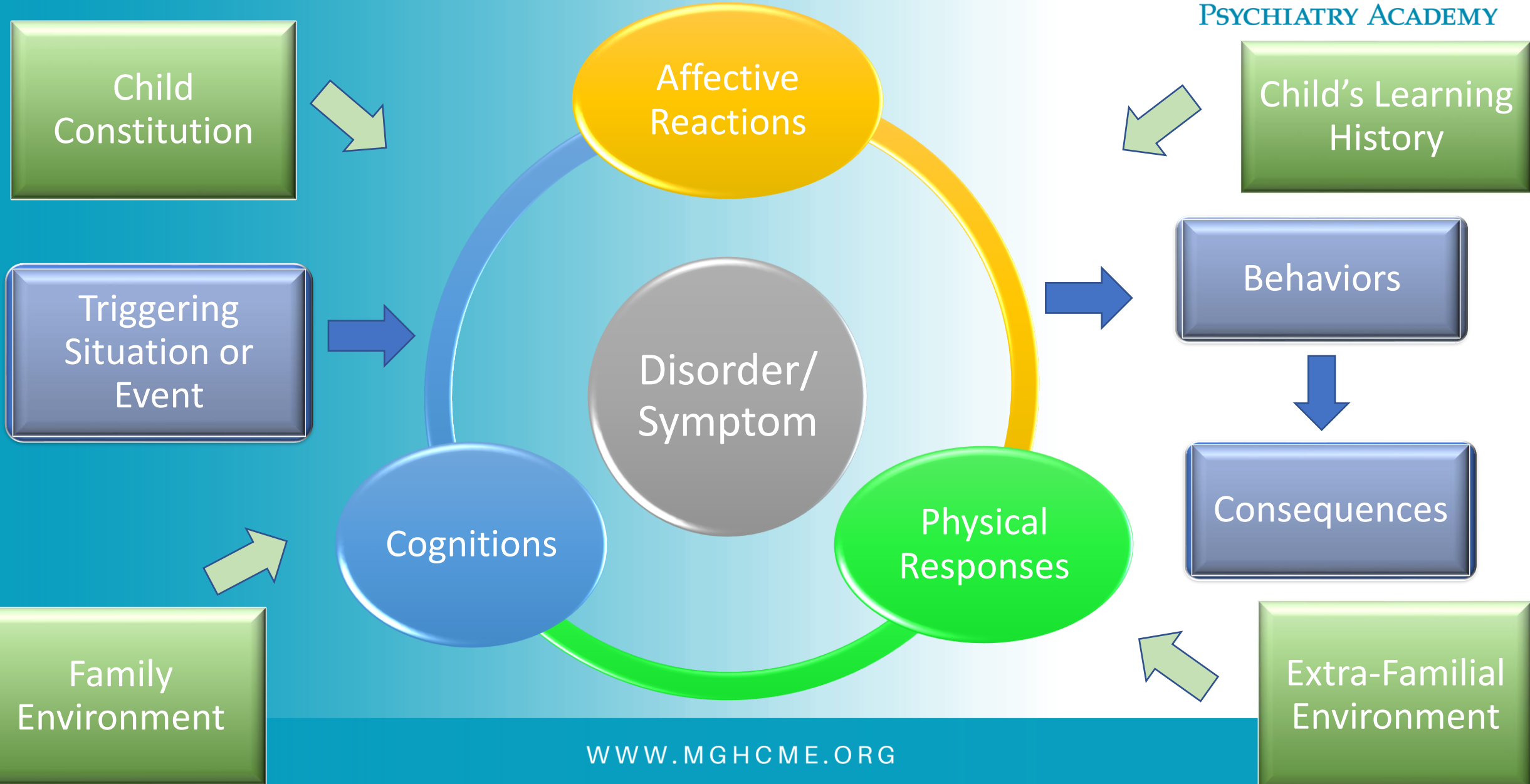


CBT Case Formulation



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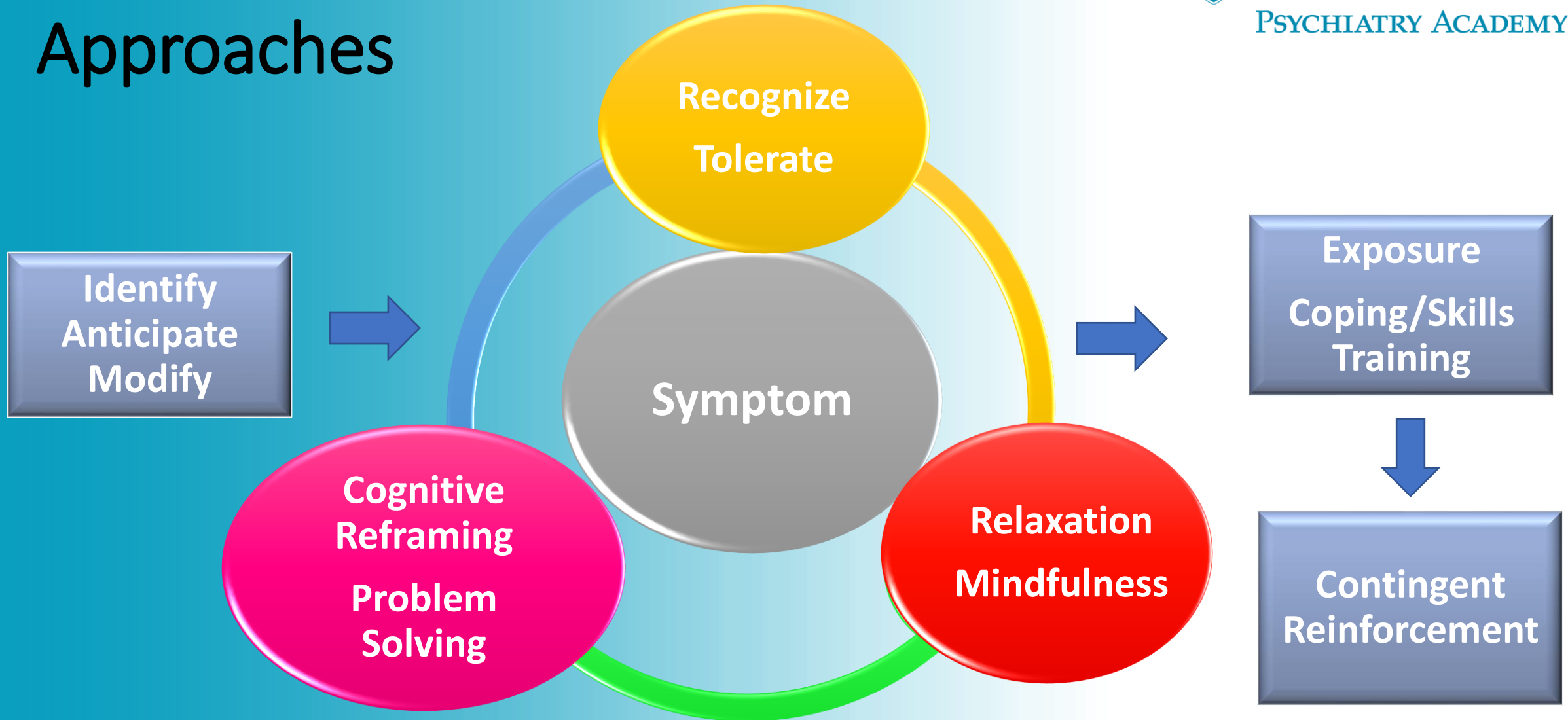


CBT Model: General Intervention Approaches



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Transdiagnostic Interventions: Unified Protocol

Unified Protocol

- Trans-diagnostic rather than disorder-specific
- Targets core difficulties that underlie multiple emotional disorders (i.e., neuroticism)
- Can be flexibly applied to a range of disorders (e.g., anxiety, depression)
- Separate versions for children and adolescents (and adults)

Barlow et al. *JAMA Psychiatry*. 2017;74:875-884.

Ehrenreich-May et al. *Unified Protocols for Transdiagnostic Treatment of Emotional Disorders in Children and Adolescents*. NY: Oxford U Press.



Unified Protocol Strategies

- Increasing awareness and understanding of emotions
- Increasing present-focused awareness during emotionally evocative exercises
 - Reduces/prevents emotional avoidance
- Increasing cognitive flexibility and linking thoughts to physical sensations
- Using cognitive techniques to challenge negative and anxious appraisals
- Emotional exposure and behavioral activation exercises
 - Changes maladaptive action tendencies to negative emotions

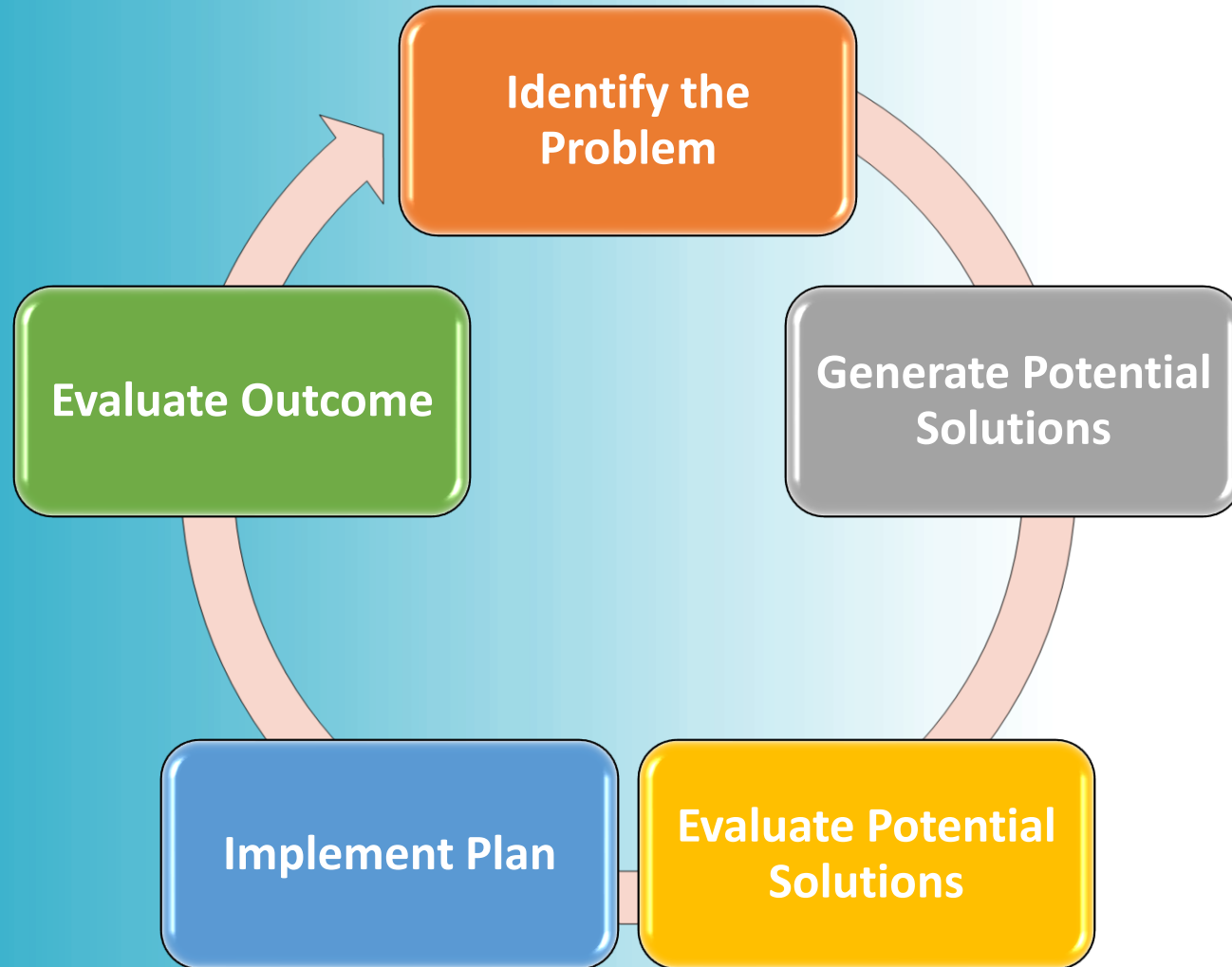
Affective Education

- To recognize emotions (fear, anxiety)
- Recognize, label, and self-monitor physiologic/affective cues
- What are situational triggers?
- What are affective reactions?
- What are physiological “warning signs”?





Problem-Solving Skills





Cognitive Restructuring



Goals:

- Identify negative/anxious/distorted cognitions
- Develop alternate, more realistic/helpful ways of viewing situations
- Develop a mindful, neutral attitude towards thoughts and feelings

Examples of Thinking Traps



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	<p><u>Looking Through Dark Glasses</u> Not seeing all of the possible good things that could happen in a situation, just thinking something unwanted is going to happen.</p>
	<p><u>The Repeater</u> If it happened once, it is ALWAYS going to happen that way.</p>
	<p><u>The Catastrophe</u> Always thinking the WORST thing is going to happen.</p>
	<p><u>Jumping to Conclusions</u> Making a decision before getting all the facts.</p>
	<p><u>The Mind-Reader</u> Feeling sure that someone is thinking bad things about you.</p>
	<p><u>The Perfectionist</u> Setting expectations for yourself that are too high or are nearly impossible to reach. Using all-or-nothing thinking: if there's one little mistake, the whole thing is no good.</p>



Cognitive Restructuring Worksheet

Situation	Thoughts	Emotion (0-10)	Challenge	Emotion (0-10)
Taking a test	I am going to fail!	Anxious (7) Hopeless (6)	I studied hard for this test and I did well on the last 2 tests. If I try my best, I will probably do well.	Anxious (3) Hopeful (3)



Third-Wave CBT Approaches

- Focus on one's relationship to thoughts and feelings rather than content
- Encourage a holistic approach to emotional and behavioral well-being
- Emphasize mindfulness, acceptance, values and goals
- Implement cross-diagnostically



Mindful Approaches to Cognitive Restructuring

- Developing a neutral response to unpleasant thoughts (“It’s just a thought”, “Thoughts come and go”)
- Helpful metaphors
 - “Spam mail”
 - “Computer glitch”
 - “Suitcases on the airport conveyor belt”
 - Leaves on a stream
 - Echoes





Behavioral Activation/Pleasurable Activity Scheduling

- Useful for managing depression, which is associated with:
 - Low involvement in pleasurable activities
 - Low level of self-reinforcement
 - Sensitivity to negative events
- Breaks “downward spiral” of depression by increasing activities that evoke pleasure or sense of accomplishment
- May also be helpful for other disorders and to enhance overall wellness



Behavioral Activation

- Monitor daily activities using daily log
- Identify potential pleasurable/mastery activities using list
- Plan concretely how to increase pleasurable activities
- Increase structured activities
- Trouble-shoot around potential difficulties

Pleasurable Activity Scheduling



	Rate Feeling before: 0–10	Activity 1: Call Friend	Activity 2: Walk dog	Activity 3: Watch movies/TV	Re-rate feeling:
Mon	2			Watched "Sinners"	8
Tues	4	Called Tim to hangout on Sat			9
Wed	5		30 min walk	Watched part of "Stranger Things season 5)	7
Thurs	—	—	—	—	—
Fri	3	Confirmed plans with Tim			6
Sat	5	Hung out with Tim			10
Sun	5		Went out with friend & dog		8



Developmental Considerations When Working with Young Adults



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Why Focus on Emerging Adults?

- 20% of young adults meet diagnostic criteria for a psychiatric disorder
- Nearly ½ of college-age adults report mental health concerns
- Late adolescence/young adulthood is peak age for onset of:
 - Depression
 - Mania
 - Psychosis
 - Panic Disorder
 - Substance Use Disorders

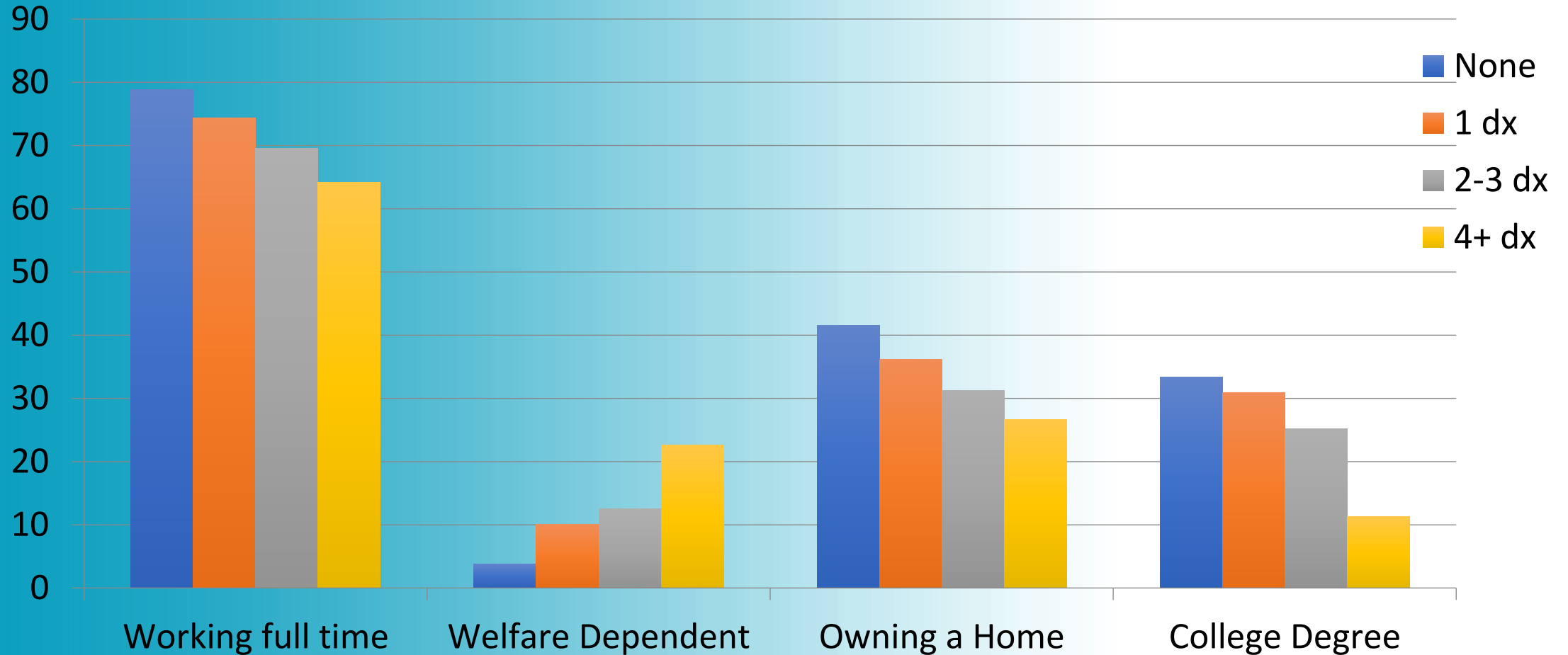


Young Adults with Severe Mental Illness: Functional Impairment

- Social skills
- Academic achievement
- Criminal activity and legal problems
- Employment and financial independence
- More limited interpersonal relationships
- Difficulty securing safe and stable housing (highest rate of residential change of any age group (Manteuffel et al. 2008))



Impact of Mental Health Problems at Ages 18-25 on Functioning at Age 30





Developmental Challenges

- Relative freedom from institutional control; loss of structure and support
- Heterogeneity and instability in involvement in work and school
- Parenting challenges (autonomy vs. support)
- Adoption of more adult roles and expectations
 - Includes responsibility for treatment
- This age spends more of their leisure time alone than any other age group aside from the elderly
- Peers influence decision-making to a high extent
- Vulnerability to impulsivity or poor decision-making processes
- Risk taking and short-term reward vs. societal expectations



Developmental Adaptations in Treatment Approach

- Recognizing age-specific stressors
- Issues of autonomy and self-concept
 - Acceptance of diagnosis
 - Acceptance (or not) of medication
- Identifying sources of social support; addressing peer issues
- Working with families around parenting adult children
- Incorporating exposure to tasks that increase autonomy (e.g., academic interactions)

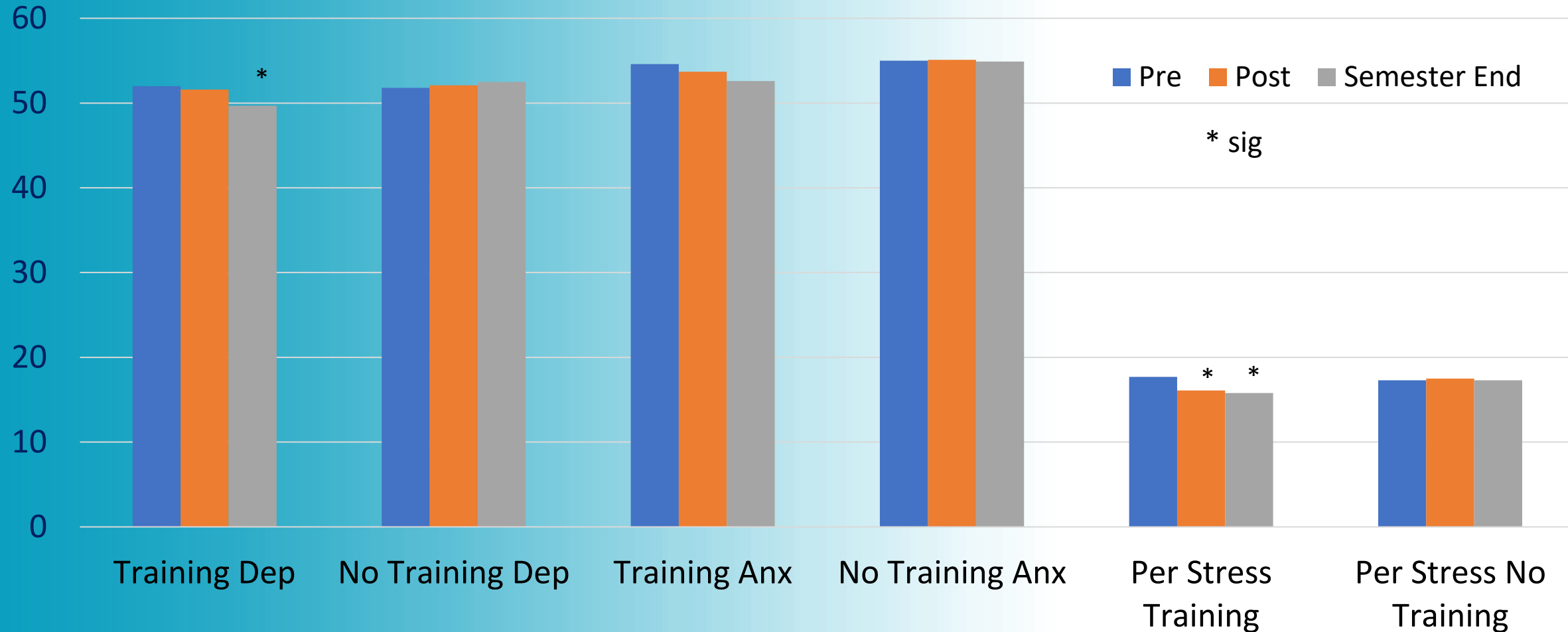
Brief Resilience Program for College Students (N=252)



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Akerman et al. *Depress Anxiety*. 2020;37:202-13.



Effectiveness of Brief CBT for School-Aged Youth (ages 16-18) in the UK

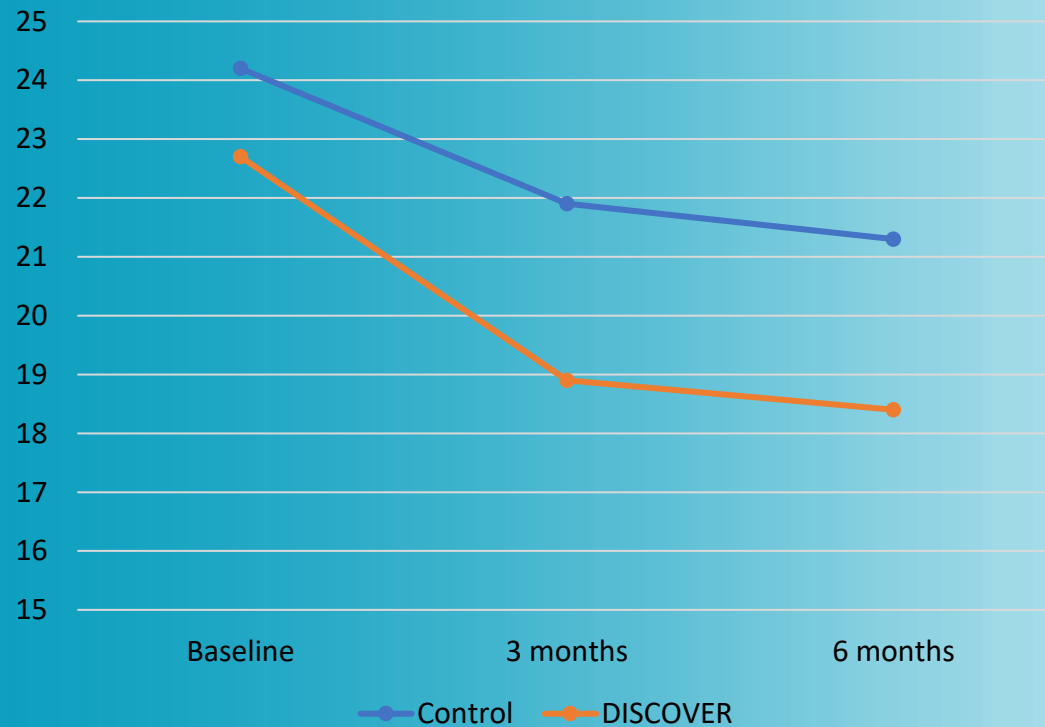


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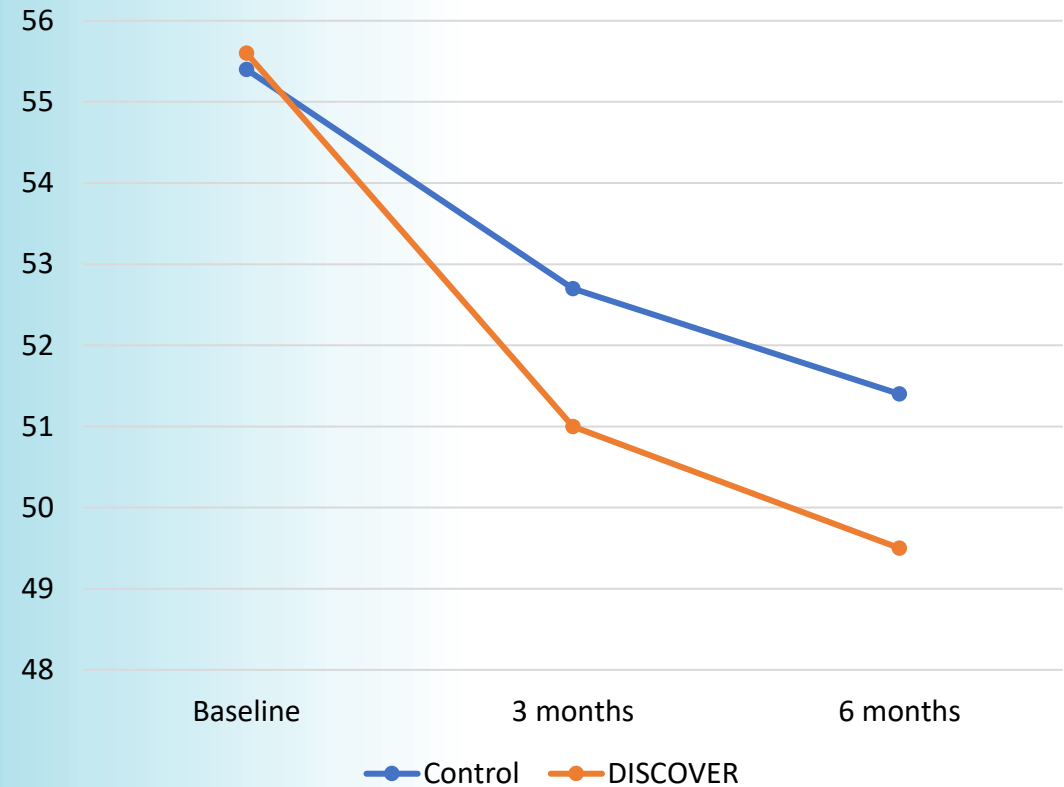
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(Brown et al., 2024. Lancet Psychiatry; 11: 504-15)

Mood and Feelings Questionnaire (Depression)



RCADS (Anxiety)



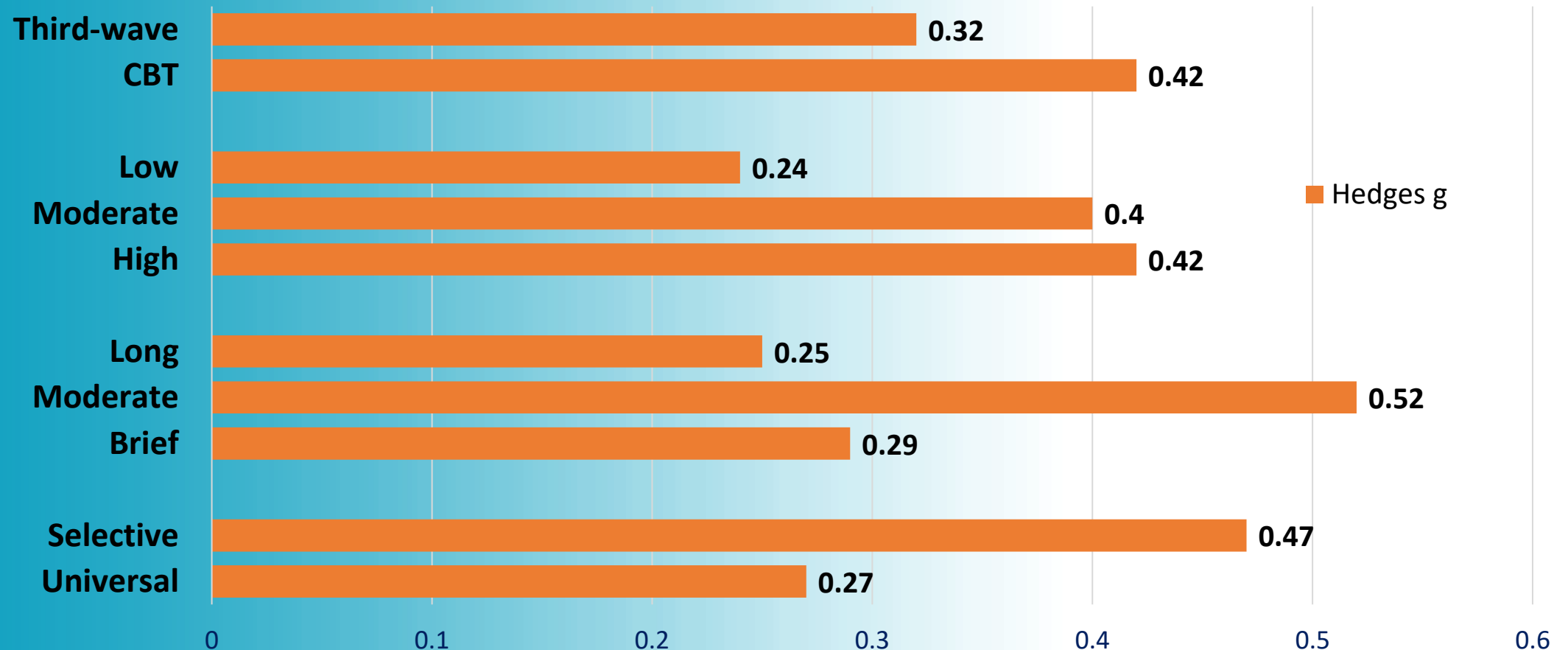
Meta-Analysis of Online, Guided, Self-Help Interventions for MDD in College Students



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Ma et al. *Internet Interv.* Sept. 2021;v.25.





Finding a CBT Therapist

- Look for graduate training in a CBT program and/or CBT internship
- Association for Behavioral and Cognitive Therapies

www.abct.org

- European Association of Behaviour and Cognitive Therapies

www.eabct.com