



Review Article

## Well Being Therapy in Psychiatric Disorders: A New Perspective

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### ABSTRACT

**Background:** In the recent era, psychotherapeutic strategies aims at symptoms reduction while other areas like personal comfort, effectiveness, positive approach, well being are considered as by- products of reduction of symptoms which are not focused much.

**Purpose:** The present paper attempts to discuss well being therapy in brief. It focuses on its characteristics, technical features and psychotherapeutic strategies used for increasing well being. It highlights its clinical implications in various psychiatric disorders and in preventing their relapse.

**Scope:** using this therapy various unaddressed issues such as promotion of eudemonic well being and optimal human functioning are explored. Well being therapy is a strategy for promoting well being in patients suffering from affective and stress related disorder who does not respond to standard pharmacological or psychotherapeutic treatment. Combination of psychological, pharmacological along with well being therapy can give outstanding result for the optimal functioning of the individual.

**Conclusion:** Well-being therapy is a new technique and was utilized in the treatment of various psychiatric disorders. Its effectiveness was proven in smaller clinical studies, hence it is needed to be tested in larger studies before it is widely accepted and practiced.

**Keywords:** Well being Therapy, Psychotherapy, Positive psychology, Psychiatric disorders.

### INTRODUCTION

Negative psychological processes like distorted cognitive style, stress and negative affect have been investigated by number of psychological scientists. [1,2]

These processes play a crucial role in development and maintenance of nearly all of the mental disorders as defined in the Diagnostic and Statistical Manual of mental disorder. [3] Prevailing notion is that absence of negative process connotes adaptive functioning but in reality psychopathology is associated with dysregulation of positive

mental functions in addition to the presence of negative affective process. [4,5] With the development of positive psychology Seligman & Csikszentmihalyi [6] exhorted researches to direct efforts towards understanding the process that enable humans to flourish even under benign conditions. Elements that makes life worth living encompasses those aspects of the human conditions that denote happiness, fulfillment and enrichment well being.

## Well-Being Therapy

Giovanni Fava's Well-Being Therapy (WBT) which is based on Ryff's model of psychological well-being [7] has shown incredible results in increasing well-being of individuals. It is a short term psychotherapeutic strategy that extends over 8 sessions, which may take place every week or every other week. The duration of each session may range from 30 to 50 minute. It is a technique which emphasizes on self observation [8] with the use of structured diary and interaction between patients and therapist. WBT is structured, directive, problem-oriented and based on an educational model.

### Initial Sessions- Self Observation

Initially rapport is established between therapist and the patient after that therapist asks their clients to identify episodes of well-being and the situations in which they occur. Patient is asked to

maintain a structured diary and to report in it the circumstances surrounding their episodes of well-being, rated on a 0-100 scale, with 0 being absence of well-being and 100 the most intense well-being that could be experienced (Table 1). If the patient comes back with blank sheet then they should be encouraged to search for well-being moments, not only in special hedonic stimulating situations, but also during the daily activity. In this session, patient is asked to acknowledge the feelings of satisfaction which is the most important step. He is then asked to step back from the negative phase of his reaction and then record the fact of what happened. Further, therapist asks him to imagine how someone else might react in the same situation. This exercise helps in breaking the habit of interpreting experiences in a consistently negative way.

Table 1- Intensity rating of well-being

Situation	Feeling of well-being	Intensity (0-100)
I was not able to attend my college for a week, my supervisor called me to enquire about my health.	My supervisor likes me. She cares for me and Is concerned for my health.	50

### Interference Session- Ending the Interference with Well-Being

In the first session, instances of well-being are properly recognized after this patient is encouraged to identify thoughts and beliefs leading to premature interpretation of well-being. The situation reported in table 1 the patient added "It is just because I take care of all her work my absence will be a great loss for her". The therapist may challenge these thoughts with appropriate questions such as "what is the evidence for or against this idea" or "are you thinking in all or none terms?" [9] Patient complains of lacking happiness in their life, they long for it, but at the same time they are scared when positive moments actually happens in their lives. These moments

triggers specific negative automatic thoughts usually concerning the fact that it will not last or that the patient does not deserve them.

Here, the therapist role is to reinforce and encourage activities that are likely to elicit well-being like- assigning graded task of undertaking particular activities for a certain time, going for a walk, listening to music, calling someone whom you have not talked to in a long time. These little things may seem trivial but in reality they are tiny step towards letting you feel good. They help you in removing the block that you have set between yourself and a sense of well-being. This session may extend over 2 or 3 sessions depending on the patient's

motivation and ability. It provide path for specific well-being enhancing strategies.

### **Final Session- Identify Improvements in Dimensions of Well-Being**

In previous sessions, continuous monitoring of the episodes of well-being is done. This allows therapist to realize specific impairments in well-being dimensions according to Ryff's conceptual framework. Ryff's scale of psychological well-being [7] can be used to measure impaired areas of well-being. In this session, the therapist introduces the formal definitions of well-being dimensions that stand out to be most relevant to patient's experience. All the experiences as recorded by the patient in the diary are reviewed with the therapist.

These three sessions ultimately leads to cognitive restructuring in well-being area by focusing on self observation. Unlike, Ellis and Becker's rational- emotive therapy [10] which search for irrational tension provoking thoughts or Beck's cognitive therapy [9] which focuses on automatic thoughts or distress, well-being therapy focuses on self- observation. The aim of the therapist is to lead the patient from an impaired level to an optimal level in the six dimensions of well-being as describes by Ryff which are- Environmental mastery, Personal growth, Purpose in life, Autonomy, Self acceptance, Positive relations with others.

### **Well being therapy in various psychiatric disorders:-**

#### **Residual Phase of Affective Disorder**

Fava et.al compared effectiveness of WBT with CBT (Cognitive behaviour therapy) in 20 patient of affective disorder in residual phase. Significant reduction of residual symptoms were noted in both the group. [11] After reduction of symptoms a significant advantage of WBT over CBT was observed with the Clinical Interview for

Depression scale (CID). [12] WBT group showed increase in psychological well-being particularly in personal growth scale.

#### **Prevention of Recurrent Depression**

WBT is a specific and innovative art of a CBT that was applied to recurrent depression. Forty patients with recurrent major depression, who had been successfully treated with anti-depressant drugs, were assigned to CBT - WBT group or to clinical management group. Relapse rate in a 2year follow up study in CBT-WBT group was 25% and in clinical management group it was 80% and in a 6 year follows up study it was 40% and 90% respectively which highlights the significance of this therapy. [13]

#### **Loss of Clinical Effect during Drug Treatment**

While undergoing pharmacological treatment, relapse of depression is a common phenomenon. This phenomenon can be addressed by WBT. In a study, 10 patients with recurrent depression who relapsed while taking anti-depressant were assigned to 2 groups. In 1st group, dose of drug was increased and in 2nd group same dose was given along with WBT sessions. In 1st group 4 out of 5 patients responded to larger dose but relapsed within 1year while in 2nd group 4 patient improved only one relapsed. [14] The data suggest that WBT application may counteract loss of clinical effect during long term anti-depressant treatment.

#### **Generalized Anxiety Disorder (GAD)**

In a study of 20 patients, who were randomly allocated to 2 groups. 1st group consisted of 10 patients and here 8 sessions of CBT was given. In other group of 10 patients, 4 sessions of CBT and 4 sessions of WBT was given for treating GAD. Findings revealed that 2nd group was superior to 1st group both in terms of symptom reduction and psychological well-being improvement. [15]

### **Post Traumatic Stress Disorder (PTSD)**

Use of WBT for treatment of traumatized patients is not yet tested in controlled investigation. However, some cases have been reported which improved with WBT, without addressing their central trauma that was discussed only in the initial sessions. [16] PTSD area needs to be reviewed for further advancement.

### **Body Dismorphic Disorder (BDD)**

Current treatment of BDD lack specific therapies [17] apart from cognitive restructuring of irrational thoughts of one's appearances. WBT may help to increase effective contrast of body image related automatic thoughts or may help to decrease in patient's perceived importance. Researches in this area are still under progress.

### **Somatoform Disorder**

In somatoform disorder, patient experiences and communicates psychological distress in the form of physical symptoms and seek medical help for them. [18] WBT may be beneficial in this disorder by well-being enhancing strategies. An extensive body of evidence suggests the influence of psychological well-being in altering individual vulnerability to disease [19] or quality of life. [20] It counteracts feeling of demoralization which is one reason of somatoform and improves the individual coping.

### **Obsessive compulsive disorder (OCD)**

Previous clinical observation suggests that anxiety provoking thoughts may often be preceded by instances of well-being in OCD. These patients are found to have low threshold for well-being related anxiety. This hypothesis is need to be tested and comparison with the well established therapy of OCD to be done. [21,22]

### **CONCLUSION**

Well-Being Therapy (WBT) was originally developed as a strategy for

promoting psychological well-being in patients with affective disorders who has impairment after pharmacological or psychotherapeutic treatment but it can be utilized for treatment of other psychiatric disorders. The therapy is also useful in limiting the expectation of failure that nothing will work out well for oneself. Through the practice of recording the positive side of daily living, one can compare those events where the person experienced feeling of well-being in the past with similar events in the present or expected to occur in the future. This helps one to challenge the automatic assumption that you won't ever do well at this type of event. Each step of the therapy helps you focus on the possibility of well-being and dislodge the assumption that one can't get satisfaction or success simply because he/she believes that he/she cannot.

WBT is a new technique, hence it is needed to be tested in larger studies before it is widely accepted and practiced.

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