# Depression Recovery





# Depression Recovery at Rogers

At Rogers, our treatment reduces depressive symptoms by teaching skills that help patients make behavioral changes and stop the cycle of depressive thinking, while also addressing obstacles to maintaining recovery.

#### What we treat

- Depression
- · Bipolar disorder and other mood disorders
- Co-occurring personality, anxiety, eating, and substance use disorders (depending on severity and medical stability)

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Admission starts with a free, confidential phone screening. To request a screening, call **800-767-4411** or visit **rogersbh.org**.

# An evidence-based approach

At Rogers, we use therapeutic methods that research shows to be the most effective for reducing symptoms. Depending on level of care and diagnosis, patients may engage in:

#### Cognitive behavioral therapy (CBT)

Research shows that CBT is highly effective in helping people make changes in their behaviors, thoughts, and emotions. Rogers is a national leader in the use of CBT.

#### Dialectical behavior therapy (DBT)

DBT provides patients with skills in a variety of areas including mindfulness, distress tolerance, emotion regulation, and interpersonal effectiveness. DBT emphasizes remaining non-judgmental and learning to view situations from a dialectical standpoint (two opposing ideas can be true at the same time). DBT skills are helpful for a variety of symptoms, including high distress that may lead to urges to engage in unsafe behaviors.

#### **Behavioral activation (BA)**

BA is a particular type of CBT that has excellent research support for the treatment of depression. BA helps individuals gradually decrease avoidance and isolation behaviors and increase engagement in activities which improve mood, including routine, enjoyable, and valued behaviors.

#### **Medication management**

Rogers' experienced medical staff assess each patient's medical history and symptoms to determine which medication and dosage may be a helpful supplement to behavioral therapy.

#### Family involvement

Family participation is a key part of recovery that allows for more effective treatment and eases the transition back home. This includes psychoeducation for family members about their loved one's symptoms, the treatment strategies being used, and how they can best support their loved one's mental health needs and treatment progress.

#### **Transcranial magnetic stimulation (TMS)**

For adults with major depressive disorder (MDD) who have not responded to medication, Rogers offers TMS at our Oconomowoc location. TMS uses targeted, magnetic pulses to increase the brain's activity and decrease depressive symptoms over time. A typical treatment plan involves 20-minute sessions, five days a week, for four to six weeks. Learn more at rogersbh.org/TMS.



# Levels of care

## **Inpatient Care**

To help patients with acute needs for medical stabilization, Rogers offers inpatient care at three hospital locations in southeastern Wisconsin: Brown Deer, Oconomowoc, and West Allis.

## **Outpatient Care**

#### **Partial Hospitalization Care (PHP)**

6 to 6.5 hours a day, 5 days a week Intensive, structured treatment that provides more hours of therapy in a week and allows patients to remain connected with their social support network. On average, PHP treatment lasts four to six weeks.

#### **Intensive Outpatient Care (IOP)**

3 to 3.5 hours a day, 4 to 5 days a week Specialized, short-term treatment to alleviate symptoms, and to assist patients with the transition between PHP care and traditional outpatient treatment. On average, IOP treatment lasts six to eight weeks.

Patients, families, and treatment teams work together to determine length of programs based on individual progress and situations.



## Levels of care

#### Residential Care

Focus Depression Recovery Residential Care provides a supportive, home-like setting for intensive treatment. Patients work with treatment teams to significantly reduce symptoms and promote long-term recovery. Patients stay on our beautiful Oconomowoc campus for an average of 45 to 60 days.

#### For adults



The **Charles E. Kubly Adult Residential Center** treats complex cases that frequently involve numerous diagnoses in addition to the mood disorder. Frequently, this involves co-occurring anxiety, substance use, and non-suicidal self-injury among other symptoms. Separate programming for young adults ages 18 to 30 and adults over 30.

#### For adults



The new location for **Adult Residential Care** in West Allis ensures that more adults get access to our specialized Focus Depression Recovery treatment.

#### For adolescents



**Adolescent Residential Care** treats complex cases and co-occurring disorders and symptoms. Adolescents also receive small education groups.

## **Outcomes Data**

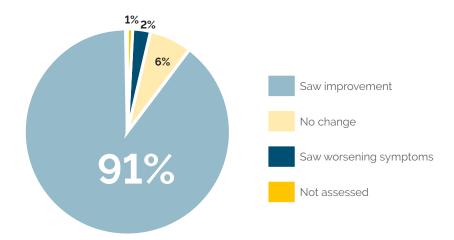
For more than 20 years, Rogers has been measuring the effectiveness of our care in the most transparent, scientifically reliable way possible.

Each year, Rogers conducts nearly a million patient assessments: taken at the start of treatment, at various points throughout treatment, at discharge, and for most programs, 12 months after care.

Our research team analyzes outcomes data to evaluate the effectiveness of individual progress during treatment as well as at the program and system level. This allows us to replicate the therapies and approaches that get the best results for our patients.

#### Clinical Global Impressions-Improvement (CGI)

Clinician-rated assessment of patient severity upon admission and assessment of improvement at time of discharge. 91% of our patients were minimally, much, or very much improved by the end of their treatment, as rated by the attending psychologist or psychiatrist.



## **Quality of Life Enjoyment and Satisfaction Questionnaire (Q-LES-Q)\***This 16-item self-report measures the degree of enjoyment and

satisfaction experienced in various areas of daily functioning. It is composed of 14 general activity items and two additional items on medication satisfaction and overall life satisfaction.

#### **Adult results**

	Admission	Discharge
Residential Care	42	64
Partial Hospitalization Care	48	60
Intensive Outpatient Care	52	63

#### Adolescent results

	Admission	Discharge
Residential Care	47	69
Partial Hospitalization Care	51	62
Intensive Outpatient Care	58	69

<sup>\*</sup> Though there is not an industry standard for interpreting score results, Rogers uses the following categories to evaluate our patients' assessment of their quality of life: 80 - very good 64 - good 48 - fair 32 - poor 16 - very poor

To see the results of evidencebased treatment at Rogers, visit rogersbh.org/outcomes.

### To get started

Admission starts with a free, confidential phone screening. To request a screening, call **800-767-4411** or visit **rogersbh.org**.

#### **Our Mission**

We provide highly effective mental health and addiction treatment that helps people reach their full potential for health and well-being.

#### Locations

For more information on the services nearest you, visit **rogersbh.org/locations**.

#### California

Los Angeles San Diego San Francisco

#### Florida

Miami Tampa

#### Georgia

Atlanta

#### Illinois

Hinsdale Skokie

#### Minnesota

Minneapolis St. Paul

#### Pennsylvania

Philadelphia

#### **Tennessee**

Nashville

#### Wisconsin

Appleton Brown Deer Kenosha Madison Oconomowoc West Allis

