

# *Eternal Beauty*



## **WORKBOOK:**

**DEPRESSION RELIEF PROGRAM -  
COPING WITH DEPRESSION AND  
COVID-19**

# Eternal Beauty

## Depression

### What is Depression?

Depression is when normal feelings like being sad, down, grumpy, or irritable are very intense, go on too long and get in the way of normal life. Depressed feelings happen to everyone sometimes, especially after a loss or disappointment. When they happen too much and interfere with life—like getting in the way of doing things you want to do and need to do—it is important to get help. 1 in 5 teenagers will experience clinical depression.

Common signs of depression are:

- getting irritated more easily,
- feeling sad or down
- feeling less interested in things,
- having a hard time enjoying things you used to enjoy,
- appetite or weight change,
- sleeping problems,
- changes in how fast you move,
- low energy/tiredness,
- feeling worthless or guilty,
- problems thinking,
- trouble making decisions or concentrating, and
- thinking about death or hurting yourself.

### How Does Depression Happen?

Usually it has to do with life events or situations that interfere with these things that research shows have a big impact on mood:

#### **How healthy we are**

(enough sleep, physical activity)

#### **How rewarding life is**

(good social interactions + fun activities + doing things we are good at (mastery) + approaching our goals + helping others)

#### **How helpful thoughts are**

(how we think about situations and ourselves)

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## Depression

### CBT Roadmap: Things We Can Do to Help

#### Improve Health:

- Planning for More Regular Sleep & Exercise

#### More Rewarding Life:

- Doing Activities that Boost Mood
- Solving Problems that Drag Down Mood
- Taking Steps Toward Goals
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#### More Helpful Thinking:

- Challenging Negative Thoughts
- Getting Unstuck from Rumination

#### Helping Your Parents/Caregivers

- Good Listening, Focusing on the Positive, Resolving Conflicts

#### Optional Topics:

- Coping Skills for Stress
- Overcoming Anxiety
- Communicating Effectively
- Skills for making Friends

#### Preventing Future Depression

- Having a Plan for if Depression Creeps Back

## **CBT Roadmap:**

### **Improve Health:**

- Planning for More Regular Sleep & Exercise

*Sleep disruption can cause depression, as well as make it worse. Getting sleep back into a regular pattern can sometimes resolve depression on its own. Teens whose sleep schedules are off can be more tired during the day, impairing functioning and making treatment engagement and activity follow through more difficult. Patterns where teens sleep after school/during the day, then can't sleep at night, then have trouble waking for school are common. Let them know that cutting out naps (at least for now), going to bed in time to allow 8-9.5 hours of sleep, and waking up at a regular time, can help a ton.*

### **Use motivational techniques if needed.**

As an example:

- NO SMARTPHONES IN BED!
- Exercise alone can improve depression symptoms for many people, making it a good place to start, if your client is interested and this isn't too big a step for them to be successful with.

### **More Rewarding Life:**

- Doing Activities that Boost Mood

Getting active, incorporating more of the activities from page 1 (next to the sun), can quickly improve mood. This is a good place to start for teens whose low mood makes follow through on other treatment activities unlikely. When teens are very depressed, it is key to start with very small, easy activities, and to practice and plan well together in session.

### **Solving Problems that Drag Down Mood**

The goal of problem solving is to take a more active approach to managing problems. Individuals who are depressed are likely to take a more passive or avoidant stance with problems. Identifying key problems (that the teen has some control over), and making a plan to begin addressing them together, can make a big difference.

- For many clients, it is clear that particular problem situations (e.g., failing a class, conflict with a friend or family member) are contributing significantly to mood issues. If the client wants to start with problem solving (vs. other interventions aimed at improving mood), or you as the clinician think this is the best way to begin improving mood, go for it!

### **Taking Steps Toward Goals**

Identifying "SMART" goals that matter to the client, then breaking them down into really manageable action steps, and supporting them in taking those steps week to week, can have a powerful impact on hopelessness and mood.

## **CBT Roadmap:**

### **More Helpful Thinking:**

- Challenging Negative Thoughts
- Negative thinking can hurt mood and can interfere with taking positive steps.

### **Getting Unstuck from Rumination**

o Rumination means spending lots of time thinking negatively about problems or situations, in an unproductive way (not solving the problems or identifying helpful actions, just dwelling). Rather than trying to think your way out of rumination, it is usually best to learn to

1) notice that you are ruminating, and

2) get ACTIVE, or do something to focus your attention on the present moment (mindfulness, or being social).

If rumination happens at bedtime, it can be helpful to have activities such as body scan, relaxation techniques, or positive imagery to focus on until sleep happens.

### **Helping Your Parents/Caregivers**

- Good Listening, Focusing on the Positive, Resolving Conflicts
- Teach parents what is depression. Often parents are highly critical or negative about behaviors that are actually symptoms of depression. Help caregivers to practice using active listening skills, to use praise of positive steps vs. criticisms, to support and facilitate “getting active” (e.g., allowing them to be social, even though depression might be impairing school performance). Counselors can also facilitate communication and problem solving between caregiver and teen regarding points of conflict.

### **Optional Topics:**

- Coping Skills for Stress
- Overcoming Anxiety

Anxiety co-occurs with depression at a high rate. For many individuals with depression, anxiety occurs first and actually leads to depression by interfering with the things (e.g., being social, achieving goals) that would typically keep a teen’s mood healthy. Sometimes anxiety interferes with treatment because kids are too anxious to make behavior changes that would help their mood. Use exposure strategies from the CBT for Anxiety treatment model, prioritizing exposure activities that are likely to be enjoyable to the teen and boost mood.

### **Communicating Effectively**

- Role play to practice challenging conversations the teen might need to have, debriefing afterward about what worked and didn’t work, and making a solid plan for them to follow.

### **Making Friends**

(<https://www.semel.ucla.edu/peers/news/13/oct/14/peers-virtual-coach-mobileapplication-friendmaker>) with scientifically informed, highly practical tips for managing common social challenges, and accompanying videos modeling each skill.

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### Behavioral Activation

Depression saps a person's energy to do just about anything—even activities they enjoy. As a result, people with depression tend to become less active, which causes the depression to worsen.

However, even a little bit of activity can help stop this cycle.

1. Choose activities you are likely to complete.

- **exercise** walk, go for a bike ride, weightlift, follow an exercise video, swim, practice yoga
- **socialize** call or text a friend, organize a group dinner, visit family, join a club / group
- **responsibilities** cleaning / housework, pay bills, professional development, homework
- **hobbies** sports, gardening, drawing, playing music, hiking, playing with a pet, cooking
- **personal care** dress up, get a haircut, prepare a healthy meal, tend to spiritual needs

2. Practice your chosen activities. Use the following tips to improve consistency.

- **start small** If needed, break activities into smaller pieces. Some activity is better than none.
- **make a plan** Set an alarm as a reminder, or tie an activity to something you already do. For example, practice a hobby immediately after dinner every day.
- **bring a friend** Including a friend will increase your commitment and make things more fun.

### Social Support

Social isolation is a common symptom of depression. Related issues—such as fatigue, lowered self-esteem, and anxiety—exacerbate this problem. Resisting social isolation, and instead leaning on social support, can improve resilience to stress and depression.

- **Lean on your existing relationships.** Make it a priority to socialize with friends or family every day. If this is proving difficult, or if no one is nearby, plan times to interact remotely. Try cooking together on a video call, playing a game together, or sharing a coffee over the phone.
- **Say “yes” to socializing.** Depression makes it tempting to stay home, isolated from friends and family. Make a habit of saying “yes” to social opportunities, even when you're tempted to stay in.
- **Join a support group.** Support groups let you connect with others who are dealing with issues similar to yours. You'll benefit from sharing and receiving advice and support.

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## Three Good Things

Negative thinking is a defining feature of depression. Positive experiences are minimized, while negative experiences are magnified. Gratitude helps combat this tendency by shifting focus toward positive experiences, rather than negative ones.

Write about three positive experiences from your day. These experiences can be small (“The weather was perfect when I walked to work”) or big (“I got a promotion at work”).

Choose one of the following questions to answer about each of the three good things:

- Why did this happen?
- Why was this good thing meaningful?
- How can I experience more of this good thing?

Repeat this exercise every day for 1 week. (Make sure to write details down)

## Mindfulness

Mindfulness means paying attention to the present moment. It means taking a step back and noticing the world, and one’s thoughts and feelings, without judgment. The goal of mindfulness is to simply observe. Mindfulness helps reduce the rumination and worry that often accompany depression. One way to practice mindfulness is through meditation. During mindfulness meditation, you will simply sit and focus your attention on the sensation of breathing. By focusing on your breathing, you will put yourself in the here-and-now.

## Time and Place

Find a quiet, comfortable place where you can practice mindfulness for 15 to 30 minutes every day. Frequent and consistent practice leads to the best results, but some practice is better than none.

## Posture

Sit in a chair or lie down in a comfortable position. Close your eyes or let your gaze soften. Let your head, shoulders, arms, and legs relax. Adjust your posture whenever you feel uncomfortable.

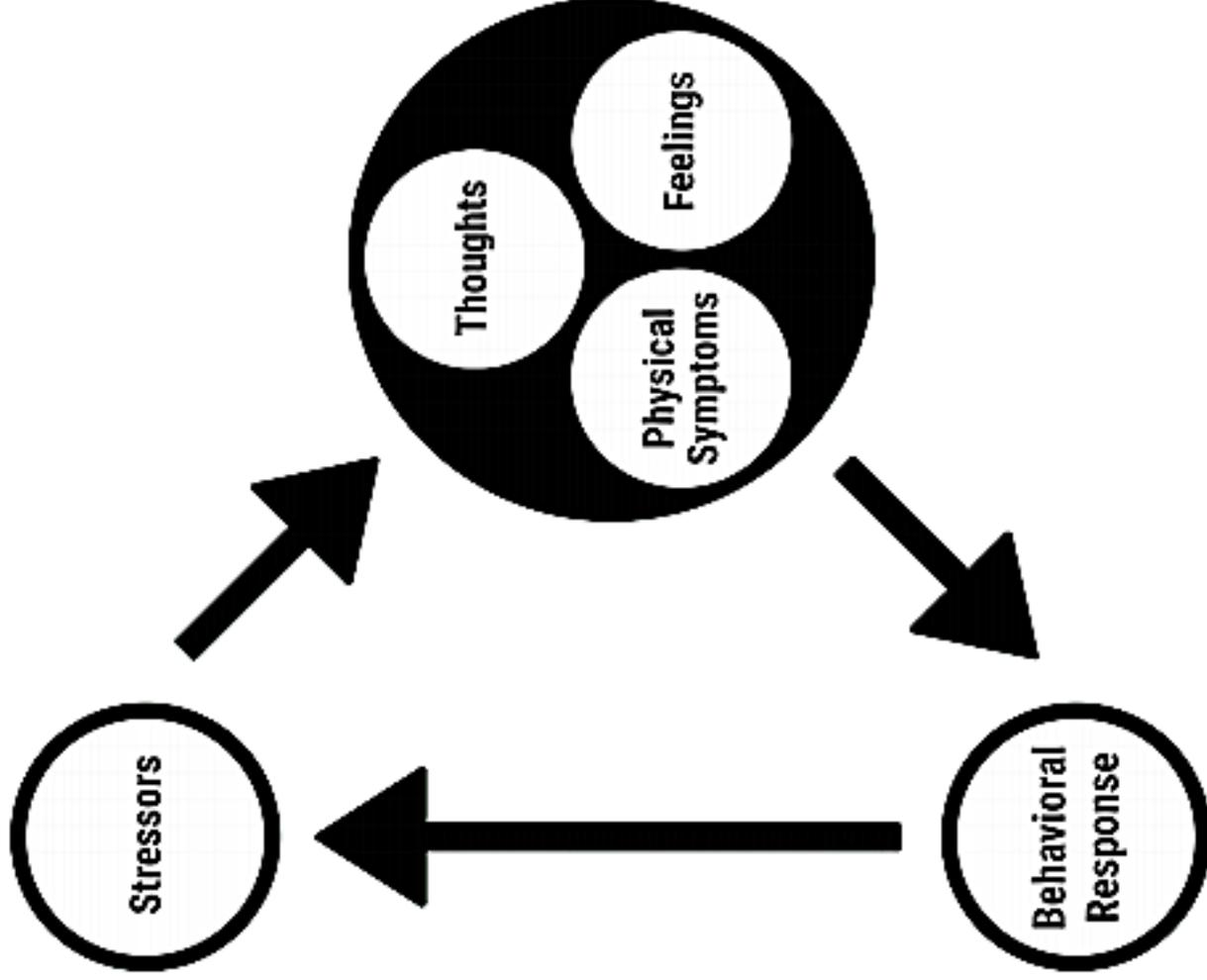
## Awareness of Breath

Focus on your breathing. Notice the sensation of the air as it travels in through your nose and out through your mouth. Notice the gentle rise and fall of your belly.

## Wandering Mind

During meditation, it’s normal for the mind to wander. When this happens, gently turn your attention back to your breathing. You may need to do this frequently throughout your practice

## The Cycle of Depression



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### Stressors

A stressor is any situation that causes strain or hardship. These may be short-term or long-term.

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### Thoughts

Stressors often lead to negative thoughts, which may be irrational, or exaggerated.

- "I need to be perfect."
- "Nobody likes me."
- "I'm not good at anything."

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### Feelings

The way a person thinks about something has a major impact on how they will feel, and vice versa.

- sadness
- anger
- hopelessness
- loneliness

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### Physical Symptoms

The body responds to stressors, and negative thoughts and feelings, with physical symptoms.

- fatigue
- sleep problems
- poor concentration
- loss of motivation

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### Behavioral Response

The way a person acts in response to thoughts, feelings, and symptoms may worsen stressors, or create new stressors.

- social isolation
- neglecting daily tasks
- abusing drugs / alcohol

## **Supporting Someone with Depression**

Recognize that depression is an illness. Just like a cold or flu, a person cannot simply choose to “get over” depression. Also like other illnesses, depression can affect anyone. A person can develop depression even if they seem to have a good life, with little to be upset about.

Make a point to reach out. Many people with depression will isolate themselves, often falling out of touch with friends and family. You can't make someone accept help, but you can provide the option.

Check in regularly, invite them to talk, and reemphasize your support. Just listening can help. You don't have to fix your loved one's problems or convince them that their negative feelings are wrong. Even if you disagree with some of their thoughts or feelings, respect and acknowledge that these experiences are real to them.

Be supportive of healthy habits. Exercise, healthy sleep habits, and socializing all contribute to mental health, and help combat depression. Support these activities by giving encouragement, offering to accompany your loved one, or providing positive feedback.

Encourage professional help. Mental health counseling and medication are effective in treating depression. If your loved one is unsure where to start, offer to help them find the right provider, such as a physician, mental health counselor, psychologist, or psychiatrist.

Connect your loved one with social support. In addition to professional help, your loved one may benefit from other sources of support. These could include community organizations, religious groups, or mental health support groups.

Take any mention of suicide seriously. Symptoms of depression include intense sadness, despair, and thoughts of suicide. If you feel that someone is in danger, don't hesitate to call 911, take them to an emergency room, or call the National Suicide Prevention Lifeline at 1-800-273-8255 for free and confidential support available 24/7.

Make time for self-care. Supporting someone with depression can be frustrating, tiring, and emotionally draining. It's okay to take a break just for you. Make sure you are getting adequate sleep, eating properly, exercising, and taking time to relax.

You are not responsible for curing your loved one. Your love and support are valuable, but ultimately, you cannot make them better. It is unfair to yourself to take responsibility for another person's depression, or their recovery

## **What is Postpartum Depression?**

During pregnancy, or shortly after the birth of a child, some parents experience postpartum depression (PPD). PPD involves depressed mood, loss of interest in activities, and several other physical and emotional symptoms. These symptoms can be debilitating, making it difficult to perform everyday tasks.

### **Signs and Symptoms**

Note: Everyone's experience with PPD is unique. Some will develop most symptoms, while others develop just a few. Diagnoses should only be made by a qualified professional.

- depressed mood loss of interest
- in activities irritability thoughts of harming the newborn
- feelings of guilt or worthlessness thoughts of suicide fatigue insomnia
- anxiety difficulty coping with daily activities poor concentration significant changes in appetite

### **Risk Factors**

- young maternal age
- low income
- marital conflict and low partner support
- lack of social support stressful life events during pregnancy
- history of depression or PPD
- depression or anxiety during pregnancy immigrant status family history of depression

### **Treatments**

#### **Psychotherapy**

Talk therapy is usually recommended for mild to moderate PPD. Parents learn to reduce stressors and improve coping skills. Cognitive behavioral therapy (CBT) and interpersonal therapy are the most common PPD therapies

#### **Medication**

Medication may be recommended for severe PPD. When taken regularly, antidepressant medication is effective in treating PPD. It may be used alone or in combination with talk therapy.

#### *Other Information*

Many women experience "baby blues" in the days following childbirth. This involves brief crying spells, irritability, nervousness, poor sleep, and emotional reactivity. Baby blues does not rise to the level of PPD and usually resolves in about one week, without treatment.

A parent's PPD can lead to cognitive, social, and behavioral problems in their child. However, when PPD is treated, these issues tend to improve. PPD affects about 1 in 10 women during pregnancy, or in the weeks following delivery. Women who are diagnosed with PPD once are more likely to experience it during future pregnancies.

## **Mindfulness Meditation**

The goal of mindfulness meditation is simple: to pay attention to the present moment, without judgement. However, as you practice, you'll find that this is easier said than done. During mindfulness meditation, you will focus on your breathing as a tool to ground yourself in the present moment. It's normal that your mind will wander. You'll simply bring yourself back into the moment by refocusing on your breathing, again and again.

Follow the instructions below to begin practicing mindfulness meditation.

### **Time & Place**

- Aim to practice daily for 15–30 minutes. More frequent, consistent, and longer-term practice leads to the best results. However, some practice is better than no practice.
- Find a time and place where you are unlikely to be interrupted.
- Silence your phone and other devices, and set a timer for your desired practice length.

### **Posture**

- Sit in a chair, or on the floor with a cushion for support.
- Straighten your back, but not to the point of stiffness.
- Let your chin drop slightly, and gaze downward at a point in front of you.
- If in a chair, place the soles of your feet on the ground. If on the floor, cross your legs.
- Let your arms fall naturally to your sides, with your palms resting on your thighs.
- If your pose becomes too uncomfortable, feel free to take a break or adjust.

### **Awareness of Breathing**

Because the sensations of breathing are always present, they are useful as a tool to help you focus on the present moment. Whenever you become distracted during meditation, turn your focus back to breathing.

Notice the sensation of air as it passes through your nose or mouth, the rise and fall of your belly, and the feeling of air being exhaled, back into the world. Notice the sounds that accompany each inhalation and exhalation.

### **Wandering Mind**

It's normal that your thoughts will wander during mindfulness meditation. At times, it might feel like a constant battle to maintain focus on your breathing. Don't worry—that's normal.

Instead of struggling against your thoughts, simply notice them, without judgment. Acknowledge that your mind has wandered, and return your attention to breathing. Expect to repeat this process again and again.

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## How Trauma Can Effect You:

### Description

Trauma can result in a wide variety of symptoms, experiences, and behaviours. As well as post-traumatic stress disorder (PTSD), prevalence rates of other conditions such as panic disorder, social anxiety disorder, and depression are all elevated amongst trauma-exposed individuals. Symptoms post-trauma can be powerful both physically and emotionally, and when the individual does not understand why they are occurring, they can feel especially disturbing. An important intervention is to help children and adolescents to understand that they are experiencing normal reactions to powerful events.

**How Trauma Can Affect You** is an illustrated information handout designed for children and young people. Clinicians may find it helpful during assessment and psychoeducation phases of treatment. It can be used to help clients to explore their symptoms & experiences, and is particularly helpful for working with clients who are struggling to describe their experiences. It can also be used to help wider networks including family systems, schools, or other professionals to understand trauma symptoms.

### Symptoms described in the handout include:

- Feelings of fear and anxiety, including body feelings of physiological arousal.
- Flashbacks and unwanted memories of the trauma.
- Hypervigilance for potential danger.
- Negative beliefs about other people and their intentions, resulting in caution and difficulty trusting others.
- Efforts to avoid perceived danger.
- Negative beliefs about the self and one's role in events.
- Dissociative symptoms including detachment, derealisation and depersonalisation.
- Feelings of anger and frustration.
- Difficulty sleeping, including nightmares.
- Somatic discomfort including headaches, upset stomachs, and unexplained pains
- Difficulty concentrating.
- Feelings of sadness, loss, and hopelessness.

Reference used for our Workbooks:

American Psychiatric Association, DSM-5 Task Force. (2013). Diagnostic and statistical manual of mental disorders: DSM-5™(5th ed.). American Psychiatric Publishing, Inc.

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### Disclaimer

Your use of this resource is not intended to be, and should not be relied on, as a substitute for professional medical advice, diagnosis, or treatment. If you are suffering from any mental health issues we recommend that you seek formal medical advice before using these resources. We make no warranties that this information is correct, complete, reliable or suitable for any purpose. As a user, you should work within the bounds of your own competencies, using your own skill and knowledge, and therefore the resources should be used to support good practice, not to replace it.

# How Trauma Can Affect You

## Feeling scared

The trauma has taught your mind and body that bad things can happen. It is normal to feel scared or anxious for some time afterwards. You might notice your heart racing, feel sweaty, or feel shaky.



## Flashbacks

Memories of your trauma can 'pop' – unwanted – into your mind. It can feel like the trauma is happening again right now. Memories can be of sights, sounds, smells, tastes, or body feelings.



## Looking out for danger

You might find that you are quick to notice anything or anyone that could hurt you. After a trauma, your brain is 'programmed' to stay on the lookout just in case there is more that could hurt you.



## Difficulty trusting people

After you have been hurt by others it can be very difficult to trust anyone, even if they are not the same people who hurt you. You might feel uncomfortable being around other people.



## Wanting to avoid danger

After being hurt, you might want to avoid things that remind you of what happened:

- People
- Places
- Thoughts
- Memories



## Blaming yourself

Many people blame themselves for what happened to them, even though it clearly wasn't their fault. You might find yourself thinking about ways that you could have prevented it.



## Dissociation

Dissociation means feeling strangely separate from your body, or the world. During a trauma your body may automatically freeze (go still) and your mind may go somewhere else (zone out). This can happen after a trauma too.



## Feeling angry

You might find that you get frustrated or lose your temper easily. You might feel annoyed by the way that other people behave, or you may get cross with yourself.



## Nightmares and sleeping badly

Having bad dreams or nightmares about your trauma is common. It is not unusual to wet the bed. You might find it difficult to get to sleep, or you might wake up in the night.



## Feelings in your body

You might feel strong feelings in your body:

- Headaches.
- Stomach-aches.
- Unexplained pains.
- Feelings like you had during your trauma.



## Problems concentrating

Any of the problems listed on this page can make it difficult to concentrate and pay attention. Do you recognise which ones affect you most?



## Feeling sad

You might feel sad about the things that have happened to you. You might feel hopeless about your future. You might feel sad without even knowing why.



# How Trauma Can Affect You

Feeling scared



Flashbacks



Looking out for danger



Difficulty trusting people



Wanting to avoid danger



Blaming yourself



Dissociation



Feeling angry



Nightmares and sleeping badly



Feelings in your body



Problems concentrating



Feeling sad



# Checking Uncertainty & Doubt

## Description

Checking, Certainty, And Doubt is an information sheet about a maintenance mechanism important in obsessive compulsive disorder (OCD). It includes a description of checking, and a summary of recent research which indicates that increased checking leads to decreased trust in memories. The information sheet also includes a suggestion for a behavioural experiment so that clients can explore the operation of this mechanism in their own lives.

Checking is a common compulsion (behaviour) in obsessive compulsive disorder (OCD). Checking is related to doubt. Doubt and uncertainty feel unpleasant, so we check to remove the unpleasant feeling. Our compulsions (behaviours) are driven by our obsessions (thoughts). For example, one person has an obsessive fear of burning the house down and will then spend a lot of time checking to make sure the electrical sockets are switched off. Another person fears that they have forgotten doing something terrible, like injuring another person, and will repeatedly check their memory to confirm whether this is so. Checking can take up a huge amount of time and in severe cases it can be disabling.

Something is wrong though: if the checking were really effective, why should it need to be carried out so many times?

Researchers have found that repeated checking is self-perpetuating: the more you check, the less certain you are about the result, and the more you feel the need to check. Repeated checking doesn't affect how accurate your memory is, but it does affect your confidence in your memory. As an analogy, can you remember what you had for breakfast today? Last week? Last year?

The more breakfasts you have, the more difficult it is to remember an individual breakfast. The same is true of checking: the more times you check, the harder it is to remember a specific time you have checked and what the result was – you just have a vague general impression that you have checked and aren't sure what the result was when you did so.

If you have an issue with checking and certainty you can investigate this for yourself using the

Write down something you worry about and check a lot:	
Day 1: Whatever worry you wrote above, check it for 30 minutes. For example, if you worry about light switches being turned off then check the switch for 30 minutes	Day 2: Whatever you wrote above, check it just once. For example, if you worry about light switches being turned off then check the switch just once.
Now walk away and wait for 5 minutes	Now walk away and wait for 5 minutes
Q: How confident are you that the thing you checked is 'safe'?	Q: How confident are you that the thing you checked is 'safe'?
Not at all 0 1 2 3 4 5 6 7 8 9 10 Completely confident	Not at all 0 1 2 3 4 5 6 7 8 9 10 Completely confident
Q: How strong is your urge to go and check it?	Q: How strong is your urge to go and check it?
No urge at all 0 1 2 3 4 5 6 7 8 9 10 Very strong urge	No urge at all 0 1 2 3 4 5 6 7 8 9 10 Very strong urge
What have you learned?	

## Assertive Communication

Communicating assertively means clearly and calmly expressing what you want without either being too passive or too aggressive. Learning to communicate assertively doesn't guarantee you will have your needs met but it makes it more likely, and it can improve your relationships with other people.



Thinking your needs don't matter at all	Recognising that your needs matter as much as anyone else's	Thinking that only your needs matter
Give in	Compromise	Take
Not talking, not being heard	Talking and listening	Talking over people
Trying to keep the peace	Making sure things are fair - for you and others	Looking out for yourself
Allowing yourself to be bullied	Standing up for yourself	Bullying others
Not saying what you think, or not saying anything	Express your point clearly and confidently	Can lead to shouting, aggression or violence
Damages relationships - other people respect you less	Enhances relationships - other people know where they stand	Damages relationships - other people don't like aggression
Damages your self-esteem	Builds your self-esteem	Damages others self-esteem

### Tips for communicating assertively

Use "I" statements

- Be clear and direct:

"I would like you to give me a refund"

"I think what you have done is good, but I would like to see more of..."

### Describe how another person's behaviour makes you feel

- This makes other people aware of the consequences of their actions:

"When you raise your voice it makes me scared ... I would like you to speak softly"

"When you don't tell me what you are feeling it makes me confused"

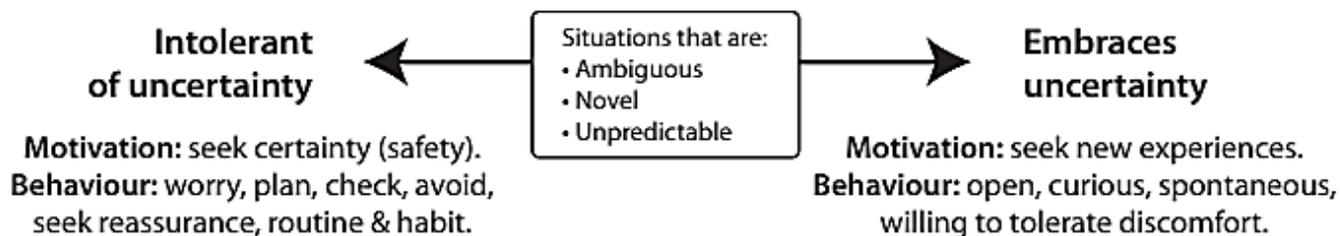
### Stick to your guns – the broken record technique

- This involves thinking about what you want, preparing what you might say, then repeating it as necessary:

"I would like a refund ... Yes, but I would still like a refund ... I've heard what you have said but I still want a refund"

## Embracing Uncertainty

Life is uncertain: we can never be 100% sure what is going to happen. Some people are OK with this and find it easy to embrace new experiences. Other people struggle with uncertainty: it is almost as if they have a phobia of it, and they often do things like *worry* or *plan* in attempts to reduce uncertainty.



Embracing uncertainty can allow you to enjoy more of life, and to respond more flexibly to challenges that come your way. One way of doing this is to gradually introduce uncertain events into your life. Try to embrace uncertainty by experimenting with some of the tasks below:

Walk a different route. 	Order something new from the menu in a restaurant. 	Try a new class. 	Go somewhere you have never been. 
See a film at the cinema without reading reviews. 	Have a different lunch every day. 	Read a different newspaper, or something by a new author. 	Talk to someone you don't know (ask a question, pay them a compliment). 
Wear something 'new' for you (e.g. style, brand). 	Do an activity that you have avoided so far. 	Talk about things that are more 'risky' for you (e.g. politics, yourself, opinions). 	Listen to music that you wouldn't normally listen to. 
Sit in a different place than you normally do. 	Delegate tasks to others. 	Sleep on a different side of the bed. 	Try a different brand of toothpaste. 

### Tips for embracing uncertainty:

- Adopt the mindset that it is good for you to take small risks and challenge yourself.
- Make 'trying new things' a regular part of your life.
- You're trying to build a 'tolerance of uncertainty muscle' so you will need to practice regularly.
- Maintain a curious and open approach by focusing on the outcome of your experiments, not on the emotional experience: What did you learn? What did you experience that was new and exciting? What did that experiment do for your confidence?

*The person who risks nothing, does nothing, has nothing, is nothing, and becomes nothing. He may avoid suffering and sorrow, but he simply cannot learn, feel, change, grow or love. Chained by his certitude, he is a slave; he has forfeited his freedom. Only the person who risks is truly free.*

## Checklist For Better Sleep

Good sleep is influenced by many factors.

Record how many of these things you have done in the last week and consider making changes to your routine.

### Things that are known to make sleep worse

- Napping during the day
- Watching television in bed
- Using a device with a bright screen in the hour before bedtime (e.g. a smartphone, a laptop)
- Consuming drinks containing caffeine (includes tea, coffee, cola, energy drinks, hot chocolate)

*How many each day? What time of the day was your last caffeinated drink? (try to avoid caffeine after 6pm)*

- Drinking alcohol (alcohol typically leads to interrupted sleep)
- Eating a heavy meal less than 3 hours before bedtime
- Staying in bed even if you can't fall asleep (it's better to get up and do something relaxing, then try again later)

### Things that are known to improve sleep

- Regular exercise

*How many times a week? (it is recommended to do at least 3 x 30 minutes per week)*

*What time of the day? (it is best not to exercise in the 3-4 hours before bedtime)*

- Setting aside some 'worry time' each day to write down any issues that are bothering or concerning you, then deciding to leave those worries behind until tomorrow

*(make sure to do this at least one hour before bedtime)*

- Relaxation exercises (e.g. relaxed breathing exercises, progressive muscle relaxation)
- Having a relaxing bedtime routine (e.g. taking a bath or a shower, reading a comforting book)
- Setting the conditions for sleep
- Make sure the bedroom is completely dark (blackout curtains are cheap and effective)
- Make sure the mattress and pillows are comfortable (make bed an attractive place to be!)
- Make sure the bedroom is the right temperature (think like Goldilocks: not too hot, not too cold)

# Classical Conditioning

## Description

Classical conditioning is a critical factor in both human and animal psychology. In cognitive behavioural therapy (CBT) classical conditioning can be viewed as a transdiagnostic mechanism (maintenance factor) with client difficulties often the result of conditioned responses. Once formulated in this way it can be seen that many difficulties may respond to a process whereby they are extinguished. The Classical Conditioning worksheet includes a simple one-page description of classical conditioning and why it is important in CBT. Examples of common difficulties to which this might apply include phobias or other anxieties, which respond to exposure-based (i.e. extinction) treatments.

Classical conditioning is one way in which animals (including humans) learn: learning by association. Previously neutral stimuli become associated with naturally occurring reflexes. Classical conditioning can happen by itself or it can be done deliberately.

### Before conditioning

Before conditioning the unconditioned stimulus (US) produces an unconditioned response (UR). Essentially, a stimulus in the environment has caused an unlearned response in the animal.

*Virus (US)* → *Feeling nauseous (UR)*



*Food (US)* → *Salivating (UR)*



### During conditioning

During the conditioning a conditioned stimulus (CS) is presented at the same time as the unconditioned stimulus (US) and produces an unconditioned response (UR).

*Virus (US) + Drink (CS)* → *Feeling nauseous (UR)*



*Food (US) + Bell (CS)* → *Salivating (UR)*



After conditioning the conditioned stimulus (CS) leads to a conditioned response (CR).

Drink (CS) → Feeling nauseous (CR)



Bell (CS) → Salivating (CR)



### Reversing the conditioning process

The process of conditioning can be reversed by (repeatedly) presenting the CS without the US. If the CS is presented on its own then the association between the CS and the US becomes weaker. This process is known as extinction. With time the CS stops leading to the CR and the CR is said to be extinguished.

### Why is classical conditioning important to therapists?

Often neutral stimuli become associated with fearful situations and cause difficulties in people's lives. E.g. John is driving on a rainy day (CS) when he is involved in a car crash (US) - he finds this terrifying (UR)



Afterwards, John feels nervous whenever it rains (CR). He stops driving altogether



Afterwards, John feels nervous whenever it rains (CR). He stops driving altogether



John sees a therapist who explains that he can overcome his fear by extinguishing his conditioned response. The therapist recommends that John needs to go driving repeatedly, particularly if it is raining. He is reassured that his fear will reduce over time if he does so.



## Coercive Methods For Enforcing Compliance

### Description

Abusers use a variety of techniques in order to coerce others into behaving the way they want. In 1956 the psychologist Albert Biderman developed a framework for understanding the methods foreign armies used to extract false confessions from prisoners of war. Psychologists now believe that abusers in many different situations use the same methods to achieve control over their victims. For example, victims of domestic violence or childhood abuse often report having experienced similar treatment.

These methods include:

1. Isolation
2. Monopolisation of perception
3. Induced exhaustion / debilitation
4. Threats
5. Occasional indulgences
6. Demonstrating 'omnipotence' and 'omniscience'
7. Degradation
8. Enforcing trivial demands

## Coercive Methods For Enforcing Compliance

Abusers use a variety of techniques in order to coerce others into behaving the way they want.

Use the checklist below to record whether you have been subjected to any of these methods of coercive control.

Method	Example
<p><i>Isolation</i></p> 	<p><input type="checkbox"/> Cut off from my family or friends</p> <p><input type="checkbox"/> Methods of communication controlled (e.g. phone, email, internet)</p> <p><input type="checkbox"/> Encouraged not to see people</p> <p><input type="checkbox"/> Encouraged not to work</p>
<p><i>Monopolisation of perceptions</i></p> 	<p><input type="checkbox"/> Physically isolated</p> <p><input type="checkbox"/> Freedoms restricted / not encouraged</p> <p><input type="checkbox"/> Behaviour controlled by mixture of charm, seduction, and hostility</p> <p><input type="checkbox"/> Encouraged to focus on abuser's wants / needs instead of your own</p>
<p><i>Induced debilitation / exhaustion</i></p> 	<p><input type="checkbox"/> Sleep deprived (e.g. not allowed to go to bed, woken in night)</p> <p><input type="checkbox"/> Diet controlled (e.g. starvation)</p> <p><input type="checkbox"/> Over-worked (e.g. kept busy, given many jobs, made physically tired)</p>

*Threats*



- Threats of death
- Threats of injury
- Threats of suicide if you don't comply
- Threats to loved ones
- Vague threats

*Occasional indulgences*



- Occasional favours
- Fluctuation of behaviour - sometimes pleasant, other times punishing
- Promises (e.g. "I will change")
- Rewards for partial compliance (e.g. "I like this ... but stop doing that")

*Demonstrating 'omnipotence' and 'omniscience'*



- Starting confrontations
- Taking compliance for granted (e.g. acting 'as if' you would never rebel)
- Demonstrating complete control

*Degradation*



- Humiliating treatment (e.g. humiliated in front of others, punishments)
- Sexual degradation (e.g. encouraged to engage in humiliating sexual behaviour)
- Controlling or preventing personal hygiene
- Insults and taunts
- Denial of privacy

*Enforcing trivial demands*



- Demanding things be done a certain way
- Making little requests
- Habits that must be adhered to

# Activity Diary

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
06:00 – 07:00							
07:00 – 08:00							
08:00 – 09:00							
09:00 – 10:00							
10:00 – 11:00							
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# Activity Diary

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
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## Activity Planning

Part of feeling good is about planning and carrying out activities that we enjoy. Try to plan an activity you enjoy for the morning, afternoon, and evening over the next week. Record how you feel when you complete one of these. Try to include a mix of activities with other people as well as activities you do on your own. Please note you can choose to do like the example below, instead of the timely sheet as give above:

**Activity Planning**  
Part of feeling good is about planning and carrying out activities that we enjoy. Try to plan an activity you enjoy for the morning, afternoon, and evening over the next week. Record how you feel when you complete one of these. Try to include a mix of activities with other people as well as activities you do on your own.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	Get myself a coffee from the nice coffee shop near work Feel: indulged			work from home and not have a shower! Feel: at ease		Volunteer at the children's centre - they always cheer me up Feel: enlivened	
Afternoon		Go and get lunch with friend from work instead of eating at my desk Feel like she cares			walk back from the meeting via the river and eat lunch while watching the swans Feel: peaceful	Go shopping for myself Feel: hard to get enthused	meet up with Sian to go for a walk with her new dog Feel: happy

## Activity Selection

Identify ten activities that are important to you – activities that would make your life richer or more meaningful (you could use the values worksheet to help you do this). Write ten activities on this form. Then rank each activity according to how difficult it would be to accomplish, where 1 is the easiest and 10 is the hardest.

Activity	Rating