



Lifting Your Mood

Cognitive Behavioural Therapy for Depression

Course Handbook

S1 – S12

Welcome to the Course

This booklet accompanies the course and is for you to keep. This course will meet weekly for 12 sessions, each session lasting no more than 2 hours, including a coffee break.

Working Together

One of the most valuable things about courses is the support that you can give to each other. To help everyone feel safe and comfortable, it is helpful for the group to agree some guidelines for the sessions. We will discuss and agree these as a group, but here are some suggestions below:

- **Ensure your camera and microphone are working. It is important to keep the camera on– unless we are having a break.**
- **Check that you have only your name and no email showing when you join the session.**
- **Please put mobile phones on silent so they do not interrupt the group.**
- **Try to be on time, but if you are ‘one off’ late do come in and join the session.**
- **Respect other people’s points of view; they may be different from your own.**
- **Listen when others are talking .**
- **If you are unable to make it to the session, please let Steps to Wellbeing know.**
- **Do not come to the group under the influence of alcohol or drugs.**
- **Please keep any personal information shared within the group sessions confidential.**

Please write here below any other rules that the group has agreed together:

-
-
-
-
-
-
-

Steps to Wellbeing Contact Telephone Numbers

West and North Dorset:	0300 790 6828
Poole, Purbeck and East Dorset:	0300 1231 120
Bournemouth and Christchurch:	0300 7900 542



Keeping Safe Between Sessions

Steps to Wellbeing is not a crisis service, and although you are welcome to contact the service between sessions, the course facilitators may not be available to speak to you. If you feel at risk to yourself or others, or feel at risk from anyone else please utilise your risk management plan agreed at assessment (it might be a good idea to write it here below in the space provided). The services listed here are really useful if you feel overwhelmed emotionally and/or at breaking point:

- **Contact your GP surgery during your GP Surgery opening times and request an urgent appointment.**
- **If you live in Dorset:**
 - Call **Connections**, on 0800 652 0190 or via NHS 111, which is a 24/7 helpline for people needing urgent mental health support
 - **The Retreat** in Bournemouth and Dorchester - The Retreat offers 'drop-in' and virtual 'drop-in' 7 days a week. It is a safe place to access if you feel you are reaching a crisis point. Either Ring the bell at the addresses below OR access via virtual link:
 - Hahnemann Road, Bournemouth BH2 5JW (4.30pm-midnight, Mon-Sun)
 - 30 Maiden Castle Rd, Dorchester, DT1 2ER (4.30pm-midnight, Mon-Sun)
 - www.dorsethealthcare.nhs.uk/patients-and-visitors/our-services-hospitals/mental-health/retreat (between 5pm and 11pm, Mon-Sun)
- **If you live in Southampton:**
 - **The Lighthouse** – <https://www.southernhealth.nhs.uk/our-services/a-z-list-of-services/lighthouse>
 - **Solent Mind** – for peer support Tel 023 8017 9049 (M-F 9am-7pm; weekends 10am-2pm)
- Call 999 in an emergency
- Go to A&E if you are worried about hurting yourself or someone else
- Call "The Samaritans" (24/7 service) on 116 123 for someone to talk to
- Think of a friend, partner or family member that you can seek support from
- There may be another professional involved in your care who could help, e.g. your Health Visitor, Social/Support Worker, Community Mental Health Team or GP Practice Nurse.

Please make a note of your useful telephone numbers (Here below), so that you have them to hand when you need them. You may want to write them in the space below, or save them in your phone so they are ready to use. e.g. my GP surgery

My Personal Safety Plan

Signs that my mood is deteriorating
<ul style="list-style-type: none"> • • • •
What steps can I take to manage this? Where can I get support (write it here)?
<ul style="list-style-type: none"> • • • • • •

Session 1 Let's begin with Hopes and Fears

You may have certain expectations, hopes and fears about coming to this course. Please take some time to think about these and write them down in the spaces below. You can choose to share this information with the group or keep it to yourself. We will come back to these at the end of the course.



What do I hope to achieve through completing this course?



What fears do I have about attending this course?

Recovery from depression is a journey. During the course you may have times where you feel better, and times where you feel low again. The times when you feel like you've slipped back remember that these times are NOT a sign of failure or that nothing works.

These are often the times when the most learning takes place.

Our low and difficult times are a chance to notice the triggers, to try out new techniques and to think about what could be done differently next time.

Understanding the problem

What is Depression?

Depression is different to feeling sad or blue for a few days - everyone is likely to experience a bad/low day from time to time. Depression symptoms last for longer and they interfere with your ability to do the things you are normally able to do easily.

Even though you might feel utterly alone with your depression, it is actually a very common illness. In fact, 1 in 4 people will experience depression at some point in their life. Often people feel embarrassed about sharing this but it is important to note that it can happen to anyone.

Symptoms of Depression

The symptoms of depression can be divided into 4 categories. The earlier you can recognize the signs (your own symptoms of depression), the earlier you will be able to act, before your mood becomes really low.

Physical Symptoms (how depression is experienced in your body)

These may include:

- Tiredness, heaviness and fatigue
- Increased or decreased appetite
- Sleep disturbances, such as early waking, trouble getting to sleep, sleeping too much
- Changes in the way you move, either becoming restless or slowed down
- Pain, foggy head

Cognitive Symptoms (what you think, your thoughts)

- Negative about yourself (e.g. I'm a burden, people would be better off without me)
- Negative about the future (e.g. this will never change, I'll never get better)
- Negative about the world and others (e.g. the world is a bad place, nobody cares)
- Only noticing the negatives whilst overlooking the positives
- Difficulty concentrating and planning and making decisions
- Repeated thoughts of death, self-harm or suicide

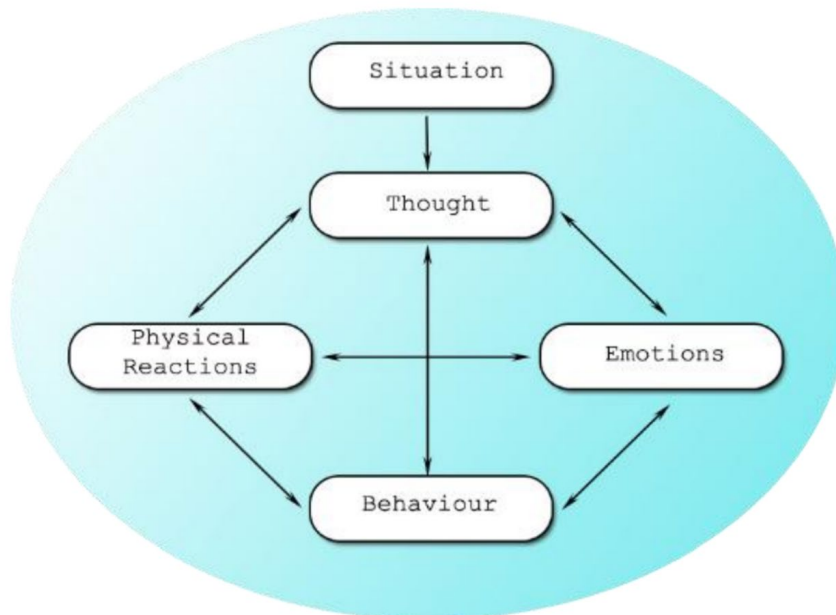
Emotional Symptoms (what you feel emotionally)

- Sadness, Despair, Hopelessness, Helplessness
- Guilt, Shame, Envy, Resentment
- Irritation, Anger, Fear, Anxiety

Behavioural Symptoms (what you do, or avoid doing)

- Withdrawing from other people
- Difficulty keeping up with household tasks or work
- Neglecting your appearance or self-care
- Using alcohol or other substances to feel better or not to think
- Comfort eating
- Arguing

DEPRESSION - The Cognitive Behavioural Therapy (CBT) Five Areas Model



What Causes Depression?

Depression is not caused by just one thing. It is probably the result of a number of factors none of which indicate any personal failings. These may include a family history of depression, physical health conditions, hormonal changes, and life events such as relationship difficulties, bereavement, redundancy or trauma.

Once depression has arrived, it keeps itself going through the vicious cycle above (note that the arrows link the 4 aspects of depression we talked about before and one can get 'stuck' in the cycle). Low mood affects motivation to do things, leaves you feeling drained, and clouds your thinking, resulting in more negative thoughts and biased or distorted thinking. These patterns of thinking can lower your mood further. Behaviour such as staying in bed or avoiding friends leaves you more time to dwell on things, cuts you off from activities that could lift your mood, and from people that could help. This vicious cycle can trap you in a state of depression.



Task: In which box (in the 5-area-model) does each of these go?

- | | | |
|-----------------------|-------------------|--------------------------|
| I'm useless | Anxious | Vulnerable |
| Stay in bed | Headache | I feel like no one cares |
| Tired | Buy clothes | Sleep |
| They don't like me | Sad | Cleaning |
| Crying | Nausea | I can do this |
| He doesn't understand | Angry | Not motivated |
| Drink alcohol | Heart pounding | Talk to someone |
| I can't do it | Go for a walk | Trembling hands |
| Guilty | Turn off my phone | Phone-in sick to work |

What is Cognitive Behavioural Therapy (CBT)?

Cognitive Behavioural Therapy (**CBT**) focuses on the impact that thoughts and behaviour have on your feelings (emotions). CBT focuses on your difficulties in the here and now; it is time limited, collaborative and empowering in nature: the idea is that you learn the skills and become your own therapist!

A key component of CBT is 'your weekly task'. Basically, this means putting into practice, between one session and the next, what we have discussed and learnt during each session. Research shows that without practice between sessions the positive gains are very limited.

CBT has been researched widely and research clinical trials (all over the world) have shown it is an effective treatment for depression, the National Institute of Clinical Excellence (NICE) recognises CBT as one of the most effective treatment for depression.

How Can CBT Help?

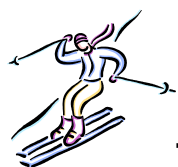
CBT helps you to understand how your thoughts, mood and behaviour are connected to each other, and the patterns or vicious cycles that may be key in maintaining your depression. CBT also gives you tools to start breaking those cycles, lifting your mood, challenging negative thinking, recognising your strengths and resources and changing unhelpful behaviours and engaging in behaviours helpful to you.

CBT can help you to break this cycle by identifying unhelpful patterns of thinking and behaviour, which could be maintaining your depression. During these group sessions you will learn techniques to help you change these patterns, to help you achieve your goals and manage and overcome depression.

Change can be difficult, and it is normal to think "I can't see this helping me" or "I can't do it", particularly if you are caught in the vicious cycle! Asking for help can be difficult, and it can be hard to find the motivation to change. Any change takes effort, but the rewards can be huge.

Discussion Point: Making Changes

Think about other times in your life when you have made a change e.g. giving up smoking, starting a new job, learning to drive, taking up a new hobby. What can you take from these experiences to help you now?



The Ski Slope Analogy

Think about a mountain covered in fresh fallen snow. As people start skiing down the slopes, paths will appear. People tend to follow each other, and during the day, well-worn routes will start to appear, with the snow becoming flattened and smooth. The easiest and fastest way down the mountain is to follow these paths.

But what if you want to take a new route, and go "off-piste"? This involves carving out a new path through the fresh snow. This is initially slower and harder work, but you can still get down the mountain. You may find a better route, one with more impressive scenery, or a more exciting ride. Although this may require more effort in the short term, with repetition this path too will become well-worn, and the journey will become easier and faster.

Building Motivation to Change

Sometimes you can have mixed feelings about making changes and trying something new. For example- coming here today you may have felt hopeful at the thought of feeling better, but nervous at the thought of meeting new people. One way of thinking about change is to weigh up the advantages and disadvantages of doing something, but also what would happen if you do not take that step.

Look at the **Change Balance** sheet and think about coming to the session today. What are the advantages and disadvantages of attending, and of not attending this course?

Advantages of attending this course	Disadvantages of attending this course
Advantages of not attending the course	Disadvantages of not attending this course

Support

Support is also really important, although this can come in many forms and doesn't just have to be someone who you can share your vulnerabilities with. This can either be from family members, friends or from professionals such as your GP, nurse, therapist or counsellor. The great thing about group therapy is that you have lots of support from others in a similar position.

A Note on Weekly Tasks

The Weekly Tasks set for the group will help you apply the course material and CBT techniques to your everyday life. It is really important to practice the techniques in between sessions, to help you get the most out of this course. → The more you put in, the more you get out.

Each session will start with a review of the previous week's task.

Learning from session

The main things I will take away from today's session are:

Session 1 Weekly Tasks:

- Read through Session 1 in the booklet
- Complete change balance sheet Advantages and disadvantages page 8.
- Complete my own 5-areas diagram (Maintenance Cycle of depression) page 10.

"If you keep doing what you've always done, you'll keep getting what you've always got" –

W. L. Bateman

So why not try embracing change for the next 12 weeks?

Let's try something different, let's try Cognitive Behavioural Therapy.

After all, what have we got to lose and what if we gained improvements from our efforts? We know that repeating the same avoidant behaviour and thinking negatively is not going to improve symptoms of depression.

How does the saying go..... 'Nothing ventured, nothing gained' so why not try this model for a few months (we can always go back to our old way of behaving and thinking if we like)?

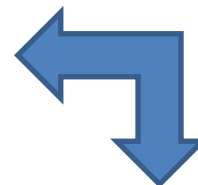
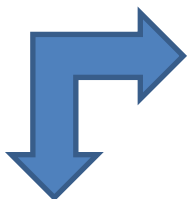
This CBT course will challenge us, annoy us and infuriate us at times BUT the hard work will be worth it!

My 5-areas model (Maintenance cycle of depression)

Situation (what, where, when, who with)

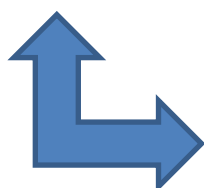
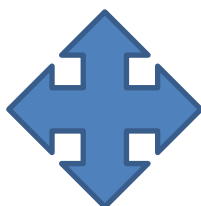


Thoughts (what was going through your mind, what images came to mind and what did you make of the situation?)



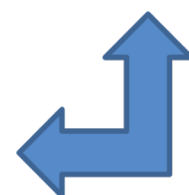
Physical (what did you feel in your body?)

Behaviours (what did you do?)



Mood

(name your emotions and rate how strongly you felt it between 0-10. For example Sad = 7/10)

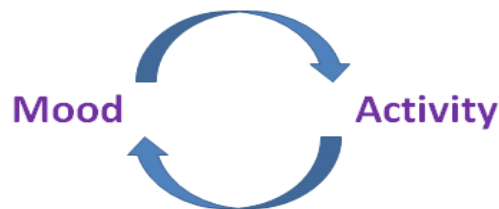


Session 2

The link between mood and activity: the importance of looking after yourself

Mood (emotions) & Activities: the Vicious Cycle

The symptoms of depression have a huge impact on your life, particularly in terms of your behavior. Often, behaviour such as withdrawing and avoiding friends are what make the depression worse and prevents recovery. This is called the vicious cycle of depression.



How you feel emotionally affects how you behave. When you feel low in mood, it is common to feel low in motivation and energy. You may lose interest in your usual activities or want to withdraw from other people. Low mood often leads to a reduction in activity; you may stop doing the things you would usually do, avoid other people, and stay at home more.

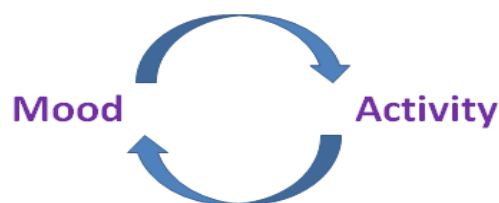
Low mood leads to changes in activity. Loss of interest, motivation and energy



Reduced activity maintains low mood

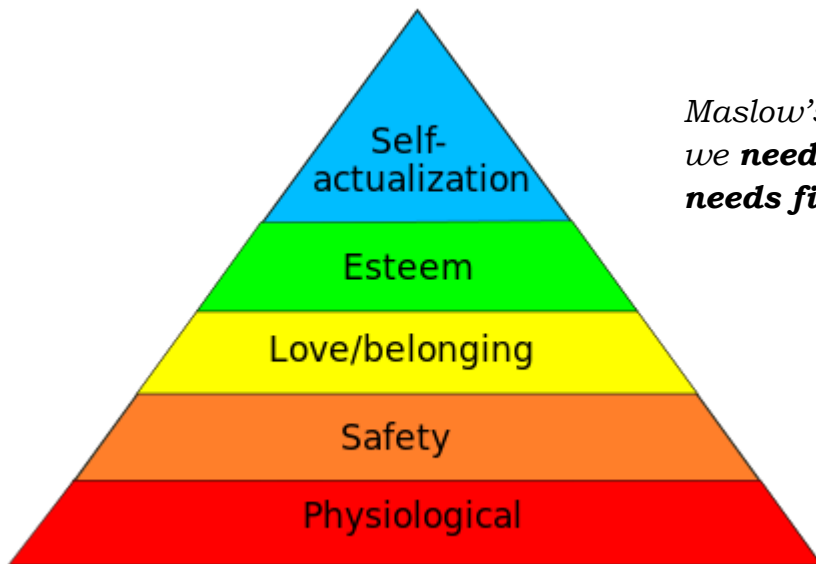
Less enjoyment, achievement or distraction from thoughts

Sometimes the opposite may happen, and you may become over-active, keeping busy and trying to distract yourself from your emotions or thoughts. Being over-busy can be exhausting! It can also prevent you from addressing underlying problems, and therefore these problems stick around.

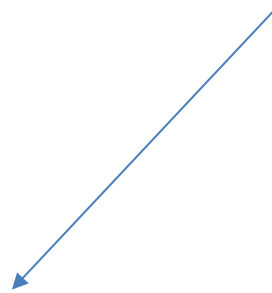


Feel exhausted, overwhelmed, not able to accomplish everything, worsens mood

Keep busy, go out all the time, sign up for classes and groups



*Maslow's Hierarchy of Needs says that we **need to take care of the basics needs first** → meeting our body needs*



Looking after Yourself

You may notice that when your mood is low, you tend to devote less time and effort to looking after yourself. Your appetite may be affected, and motivation to live a healthy lifestyle may be low. You may lack the energy to prepare nutritious meals or manage any ongoing health conditions. Home environment, personal appearance and health can all suffer. Yet the food and drink you take in, your sleep patterns and spending time on your appearance can all have an effect on your mood.

Meeting the needs of Our Body

This section contains general healthy lifestyle advice- if you have any medical conditions, please seek advice from your GP to make sure that you are eating and exercising appropriately.

Diet: You can find helpful tips on eating a healthy diet on the NHS website

<https://www.nhs.uk/live-well/eat-well/eight-tips-for-healthy-eating/?tabname=food-and-diet>

- A healthy diet can be good for our mental health-we also need to make sure that we have enough fuel to help us function and embrace changes as part of CBT.
- Brain relies on glucose (*potatoes, rice, cereals, bread, pasta*) eat little and often to keep your mood at its best.
- Brains are made up of 50% fat and need fat to maintain structure and health.
- Choose **unsaturated** naturally found fats (*nuts, seed, olive oil*)
- Avoid **trans fats** found in ready meals, pre-packaged cakes and biscuits, processed meats as this changes the cell structure and its function.
- A healthy brain is made up of 78% water and even slight dehydration can affect mood-aim to drink 6-8 glasses of fluid each day. **Remember the importance of drinking plenty of water**
- Avoid drinking too much caffeine and alcohol as these contribute to dehydration, low mood, disturbed sleep and increase symptoms of anxiety.

Exercise: Keeping active is very important both for our physical and emotional wellbeing. You can find more explanations on the benefit of keeping active on the NHS website:

<https://www.nhs.uk/live-well/exercise/exercise-health-benefits/>

- Exercise has long been known to have a positive benefit on mood and evidence shows it helps ease symptoms of mild, moderate and severe depression.
- Exercising not only increasing blood flow and oxygen to the brain which helps improve our functioning, it also releases endorphins- the body's natural anti-depressant hormone.
- Any exercise is better than none and the key is finding something you enjoy or it will be harder to find the motivation to do it regularly.

Sleep:

When feeling depressed sleep is often disturbed or disrupted. You can suffer from a range of insomnia symptoms including difficulty falling asleep (sleep onset insomnia), difficulty staying asleep (sleep maintenance insomnia), unrefreshing sleep.

Looking after your diet, physical exercise and sleep means you are starting to take care of yourself. Taking care of yourself is a key building block to returning to wellbeing.

And remember:



SLEEP DIFFICULTIES– Let’s have a closer look

There are ways to try and reduce sleep difficulties as part of CBT interventions. Some of these you may have heard of and tried others may be new to you.

Sleep hygiene:

- Avoid caffeine after lunch and alcohol within 6 hours of bedtime- Alcohol helps with sleep initiation, but it impairs sleep maintenance as it changes your sleep architecture. Additionally alcohol is a depressant which will impact negatively on your mood.
 - Avoid nicotine close to bedtime or during the night- Nicotine is a potent stimulant with a short half-life which means as part of the frequent withdrawal symptoms you will experience you will induce broken sleep through regular awakenings in the night.
 - Exercising will help your sleep. Engage in moderate physical activity but avoid heavy exercise within 3 hours of bedtime.
 - Avoid consuming excessive liquids or a heavy evening meal before bedtime
- Bedroom environment:
- Maintain a quiet, dark and comfortable sleep environment.
 - Keep the bedroom cool: evidence suggests a drop in body temperature aids our internal systems to prepare for sleep
 - Develop a bedtime routine to cue your brain to sleep, e.g. Brush your teeth, relax, turn lights down, have an herbal tea.
 - Using the sleep diary we can monitor our sleep and this will help us to return to a good sleep-wake routine. An adult generally sleeps around 7-8 hours to feel refreshed, however there are individual differences and some people don’t need more than 6.5 hours to feel refreshed and others need 9 hours.
 - Set an alarm so as to get up at the same time each day. Even if you had a sleepless night get up at the agreed time, you will increase your chances of having a good sleep the following night.
 - Avoid napping during the day. If you really want to have a *nap (15-30 minutes) during the early afternoon, you need to set the alarm clock so as to ensure you are not in bed for more than 15-20 minutes. Falling asleep in the early evening will decrease the chances of having a good night sleep.*

Stimulus control:

Stimulus control is designed to re-associate the bed/bedroom with sleep and to re-establish a consistent sleep-wake schedule. This is achieved by limiting activities that serve as cues for staying awake. The treatment consists of the following behavioural instructions:

- Eliminate non-sleep activities in the bedroom. Remove the TV and computer from the bedroom
- Use the bed and bedroom only for sleep (and sex); that is no ‘texting, eating, watching TV’ in bed.
- Establish a pre-bed routine such as brushing your teeth, putting your PJ on, listening to a relaxation application, drinking an herbal tea and then go to bed only when sleepy tired.
- If once you are in bed you are not asleep within 15-20 minutes, then get out of bed, go to another room and do something relaxing such as reading a book, listen to some soft music (no working or planning). As soon as you feel sleepy again, go back to your bed. Repeat this process as many times as needed until you fall asleep within the 15-20 minutes.

As with anything change takes time and having the information as to why it is of benefit can contribute to our motivation and likelihood to maintain a change. Aim for a small change and build from there-try not to feel overwhelmed and use it as an opportunity to be curious about what works for you.

Learning from the Session: How can I start to take better care of myself this week?

1. – Food

2. – Fluids

3. – Exercise

4. – Sleep

5.

6.

Session 2 Weekly Tasks:

- **Read through Session 2 in the booklet**
- **Keep a sleep diary - fill it in each morning on page 16.**
- **Start building in healthier changes, use the activities monitoring/scheduling to help with this on page 17.**
- **Try out some self-care activities to look after yourself (put them in your activity monitoring)**

SLEEP DIARY: Please fill in the diary each morning upon awakening.

Diary entries DATE I fill it in	E.G 12/12/ 2099						
What time did you rise from bed this morning?	8.45						
What time did you wake up this morning?	8.00						
What time did you go to bed last night?	10pm						
What time did you switch off the light intending to sleep?	11.30 pm						
How long did you take to fall asleep (once you switched off the light)?	45 min						
How many times did you wake up during the night?	2						
How long were you awake, in total, during the night after you first fell asleep?	1 hr						
Did you take any nap yesterday? If yes for how long?	Yes						
How many units of alcohol did you take yesterday?	3						
Did you take any sleeping tablets last night?	No						
If you smoke, did you smoke last night? (y/n) What time did you last smoke?	No						
How many tea/coffee/fizzy drink/hot chocolate did you have yesterday?	5						
Measuring the quality of your sleep:	****	****	****	****	****	****	****
How was your sleep? 0=very bad; 1=bad; 2=so-so; 3=good; 4= very good	2						
How rested do you feel this morning? 0=not at all; 1=little; 2=so-so; 3=quite; 4=very rested	1						

ACTIVITY MONITORING - Days of the Week

Time of Day	Wed	Thu	Fri	Sat	Sun	Mon	Tue
M o r n i n g							
After Noon							
Evening							
Bed time							

Session 3

The Link Between Mood and Activity: 'BACE' Goal Setting

Reversing the Vicious Cycle of Depression through Behavioural Changes

In Session 2 we have discussed the importance of taking care of our basic needs: a healthy diet, physical activities and sleep. This is to provide our bodies with the necessary ingredients for physical and emotional wellbeing. These activities represent the 'B' of 'BACE'

When we feel depressed, we stop doing many of the activities in our lives because we feel overwhelmed, or don't have the motivation or energy to do things. **It may be the last thing you feel like doing but increasing your activity level really CAN help you feel better.** Becoming more active has a number of advantages:

- Doing things you enjoy is likely to boost your mood in the long term
- Engaging in activities gives you a sense of achievement
- Activity actually makes you feel less tired
- Activity helps you think more clearly
- Activity increases social support from others

Having said this, it is important that you don't set yourself up to have expectations that are based on how you used to feel. Maybe you used to clean your whole house in a day, but now it might be a pretty big achievement to just vacuum one room.

A Balance of Activities - BACE

To stay well, there need to be a **balance of**

B - Body that is 'taking care of me' activities

A - Achievement (including chores) based activities

C - 'Closeness to others' based activities

E - Enjoyment based activities

We all need:

B - Healthy eating and physical exercise

A - A sense of achievement

C - Connect with people we like and who support and help us

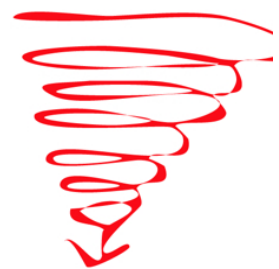
E - Do things that give us a sense of joy and pleasure

Last week we have monitored our daily activities using a weekly activity diary. By looking at it would you say that your activities during the past week have a good balance of BACE activities? If you think about your activities would you say there is a good balance of BACE activities?

The problem with
inactivity:

The less we do

the worse we feel



The worse we feel

the less we do!

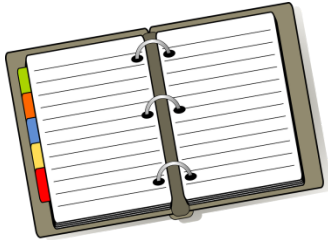
Activity scheduling

This section covers how to plan, or schedule activities, to boost your mood. Planning when, where and how an activity will happen makes it much more likely that it **will** happen.

For example: I want to go out more... (it is very vague and, does not state when, how or for how long)

Instead Try: I will go out three times a week: Every Monday I will meet a friend for coffee; Each Wednesday I will go to the library & Each Friday I will go swimming

No matter what it is you choose to do, by making a change to what you are doing at the moment, you are taking a step forward.



Points to Keep in Mind when Planning Activities

- Have I got a balance of ACE (Achievements/chores, Enjoyment & Closeness to others)?
- Have I included some self-care?
- What will help me remember to do things? Diary, phone reminders, calendar, post-it notes, lists, diary sheet
- Start small and build up – make one change at a time 😊



Sometimes it can be hard to think of an activity on the day, especially for activities that bring a sense of enjoyment or 'just for me' feeling. Here below there is a list of activities that you could use to start you thinking about what you could do. Look through the list and mark those activities that you think you might have enjoyed at one point, might have considered at one point or which you are willing to try. Don't expect to feel any great enthusiasm for any of them at the moment. The key to introducing activities is balance of both daily tasks and activities that are enjoyable; when you are struggling with depression, it is often the routine tasks that are prioritized, and pleasurable activities may not be thought about.

Fun activities catalogue

In the next page there is a list of activities that might be fun and pleasurable for you. Feel free to add your own fun activities to the list!

- Soaking in the bathtub
- Listening to my favourite music
- Buying household gadgets
- Reading magazines or newspapers etc.)
- Spending an evening with good friends
- Card and board games
- Eating
- Repairing things around the house
- Taking care of my plants
- Playing golf / football / squash
- Having discussions with friends
- Sex
- Singing around the house
- Going to my place of faith
- Going ice skating, roller skating/blading
- Sketching, painting
- Driving
- Going birdwatching
- Playing musical instruments
- Buying CDs, tapes, records
- Cooking, baking
- Sewing
- Discussing books
- Gardening
- Early morning coffee and newspaper
- Going to plays and concerts
- Refurbishing furniture
- Going bike riding
- Buying gifts
- Exchanging emails, chatting on the internet
- Going fishing
- Acting
- Cleaning
- Taking children places
- Going on a picnic
- Playing volleyball
- Going to the hills
- Solving riddles
- Seeing and/or showing photos or slides
- Doing crossword puzzles
- Dressing up and looking nice
- Lighting candles
- Getting/giving a massage
- Taking a sauna or a steam bath
- Doing woodworking
- Debating
- Having an aquarium
- Making jigsaw puzzles
- Having a barbecue
- Recycling old items
- Going for a walk or a jog or a swim
- Lying in the sun
- Hobbies (stamp collecting, model building,
- Meeting new people
- Going to the gym, doing aerobics
- Practising karate, judo, yoga
- Working on my car/bicycle
- Exercising
- Flying kites
- Having family get-togethers
- Going camping
- Arranging flowers
- Going to the beach
- Going to a party
- Doing embroidery, cross stitching
- Going to clubs (garden, sewing, etc.)
- Singing with groups
- Doing arts and crafts
- Watching sports
- Writing books (poems, articles)
- Going out to dinner
- Sightseeing
- Going to the beauty salon
- Playing tennis
- Listening to a stereo
- Watching my favourite TV program
- Walks on the riverfront/foreshore
- Travelling to national parks
- Photography
- Reading fiction
- Writing diary/journal entries or letters
- Reading non-fiction
- Dancing
- Mindfulness
- Having lunch with a friend
- Playing cards
- Having a political discussion
- Knitting/crocheting/quilting
- Shooting pool/Playing billiards
- Going to museums, art galleries
- Having coffee at a cafe
- Buying books
- Going skiing / bowling / canoeing / climbing
- Doing ballet, jazz/tap dancing
- Playing computer games
- Going horseback riding
- Playing with my pets
- Rearranging the furniture in my house

Goal Setting

Goals can help to motivate us but often we set goals that are too big or poorly set up. When we don't achieve our goals we can feel bad about ourselves, and this can contribute to the vicious cycle of depression. Goals can be short term, medium or long term. When set up properly they can give us a sense of achievement.

Good goals are S.M.A.R.T.(e.r.) goals

Specific – To set a specific goal you must answer the six “W” questions:

- ***Who:** Who is involved?
- ***What:** What do I want to accomplish?
- ***Where:** Identify a location.
- ***When:** Establish a time frame.
- ***Which:** Identify requirements and constraints.
- ***Why:** Specific reasons, purpose or benefits of accomplishing the goal



EXAMPLE: A general goal would be, “Get in shape.” But a specific goal would say, “Join the health club near my house, perhaps with my friend and workout 3 days a week (Monday morning, Wednesday evening and Saturday afternoon) for the next 3 months. This will help me to get more definition in my muscles and increase my stamina”

Measurable – Establish a way of measuring your progress towards each goal you set.

When you measure your progress, you stay on track, reach your target dates, and experience a sense of achievement that motivates you further.

To determine if your goal is measurable, ask questions such as.....

- How much?
- How many?
- How will I know when it is accomplished?

Achievable – You can attain almost any goal when you plan your steps wisely and establish a time frame that allows you to carry out those steps. Goals that may have seemed far away and out of reach eventually move closer and become attainable, not because your goals shrink, but because you grow and expand to match them. When you list your goals you build your self-image. You see yourself as worthy of these goals, and develop the traits and personality that allow you to possess them.

Realistic – To be realistic, a goal must represent an objective toward which you are both *willing* and *able* to work. A goal can be both high and realistic; you are the only one who can decide just how high your goal should be. A high goal may be easier to reach than a low one because a low goal exerts low motivational force. Some of the hardest jobs you ever accomplished actually seem easy simply because they were a labour of love.

Timely – A goal should be grounded within a time period. With no time frame tied to it there's no sense of urgency. If you want to lose 10 lbs, “Someday” won't work. But if you state a timeframe; “by May 1st”, then you've set your unconscious mind into motion to begin working on the goal. Your goal is probably realistic if you truly *believe* that it can be accomplished. Another way to judge if your goal is realistic is to ask yourself whether you have accomplished anything similar in the past, or what conditions would have to exist to accomplish this goal.

→ and don't forget that goals are easier when they are enjoyable! And of course we need to review and amend if necessary

Personal goals

Have a think about your personal goals. What would you like to be different? What would you like to achieve, perhaps by the end of the group sessions, or by the end of the year. Try to set one behavioural goal to increase activity over the next week. You can always choose from the list provided in this group if needed. Remember to make them S.M.A.R.T.e.r.!

Short Term Goals- over the next 2 weeks

Medium Term Goals- by the end of the group sessions

Longer Term Goals- by the end of the year, or next year

Learning from session

The main things I will take away from today's session

Session 3 Weekly Tasks:

- Read through Session 3 in the booklet
- Identify and write down your personal goals (p. 22) → you might find it helpful to use the prompts (p. 25) to ensure your goals are SMART
- Schedule what activities you wish to introduce in your week in your weekly activity scheduling (p. 23) & track your mood.
- Use your sleep diary if you are working on improving your sleep (p. 24).

	Days of the Week						
Time of Day	Wed	Thu	Fri	Sat	Sun	Mon	Tue
Out of bed							
Morning							
After Noon							
Evening							
In bed light off							

Rate each activity 0-10 for M = Mood,

SLEEP DIARY: Please fill in the diary each morning upon awakening.

Diary entries DATE I fill it in							
What time did you rise from bed this morning?							
What time did you wake up this morning?							
What time did you go to bed last night?							
What time did you switch off the light intending to sleep?							
How long did you take to fall asleep?							
How many times did you wake up during the night?							
How long were you awake, in total, during the night after you first fell asleep?							
Did you take any nap yesterday? If yes for how long?							
How many units of alcohol did you take yesterday?							
Did you take any sleeping tablets last night?							
If you smoke, did you smoke last night? (y/n) What time did you last smoke?							
How many fizzy drinks/hot chocolates did you have yesterday?							
Measuring the quality of your sleep:	****	****	****	****	****	****	****
How was your sleep? 0=very bad; 1=bad; 2=so so; 3=good; 4= very good							
How rested do you feel this morning? 0=not at all; 1=little; 2=so so; 3=quite; 4=very rested							

PROMPTS TO MAKE SMART GOALS

Goal Name:



Ask Yourself: Who? What? Where? When? Which? Why?



Ask yourself: How Much? How Many? How Will I Know When It is Accomplished?



Ask Yourself: How will I achieve this? What Steps Might I Need To Take?



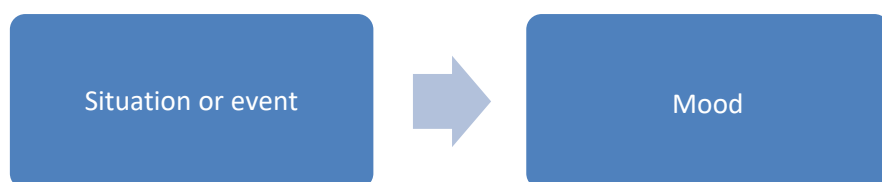
Ask Yourself: Am I Willing To Work On This Goal? Am I Able To Work On This? Will This Help You Achieve What You Want?



Ask Yourself: When Would I Like To Achieve This Goal/Step By?

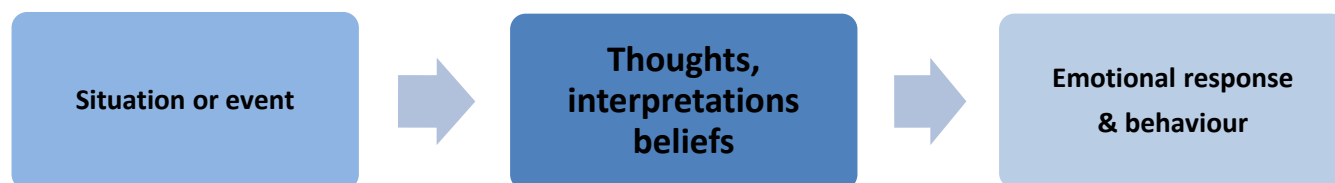
Session 4: Negative Thoughts and Unhelpful Thinking

Most of us believe that external events, situations and the behavior of other people cause us to feel emotions like, for example, anxiety, sadness or anger.



If this were true then everybody in a particular situation would react the same way, but we know that different people react differently. Think about this scenario: there is a young dog running in the park near a path. One person might look at the dog and feel quite happy, pleasant feelings; whilst another person might feel quite anxious and fearful. It is the same dog and yet we have a set of very different emotions (happiness vs anxiety and fear).

This suggests that it is the way that we think about, perceive or interpret the situation or others' actions that influences how we feel (and also how we behave).



The way we think in a situation, and how we make sense of it in our minds, is shaped by our previous experiences, our personality, and our underlying beliefs about ourselves, other people, and the world.

We tend to interpret new situations in line with beliefs and ideas that we already hold. However, they may not always be helpful to us, even if they were in the past.

Task:

what might these people be thinking? Have a go at filling in the boxes

SITUATION	Thought about what happened	Emotions	Behaviour
Say hello to a friend in town but they walk on past me and do not acknowledge me		Guilt/anxiety	Ask another friend for reassurance
		Concern	Phone them later to see how they are
		Anger	Decide not to bother talking to them again
		Sadness	Cry, remember all the time someone did not acknowledge me

Another example:

SITUATION	THOUGHT	EMOTION	
		BEHAVIOUR	
Car swerved in front of Bella's car at the roundabout and Bella had to break sharply	'Silly driver!! You should not be allowed to drive!!'	Angry	Beeped horn, wound down the window and shouted
		Anxiety/Fear	
		Relief	
		Neutral	

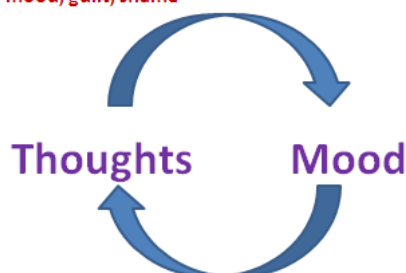
Key Message:

The way that we think about / interpret the situation influences how we feel emotionally and how we behave / react.

Thoughts vs. Facts

When we have a thought, we tend to just accept it as true without considering how realistic or helpful it is. But sometimes we can “jump to conclusions” or form a judgement about a situation without having all the facts. Sometimes we can form an opinion based on things that have happened to us in the past, which may not be relevant to the present. We all do this at times. When we are feeling ok our mind can consider alternative thoughts such as ‘perhaps they didn’t hear me, or they were thinking about something else and didn’t realise I was speaking to them’. If we are already feeling down or anxious or angry, our mind assumes that there are no alternatives: our thought must be the truth! We tend to go for the negative thought or get stuck in habitual patterns of thinking. This affects our mood, which in turn makes it harder to think of alternatives, leading us back to our vicious cycle.

Negative or self-critical thoughts lead to low mood, guilt, shame



Low mood results in more negative thinking
Less rational, more generalised

The good news is that by becoming more aware of our automatic negative thoughts (NATs), we can take steps to change them.

We can learn to notice & examine our negative thoughts so as to replace them with more helpful, balanced thoughts, which in turn helps us to improve our mood, and to behave ways that are more helpful for us. → **This helps to create a “virtuous” circle, rather than a “vicious” one.**

Identifying and Recording Your Thoughts

CBT helps people to see how their thoughts and behavior interact in helpful or unhelpful ways. The first step is learning to identify our thoughts, emotions and behavior when we are faced with situations (everyday situations). This is easier said than done. Often the feelings seem like they just happen, and, therefore, we need to learn to be like detectives, asking ourselves questions such as: ‘what was going through my mind when I started feel down?’, ‘and what did I do then?’. The following steps can help with this process.

1. Identify the situation
The situation or trigger which occurred just before we noticed the shift in mood. [e.g. thinking about yesterday at work when my colleagues did not reply]
2. Identify the emotions
Sadness/Anger/Anxiety/Guilt/Fear/ etc. (one word for each emotion, we can have lots of different emotions at the same time – just use one word for each of them)
Rating how strong our emotion(s) is felt. How strong was it between 0 and 10 (10 the strongest)? [e.g. sadness= 7; anxiety= 5; shame= 8]
3. Identify the thoughts
‘What was going through my mind when that happened, and I noticed a shift in my emotion?’
Remember that it could be thoughts but also images. [e.g. I am really stupid; image of being asked questions and not knowing how to reply; my partner raising their eyes when I speak]
4. Identify the behaviour
‘When I noticed the shift in my emotion: what did I do?’ [e.g. shouted; cried; open the fridge and got a sandwich, did not answer my friend’s call]

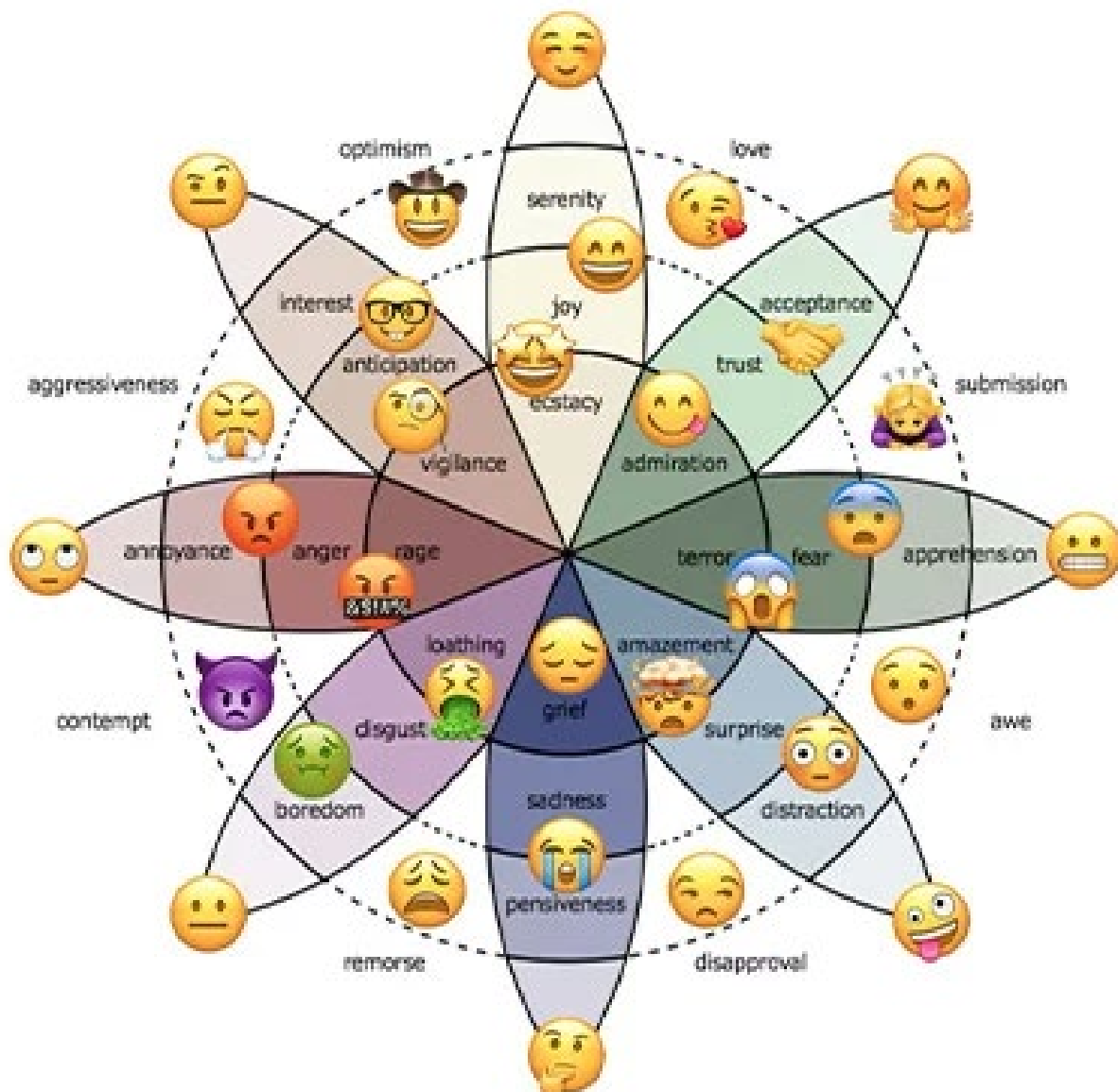
Using a Thought Record Form

When you notice a change in your mood, try to write down a brief description of the situation (event), how you were feeling emotionally (mood), what was going through your mood (thoughts), and what you did, or avoided doing (behavior).

Thought Record Form			
Situation	Emotion/Mood	Thoughts, images	Behaviour
Example Sitting down watching TV and I see dust under the TV table	Sad 8/10 Guilty 6/10	Look at that dust! I am such a slob. I should have cleaned the sitting room. I always say I would tidy up and I never do. I am so useless I cannot even clean my house.	Quickly swept under the table, watched TV until late, had a tub of ice-cream, think about all the things I have not done.

Identifying Emotional Feelings

It can be hard to identify our emotions/feelings. The following 'feeling wheel' may help.



Unhelpful Thinking Styles

When we start recording our thoughts, we are likely to notice there are themes or patterns in our thinking. 'UNHELPFUL THINKING STYLES' are ways that our thoughts can become biased. As we have already discussed, we human beings are continuously interpreting the world around us, we are trying to make sense of what is happening. Sometimes we take 'short cuts' when we try to make sense of something that has happened using 'thinking styles' to reach conclusions. In so doing we can make interpretations that are not completely accurate and we can jump to the wrong conclusions.

Mental filter

This pattern of thinking means that we get tunnel vision and only focus on one part of the situation ignoring the rest. Typically, this means focusing on the negatives and not seeing the whole picture. A bit like a tiny drop of ink in a glass of water.

For example: _____

Fortune telling

We make predictions about what will happen. These predictions are never positive.

For example: _____

Mindreading

We assume we know that people are thinking and again this is never positive.

For example: _____

Catastrophising

This occurs when we blow things out of proportion; we view the situation as terrible, awful, and dreadful and often fail to focus on how we can solve it.

For example: _____

Personalisation:

This involves blaming yourself for everything that goes wrong or could go wrong even if you are not responsible or only partly responsible.

For example: _____

All or Nothing Thinking / Dichotomous thinking

When we think in terms of extremes e.g. I'm a success or a failure. Thinking this way means that we don't take into consideration any shades of grey.

For example: _____

Shoulds / Musts / Shouldn't / Mustn't

Saying 'I/they should' or 'I/they must' puts unreasonable demands or pressure on us and sometimes on other people. We need to check that these are realistic expectations

For example: _____

Overgeneralisation

When we overgeneralise we take one instance in the past or the present and apply it to all current and future situations. Indicators that we are overgeneralising are when we use terms like 'always', 'everyone', 'never'.

For example: _____

Emotional Reasoning

This involves basing our view of a situation or ourselves on the way that we are feeling.

For example: _____

Saying I know it's going to be bad because we feel like it will be bad.

Magnification/Minimisation

We magnify positive qualities in others but minimise our own.

For example: _____

Memories

Upsetting memories from the past are triggered by a present-day situation. These reminders of the past bring up difficult emotions in the present.

For example: _____

Critical Self

Putting yourself down, blaming yourself for things that have not worked out, being your own worst enemy.

For example: _____

Compare and Despair

Comparing ourselves negatively against others. We magnify positive qualities in others but minimise our own.

For example: _____

Learning from session

The main things I will take away from today's session

Session 4 Weekly Tasks:

- **Read through Session 4 in the booklet**
- **Read the 'unhelpful thinking styles' and write down the ones that I think I particularly use (pages 29 to 31)**
- **Record my negative thoughts and unhelpful thinking styles (page 32 and 33)**

Thought Record Form: Use this form to record examples of your thinking. Draw a line under each one to separate them

Situation (what, where, when, who was there)	Emotions (1 word for each emotion. Rate intensity out of 10; 10 = the most)	Thoughts (what was going through my mind when I started to feel this emotion(s))	Negative Thinking Styles (list all you can identify by reading the thoughts you wrote)	Behaviour (what did you do, or avoid doing when you felt that emotions)

Thought Record Form: Use this form to record examples of your thinking. Draw a line under each one to separate them

Situation (what, where, when, who was there)	Emotion (label your feeling and rate intensity out of 10)	Thoughts (what was going through your mind just before you started to feel this way)	Thinking Styles (catastrophising, mental filter, shoulds/musts)	Behaviour (what did you do, or avoid doing)

Session 5: Alternative, Balanced Thinking

The key to changing the way we feel is to learn to re-evaluate our thoughts. Instead of just accepting that what we are thinking must be the true, we must learn to check them out: is there evidence to demonstrate that our thoughts are accurate? Is there evidence showing that our thought/interpretation is not completely (or even not at all) accurate?

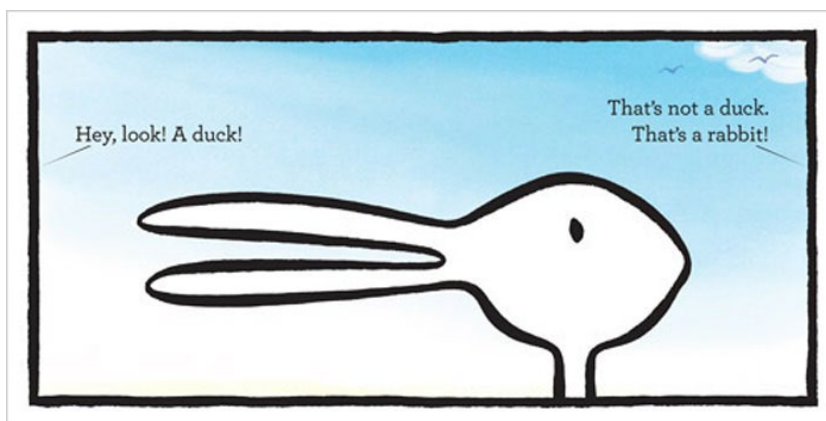
*“Hot” Thoughts *

Often there will be lots of thoughts going through our mind, like a train of thoughts. Fortunately we are not required to gather evidence to re-evaluate every single thought. Usually we can identify a main thought that links most closely to our emotion and is usually the most hurtful/distressing. We call this thought a “**hot thought**”.

Once we have identified the ‘HOT’ thought among all our other thoughts we need to ‘check it out’: Is it a factual description of the situation? If not how can we change it to stop our emotion spiralling downward?

To help us re-evaluate our thoughts we can ask a number of questions

- What is the evidence supporting my ‘hot’ thought?
- Is there any evidence that does NOT support my ‘hot’ thought?
- Are there any other explanations for this situation?
- How might someone else view this situation?



- What might someone who cares about me tell me if they heard me thinking this way?
- What might I tell someone if I heard them thinking this way?
- How would I have thought about this before I was feeling down?
- What is the likelihood that this will happen?
- What is the worst that will happen?
- How can I cope if the worst does happen?

To recap:



Step 1: Identify the thoughts you were having in the situation

Step 2: Find the “hot” thought

Step 3: Find factual evidence supporting and NOT supporting the thought

Step 4: Amend the original thought by taking into consideration the gathered evidence

When gathering evidence (both evidence supporting and not supporting the ‘hot’ thought, it is important to ensure the evidence is factual and not a ‘feeling’ or an opinion. For example by looking at the blue sky and sun, the description ‘it is a sunny day’ would be factual whether ‘it is a lovely, happy sunny day’ expresses an opinion (for some people it is lovely but others don’t like the sun).

The final step is to come up with a balanced viewpoint, based on all the facts we have in front of us. This is an alternative to our original, “hot” thought. Consider the following analogy:



The Traffic Accident

When there's a traffic accident, police ask for witnesses to come forward and describe what happened. They like to have as many witness statements as possible so that they can build up enough evidence to give them a broader, more realistic version of events. In a traffic accident, there will be many different perspectives on what happened. The driver of one car will have one view, another driver or a passenger will have yet another view. Each onlooker who witnessed the accident will have a slightly different perspective, depending on where they were, how far they were, how good a view they had, what else was going on, how much danger they felt they were in, how the accident affected them, what the accident means to them.

It's the same principle with everything - each situation, event, conversation, means something different to all those involved, and also to those not involved.

(Vivyan 2009, taken from www.get.gg)

The alternative, balanced thinking is like putting all the different perspectives together to come up with the most accurate, rational and helpful view.

You can use one of the 2 templates here below to challenge your Negative Automatic Thoughts, please use the one which you prefer.

CHALLENGING MY NEGATIVE THOUGHTS

Situation (where/when/what/who with) :

My negative thought was:

Unhelpful thinking style:

My mood (score out of 10, 10 the most):

What evidence supports my thought?

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What evidence does NOT support my thought?

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By looking at all the evidence how can I transform my thought so that it is more helpful to me?

Although I thought that..

the evidence shows that..

Thought Diary for Re-evaluating Thoughts

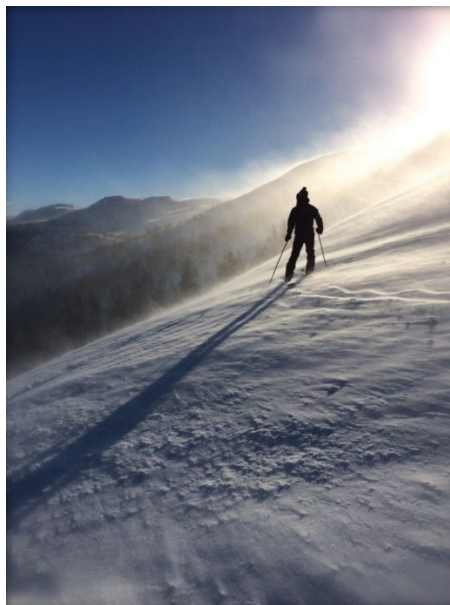
Situation (what, where, when, who)	Emotion (label and rate out of 10)	Thoughts What was going through your mind? Circle "hot" thought	Evidence Supporting Hot Thought	Evidence Contradicting Hot Thought	Alternative, balanced perspective	Re-rate Emotions

Learning from the session:

Session 5 Weekly Tasks:

- **Read through Session 5 in the booklet**
- **Using the thought record on page 36 or page 37 practice identifying the evidence for and against your “hot” thoughts and Write down an alternative, more balanced thought**
- **Continue with your activity scheduling**

Change takes time, remember the Ski Slope Analogy



... and remember that the more you put in the better outcome you get

Session 6: Challenging my negative thoughts: troubleshooting

*Help! I've completed a couple of thought record forms and I don't feel any different.
My mood is still the same 😞*

If there is no change in your mood after completing a thought record form, ask yourself the following questions....

- **Have I described a specific situation?** (a lot of times we make a composite of past situations, we need to focus at one situation at each time)
- **Did I accurately identify and rate my moods?** (did I miss out a mood? Many times we have more than one feeling.. so it is important to write down all the ones I am feeling and rate each of them. This will also help me guide when I look at the hot thoughts)
- **Am I targeting the hot thought for the mood I want to change?**
- **Did I identify multiple “hot” thoughts?** If so, I may need to gather evidence supporting and/or contradicting each one before my mood changes. Remember to do one challenge and re-frame sheet for each ‘hot’ thought you have identified.
- **Is there a “hotter” thought that I am missing here?** Try to get at the deeper meaning by asking yourself: A) what is so bad about it? and B) what does that say about me?
- **Did I write down all the evidence that I could think of?** When we start challenging our negative thoughts, we are often very good at finding evidence which support our thought and we dismiss or cannot think of pieces of evidence NOT supporting such thought. There needs to be several pieces of evidence contradicting the hot thought before developing an alternative, balanced perspective.
- **Did I review the evidence supporting my hot thought?** Once all evidence is written down, go back to each piece of evidence and ask yourself: ‘is this an opinion or a fact?’ If they are just my opinion, they may be more examples of “wonky thoughts”.
- **Is my alternative thought believable to me?** If not, review the evidence again and try to write something that seems more credible to me.

Sometimes it takes a while for us to start believing our newer way of thinking. Try acting “as if” you believe it and see what happens.

Session 6 Weekly Tasks:

- **Read through Session 5 & 6 in the booklet**
- **Continue challenging your negative thoughts using the thought records available on pages 36 & 37 (Choose the format that is most helpful).**
- **Use the tips in session 6 to help you gather the evidence to reframe your original negative thought**
- **Review your goals and progress**
- **Think about what techniques you find useful/difficult/easy/.. (it might be useful to fill in page 41 of the next session)**

Session 7: Challenging Unhelpful Thinking Styles

We are now half way through this course, which is seems like a very good time to pause and think about my progress.

What have I learnt so far?

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.....
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What techniques or strategies have I found helpful?

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What changes have I been able to make?

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What progress have I made towards achieving my goals?

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Are there any problems that I still have trouble with?

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.....

What would I like to achieve by the end of this group?

.....
.....
.....
.....

Changing Unhelpful Thinking Styles

In session 4 we have learnt that there are a number of unhelpful thinking styles which can impact negatively on our thinking and mood. Once we become aware of the unhelpful thinking styles, we can learn ways to challenge them. As usual the idea is to move from unhelpful negative thinking to a more balanced and realistic thinking.

Mental filter

This pattern of thinking means that we get tunnel vision and only focus on one part of the situation ignoring the rest. Typically this means focusing on the negatives and not seeing the whole picture. A bit like a tiny drop of ink in a glass of water.

Challenge:

- **The most important rule for challenging mental filtering is to look for balance.**
- **Look for the opposite of what you filter for**
- **Am I only noticing the bad stuff?**
- **Am I filtering out the positives?**
- **Am I wearing gloomy specs?**
- **What would be more realistic?**



Fortune telling

We make predictions about what will happen. These predictions are never positive.

Challenge:

- **Am I thinking that I can predict the future?**
- **How likely is it that it will really happen?**
- **If I were really able to predict the future, why am I not coming up with the lottery numbers?**

Mindreading

We assume we know that people are thinking and again this is never positive.

Challenge:

- **Concentrate on being specific and accurate**
- **The only way to know others opinions is to ask them**
- **Am I assuming I know what others are thinking?**
- **Are those my own thoughts rather than theirs?**
- **Do not confuse “*intuition*” with guessing.**
- **What else could they be thinking?**
- **Accept that everyone has a right to their own thoughts and opinions-we can only control our own thoughts**

Catastrophising

This occurs when we blow things out of proportion; we view the situation as terrible, awful, and dreadful and often fail to focus on how we can solve it.

Challenge:

- **Ask yourself what hard evidence supports my conclusions?**
- **Can I adopt a more accurate perspective on the event?**
- **What are some less terrible conclusions I can make about the event?**
- **What practical steps can I take to deal with the situation?**
- **What’s most likely to happen?**

Personalisation

This involves blaming yourself for everything that goes wrong or could go wrong even if you are not responsible or only partly responsible.

Challenge:

- **What else/who else shares responsibility for what happened?**

All or Nothing Thinking /Dichotomous thinking

When we think in terms of extremes e.g. I'm a success or a failure. Thinking this way means that we don't take into consideration only the 2 opposite extremes, we do not consider the nuances in the middle.

Challenge

- **Instead of describing yourself/your life in all or nothing terms, describe specific points (all, a little, not much,..).**
- **Consider use of percentages when describing or a scale or continuum**
- **Where is this on the spectrum?**



Shoulds/Musts

Saying 'I/they should' or 'I/they must' puts unreasonable demands and sometimes on other people. We need to check that t expectations.

Challenge

- **Am I putting more pressure on myself setting up expectations of myself that are almost impossible?**
- **What would be more realistic?**

Overgeneralisation

When we overgeneralise, we take one instance in the past or the present and apply it to all current and future situations. Indicators that we are overgeneralising are when we use terms like 'always, everyone, never'.

Challenge

- **Catch yourself using absolute terms such as 'all', 'every', 'none', 'nobody', 'everybody', 'never', 'always'. For example: if you said 'I always burn my toasts' → ask yourself 'Always? Or sometimes? Can I think of times when I did not burn the toast?'**
- **What evidence have I got for that conclusion?**
- **Do I really have enough data to make this a rule?**
- **What other conclusion could this evidence support? What else could it mean?**

Emotional Reasoning

This involves basing our view of a situation or ourselves on the way that we are feeling. Saying I know it's going to be bad because we feel like it will be bad.

Challenge

- **Avoid using emotional words about self when viewing situations. E.g. "I am so anxious therefore I am bound to fail/not be able to cope/not pass".**
- **"I feel helpless...therefore I am helpless"**
- **Look for underlying thoughts that create the feelings i.e. challenge the thoughts creating the emotion.**

- **Just because it feels bad doesn't necessarily mean it is bad.**
- **My feelings are just a reaction to my thoughts**

Magnification/Minimisation

We magnify positive qualities in others but minimise our own.

Challenge:

- **People are all individuals, with unique combinations of strengths and weaknesses.**
- **Concentrate on affirming your own right to be exactly as you are, without apology or judgement**
- **Am I exaggerating the bad stuff?**
- **How would someone else see it?**
- **What's the bigger picture?**



Memories

Upsetting memories from the past are triggered by a present-day situation. These reminders of the past bring up difficult emotions in the present.

Challenge:

- **This is just a reminder of the past**
- **That was then and this is now**
- **Even though this memory makes me feel upset it's not actually happening again**

Critical Self

Putting yourself down, blaming yourself for things that have not worked out, being your own worst enemy.

Challenge:

- **There I go that internal bully is at it again.**
- **Would most people who really know me say that about me?**
- **Is this something that I am totally responsible for?**

Compare and Despair

Comparing ourselves negatively against others. We magnify positive qualities in others but minimise our own.

Challenge:

- **Am I doing that compare and despair thing?**
- **What would be a more balanced and helpful way of looking at it?**

Session 7 Weekly Tasks:

- **Read through Session 7 in the booklet.**
- **Practice identifying and challenging your own unhelpful thinking styles (page. 45).**
- **Continue using your thought diary (pages 36 or 37) to gather the evidence to challenge negative thoughts and develop a more balanced thought to replace it.**

Unhelpful Thinking Style	Example:	Challenges

Session 8

Our Underlying Beliefs, Assumptions and Rules

Understanding our Beliefs

So far, we have been concentrated on “negative automatic thoughts (NATs)”- those thoughts that pop into our heads as we go about our daily lives. We are often very aware of our NATs and we have learnt in the previous sessions to recognize them when we notice changes in our mood (asking ourselves the question: what is going through my mind?). We have learnt that by altering these thoughts we can make a big impact on how we feel, and what we do (behaviour).

These NATs are driven by our underlying beliefs about how we see ourselves, other people and the world around us. These underlying beliefs (we name them ‘core beliefs’) usually develop over time and have been influenced by our individual experiences, observations and interactions with others in our immediate world. While they are often rooted in childhood, this is not always the case and they can develop after significant experiences in adulthood. Our beliefs help explain why in a particular situation our thoughts and therefore our feelings and consequent actions might be different to someone else’s.



Rucksacks -

It seems that we all carry our own rucksacks on life’s journey. In our rucksack we carry our life’s experiences and expectations, and these influence the way we are, what we do, and what we make of our life and how we go about it. Our rucksack – and what we carry in it - affects the way we think, feel and act: towards ourselves, towards others, and towards life in general.

If we think about our problems as a result of our own “rucksacks”, we can take the problem(s) outside of us, which makes it easier to change things in a positive way. Before we can make those helpful changes, we need to understand more about our personal rucksack, and how it affects us.

→ Think about what is in your rucksack- past experiences, memories, beliefs, expectations, rules for living, assumptions etc.

→ What does your rucksack look like? What colour, shape, size, weight, fastenings, straps, and material does it consist of?

Core Beliefs

Core beliefs are about the SELF, OTHERS and THE WORLD. They can be both positive (e.g. I am fair) and negative (I am stupid, I am not good enough).

We all have core beliefs, although we may not be aware of them.

They are based on our early interpretation of messages received and events during our childhood (and also later in our lives) from the people who matter the most to us.

These are deeply ingrained and when activated can cause very strong emotions! They are deeply rooted convictions. They become the lens through which we view **ourselves, others and the world around us**. They often cause us to think critically and negatively of ourselves or others.

Core beliefs rule us until we bring them into consciousness and begin to challenge them.

A list of Common Negative Core Beliefs:

[note that core beliefs look like absolute statements: “I AM... “; “I AM NOT ...” (they are about ‘being’ - not about ‘doing’)]

I am helpless	I am not good enough
I am powerless	I am unlovable
I am out of control	I am unlikeable
I am weak	I am undesirable
I am vulnerable	I am unattractive
I am needy	I am unwanted
I am trapped	I am uncared for
I am inadequate	I am bad
I am ineffective	I am unworthy
I am incompetent	I am different
I am a failure	I am bound to be rejected
I am disrespected	I am bound to be abandoned
I am defective	I am bound to be alone

Dysfunctional Assumptions / Rules for Living

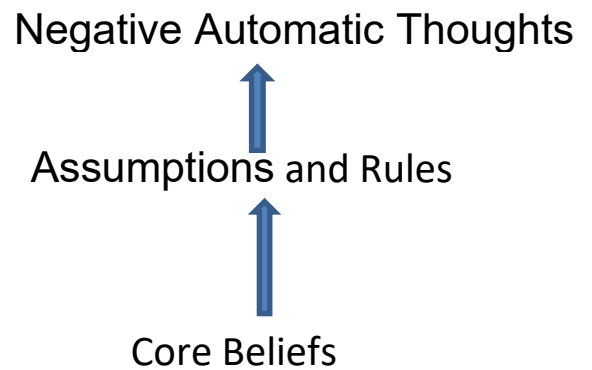
Dysfunctional assumptions (another name is ‘rules for living’) are a set of rules and expectations that we set for ourselves (and sometimes for others). For example:

- I must**always put others’ needs before my own.
- If** I do not do everything perfectly **then** I am a failure.
- I should never make mistakes

As long as we are living our lives in accordance with these rules, we feel ok. But because these rules tend to be unrealistically high and unachievable, they are often not met, at times we cannot do anything but break them. Whenever we are unable to meet our rules for living → NATs (automatic negative thoughts) ‘pop’ into our heads and distressing emotions such as guilt, shame, anxiety and sadness flood us.

So... why are these rules developed? Let’s remember that many rules we have (for example: do not cross a busy road when the traffic light is red) are there to help us be safe and content. So even these unrealistically tough rules were developed to try and shield us from our underlying negative core beliefs.

Imagine a tree.....



A tree can be a helpful analogy. Negative automatic thoughts are like the leaves, they are the easiest to access, and there may be many of them. Assumptions and rules are more substantial, and support the growth of thoughts. Core beliefs are like the roots of the tree: they are deeply held, and may be more difficult to access. They feed assumptions and thoughts (trunk and leaves) and at the same time they are protected by the assumptions (trunk) and get strength from the negative thoughts (leaves), much like roots sustain a tree the leaves and trunk keep the roots going.

Example: Julie and Ben. By reading a short summary of their lives: What core beliefs and rules for living might Julie and Ben hold for themselves?

Julie's family moved around a lot when she was growing up, and she changed schools and areas several times. Julie found it difficult to make friends because she was always the new girl, and the other children had already formed their friendship groups. Julie's older sister was very bright and academically gifted. She was always being praised by their teachers, and in turn by their parents. When Julie left school she did not go to college because she didn't believe she was good enough. Julie started working in an office but often thought that her colleagues did not like her, and that her boss thought she was useless. She tried to do her very best, and often worked late. She would volunteer to help her colleagues whenever possible and always took on the least enjoyable tasks that no one else wanted.

Core beliefs:

Rules for living:

Ben's father was very critical and controlling. Ben was often hurt by his father's behaviour towards him, but if he showed his emotions, his father would make fun of him. Ben is now a successful business man but has a reputation for being ruthless. He works very long hours and sets extremely high standards for himself. He would like to settle down and maybe get married, but his relationships never seem to last. His work tends to take up most of his time.

Core beliefs:

Rules for living:

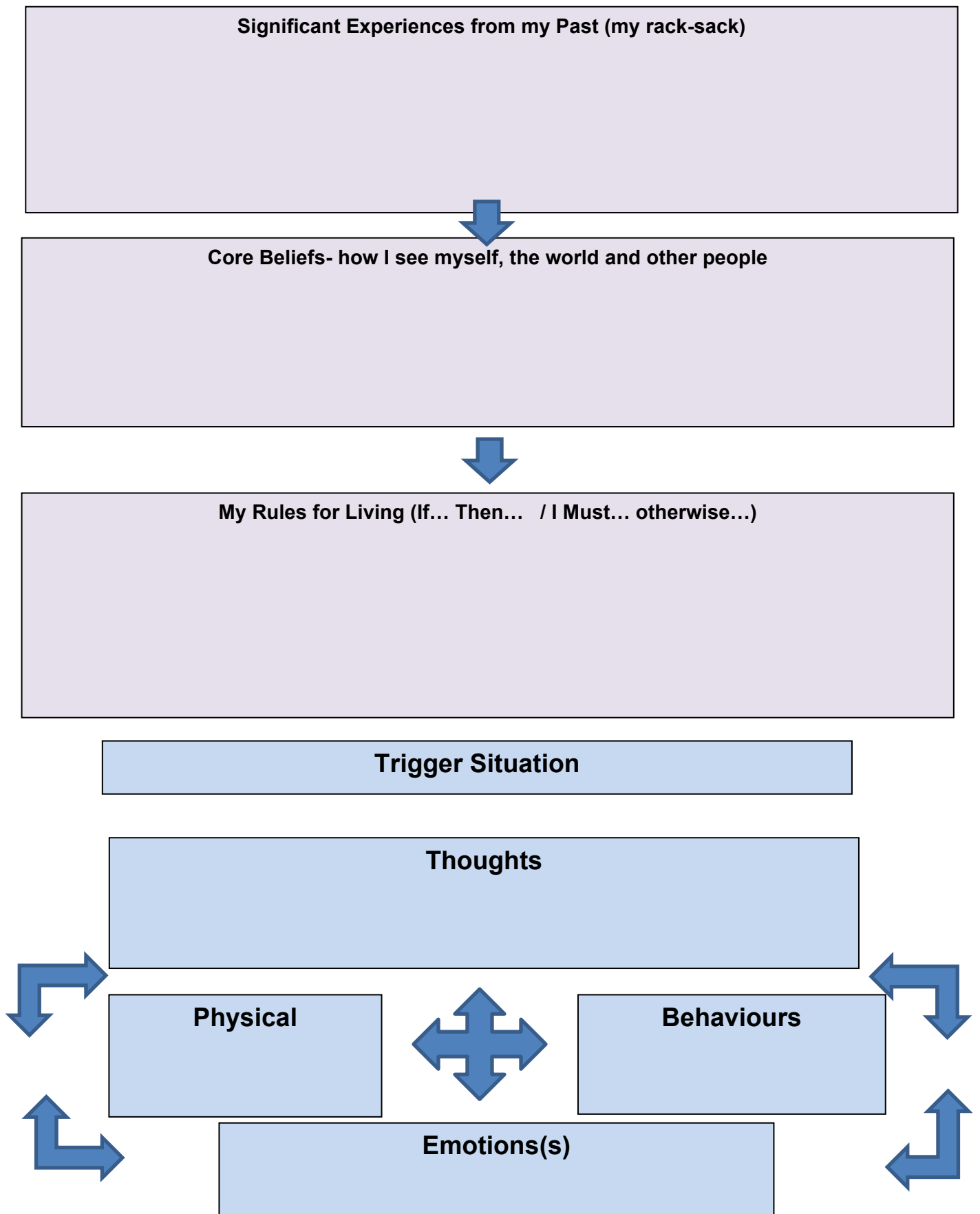
Learning from this session:

.....
.....
.....
.....
.....

Session 8 Weekly Tasks:

- **Read through Session 8 in the booklet.**
- **Read Julie and Ben vignettes and identify what rules for living and beliefs they might have (page 48 & 49)**
- **Identify my core beliefs**
- **Optional Start building 'my own tree' (also referred as 'formulation' page 50)**

Putting it all together: My Own Tree (Formulation)



Session 9: Challenging Core Beliefs & The Importance of Recognising Positive Data

In session 8 we discussed that our core beliefs are held deeply within us and most of them have been with us for a very long time.

If we 'have to believe' in the story they tell us over a long period of time that it is normal to ask ourselves:

- ➔ How is it even possible that my core beliefs about myself are in fact false? Remember the rucksack? Core beliefs are most often formed in childhood, they are formed through child eyes. Does a child (or a teenager) process information the way an adult does? Is a child easily convinced and made to believe something that is not true? (most of us believed in unicorns and Santa when we were children...)

Now that we have challenged the idea that core beliefs must be correct and true, we can also consider that **'if core beliefs are not true then I don't have to believe them. And most importantly they can be modified!'**

The work you have been doing on changing your NATs (negative automatic thoughts) together with changing your behaviour, will have already started to help chipping away at your negative core beliefs.

Challenging Core Beliefs

We can develop alternative core beliefs. Like setting up a new file in your mind, followed by gathering and saving the evidence to strengthen updated belief. To identify an alternative belief, think about the opposite (but balanced) to the original core belief eg, **'I'm unlovable'** would become **'I'm loveable'**. Or **'I am good for nothing'** would become **'I am good enough'**.

To develop alternative, more balanced core beliefs we use a 'continuum sheet' (pp 53 & 54)

Here are the steps:

1. Write down your core belief that you wish to challenge
2. Write how much you believe it to be true between 100% to 0%
e.g. "I am unlovable" – I believe this 85%
3. Write down the opposite of your core belief (i.e. I am lovable)
4. Rate how much you believe the opposite of your core belief
e.g I believe 15% that I am lovable
5. Write down a list of all the qualities /attributes of a person that would be labelled with the opposite core belief. To gather the attributes of such person you can google it or ask others if you can think of only a few attributes. Remember this is not about whether you have such qualities.
e.g. The attributes of "a lovable person" are: kind, caring, funny, loving etc..
6. Once you have written the list of the qualities, read each of the qualities and rate how much you believe you have such qualities
(e.g. kind 75%, caring 70%, funny 50%, loving 90%, ..)
7. Make an average rate of the qualities (sum up all the ratings and then divide this total by the number of qualities.
In our example: $[75+70+50+90] = 285$, $285/4=71 \rightarrow 71\%$ is my average.

- Now look back at your rating on how much you believed the opposite of your core belief and compare it with the rating when you look at the qualities making up 'being lovable'

In the example, We started with "I am lovable – believed 15%" but when we look at what it means to be lovable (the attributes of being a lovable person) we realised that the outlook is very different → 71% !!!
 From now, whenever feeling 'unlovable', it will be important to remind yourself that you have the qualities (71%) of someone lovable. By continuing reminding ourselves of the attributes showing that our old core belief is not completely (or at all) true, we will learn to believe in the more balanced and realistic one.

Positive Data Logs

Although most of us can easily notice and remember situations around us that may reinforce our core beliefs, most of us don't spend time thinking about the positive experiences that we have each day. Many times we forget or dismiss them. Positive experiences may be obvious, e.g. someone paying us a compliment, or more subtle, e.g. a pet being pleased to see us or a stranger smiling at us. Keeping a positive data log of these experiences can help us to acknowledge the positive things happening around us. Noticing positive experiences is the first and very important step to gathering evidence. Thereafter we can begin to think about what these experiences say about us.

For example:

Positive experience

I was on time for work
 My friend laughed at my joke
 I grew some vegetables
 I visited my elderly neighbour

What it says about me

I am punctual
 I am humorous
 I am a good gardener
 I am helpful and considerate

Learning from this session:

.....

Session 9 Weekly Tasks:

- . Read through Session 9 in the booklet (Reading session 8 again, would be especially helpful, particularly the information on core beliefs)
- . Choose a core belief you wish to challenge and complete the continuum sheet (pp. 53-54)
- . Keep a Positive Data Log. Write something positive every day (page 55)

Core Beliefs Continuum

My Core Belief:

I believe it (0-100%) →

Opposite of Core Belief:

I believe this to be true (0-100%):

What attributes a person who is (write the opposite of your core belief) **have?** (e.g. A lovable person has the following attributes)

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
- 14.
- 15.
- 16.
- 17.
- 18.
- 19.
- 20.
- ..

Now that you have written down all the attributes you can think of that 'opposite' of your core belief (tip: you can google or asking friends and family to suggest some attributes as well)

1. → Go back to the list and rate how much you feel you meet it each of the attributes in the list (out of 100%).
2. → make an average percentage of all your attribute ratings (tip: to make the average sum up all the scores of the attributes and divide the total by the number of attributes)
3. → Compare this average score to your originally scored opposite core belief
4. → Read the list of attributes you have compiled every day, so as to remembering you have them!

Positive Data Log

Situation/experience/comment	What this says about me
e.g. my friend called me	I am cared for, I am remembered

Session 10: Challenging unhelpful rules for living (assumptions) and creating more helpful ones

In sessions 8 we discussed that Rules for Living/Assumptions guide our behaviour and how we live our lives.

Whilst unhelpful rules for living are very rigid (ex: I should never make mistakes) and if not met or broken they lead to negative thoughts about ourselves, other rules can also be helpful e.g. Don't cross the road when there are cars speeding, it's busy or the traffic light is showing red.

A key difference between unhelpful and helpful rules is:

→ **Helpful rules for living are flexible (rather than rigid).**

Notice the difference between:

'I will try my best to do a good job' and

'I must always do a good job/a perfect job'



→ **Unhelpful (Dysfunctional) Assumptions and Rules are: rigid, unrealistic, or excessive**

For example:

'I must do everything perfectly (otherwise I am a failure)'

'I must keep others happy (otherwise they will reject/abandon me)'

'If people get to know the real me then they will dislike me'
(must always appease people)

'If I have a relationship then I will end up getting hurt'
(must keep people at arms length)

Do you remember in Session 8 Julie and Ben?

Check out what rules for living we identified by reading their stories.

We have discussed how rigid and inflexible '*Rules for Living*' are and the impact they have on our behaviour (what we do), how they can control our lives and (especially when we cannot live by the rule) the emotional fallout from negative thoughts.

Imagine finding a way to adapt rigid rules so they work for us rather than 'bullying us'.

Updating my own Rule or Assumption

Choose one of your rules that you would like to challenge and adapt.

1. How is this rule impacting on your life?
2. Where did this rule come from?
3. In what way is this rule unreasonable?
4. What are the disadvantages of this rule?
5. What are the advantages of having this rule?
6. What might be a more balanced rule / a rule that would work for you?

Behavioural Experiments

- . Behavioural experiments are planned activities that test our rules for living (assumptions) in everyday situations.
- . They can help test how accurate the rule and assumptions is and provide the evidence to develop an updated more flexible rule

REMEMBER THAT →



Session 10 Weekly Tasks:

- Read through Session 10 in the booklet.
- Design & Action your own behavioural experiment using the sheet on page 58.
- Continue to keep and apply your positive data log diary (page 55).
- Using the daily thought diary (page 54) apply the positive evidence you have captured to help update your core beliefs.

Behavioural Experiment Worksheet

Prediction -- What is your prediction?

What do you expect will happen?

How would you know if it came true?

Rate how strongly you believe this will happen (0-100%)

Experiment -- What experiment could test this prediction? (where & when)

What will you be doing differently?

How would you know your prediction had come true?

Outcome --What happened?

Was your prediction accurate?

Learning -- What did you learn?

How likely is it that your predictions will happen in the future?

Rate how strongly you agree with your original prediction now(0-100%):

Session 11: Another Area of Difficulties Common in Depression: Anxiety

What is Anxiety?

Anxiety is the body's natural response to a perceived threat, or danger. Everybody experiences anxiety, worries and fears from time to time. Anxiety and fear are not dangerous and in many ways act to keep us safe. Our fear response (also called the Fight/Flight/Freeze response) helps us react quickly when we are faced with danger. Therefore, some anxiety when faced with threatening situations is natural. However, some people experience high levels of anxiety which does not match the level of threat and/or feel anxious very often as they perceive the environment as full of dangers.

It is important to notice that threats come in different forms.

- Physical threat: an individual trying to punch you; threatening you by telling you they are going to punch you;
- Mental threat: a criticism, the possibility of a criticism

The primitive part of our brain (which reacts quickly to threats so as to keep us alive) cannot distinguish between Physical and Mental threats. It switches on to try to protect us.

This is why you may react by wanting to run away even when there is nothing to run away from or by getting all ready for a confrontation when it is not really required...

→ and you can be left with this energy (fight or flight) and with no way to expel it.
Many people with depression also experience anxiety.

The Fight or Flight Response

When we were evolving and adapting as early humans the threats we faced were very immediate and very real (a tiger, predators). We needed to be able to respond quickly and effectively. Those who could survive would reproduce and their genes lived on. So we have inherited the brain mechanism that early humans had: the Fight or Flight response. When we perceive a threat, the body produces/releases hormones (adrenaline) which kick starts us mentally and physically into a state where we can act by fighting back / running away / freezing (the physical effects can be very unpleasant at the time). The release of hormones when faced with a threat is automatic and hard wired. We can, however, learn to appraise our interpretation of events and if there is no real threat by reframing our initial interpretation we can calm down our threat system. If our threat system 'fires' at everything, we can learn ways to 'recalibrate' it.

Common physical changes that people notice include:

- Heart beating faster
- Feeling hot, or sweating more
- Shaking, trembling hands
- Nausea or stomach cramps
- Tight chest and shallow breathing



The Fight or Flight response evolved to help us to react quickly to danger: to run away, to fight, (or sometimes freeze to be a less visible target). Therefore, anxiety, worry and fear all play a crucial role in keeping us alive; they prepare us mentally and physically for danger. But for most of us life isn't about fighting or escaping predators or enemies anymore.

The Fight or Flight response was designed to deal with life-threatening dangers, but it is much more likely to be triggered by our general fears and worries, or by situations which we have learned to think of as threatening in some way.

A good analogy is the smoke alarm. A smoke alarm is designed to alert us to the danger of fire but if it is set at very high (very sensitive) detection levels, then it cannot distinguish between 'steam from the shower', 'burnt toast' or 'a house fire'. While the first two examples are not real threats, the third is. But the response of the alarm is the same- and in each case the alarm is difficult to ignore!

We may also notice psychological changes when we experience anxiety. Some people report that their concentration becomes focused and for a time their ability to problem solve is enhanced: every senses tuned into the perceived threat. Some people also report finding their thoughts turning to the things that are important to them at that time. However, other people experience 'freeze' in their ability to problem solve, think and organize.

Anxiety, worry and fears also affect the way we behave, for example we may act in a braver way than we normally would, or we might have a surge of energy to accomplish a task. Alternatively, we might feel that all our energy has disappeared, and our head is running around aimlessly.

If danger is perceived in one too many situations and anxiety accompanies us for a prolonged period of time we can start to misinterpret the experience:

For example:

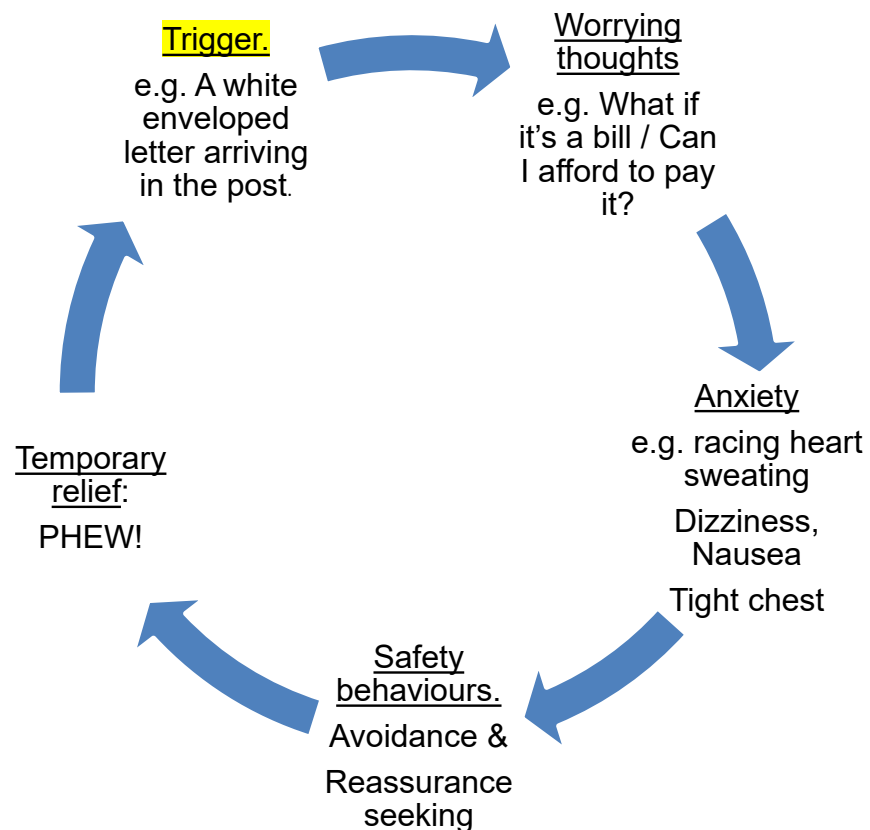
Physical symptoms might trigger thoughts that there is something seriously wrong like a heart attack, or that we are 'going mad'.

Psychological symptoms spike and we our ability to concentrate, focus and be resourceful diminishes.

Behaviours – in order to stop the distressing symptoms physical and psychological symptoms we often try to avoid the anxiety provoking trigger, causing a temporary relief in our symptoms.

When these factors all work in combination we can become caught in a vicious cycle that maintains our anxiety and worry. Sometimes our flight or fight reaction works too well, and this can lead us to experience panic attacks. This is when experience an extreme intensity of the common anxiety symptoms.

Common Maintenance Cycle for Anxiety



Strategies for managing anxiety

Although there may be many psychological and physiological symptoms of anxiety, regardless of what symptoms may be present – there are two symptoms that we can do something about. There are strategies to help with our breathing, when we may begin to hyperventilate, and our muscles, when we may begin to feel very tense.

Diaphragmatic Breathing

Diaphragmatic breathing is a technique that can be easily learnt and practiced to help reduce these symptoms and help to rebalance the O₂ and CO₂ levels in our body. The diaphragm is a large muscle that sits across the base of the ribcage. It is best to start practising this breathing technique daily so that it becomes like second nature.

- Place one hand on your chest and one on your stomach.
- While you breathe in through your nose, notice your stomach area starting to rise and fall with the breaths. This means that you are fully inflating your lungs. Try to keep any movement in your chest to a minimum.
- Slowly and steadily breathe out through your nose.
- Repeat this cycle and try to fall into a rhythm. We should aim for eight to twelve breaths every minute.

- Breathing in and out equals one breath.
- Some people find it helpful to count as they breathe. Try 'breathing in' to a slow count of three, and 'breathing out' to a count of four, so that the out-breath is slightly longer than the in-breath.
- You do not have to "breathe deeply", just aim for a steady, comfortable rhythm.

As with any new skill, it may be difficult at first. If you find it tricky, just practice breathing in and out for five seconds. Or you could try imagining that you are gently blowing on a candle flame, so that it flickers but does not go out.

Progressive Muscular Relaxation

'Progressive Muscle Relaxation (PMR) is a tension-reducing technique that involves the systematic tension and relaxing of specific muscle groups. Starting with the muscles in the face, the participant completely tenses all muscles and holds the tension for several seconds, completely relaxes for the same period of time, then repeats the process with the next set of muscles (the neck, the shoulders, etc.) until every area of the body has been relaxed. With practice, the participant learns to completely relax the body within seconds and keep from storing up tension and stress in the body.

The full Progressive Muscle Relaxation script can be found at the back of this booklet.

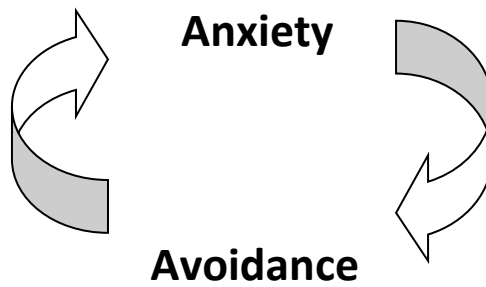
Audio recordings can be found by searching online for "Progressive Muscle Relaxation" or on YouTube.

The NHS recommends several smart phone apps for anxiety, including "Stress and Anxiety Companion". Other apps include Calm, Breathe2Relax and Headspace.

Avoidance

Often we cope with anxiety by avoiding the situations that trigger it. This makes intuitive sense. However, avoiding the things we fear only maintains the problem. Imagine for example that you are afraid of dogs, and avoid them at all costs. You may avoid triggering anxiety, but avoidance prevents you from learning that the majority of dogs pose no threat to you. Avoidance also has a significant impact on your life. If you are trying to avoid dogs there are lots of places that you are not able to go, such as parks, town centres and some beaches. By running away from our fears we do not give ourselves the opportunity to learn:

1. We can cope with our anxiety – which actually decreases over time
2. Situations might not be as terrible as we initially thought
3. We have resources to cope with the situation if faced with it.



Avoidance makes us feel better in the short term but does not allow us to learn that anxiety is uncomfortable but we can tolerate it. And in tolerating anxiety we have the opportunity to notice that many of our fears are not as terrible as we thought and that we have many resources to cope if the feared situations were to happen.



Rumination:

Rumination means going over things repeatedly, without completion or resolution. Our minds churning over and over information, past memories or regrets, but things are not changing or moving forward. We are just going round and round in our own heads.

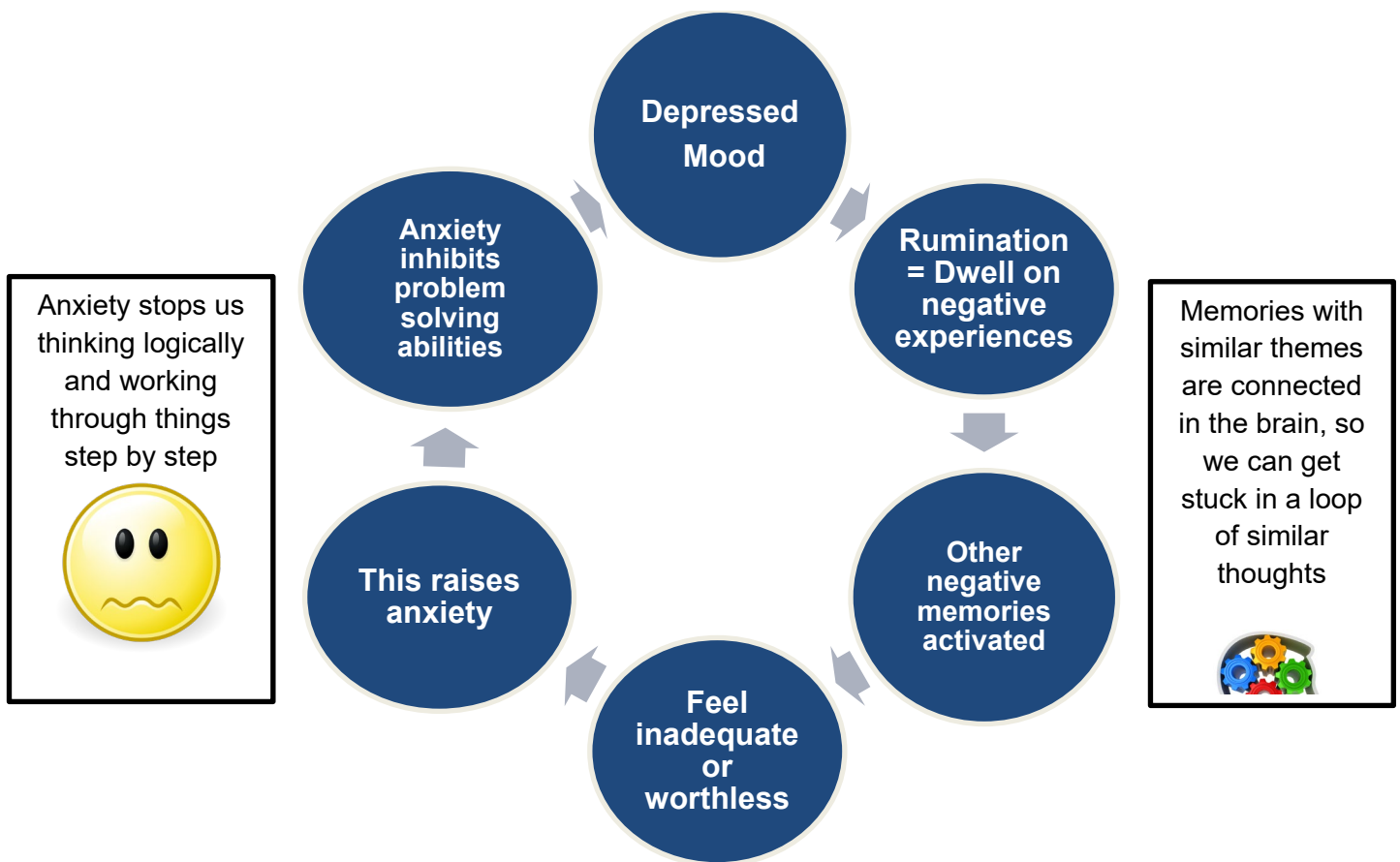
Worry and Rumination

Rumination tends to be focused on past events. Dwelling on these is unhelpful because we cannot change the past.

Worries are anxious thoughts about the future: “what if something bad happens.....”

Worrying cannot influence or change the future, it just raises anxiety. Most things we worry about never actually happen.





Because rumination makes us go from one memory to the next often does not allow us to solve problems. It is, therefore, important to break out of rumination and try to 'unhook' one problem from another one, so as to understand what problems can be solved (and problem solve them one at a time) and which ones are just hypothetical worries to eliminate.

To break out of Rumination

1. Calm our anxious minds (and bodies) with Soothing Techniques
2. Separate the problems and check out if they are real actual problems or just worries
3. Tackle one problem at a time with good Problem Solving Skills

1..Calming and Soothing Anxiety

Use breathing to calm yourself

You could do something that give pleasure or comfort to you (e.g. calling a friend, going for a walk, playing with your pet)

2..Separate the problems

Write a list of problems in your mind

Put them in columns, side by side, and check if they are connected or separate/different problems

3..Problem Solving

Once you have listed the problems, use Problem Solving Steps to tackle one problem at the time (rather than ruminating or worrying about all of them).

FOR EACH PROBLEM

1. Identify and define the problem (be specific)
2. Identify as many possible solutions as you can
3. Select your best option
4. Develop an action plan
5. Put it into practice
6. Review the outcome and repeat these steps if needed



Now whenever you notice that you are worrying about any of the problems say to your self something like 'No need to worry any longer, I have a plan for this one'

It could be that some of the problems in your list have NO solution. In some cases this is most likely a worry and until there is more information to solve the issue, we do not really need to do much about it. So next to that problem write a date when you might have more information to make it useful to think about it again. We are going to discuss worries in more details here below.

The better you get at interrupting rumination, the lighter your depression will become. It is possible to stop brain patterns that contribute to anxiety and depression by stopping rumination. It gets easier the more you practice, so stick with it and you will soon be able to do it automatically.

Letting Go of Rumination and Worry:

- Focus your attention away from the thought
- Notice and describe in detail something about your environment
- Use a breathing technique
- Mindfulness or meditation
- Visualising your worries as leaves floating away on a stream
- Reminding yourself that worrying will not change the situation or prevent unwanted events from happening
- Focus on your surroundings, name 4 things that you can see, hear and feel around you

Types of Worry

'Real problem worries' are worries about a here and now problem, for example bills that need paying, a broken down car, getting to an appointment on time.

'Future/hypothetical worries' are just worries about things that could have happened, but may never/ are very, very unlikely to happen. They usually start with "what if".

For example,

'what if my car breaks down...' – despite there are no real signs to suspect it will,

'what if I have a heart attack...' – despite I am healthy and fit,

'what if something bad happens to my child...' – despite they are not in any danger.

→ Remember the thinking style "Catastrophising"?

The Worry Tree can help you to distinguish between a here and now problem and a future hypothetical one, and to do something about the former (or at least plan to); while letting the latter go, and shifting the focus of our attention.



Rumination Practice at home.

- **If Rumination is a problem for you**, practice the 3 steps at home
 1. Calm our anxious minds (and bodies) with Soothing Techniques
 2. List the problems in your mind
 3. Tackle one problem at a time with good Problem Solving Skills
- **If Worry is a problem for you**, practice using the Worry Tree.
 1. Problem solve real-event worries,
 2. Practice letting go of future hypothetical worries

Worry Time

Scheduling time when to worry is a very effective techniques to help decreasing worry patterns.

It might seems 'crazy' to schedule time to worry: what? I want to stop worry and I am told to schedule 20-30 minutes each day so that I can worry?

Steps:

1. In your scheduled week, set aside 20-30 minutes each day as 'my worry time'. You can choose morning or afternoon, but try to choose the same time each day. It is best not to choose evenings- right before going to bed- as we want that to be 'wind-down time' (remember session2). Also make sure your worry time is not in your bed or a restful place as you to avoid associating the bed with worrying.
2. During your 'worry time' write down all the worries you can think of. Writing down the worries will help you to 'free up' space in your mind and by writing the worries down you get perspective.
3. Between 'worry times' remind yourself that you have scheduled time to worry and that 'now is not my worry time, I will wait to worry until MY scheduled worry time'

It might be that when your 'worry time' arrives you cannot think of any worries, that is ok. At the end of the week it could be useful to go back to your daily worry list: is there any theme? Was any of the worries actually nothing to worry about?. Do use the 'worry tree' and the 'problem solving techniques' for real/actual problems.

Learning from this session:

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Session 11 Weekly Tasks:

- **Read through Session 11 in the booklet**
- **Use the techniques discussed to help you break out of ruminating**
- **Use the 'worry tree' to distinguish REAL problems from HYPOTHETICAL worries**
- **Use problem solving techniques to solve each problem you have identified**

IN PREPARATION FOR SESSION 12 'The End...and The Beginning...'

- **Review which goal's you have achieved and celebrate your success?**
- **Which of your goal's remain 'a work in progress?' and**
- **Which goals do you have planned for the future?**

- **Review the techniques you have learned during the sessions?**
- **Which techniques have been useful?**
- **Are there any techniques you would like further tips to help you sustain your progress?**

Session 12: The End.....and the Beginning.....

You have now completed the course, but this is really just the beginning. It is important to maintain the gains you have made, and to build on the changes you have started. Continuing to practice the strategies you have learned during the course is essential. This will help you to maintain your progress to continue to make further changes. On the next page is a blueprint to help you summarise what you have learned from the course and identify the strategies/techniques to help you remain well in the future. The purpose of CBT is to provide you with the tools that you can use long after therapy ends; it aims to help you to become your own therapist.

Some other important suggestions for staying well:

1. Keep a balanced routine and lifestyle

Even though your sleep may get disrupted it is important to try and keep a normal routine. Structure helps to maintain good sleeping, eating and exercising habits.

2. Develop a good social support network

Social support is crucial. While it's good to find someone you can talk to about things (a sounding board) because sometimes just talking things out loud makes you realise that they are more manageable than you originally thought. Social support can occur in a number of different ways. Even if you would never talk to someone about your vulnerabilities they might be someone that you could do things with e.g. go for walks together. Make a list of people in your life that could offer different forms of support (emotional, practical, etc). If you really feel like this is limited, then use your problem solving skills to figure out how to increase your support network.

3. Develop a good professional support network

Keep in contact with your GP. Know what your early warning signs (symptoms) are and have a plan to address them. This may include referring yourself back to Steps to Wellbeing in the future for some top-up sessions. However we would encourage a period of independent skills practice before returning to the service, because often the benefits of the course are not fully apparent until a few months down the line.

4. Expect slip ups and down days

Life will bring with it 'Slip ups and down-days,' they will happen! It is easy to think that you are 'back to square one', but this is unhelpful thinking. Life is full of ups and downs- everyone has down days and it would be unrealistic to expect that you will not experience this too. Also, down days do not mean you are back at square one; you now have new skills and strategies which you can employ which you know work. Down days or slip ups are opportunities to learn from. Apply your problem solving skills and figure out what has happened and what you could do differently.

My Therapy Blueprint

<p>What have I learnt through attending this group?</p>	
<p>What strategies have I found helpful?</p>	
<p>What do I need to keep doing to maintain my progress?</p>	
<p>Sometimes setbacks occur- what are my warning signs to look out for?</p>	
<p>What can I do if a setback occurs? How can I overcome it?</p>	



**“You can’t stop the waves, but you can learn to surf”
(Jon Kabat-Zinn)**

**Thank you very much for contributing to this course.
We hope that you can continue to use what you have learned here
to become your own therapist. This will help you to keep moving
forward and to combat depression in the future.**

Appendices and Resources

Appendix 1: Reading, Smart Phone Apps and Resources

Books

- . **Overcoming Depression: a self-help guide using Cognitive Behavioural Techniques** by Paul Gilbert
- . **Mind Over Mood: Change the way you feel by changing the way you think** by Dennis Greenberger and Christine Padesky
- . **Overcoming Low Self-Esteem: a self-help guide using Cognitive Behavioural Techniques** by Melanie Fennell
- Reinventing Your Life** by Jeffrey Young

Smart Phone Apps

- . **Catch It** – encourages you to record negative thoughts and to look at it from a different perspective
- . **Stress & Anxiety Companion**- free on the App Store, recommended by the NHS for mild-moderate anxiety and stress, includes tools such as breathing exercises and relaxing music
- . **Calm** – meditation app with sleep stories and relaxing music, £36 per year's subscription
- . **Breathe2Relax**- breathing exercises app
- . **Relax Melodies** – Music for sleep and relaxation
- . **Headspace** – Guided meditation and mindfulness, free trial available, see App Store, Google Play or www.headspace.com

Websites and Online Resources

<http://www.dorsetmentalhealthforum.org.uk> Local charity promoting wellbeing and recovery

www.getselfhelp.co.uk website where you can print out lots of free recourses and therapy worksheets

<https://www.anxietyuk.org.uk/> A national charity set up to help people experiencing different forms of anxiety.

www.selfcompassion.org Website of Dr Kristen Neff, includes lots of information and resources relating to self- compassion, including practices to help you develop a more compassionate way of relating to yourself, and guided meditations

<https://www.mindful.org/meditation/mindfulness-getting-started/> introduction to mindfulness and meditation, including videos to watch

Appendix 2: Progressive Muscular Relaxation Script

Find yourself a quiet place to relax. Turn off your phone and dim the lights. This is your time...a time for complete and utter relaxation.

For this relaxation, you can either sit or lie down. Just make sure that you are warm enough, and that you are comfortable. Let your hands rest loosely in your lap, or by your side. Now close your eyes.

Become aware of your breathing, and notice how your abdomen rises and falls with each breath...

Now take a long slow deep breath in through your nose, all the way down into your stomach. Hold the breath for just a moment, and then exhale through your mouth. Allow your breath to carry away all stress and tension as the air floods out of your lungs.

Take another slow breath in through your nose. Fill your lungs completely. Hold it for a moment...and release the breath through your mouth. Empty your lungs completely.

Take a third deep breath in. Hold it for a moment, and then let it go.

Feel that your body has already undergone a change. The tension in your body has begun to loosen and subside.

Now let your breathing rhythm return to normal...and relax....

During this relaxation I will ask you to tense various muscles throughout your body. Please do this without straining. You do not need to exert yourself, just contract each muscle firmly but gently as you breathe in. If you feel uncomfortable at any time, you can simply relax and breathe normally.

Bring your awareness to your feet and toes. Breathe in deeply through your nose, and as you do, gradually curl your toes down and tense the muscles in the soles of your feet. Hold your breath for just a few seconds and then release the muscles in your feet as you breathe out. Feel the tension in your feet wash away as you exhale.

Notice how different your feet feel when tensed and when they are relaxed.

Take another deep breath in again, tense the muscles in the soles of your feet and hold this position for a few seconds. Now release. Feel yourself relaxing more and more deeply with each breath. Your whole body is becoming heavier, softer and more relaxed as each moment passes.

Now bring your awareness to your lower legs...to your calf muscles. As you draw in a nice deep breath, point your toes up towards your knees and tighten these muscles. Hold for just a moment, and then let those muscles go limp as you exhale.

Once again, draw in a deep breath...and tighten your calf muscles. Hold for a few seconds, and then let it all go. Feel your muscles relax, and feel the tension washing away with your out-breath.

In a moment you will tense the muscles in the front of your thighs. If you are lying down, you can do this by trying to straighten your legs. You'll feel the muscles pulling your kneecap upwards. If you are seated, you can tense these muscles by pushing your heels down onto the floor. 2

Take a deep breath in, and tense the muscles in your thighs. Hold for just a moment, and then release everything. As you do this, the blood flow to your muscles increases, and you may notice a warm tingling sensation. Enjoy this feeling of soothing relaxation in your thighs.

Again, breathe in deeply and tighten your thigh muscles. Hold for a moment. Now release. Focus on letting your muscles go limp and loose.

Draw in a nice deep breath and gradually tighten the muscles in your buttocks. Hold this contraction for a few seconds, and then release your breath. Feel the tension leaving your muscles. Feel them relaxing completely.

Once more, breathe in deeply and tighten the muscles in your buttocks. Hold for a moment. Now release them. You are becoming more and more deeply relaxed.

Take another breath, and this time, gradually tighten all the muscles in your legs, from your feet to your buttocks. Do this in whatever way feels natural and comfortable to you. Hold it...and now release all these large strong muscles. Enjoy the sensation of release as you become even more deeply relaxed.

Now bring your awareness to your stomach. Draw in a nice deep breath and then tighten these muscles. Imagine you are trying to touch your belly button to your spine. Now release your breath and let your muscles relax. Notice the sensation of relief that comes from letting go.

Once again, draw in a deep breath and then tighten your stomach muscles. Hold for a few seconds... and then let them relax as you exhale and release all tension.

Bring your awareness to the muscles in your back. As you slowly breathe in, arch your back slightly and tighten these muscles....Now release your breath and let your muscles relax.

Again, draw in a deep breath and then tighten your back muscles. Hold for a few seconds...and then let them relax and release.

Now give your attention to your shoulder muscles and the muscles in your neck. As you slowly draw in a nice deep breath, pull your shoulders up towards your ears and squeeze these muscles firmly. Now breathe out completely, and allow your contracted muscles to go loose and limp.

Again, pull your shoulders up towards your ears and squeeze these muscles firmly. Now feel the tension subside as you relax and breathe out.

Feel the heaviness in your body now. Enjoy the feeling. Feel yourself becoming heavier and heavier. Feel yourself becoming more and more deeply relaxed.

You are calm, secure, at peace.

Now it's time to let go of all the tension in your arms and hands. Let's start with your upper arms.

As you breathe in, raise your wrists towards your shoulders and tighten the muscles in your upper arms. Hold that breath and that contraction for just a moment...and then gently lower your arms and breathe all the way out.

You may feel a warm, burning sensation in your muscles when you tighten them. Feel how relaxing it is to release that tightness and to breathe away all tension. As you curl your upper arms again, tighten the muscles as you breathe in. Breathe in deeply. Now relax your arms and breathe out.

Now bring your awareness to your forearms. As you breathe in, curl your hands inwards as though you are trying to touch the inside of your elbows with your fingertips. Now feel the tension subside as you relax and breathe out.

Again, take a deep breath in, and tighten the muscles in your forearms. Hold it for a moment, and then release them. Feel the tension washing away.

Now, take another breath in and tightly clench your fists. When you have finished breathing in, hold for just a few seconds, and then release. Notice any feelings of buzzing or throbbing. Your hands are becoming very soft and relaxed.

Take another deep breath in and clench your fists again. Hold for just a few seconds, and then release. Let your fingers go limp.

Your arms and hands are feeling heavy and relaxed.

Take a couple of nice long slow breaths now, and just relax. Feel yourself slipping even deeper into a state of complete rest.

Now tighten the muscles in your face by squeezing your eyes shut and clenching your lips together. As you do, breathe in fully. Hold it...now breathe out and relax all your facial muscles. Feel your face softening.

Once more, breathe in deeply while you scrunch the muscles in your eyes and lips....and release.

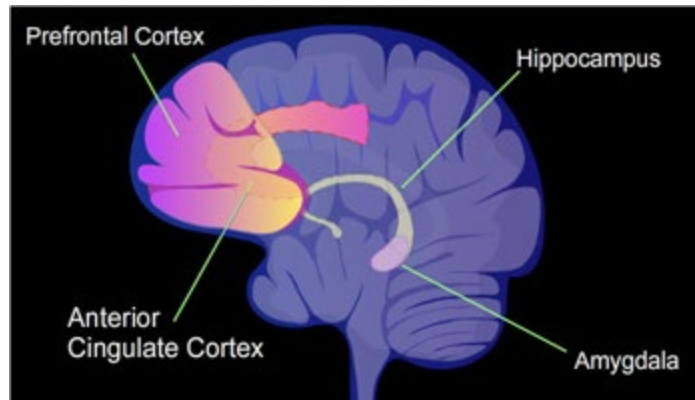
Now bring your awareness to the muscles in your jaw. Take a deep breath in, and then open your mouth as wide as you can. Feel your jaw muscles stretching and tightening. Now exhale and allow your mouth to gently close.

Again, fill your lungs with air and then open your mouth wide. Now let your mouth relax and let your breath flood all the way out.

You are now completely relaxed from the tips of your toes to the top of your head.

Please take a few more minutes to rest. Relax. Listen to the sound of your breathing and enjoy the lovely, warm sensation of physical relaxation

Appendix 3: How depression affects the brain



Prefrontal cortex – involved in planning complex cognitive behaviour (the way we think), decision making and moderating social behaviour

Hippocampus – involved in consolidating information from short-term memory to long-term memory and spatial navigation

Amygdala – processing of memory, decision-making and emotional reactions

The brain uses a number of chemicals as messengers to communicate with other parts of itself and with the nervous system. These chemical messengers, called neurotransmitters, are released and received by the brain's many nerve cells, which are also called neurons. Neurons are constantly communicating with each other by way of exchanging neurotransmitters. This communication system is essential to all of the brain's functions, including thought processes and behaviour.

Using a basic explanation, one neuron (the sender) sends a neurotransmitter message across the synapse and the next neuron (the receiver) receives that message. Receptors have chemical channels with particular shapes, which perfectly match the shape of neurotransmitter molecules that are sent across the synapse.

It is important that receptors be allowed to reset and deactivate between messages so that they can become ready to receive the next burst of communication. Although complicated, this entire information transmission cycle occurs in the brain within in a matter of seconds. Any problem that interrupts the smooth functioning of this chain of chemical events can negatively impact both the brain and nervous system.

Depression has been linked to problems or imbalances in the brain with regard to the neurotransmitters serotonin, norepinephrine, and dopamine. Although the exact nature of the role these neurotransmitters is still unclear, what we do know is that antidepressant medications (used to treat the symptoms of depression) are known to act upon these particular neurotransmitters and their receptors.

The neurotransmitter serotonin is involved in regulating many important physiological (body-oriented) functions, including sleep, aggression, eating, sexual behaviour, and mood. Current research suggests that a decrease in the production of serotonin by these neurons can cause depression in some people, which is why many people with depression take medication that treats their serotonin levels.

Appendix 4: Assertiveness

Being assertive means communicating our opinions and wishes in a confident way, without being passive or aggressive. It can be really difficult to assert yourself when you are feeling low or anxious, but assertiveness can be a really useful skill.

Being assertive can help you to:

- Feel more in control
- Communicate your needs to others and have these understood
- Communicate more effectively with your partner, family and friends
- Have confidence in your own opinions
- Reduce worry and anxiety by tackling difficult situations
- Say “no” and feel less overwhelmed
- Improve or maintain relationships
- Respond to unwelcome advice

Communication Styles

Being assertive means communicating confidently, enabling you to balance your needs with those of others. Have a look at the table below, noticing the behaviours and responses associated with each communication style.

Which style of communication can you recognise in yourself?

	Passive	Indirect	Aggressive	Assertiveness
Basic Attitude	I'm not ok	You're not ok, but I'll let you think you are	You're not ok	I'm ok and you're ok
Philosophy	Take care of others' needs without regard to one's own	Take care of own rights and needs whilst letting others think that you care about theirs	Own rights and needs met at the expense of others	Take care of own and others' rights and needs
Behaviour	Retreating Giving up Resenting situation	Manipulation Sarcasm	Criticism Shouting Put downs	Honesty Confrontation Negotiation
Response from Others	Attention Sympathy Exasperation	Suspicion Confusion Feels manipulated	Fear/Hurt Humiliation Defensiveness Aggression	Respect Acceptance Comfort

Task: read out the statement and practise an assertive response

	Assertive Response
While you're in town, could you take this parcel to the post office and get some shopping for me? I need a rest.	
I'm going to Kate's later and I said that you'll be coming too.	
Still not feeling better? You should be doing.....	
You don't mind looking after the twins for me later do you. Can you give them their tea as well?	
Haven't you managed to get that done today? What have you been doing?	

*** A good way to start practising Assertive Communication is to start small. Choose someone that you feel more comfortable with, or choose a minor problem to tackle first, and build your confidence before tackling bigger issues.**

Assertiveness Skills Practice:.

- Have a look at the table of communication styles. Which styles can you relate to?
- How could being more assertive help you?
- Practice the assertive responses in your group and give each other feedback
- If you feel anxious when being assertive, you can use the breathing technique to calm you
- Choose a situation where it would help you to be more assertive. Discuss this with your group before trying your assertive communication skills this week. For example, asking for directions, returning something to a shop, saying no to someone when they ask you to do something.
- Remember to start small to build your confidence!

Appendix 5 - Perfectionism

What is perfectionism?

- Continual striving to achieve high standards despite negative consequences.
- Self-criticism when standards are not met.
- Self-esteem is often based on how well these standards are pursued, and met

Perfectionist thinking:

- BLACK AND WHITE (ALL OR NOTHING)
- CATASTROPHISING
- PROBABILITY OVERESTIMATION
- SHOULD AND MUSTS
- RIGID RULES ABOUT HOW THINGS SHOULD BE
- IM A FAILURE
- IM NOT GOOD ENOUGH



Perfectionist behavior:

- Avoid trying new things or making mistakes
- Overly cautious and thorough
- Excessive checking
- Redoing tasks to try to improve on them
- Chronic procrastination, difficulty completing tasks or giving up easily
- To do lists

Task: What are the Pros and Cons of Setting High Standards?

Pros of Setting Myself High Standards	Cons of Setting Myself High Standards

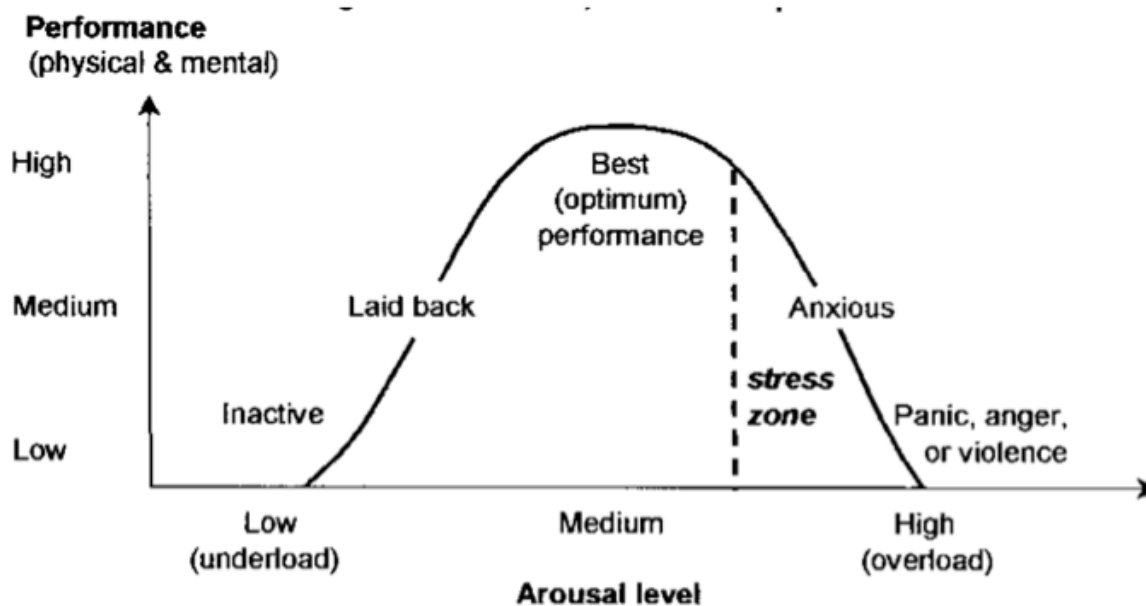
Tools to manage problematic Perfectionism

- ✓ **Change Balance grid** to establish motivation for change
- ✓ **Thought Challenging** to examine the evidence and create realistic statements

Take perspective – ‘how might someone else (eg. a close friend) view this?’, ‘Are there other ways to look at this?’, ‘what might I tell a close friend who was having similar thoughts?’

Look at the bigger picture – ‘does it really matter?’, ‘what is the worst that could happen?’, ‘if the worst does happen, can I survive it?’, ‘will this still matter next week? next year?’

Compromising (particularly good for black and white thinking) – ‘can I introduce a degree of flexibility?’, ‘what level of imperfection could I tolerate?’



- ✓ **Find the zone of optimum performance for you** – gain information about what is worthwhile eg 4hrs more = 2% extra vs 10%
- ✓ **Behavioural Experiments** to test whether beliefs are accurate
- ✓ **Reduce excessive behaviours gradually** as they will be reinforcing the problem
- ✓ **Graded Exposure to avoided situations/tasks** – small steps, repeated practice, stay long enough for anxiety/uncomfortable feeling to ease, preferably without distraction
- ✓ **‘Urge Surfing’** – resisting the urge to respond until the urge eases off
- ✓ **Learn to relax and be spontaneous** – rolling the dice, breathing, progressive muscle relaxation

- ✓ **Be compassionate** and learn how to activate and nurture your self-soothing capability
- ✓ **Changing Rules to Guidelines** – consider the pros and cons of having the rule, where did it come from, does it need to change, what would be a more helpful alternative, what would the alternative look like



would we expect others to be perfect at everything?

Is perfection sustainable at all times?

Self-Critical Thoughts	Self-Compassionate Alternatives
<p>Mistakes are not acceptable, if I get something wrong then I have failed, only the best is good enough</p>	<p>Pushing myself like this is triggering anxiety. Everyone makes mistakes, no one gets everything right all the time. I always try very hard and I need to give myself credit for that. I would not dream of speaking to someone else this way. I am acceptable as I am, even if I don't do everything "right". I will aim high, but 80% is still fantastic. No one is perfect at everything.</p>

Perfectionism and Procrastination Tasks:

- **Consider the pros and cons of being a perfectionist**
- **Challenge negative, rigid and self-critical thoughts using thought diaries**
- **Notice and challenge Unhelpful Thinking Patterns**
- **Gradual behaviour change – design a behavioural experiment to test out a negative prediction, or use a fear hierarchy**
- **Procrastination is a form of avoidance – use problem solving to tackle things you have been putting off**
- **Practice Self-Compassion instead of Self-Criticism**

steps2wellbeing
Southampton & Dorset

Peer Support

steps2gether

"It was so helpful to meet a person that had some lived experience of stress and anxiety who had made a recovery, knowing they had successfully tackled issues that I myself was going through."



Come and meet previous service users in a friendly, informal, non-judgemental safe space.

We share our experience to help each other build confidence, share coping techniques and reduce isolation.

Our groups are facilitated by our lovely Peer Support Practitioners, Becky, Chris, Emily, Lauren & Louise who have previously accessed the service.

We use the sessions to check in and offer support with an aim to keep ourselves well.

WHS
Dorset HealthCare University
NHS Foundation Trust

Groups are currently running fortnightly online. To join us please email dhc.s2w.dorsetpsps@nhs.net

Peer Support

- A small group (up to 12) who have completed treatment at Steps2Wellbeing.
- 1 hour meeting every 2 weeks (daytime or evening)
- Online group facilitated by Peer Support Practitioners
- Topics of discussion are focussed on mutual support.

If you are interested in attending please

email: dhc.s2w.dorsetpsps@nhs.net

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