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# Depression Case Study Example

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Brief Behavioural Activation for Adolescent Depression  
 The Loss of Sadness  
 Psychiatric Case Studies for Advanced Practice  
 Case Studies in Clinical Psychological Science  
 Diagnostic and Statistical Manual of Mental Disorders (DSM-5)  
 Oxford Guide to Behavioural Experiments in Cognitive Therapy  
 The Self in Process  
 MhGAP Humanitarian Intervention Guide (mhGAP-HIG)  
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 Mental Health  
 The Oxford Handbook of Hope

*Depression Case Study Example*

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## ALEXZANDER JOHNSON

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Brief Behavioural Activation for Adolescent Depression Common Mental Health Disorders

Though grounded in traditional cognitive behavior therapy, this book refines the practical aspects of its application. The method described is flexible enough to be used for disorders other than depression.

*The Loss of Sadness* Cambridge University Press

This handy DSM-5(R) Classification provides a ready reference to the DSM-5 classification of disorders, as well as the DSM-5 listings of ICD-9-CM and ICD-10-CM codes for all DSM-5 diagnoses. To be used in tandem with DSM-5(R) or the Desk Reference to the Diagnostic Criteria From DSM-5(R), the DSM-5(R) Classification makes accessing the proper diagnostic codes quick and convenient. With the advent of ICD-10-CM implementation in the United States on October 1, 2015, this resource provides quick access to the following: - The DSM-5(R) classification of disorders, presented in the same sequence as in DSM-5(R), with both ICD-9-CM and ICD-10-CM codes. All subtypes and specifiers for each DSM-5(R) disorder are included.- An alphabetical listing of all

DSM-5 diagnoses with their associated ICD-9-CM and ICD-10-CM codes.- Separate numerical listings according to the ICD-9-CM codes and the ICD-10-CM codes for each DSM-5(R) diagnosis.- For all listings, any codable subtypes and specifiers are included with their corresponding ICD-9-CM or ICD-10-CM codes, if applicable.

The easy-to-use format will prove indispensable to a diverse audience--for example, clinicians in a variety of fields, including psychiatry, primary care medicine, and psychology; coders working in medical centers and clinics; insurance companies processing benefit claims; individuals conducting utilization or quality assurance reviews of specific cases; and community mental health organizations at the state or county level.

Psychiatric Case Studies for Advanced Practice Routledge

In recent years, there has been a growing awareness of the multiple interrelationships between depression and various physical diseases. The WPA is providing an update of currently available evidence on these interrelationships by the publication of three books, dealing with the comorbidity of depression with diabetes, heart disease and cancer. Depression is a frequent and serious comorbid condition in diabetes, which adversely affects quality of life and the long-term prognosis. Co-occurrent depression presents peculiar clinical challenges, making both

conditions harder to manage. *Depression and Diabetes* is the first book devoted to the interaction between these common disorders. World leaders in diabetes, depression and public health synthesize current evidence, including some previously unpublished data, in a concise, easy-to-read format. They provide an overview of the epidemiology, pathogenesis, medical costs, management, and public health and cultural implications of the comorbidity between depression and diabetes. The book describes how the negative consequences of depression in diabetes could be avoided, given that effective depression treatments for diabetic patients are available. Its practical approach makes the book ideal for all those involved in the management of these patients: psychiatrists, psychologists, diabetologists, general practitioners, diabetes specialist nurses and mental health nurses.

*Case Studies in Clinical Psychological Science* Simon and Schuster

*Experiences of Depression* is a philosophical exploration of what it is like to be depressed. In this important new book, Matthew Ratcliffe develops a detailed account of depression experiences by drawing on work in phenomenology, philosophy of mind, and several other disciplines. In so doing, he makes clear how phenomenological research can contribute to psychiatry, by helping us to better understand patients' experiences, as well as informing classification, diagnosis, and treatment. Throughout the book, Ratcliffe also emphasizes the relevance of depression to philosophical enquiry. He proposes that, by reflecting on how experiences of depression differ from 'healthy' forms of experience, we can refine our understanding of both. Hence phenomenological research of this kind has much wider applicability. He further shows how the study of depression experiences can inform philosophical approaches to a range of topics, including interpersonal understanding and empathy, free will, the experience of time, the nature of emotion and feeling, what it is to believe something, and what it is to hope. This book will be of interest to anyone seeking to understand and relate to experiences of depression, including philosophers, psychiatrists, clinical psychologists, therapists, and those who have been directly or indirectly affected by depression.

#### **Diagnostic and Statistical Manual of Mental Disorders (DSM-5)** World Health Organization

A new book by John McLeod is always a treat and, like good qualitative research, takes the reader by surprise, and shows him or her something new. The revelation to me in this book is its focus on philosophy (rather than psychology) and on John's insistence that qualitative research is rooted in a mixture of phenomenology and hermeneutics. Those of us engaged in qualitative research are challenged to underpin our work with a deeper awareness of relevant philosophy with Chapters 2, 3 and 4 offering a good starting point. This book might not be seen then as being for the novice researcher who, in any case, would be best advised to start with one of John's earlier books: *Doing Counselling Research* (SAGE, 1994) or *Practitioner Research in Counselling* (SAGE, 1999). However, many parts of this book are essential reading for those beginning qualitative research. The first half of Chapter 9, for example, 'How to Do Qualitative Research?' is rich material, as is Chapter 6, which explores grounded theory, referred to by John as the 'market leader' in qualitative research. Chapter 10 takes a critical stance on randomized controlled trials before arguing the case for using qualitative outcomes measures: "Qualitative interviews appear to be, at present, the most sensitive method for the evaluation of the harmful effects of therapy and also for recording its greatest successes. The standardized self-report methods used in randomized trials appear both to inhibit criticism of therapists

and reporting of deterioration and also give little scope for clients to describe the hugely positive transformational experiences that can sometimes take place in counselling". This book deeply addresses what it means to do qualitative research into counselling and psychotherapy with plenty for the novice researcher and even more for those already deeply immersed in qualitative research' - William West, *Counselling and Psychotherapy Research* Qualitative methods are particularly suited to answering the kinds of questions that counsellors and psychotherapists need to ask about their practice. *Qualitative Research in Counselling and Psychotherapy* has therefore been written to help researchers find their way through the range of methodologies and techniques available to them. Leading expert, and bestselling author John McLeod takes the reader through each stage of the research process, explaining techniques for gathering data, writing up the study and evaluating the findings. Each qualitative method is clearly described and critically assessed in terms of its own strengths and weaknesses. Examples from actual research studies are given to show how the methods work in practice. The need to show how and why counselling works has led to an explosion of research activity. For all those involved in research - whether as part of academic study or in practice this book will be essential reading. As an introduction to qualitative methods, this it is certain to be widely recommended on courses in counselling and counselling psychology and will also be of interest to those who provide counselling in other professional areas such as nursing and social work.

#### Oxford Guide to Behavioural Experiments in Cognitive Therapy American Psychiatric Pub

In this profound work, Vittorio Guidano expands upon his earlier seminal contributions on the application of cognitive and developmental principles to individuals struggling with various forms of psycho-pathology. Here, he fully develops the idea that individuals' experience, both positive and negative, are powerfully influenced by their personal "psychological organizations." Focusing primarily on the eating disorders, the phobias (with agoraphobia as the prototype) obsessive-compulsive patterns, and depression, Guidano illustrates how early developmental experiences and ongoing psychological processes may collude to perpetuate dysfunctional patterns and personal distress. The central and perhaps most exciting thesis in this new expression of Guidano's thinking is that the "deep structure" or "core organizing processes" that constrain human psychological experience may be at the heart of successful intervention as well as the classical problems of resistance, relapse, and refractory behaviors. Guidano's contention is at once simple and powerful: those psychological processes involved in the development and maintenance of personal identity, or "self" that should be the primary foci of research and intervention in psycho-logical disorders. The meaning of Guidano's perspective for clinical practice is perhaps best expressed in the author's own words: "Knowing the basic elements of the personal cognitive organization that underlie the pattern of disturbed behavior and emotions, the therapist can behave, from the beginning, in such a way as to build a relationship as effective as possible for that particular client. In other words, the therapist should be able to establish a relationship that respects the client's personal identity and systemic coherence and that, at the same time, does not confirm the basic pathogenic assumptions. For example, in working with agoraphobics, the therapist has to respect their self-images centered on the need to be in control. He/she can do this by avoiding any direct attack on their controlling attitudes and by leaving them a wide margin of control in the relationship. At the same time the therapist should avoid confirming their

assumptions about the somatic origin of their emotional disturbances or about their inborn fragility. In short, the therapist who can anticipate the models of self and reality tacitly entertained by the client is surely better able to help the development of a cooperative and secure therapeutic relationship than the therapist who cannot make such anticipations." This timely and provocative volume offers exciting new ideas about how to conceptualize and facilitate change in the "self system." With the rare combination of his Renaissance intellect and integrative practical expertise, Guidano has been able to draw together many disparate themes from object relations theory, ego psychology, attachment theory, constructivist models of human cognition, and lifespan developmental psychology. It is must reading for the practicing professional, the helping apprentice, and anyone interested in glimpsing the cutting edge at the growing interface between cognitive and clinical science.

*The Self in Process* Guilford Press

This is a collection of 48 highly useful case studies of children and adults with communication disorders.

*MhGAP Humanitarian Intervention Guide (mhGAP-HIG)* Oxford University Press

Depression is a widespread condition affecting approximately 7.5 million parents in the U.S. each year and may be putting at least 15 million children at risk for adverse health outcomes. Based on evidentiary studies, major depression in either parent can interfere with parenting quality and increase the risk of children developing mental, behavioral and social problems. Depression in Parents, Parenting, and Children highlights disparities in the prevalence, identification, treatment, and prevention of parental depression among different sociodemographic populations. It also outlines strategies for effective intervention and identifies the need for a more interdisciplinary approach that takes biological, psychological, behavioral, interpersonal, and social contexts into consideration. A major challenge to the effective management of parental depression is developing a treatment and prevention strategy that can be introduced within a two-generation framework, conducive for parents and their children. Thus far, both the federal and state response to the problem has been fragmented, poorly funded, and lacking proper oversight. This study examines options for widespread implementation of best practices as well as strategies that can be effective in diverse service settings for diverse populations of children and their families. The delivery of adequate screening and successful detection and treatment of a depressive illness and prevention of its effects on parenting and the health of children is a formidable challenge to modern health care systems. This study offers seven solid recommendations designed to increase awareness about and remove barriers to care for both the depressed adult and prevention of effects in the child. The report will be of particular interest to federal health officers, mental and behavioral health providers in diverse parts of health care delivery systems, health policy staff, state legislators, and the general public.

**Depression in Parents, Parenting, and Children** Elsevier Integrating recent research and developments in the field, this revised second edition introduces an easy-to-master strategy for developing and writing culturally sensitive case conceptualizations and treatment plans. Concrete guidelines and updated case material are provided for developing conceptualizations for the five most common therapy models: Cognitive-Behavioral Therapy (CBT), Psychodynamic, Biopsychosocial, Adlerian, and Acceptance and Commitment Therapy. The chapters also include specific exercises and activities for mastering case conceptualization and related competencies and skills. Also new to this edition is a chapter on couple and family case conceptualizations, and an emphasis

throughout on trauma. Practitioners, as well as graduate students in counseling and in clinical psychology, will gain the essential skills and knowledge they need to master case conceptualizations.

*MhGAP Intervention Guide for Mental, Neurological and Substance-Use Disorders in Non-specialized Health Settings - Version 2.0* John Wiley & Sons

Mental, neurological and substance use (MNS) disorders are highly prevalent, accounting for a substantial burden of disease and disability globally. In order to bridge the gap between available resources and the significant need for services, the World Health Organization launched the Mental Health Gap Action Programme (mhGAP). The objective of mhGAP is to scale-up care and services using evidence-based interventions for prevention and management of priority MNS conditions. The mhGAP Intervention Guide version 1.0 for MNS disorders for non-specialist health settings was developed in 2010 as a simple technical tool to allow for integrated management of priority MNS conditions using protocols for clinical decision-making. With uptake in over 90 countries, mhGAP-IG 1.0 version has had widespread success. It is our pleasure to present mhGAP version 2.0, with updates incorporating new evidence-based guidance, enhanced usability, and new sections to expand its use by both health care providers as well as programme managers. It is our hope that this guide will continue to provide the road-map to deliver care and services for people with MNS disorders around the world and lead us closer to achieving the goal of universal health coverage.

**Experiences of Depression** SAGE

With at least one case presentation for each of the mental disorders catalogued in DSM-5 -- and multiple cases for nearly half of the disorders -- Learning DSM-5® by Case Example has been meticulously designed to aid practitioners and students of all levels in psychology, psychiatry, social work, counseling, and psychiatric nursing develop internalized prototypes of DSM-5 disorders by first describing each disorder in relatable terms and subsequently illustrating how these symptom constellations manifest in real-life settings using clinical case material. The nearly 200 cases featured in this guide are drawn from the clinical experience of well over 100 clinicians, many of whom are well-known experts in particular areas of diagnosis and treatment. Sensitive to the fact that one of the hallmarks of mental disorders is the wide range of presentations that are encountered in a real-world setting, many of the disorders described include multiple cases that vary in symptom presentation, gender, age, clinical course, associated impairment in psychosocial functioning, and developmental factors, thus giving readers an appreciation for the heterogeneity typical of these disorders. Each case is complemented by a discussion that elaborates the ways in which the case conforms to the DSM-5 prototype or highlights those features of the case that illustrate the heterogeneity. With definitions of potentially unfamiliar medical and psychiatric terms, Learning DSM-5® by Case Example is an accessible resource for readers of all disciplines. And because it guides the reader through the organizational structure of DSM-5, it is also an ideal reference for courses on psychopathology or abnormal psychology.

*Depression and Diabetes* National Academies Press

First published in 2002, the landmark Psychotherapy Relationships That Work broke new ground by focusing renewed and corrective attention on the substantial research behind the crucial (but often overlooked) client-therapist relationship. This highly cited, widely adopted classic is now presented in two volumes: Evidence-based Therapist Contributions, edited by John C. Norcross and Michael J. Lambert; and Evidence-based

Therapist Responsiveness, edited by John C. Norcross and Bruce E. Wampold. Each chapter in the two volumes features a specific therapist behavior that improves treatment outcome, or a transdiagnostic patient characteristic by which clinicians can effectively tailor psychotherapy. In addition to updates to existing chapters, the third edition features new chapters on the real relationship, emotional expression, immediacy, therapist self-disclosure, promoting treatment credibility, and adapting therapy to the patient's gender identity and sexual orientation. All chapters provide original meta-analyses, clinical examples, landmark studies, diversity considerations, training implications, and most importantly, research-infused therapeutic practices by distinguished contributors. Featuring expanded coverage and an enhanced practice focus, the third edition of the seminal *Psychotherapy Relationships That Work* offers a compelling synthesis of the best available research, clinical expertise, and patient characteristics in the tradition of evidence-based practice.

#### **Public Health Skills** Routledge

Brain disorders—neurological, psychiatric, and developmental—now affect at least 250 million people in the developing world, and this number is expected to rise as life expectancy increases. Yet public and private health systems in developing countries have paid relatively little attention to brain disorders. The negative attitudes, prejudice, and stigma that often surround many of these disorders have contributed to this neglect. Lacking proper diagnosis and treatment, millions of individual lives are lost to disability and death. Such conditions exact both personal and economic costs on families, communities, and nations. The report describes the causes and risk factors associated with brain disorders. It focuses on six representative brain disorders that are prevalent in developing countries: developmental disabilities, epilepsy, schizophrenia, bipolar disorder, depression, and stroke. The report makes detailed recommendations of ways to reduce the toll exacted by these six disorders. In broader strokes, the report also proposes six major strategies toward reducing the overall burden of brain disorders in the developing world.

#### **Neurological, Psychiatric, and Developmental Disorders** Lippincott Williams & Wilkins

Eastern spiritual traditions have long maintained that mindfulness meditation can improve well-being. More recently, mindfulness-based treatment approaches have been successfully utilized to treat anxiety, depressive relapse, eating disorders, psychosis, and borderline personality disorder. This book discusses the conceptual foundation, implementation, and evidence base for the four best-researched mindfulness treatments: mindfulness-based stress reduction (MBSR), mindfulness-based cognitive therapy (MBCT), dialectical behavior therapy (DBT) and acceptance and commitment therapy (ACT). All chapters were written by researchers with extensive clinical experience. Each chapter includes the conceptual rationale for using a mindfulness-based treatment and a review of the relevant evidence base. A detailed case study illustrates how the intervention is implemented in "real life," exploring the clinical and practical issues that may arise and how they can be managed. This book will be of use to clinicians and researchers interested in understanding and implementing mindfulness based treatments. \* Comprehensive introduction to the best-researched mindfulness-based treatments \* Covers wide range of problems & disorders (anxiety, depression, eating, psychosis, personality disorders, stress, pain, relationship problems, etc) \* Discusses a wide range of populations (children, adolescents, older adults, couples) \* Includes wide range of settings (outpatient, inpatient, medical, mental health, workplace) \* Clinically rich, illustrative case study in every chapter \* International perspectives

represented (authors from US, Canada, Britain, Sweden)

#### **Clinical Handbook of Psychological Disorders, Fourth Edition** National Academies Press

In the United States, some populations suffer from far greater disparities in health than others. Those disparities are caused not only by fundamental differences in health status across segments of the population, but also because of inequities in factors that impact health status, so-called determinants of health. Only part of an individual's health status depends on his or her behavior and choice; community-wide problems like poverty, unemployment, poor education, inadequate housing, poor public transportation, interpersonal violence, and decaying neighborhoods also contribute to health inequities, as well as the historic and ongoing interplay of structures, policies, and norms that shape lives. When these factors are not optimal in a community, it does not mean they are intractable: such inequities can be mitigated by social policies that can shape health in powerful ways. *Communities in Action: Pathways to Health Equity* seeks to delineate the causes of and the solutions to health inequities in the United States. This report focuses on what communities can do to promote health equity, what actions are needed by the many and varied stakeholders that are part of communities or support them, as well as the root causes and structural barriers that need to be overcome.

SAGE

With over 75,000 copies sold, this clinical guide and widely adopted text presents authoritative guidelines for treating frequently encountered adult disorders. The Handbook is unique in its focus on evidence-based practice and its attention to the most pressing question asked by students and practitioners—"How do I do it?" Leading clinical researchers provide essential background knowledge on each problem, describe the conceptual and empirical bases of their respective approaches, and illustrate the nuts and bolts of evidence-based assessment and intervention.

*Cognitive Therapy in Practice* American Psychiatric Publishing Edited by internationally recognized pain experts, this book offers 73 clinically relevant cases, accompanied by discussion in a question-and-answer format.

*Introduction to Supportive Psychotherapy* National Academies Press

Common Mental Health Disorders RCPsych Publications

#### **Learning DSM-5® by Case Example** John Wiley & Sons

Nurses and other public health practitioners have a crucial role to play in helping to improve the collective well being of society and so developing skills in public health - preventing disease, prolonging life and promoting health - is key to this process. *Public Health Skills: A practical guide for nurses and public health practitioners* covers the complete spectrum of public health practice: the effective assessment and management of need, understanding policy and how to affect its implementation; before moving on to explore practical issues and themes surrounding the facilitation of public health. Within the four sections of the book, the text is organised around the ten core public health skills outlined in the National Occupational Standards for the practice of public health, covering skills including surveillance and assessment, collaborative working, working with communities, strategy development, risk management, leadership and ethics. *Public Health Skills: A practical guide for nurses and public health practitioners* provides the fundamental, essential knowledge and skills required to provide safe and effective practice and is an invaluable resource for all those connected to this vital, challenging and rapidly expanding aspect of health provision.

*The Oxford Handbook of Mood Disorders* Oxford University Press

Grounded in extensive research and clinical experience, this manual provides a complete guide to interpersonal psychotherapy for depressed adolescents (IPT-A). IPT-A is an evidence-based brief intervention designed to meet the specific developmental needs of teenagers. Clinicians learn how to educate adolescents and their families about depression, work with associated relationship difficulties, and help clients manage

their symptoms while developing more effective communication and interpersonal problem-solving skills. The book includes illustrative clinical vignettes, an extended case example, and information on the model's conceptual and empirical underpinnings. Helpful session checklists and sample assessment tools are featured in the appendices.

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