

Effectiveness of Cognitive Behavioral Therapy for Major Depressive Disorder: A Review of Recent Evidence

R. Dharani Reddy*

Department of Psychology, CMR University, Bengaluru, India

Abstract: Major Depressive Disorder is one of the most common disorders and is related to clinically significant distress and impairment in daily functioning. Cognitive Behavioral Therapy is a widely researched and studied psychological intervention for the treatment of depression. This paper reviews the recent research regarding the effectiveness of CBT in reducing depressive symptoms. Even the Randomized Controlled Trials and Meta-analysis that were recently held help to understand how effective CBT is for treating Major Depressive Disorder and other forms of depression. The results of these studies show how CBT effectively reduces symptoms and helps improve psychological functioning. It also proves that CBT works well not only in controlled settings but also in real-life clinical settings or practices. Studies also reveal that blended Cognitive Behavioral Therapy, which is a combination of traditional therapy sessions with digital or online tools, might also improve patient engagement and accessibility, which makes it easier for a lot more people to receive it. However, there are a few limitations that exist, like patients not always stick to the treatment and differences in the therapist skill levels.

Keywords: Major Depressive Disorder, Cognitive Behavioral Therapy, Depressive Symptoms, Psychological Functioning, Blended Cognitive Behavioral Therapy, Randomized Controlled Trials.

1. Introduction

Many people suffer from persistent low moods, also known as depression in general. Usually, people lack interest in life, don't enjoy the activities they once enjoyed, and feel exhausted for most of the day. Find it extremely difficult to concentrate, and sudden changes in their sleep cycles and appetite are externally noted. All these also impact certain regions of the brain. This treatment of depression at the earliest is most important for good mental health. (American Psychiatric Association, 2022).

CBT or Cognitive Behavioral Therapy, comes in here as one way to handle it. Aaron T Beck developed it, focusing on how twisted thoughts lead to bad feelings and habits that drag you down.

The goal is to identify and reverse those negative habits so that we feel more stable and our behavior improves. It's believed the heart of depression persists as a result of people's pessimistic perceptions of themselves, the world, and what lies

ahead.

Beck had a name for that, the cognitive triad or something like that. It keeps the cycle going with negative thinking and routines that don't help.

In CBT, they work on changing those thoughts through stuff like restructuring, where you question the bad ideas and try to balance them out. Then there's behavioral activation, which gets you back into activities that might feel good. Scheduling helps plan it all so it's not overwhelming. It seems like tackling both the mind side and the action side could really ease the depression symptoms. Some of that overlaps, I guess, but it's not always straightforward for every person.

Recent studies have been digging into whether CBT actually works well, like in groups or online versus face-to-face, across different folks. Big reviews pull together a bunch of that research to see if it reduces the sadness and all. This paper aims to check out some of those findings on CBT for depression. (Cuijpers et al., 2023). Not sure everything lines up perfectly yet, but it's worth going through.

2. Cognitive Behavioral Model of Depression

According to the cognitive behavioural paradigm, maladaptive behavioural patterns and negative cognitive schemas sustain depression. People who are depressed frequently form enduring pessimistic views about the world, themselves, and the future. According to Beck, these ideas make up the cognitive triangle. (Cuijpers et al., 2023)

CBT is a therapy thing for depression that looks at how you think and what you do every day. This helps people heal and overcome the feeling of lowness. It encourages them to try new activities that make them feel good or rewarding.

When the individual pushes themselves to do stuff even when they don't want to, it adds to the behavioral activation part. Motivation is super low sometimes, but starting small, like making a list of what to do each day, can help build routines. It ties into noticing those bad thoughts too, the kind that aren't really true but make everything worse.

Challenging those distortions in how you see things is cognitive restructuring. You replace them with ideas that make more sense based on what's real. It can seem kind of technical

*Corresponding author: dharanireddy5229@gmail.com

at first, but it's mostly about questioning what pulls you down all the time.

Combining the thinking changes with the action stuff targets depression right on, I think. Though it's not like a quick fix or anything, shifts take time to show up. That explanation gets messy, and I'm not totally sure how to wrap it all up neatly. Some people might find one part easier than the other, but overall, it feels direct.

3. Literature Review

Recent studies conducted on nursing students who are feeling low showed that CBT really helps with depression (Demir and Ercan, 2022). The study was group counselling-based, which revealed that students showed fewer depressive symptoms and less negative thoughts post the counselling session. Thus, this strengthens how CBT builds better ways to handle and cope with emotions, among the younger generation. It was found to cut down the relapse rate and improve the symptoms over the long run (Chen *et al.*, 2022).

Then there's blended CBT, which mixes in-person sessions with online stuff. Kalde and others in 2024 looked at that, and people who got the blended version felt a lot better than the control group. It seems like adding digital parts makes it easier to access and keeps people more involved (Kalde *et al.*, 2024).

Meta-analyses back this up, too, on CBT for preventing relapse in depression. (Chen *et al.*, 2022). According to Cuijpers, team studies revealed that CBT still works well for depressive symptoms. The outcomes match what happens in controlled trials, which is good because it means it's valid outside labs. (Cuijpers *et al.*, 2023).

CBT even helps when depression comes with physical issues. Huang *et al.* in 2021 focused on heart disease patients; their meta-analysis showed reductions in depression, anxiety, and stress from CBT interventions. Additionally, quality of life got better (Huang *et al.*, 2021).

Some people might wonder about different groups, but overall, these points support CBT being useful in various situations. Not everything is perfect, though, like I am not totally sure how it compares long-term everywhere. The relapse part stands out, which seems key for ongoing help.

4. Critical Analysis

The literature I looked at shows a lot of support for CBT working well with depression. It seems like one big plus is how it teaches people actual skills to handle their thoughts and behaviors, kind of in a step-by-step way that makes sense for everyday stuff (Cuijpers *et al.*, 2023).

That structured part helps a ton, but then there's the way it can fit into different setups too. Like, group sessions or one-on-one, even some online mixes, and studies say they all turn out positive most of the time. This means it can work in clinics or wherever, which is flexible, I guess (Kalde *et al.*, 2024).

Yet everything isn't perfect. It depends on how involved the clients are in doing their exercises and homework. If the level of a person's depression is severe, then they won't have energy for it. It could mess with sticking to the plan or seeing results.

Additionally deals with how well the therapist builds the connection and at their work that matters a lot.

On the whole, even with a few problems, CBT is still a solid option to treat depression from what studies have proven (Chen *et al.*, 2022; Cuijpers *et al.*, 2023). Though some people still argue about motivational factors, it can still pull off severe cases better.

5. Clinical Implications

This review points out some stuff that could change how we do therapy in real life. Like, CBT seems like a good starting point for treating major depressive disorder (American Psychiatric Association, 2022). Mental health pros might try techniques from it, you know, cognitive restructuring to spot bad thinking habits, and behavioral activation to get people moving on better ways to cope. I am not totally sure if every case fits perfectly, but it looks promising.

Digital tools are getting mixed into CBT more and more, which might make mental health care easier to access. Online versions or ones that blend in-person and virtual could fix issues like not enough therapists or living far away from help. Especially in places with limited resources, that part stands out as important. It feels like access barriers get smaller this way, though I might be oversimplifying how it all works out (Kalde *et al.*, 2024).

6. Conclusion

CBT is intended to help with depression, and based on what I've read, there's a lot of data to support it. Those randomized studies, you know, and then the ones that sum up a ton of them. It makes sense why people talk about it so much. The symptoms get toned down, I guess. Like, it lightens the load in your head or something. Not completely, but enough to notice (Chen *et al.*, 2022; Cuijpers *et al.*, 2023).

I mean, it's not like a cure-all by any means. Still, the research points to it being effective, at least from the stuff I recall. That part stands out.

Sometimes the results might not apply the same way in different places, or I'm not sure. But overall, it feels reliable enough, yeah.

The way CBT can fit into different setups, like group sessions or whatever, that's what makes it useful in clinics, I guess. It adapts pretty well, which is a plus. Looking ahead, there's probably more to dig into with how to deliver it, you know, through apps or mixing online and in-person stuff. That could make it easier for more people to get help and see results (Kalde *et al.*, 2024).

CBT keeps being important for handling depression, though I'm not totally sure how it stacks up long term against other things. Some say it's key, others might think newer methods could take over.

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