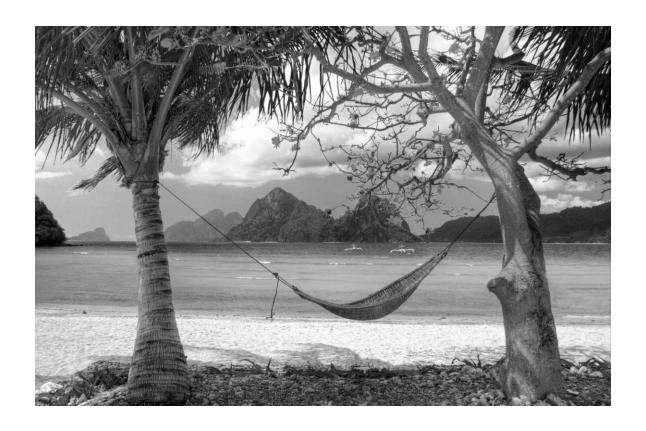
# **Getting Unstuck**

# **Student Workbook**





(434) 582-2651 Green Hall 1830 www.liberty.edu This Getting Unstuck workshop curriculum is based on the Getting Unstuck curriculum at Counseling Services of California Polytechnic State University, San Luis Obispo, with modifications by the Broene Counseling Center of Calvin College. Used by permission.

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#### Welcome!

Welcome to Getting Unstuck, a fast-paced, 3-session seminar intended to help increase your understanding and knowledge about depression. The goal is to provide you with some skills to recognize and manage symptoms you may be experiencing. We hope you find it helpful.

The seminar will provide you with life-long tools you can use while facing depressive symptoms. By the end of this workshop, you will have received a lot of information that at times may feel overwhelming. Remember that like any skill (e.g., learning to ride a bike), the skills you will learn in Getting Unstuck take time and practice to master. At times, you may encounter obstacles and/or find it difficult to integrate these skills into your daily life. That's okay, it's how change works, and as with all change, it's important to practice as much as you can, even after encountering setbacks.

These skills are a form of "mental health hygiene." At the outset, it may seem tedious and you may question why you need to practice these skills so often. Think of it like dental hygiene—you brush your teeth multiple times a day to prevent the buildup of plaque and ultimately to prevent cavities. Similar to brushing your teeth, daily practice can minimize and prevent the symptoms of depression long-term. The more you practice and use these skills as part of your daily routine, the less tedious they may seem because they simply become a regular part of daily life.

A few guidelines to keep in mind...

- This workshop is confidential. Do not share information about anyone in the workshop with others, including others' stories (even if you think no one will know whom you're speaking about). We want to ensure that it feels safe to speak here.
- You are expected to attend all three sessions, as they build upon each other. If you miss a session, you will be asked to switch to a different section of the workshop in order to continue with the material in the proper order.
- Please be sure to let your workshop leader know (or call the counseling office) ahead of time if you are unable to attend a session.

If at any time you feel that you need additional support, please let your workshop leader know or contact Student Counseling Services at 434-582-2651. You can also find additional resources online at www.liberty.edu/studentcounselingservices.

We're glad you're here!

#### **Frequently Asked Questions**

#### What is Getting Unstuck?

Getting Unstuck is a fast-paced, three-session seminar specifically designed to help people who struggle with a variety of depression-related concerns. The goal is to provide education on depression and to teach coping skills for managing symptoms.

#### Why does Getting Unstuck use a 3-session model?

Teaching Getting Unstuck over the course of 3 sessions allows you sufficient time to learn the concepts with time to practice between sessions. Keeping it to three 50-minute sessions allows you to find time in your busy schedule to learn these skills.

#### What if I need more than 3 weeks to learn the model?

You are not alone. The skills are difficult and take time to build. For this reason, we offer multiple other groups, workshops, and resources that are intended to provide further support for practicing these skills. For more information, talk with your Getting Unstuck workshop leader or contact Student Counseling Services.

#### What if I don't feel comfortable in groups?

Many people feel a little anxious about participating in a group. Getting Unstuck is structured and curriculum-driven, like an academic class. You are not required to speak if you do not feel comfortable doing so. The facilitators respect each participant's right to share only what they are comfortable sharing and never require you to share sensitive or potentially embarrassing information about yourself.

#### What if I have an urgent need to see a counselor during the seminar?

Simply let the workshop leader or the Student Counseling Services front desk staff know, and they will facilitate you getting the help you need.

#### Why do I have to do homework?

The focus of this workshop is on building skills to cope with depression. In order to achieve that goal, regular practice is essential. The more you practice, the more you may find you get out of this workshop. The assignments are for you and only you, in the service of your own personal growth. You will not be required to provide your responses out loud at any time. However, it's important to bring your responses with you each week as you may be asked to look back or elaborate on a prior assignment during the workshop.

#### What if I didn't do my homework?

We encourage you to come to group regardless of whether or not you were able to complete the homework assignment. We can also assist you in working on examples when the homework is reviewed.

# **SESSION ONE**

# **Understanding Depression**

#### **Understanding Depressive and other Related Disorders**

While some depressive symptoms (i.e., sadness) are a normal experience for everyone, depressive and other related disorders are characterized by significant distress or impairment in social, academic/occupational, or other important areas of functioning (e.g., your general ability to function in life).

Some of the most common disorders include:

Major Depressive Disorder:

Involves experiencing depressive episodes, which must last for two weeks, and include a minimum of 5 symptoms.

Persistent Depressive Disorder:

A less extreme depressive presentation that includes a depressed mood and at least 2 other symptoms that last for at least two years. May have episodes of major depression along with periods of less severe symptoms, but symptoms must last for two years.

Premenstrual Dysphoric Disorder:

Several depressive symptoms present consistently during the week prior to menses.

**Bipolar II Disorder:** 

Includes experiences of both depressive episodes as well as "mixed" or hypomanic episodes (i.e. elevated mood with other expansive symptoms).

**Cyclothymic Disorder:** 

Persistent periods of alternating between "highs" and "lows" that are subthreshold for hypomanic and depressive episodes.

Disruptive Mood
Dysregulation Disorder:

Recurrent temper outbursts and persistently irritable or angry mood for at least one year (present between ages 6-18).

# **Common Depressive Symptoms**

Self-criticism	Reduced focus/concentration	Low mood or persistent sadness	Fatigue or low energy
Withdrawing from friends, family, pets	Suicidal thoughts or preoccupation with death	Crying Spells	Suicide attempts
Loss of Pleasure for things you used to enjoy	Poor hygiene	Anger or irritability	"Self-medicating" with alcohol or other drugs
Changes to eating or weight	Worry about something awful happening	Guilt	Appetite disruption
Unexplained aches and pains	Numbness or feelings of emptiness	Changes to sex drive	Gastrointestinal problems
Physical restlessness or slowing	"Heaviness" in the body	Hopelessness	Fear of rejection
Increased or reduced sleep	Inability to make decisions		

#### **Common Schemas**

#### **Abandonment**

The belief and expectation that others are unreliable and will eventually leave. The belief that relationships are fragile, loss is inevitable, and you will ultimately wind up alone.

#### Approval-Seeking/Recognition-Seeking

The sense that approval, attention, and recognition from others are far more important than genuine self-expression or being true to yourself.

#### **Defectiveness/Shame**

The belief that you are flawed, unlovable, or, damaged and would be rejected by significant others if exposed. May involve hypersensitivity to criticism, insecurity around others, or a sense of shame regarding perceived flaws.

#### Dependence/Incompetence

The belief that your judgement is questionable and you are incompetent. This leads to feeling like you are unable to handle day-to-day responsibilities (i.e., taking care of yourself or making good choices) without considerable help from others.

#### **Emotional Deprivation**

Expectation that your primary emotional needs, including nurturing, protection, and empathy, will never be met.

#### **Emotional Inhibition**

The belief that you must control your self-expression or others will reject or criticize you.

#### **Enmeshment/Undeveloped Self**

The belief that you do not have an individual identity separate from one or more significant others, resulting in unhelpful levels of emotional involvement and closeness. May also include feelings of smothering.

#### **Entitlement/Grandiosity**

The belief that you are special or more important than other people and entitled to special rights and privileges, even though it may have a negative effect on others. May include an exaggerated focus on superiority in order to achieve power or control.

#### **Failure**

The belief that you have failed, will inevitably fail, or are fundamentally inadequate in areas of achievement (i.e., school, career, sports, etc.).

#### **Insufficient Self Control/Self-Discipline**

Difficulty or refusal to exercise self-control and frustration tolerance in order to achieve personal goals, or to restrain the excessive expression of emotions and impulses.

#### Mistrust/Abuse

The belief that others will hurt, abuse, humiliate, cheat, or manipulate you. Usually involves the belief that the harm is intentional or due to extreme negligence.

#### **Negativity/Pessimism**

A pervasive belief that the negative aspects of life outweigh positive or optimistic aspects. The expectation that things will eventually go seriously wrong or that things that seem to be going well will ultimately fall apart.

#### **Punitiveness**

The belief that people should be harshly punished for their mistakes or shortcomings.

#### **Self-Sacrifice**

The belief that **you should** focus on meeting the needs of others at the expense of your own needs, to the point that it is excessive and harmful.

#### **Social Isolation**

The belief that you are isolated from the rest of the world, different from other people, and/or alienated from a community.

#### **Subjugation**

Excessive surrendering of control to others because you feel coerced, usually to avoid anger, retaliation, or abandonment.

#### **Unrelenting Standards**

The belief that you need to be the best, constantly striving for perfection or trying to avoid mistakes.

#### **Vulnerability**

Belief that the world is a dangerous place and that imminent catastrophe will strike at any time and that you will be unable to prevent it.

# **Common Depressive Symptoms**

Behaviors	Thoughts	Emotions	Physical Sensations
Increased or reduced sleep	Reduced focus/concentration	Low Mood or persistent sadness	Fatigue or low energy
Withdrawing from friends, family, pets	Suicidal thoughts or preoccupation with death	Loss of Pleasure for things you used to enjoy	Unexplained aches and pains
"self-medicating" with alcohol or other drugs	Self-criticism	Anger or irritability	"heaviness" in the body
Changes to eating or weight	Worry about something awful happening	Guilt	Appetite disruption
Suicide attempts	Fear of rejection	Numbness or feelings of emptiness	Gastrointestinal problems
Physical restlessness or slowing	Inability to make decisions	Hopelessness	Changes to sex drive
Poor hygiene			
Crying Spells			

#### **Situation** (When? Where? What? With whom?)

I have a group assignment due for my class. I asked a fellow classmate to be my partner, but she declined.

Schemas: failure, abandonment, defectiveness, social isolation



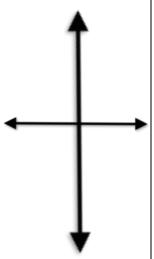
**Physical** (When depressed, what physical sensations did you experience? What did you notice in your body?)

Upset stomach, tired, lost my appetite, got really hot



**Emotional** (What emotions came up for you when you felt depressed?)

Sad, ashamed,
embarrassed, rejected,
lonely, irritable



Cognitive (What went through your mind when you felt depressed? What did that say or mean about you or the situation?)

I knew I shouldn't have asked her; she's way smarter than me and she knows it. If we had worked together, I only would have brought down the grade. I'm so stupid. She must hate me.

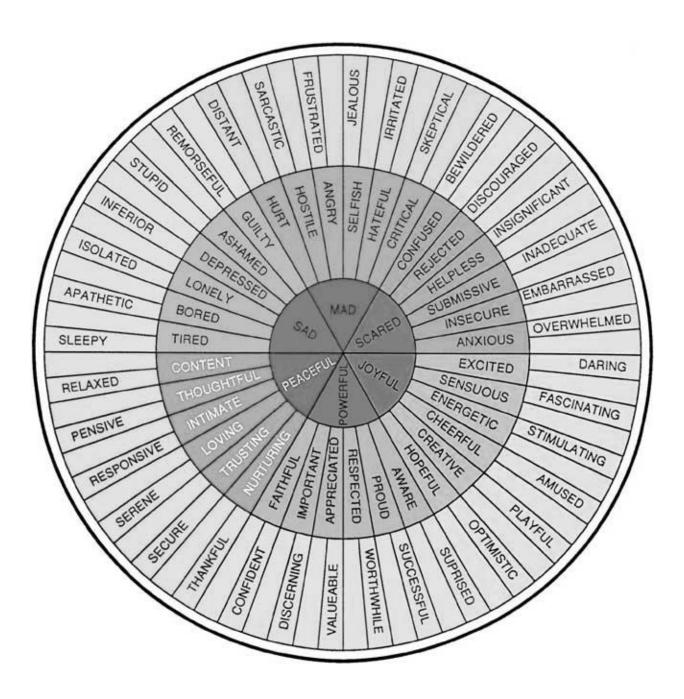


**Behavioral** (What was your first instinct and/or response? What did you do and/or avoid doing?)

I want to avoid asking anyone else in case they say no. I left class early and haven't found a partner to work with. I'll avoid talking to her in the future.



# **Feelings Wheel**





# **Sleep Hygiene**

- 1. **Get regular.** Go to bed and get up at more or less the same time every day, even on weekends and days off!
- 2. **Get up and try again.** Try to go to sleep only when tired. If you haven't been able to get to sleep after about 30 minutes, get up and do something calming (not stimulating) until you feel sleepy, then return to bed and try again.
- 3. Avoid caffeine and nicotine.
  Avoid consuming any caffeine
  (coffee, tea, soda, chocolate) or
  nicotine (cigarettes) for at least
  4-6 hours before going to bed.
  These act as stimulants and interfere with falling asleep.
- 4. **Avoid alcohol**. Avoid alcohol for at least 4-6 hours before bed because it interrupts the quality of sleep.
- 5. **Bed is for sleeping.** Try not to use your bed for anything other than sleeping and sex, so that your body comes to associate bed with sleep.
- 6. **Electronics curfew.** Don't use back-lit electronics 60 minutes prior to bed, as the artificial light inhibits hormones and neurons that promote sleep.

- 7. **No naps.** Avoid taking naps during the day. If you can't make it through the day without a nap, make sure it is for less than an hour and before 3pm.
- 8. **Sleep rituals**. Develop rituals to remind your body that it is time to sleep, like relaxing stretches or breathing exercises for 15 minutes before bed.



- 9. **No clock-watching.** Checking the clock during the night can wake you up and reinforces negative thoughts such as, "Oh no, look how late it is, I'll never get to sleep."
- 10. **The right space.** Make your bed and bedroom quiet and comfortable for sleeping. An eye mask and earplugs may help block out light and noise.
- 11. **Keep daytime routine the same.** Even if you have a bad night's sleep, it is important that you try to keep your daytime activities the same as you had planned. That is, don't avoid activities because you feel tired. This can reinforce the insomnia.

# **Exercise Tips**

- **1. Find an enjoyable activity.** Exercise doesn't have to be boring. Choose a pleasurable activity, like playing badminton or doing yoga. Aim for fun, not more work.
- **2. Start small.** Commit to 10 minutes of exercise a day or add exercise to your daily routine (like walking to school or doing push-ups in your room).
- 3. Get outside. The sun provides a mood "pick me up" of its own, producing serotonin in the brain. Take a walk outside or go swimming.
- **4. Schedule it in.** It's easy to skip exercise when we don't plan. Put it in your phone as part of your daily to-do's and celebrate when you check it off.
- **5. Mix it up.** To avoid feeling bored with exercise, try a number of different activities.

- **6. Team up.** Depression can be isolating. Ask others to do team activities or find an exercise buddy for accountability and to increase social interaction.
- 7. Minimize equipment.
  Equipment can be expensive.
  Identify activities that don't require you to have equipment or facilities, like walking, running, or dancing.
- **8. Follow your energy.** If your energy fluctuates throughout the day, try to plan to exercise when your energy is at its peak. Alternatively, exercise when feeling sluggish for an energy boost.
- **9. Set goals.** Achieving goals improves mood and selfesteem. Set specific achievable exercise goals and reward yourself when you accomplish them.

# **Session 1: Homework Assignment**

#### **Homework 1**

Complete at least 1 simple Cross-Sectional Formulation worksheet for review next week.

• multiple blank copies provided starting on page 16

#### **Homework 2**

Implement one sleep hygiene tip and one exercise tip over the next week.

• see page 14

# **SESSION TWO**

Thoughts & Behaviors

#### How To Do a "Good" Depression

- Stay still, don't do anything.
- Stay in bed if you can; if not, sit in the same chair or lay on the couch.



- Watch excessive amounts of TV or go online for hours, particularly viewing social media.
- Sleep during the day and don't sleep at night.
- Focus on the past, your fears, faults and resentments.
- Imagine the future will be the same or worse than the past or present.
- Isolate; avoid other people, including friends and family.

- If you can't avoid other people, try to talk to the same person or few people.
- If you do talk to people, talk about the same topic, usually how depressed or unhappy you are.
- Eat poorly; overeat or stop eating. Eat predominantly junk food, sugar, and carbs.



- Don't pursue hobbies, passions, or interests.
- Drink alcohol, smoke cigarettes, and/or use other drugs.
- Don't ask for help.

# **Looking at Thoughts**

<b>Cognitive</b> (What went through your mind when you felt depressed? What did that say or mean about you or the situation?)

#### **Schemas**

- Abandonment
- Approval-Seeking/Recognition-Seeking
- Defectiveness/Shame
- Dependence/Incompetence
- Emotional Deprivation
- Emotional Inhibition
- Enmeshment/Undeveloped Self
- Entitlement/Grandiosity
- Failure

- Insufficient Self Control/Self-Discipline
- Mistrust/Abuse
- Negativity/Pessimism
- Punitiveness
- Self-Sacrifice
- Social Isolation
- Subjugation
- Unrelenting Standards
- Vulnerability

## **Unhelpful Thinking Styles**

#### All or nothing thinking



Sometimes called 'black and white thinking'

If I'm not perfect I have failed

Either I do it right or not at all

#### Overgeneralizing

"**nothing** good ever happens"

Seeing a pattern based upon a single event, or being overly broad in the conclusions we draw

#### Mental filter



Only paying attention to certain types of evidence.

Noticing our failures but not seeing our successes

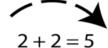
#### Disqualifying the positive



Discounting the good things that have happened or that you have done for some reason or another

That doesn't count

#### Jumping to conclusions



There are two key types of jumping to conclusions:

- Mind reading (imagining we know what others are thinking)
- Fortune telling (predicting the future)

#### Magnification (catastrophizing)



Blowing things out of proportion (catastrophizing), or inappropriately shrinking something to make it seem less important

#### **Emotional** reasoning



Assuming that because we feel a certain way what we think must be true.

I feel embarrassed so I must be an idiot

# should

Using critical words like 'should', 'must', or 'ought' can make us feel guilty, or like we have already failed

If we apply 'shoulds' to other people the result is often frustration

#### Labeling



Assigning labels to ourselves or other people

I'm a loser I'm completely useless They're such an idiot

#### Personalization

"this is my fault" Blaming yourself or taking responsibility for something that wasn't completely your fault. Conversely, blaming other people for something that was your fault.

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# **Unhelpful Behaviors**

Get up at different times every morning	Go to bed at different times every night	Miss class	Don't do a homework assignment	Wait until the last minute to get something done	Stop washing your hair
Stop brushing your teeth	Skip a test	Stop going to team or club meeting	Ignore or decline invites to hang out	Skip a meal	Overeat
Eat lots of junk food	Binge drink	Smoke cigarettes	Stop talking to/actively avoid your friends	Stop talking to/actively avoid your family	Don't seek help when you are struggling
Stay inside all the time	Play video games for hours	Constantly monitor social media	Stay in your bed	Stay in your room; don't leave	Stop talking to your roommate
Stop completing tasks	Stop going to work	Stop exercising	Watch a lot of TV	Only eat one meal a day	Argue with other people
Stop doing your hobbies	Only focus on the negative	Complain a lot	Use recreational drugs	Sleep all day	Don't move
Only listen to music that makes you sad, angry or upset	Stop smiling and laughing	Stop going to church, meditating or praying	Let your room get really disorganized	Self-harm	Smoke marijuana

Schema	Example of surrender	Example of avoidance	Example of Over-	Schema	Example of Surrender	Example of Avoidance	Example of Over-
			Compensatio n				Compensation
Abandonment/ Instability	Selects partners who cannot make a commitment and remains in the relationships	Avoids intimate relationships; drinks a lot when alone	Clings to partner to point of pushing partner away; attacks partner for minor separations	Entitlement/ Grandiosity	Bullies others into getting own way, brags about own accomplishments	Avoids situations in which they are average	Attends excessively to the needs of others
Mistrust/Abuse	Selects abusive partners	Avoids becoming vulnerable and trusting anyone; keeps secrets	Uses and abuses others ("get others before they get you")	Insufficient Self- Control/ Discipline	Gives up easily on routine tasks	Avoids employment or accepting responsibility	Becomes overly self- controlled or self- disciplined
Emotional Deprivation	Selects emotionally depriving partners and does not ask them to meet	Avoids intimate relationships all together	Acts emotionally demanding with partners and close friends	Subjugation	Let's other individuals control situations and make choices	Avoids situations that might involve conflict with another individual	Rebels against authority
Defectiveness/ Shame	Selects critical and rejecting friends; puts self down	Avoids expressing true thoughts and feelings and letting others get close	Criticizes and rejects others while seeming to be perfect.	Self-Sacrifice	Gives a lot to others and asks for nothing in return	Avoids situations involving giving or taking	Gives as little to others as possible
Social Isolation/ Alienation	Focuses exclusively on differences from others rather than similarities	Avoids social situations and groups	Becomes a chameleon to fit into groups	Approval/ Recognition Seeking	Acts to impress others	Avoids interacting with those whose approval is coveted	Goes out of the way to provoke the disapproval of others; stays in the backeround
Dependence/ Incompetence	Asks significant others (parents, spouse) to make all their financial decisions	Avoids taking on new challenges, such as learning to drive	Becomes so self- reliant that they do not ask anyone for anything	Negativity/ Pessimism	Focuses on the negative; ignores the positive; worries constantly;	Drinks to blot out pessimistic feelings and unhappiness	ls coverly optimistic denies unpleasant realities
Vulnerability to Harm or Illness	Obsessively reads about catastrophes and anticipates them in everyday situations	Avoids going places that do not seem totally "safe"	Acts recklessly, without regard to danger	Emotional Inhibition	Maintains a calm, emotionally flat demeanor	Avoids situations in which people discuss or express feelings	Awkwardly tries to be the "life of the party, "even though it feels forced and unnatural
Enneshment/ Undeveloped Self	Lives through partner	Avoids intimacy; stays independent	Tries to become the opposite of significant others in all ways	Unrelenting Standards/ Hypercriticaln ess	Spends inordinate amounts of time trying to be perfect	Avoids or procrastinates in situations where performance will ha indeed	Does not care about standards at all-does tasks in a hasty,
Failure	Does tasks in a halfhearted or haphazard manner	Avoids work challenges completely; procrastinates on tasks	Becomes an "overachiever" by ceaselessly driving themself	Punitiveness	Treats self and others in harsh , punitive manner	oc judged Avoids others for fear of punishment	caretess manner Behaves in overly forgiving way

## **Session 2: Homework Assignment**

#### **Homework 1**

Complete Maintaining Depressed Mood Worksheet.

• see page 27

#### **Homework 2**

Complete at least one simple Cross Sectional Formulation and one Looking at Thoughts worksheet for review next week.

• multiple blank copies provided starting on page 28

#### Homework 3

Continue practicing the sleep hygiene and exercise tip that you chose last week.

• see page 14

#### **Maintaining Depressed Mood**

Your task is to be a curious investigator or scientist in the study of you for at least two days this week. What are your thought and behavior patterns that perpetuate feeling depressed? What perpetuates feeling okay or good? What is not working and what is working?

#### Things I think and do that maintain my depressed mood:

Examples of thoughts: Magnification, disqualifying the positive, emotional reasoning

<u>Examples of behaviors:</u> Skip meals, stop exercising, stay up late, stop showering, miss class, avoid friends

Day	Thoughts	Behaviors
1		
2		
(Sat or Sun)		

#### Things I think and do that help me feel okay, good, and/or accomplished:

<u>Examples of thoughts:</u> Compliment yourself, give yourself credit for doing something, talk back to your negative thoughts, remind yourself to be gentle to yourself, think about a good memory

Examples of behaviors: Read a book for fun, go to a club meeting, brush my teeth at night, go to the library to study, clean/organize my room, eat breakfast, take vitamins, call a friend, go to a coffee shop, do a chore

Day	Thoughts	Behaviors
1		
2		
(Sat or Sun)		

## **Looking at Thoughts**

#### **Schemas**

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# **Looking at Thoughts**

<b>Cognitive</b> (What went through your mind when you felt depressed? What did that say or mean about you or the situation?)

#### **Schemas**

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# **SESSION THREE**

Making Changes

#### **Self-Affirmations**

This cheat sheet should help you create self-affirmations that are effective and personalized. Affirmations can focus on several categories, including character traits, physical attributes, and skills and/or accomplishments.

- 1. Start your affirmations with "I am" (e.g., "I am a good friend")
- 2. Keep them short (we don't need a novel)
- 3. Keep them positive (avoid saying "not")
- 4. Use feeling words when you can (e.g., "I am proud of myself")
- 5. Keep them focused on you (after all, they are **self**-affirmations)

Examples: "I am proud that I am hard-working" or "I am thankful for my strong legs"

My Self-	-Affirmations:			

#### **Feeling stuck?** Ask yourself questions like these:

- When was a time that you felt proud of yourself and why?
- Have you ever forgiven someone who has hurt you?
- Have you ever received a compliment that you agree with?
- What would your best friend or a loved one say about you?

#### **Feeling Guilty?** Consider this:

- We are socialized to ignore or minimize our positive characteristics.
- Unfortunately, we then just dwell on our "negatives."
- Practicing self-affirmations helps bring balance and improve mood.

## **Alternative Response Worksheet**

**Situation:** (When? Where? What? With whom? What did you feel depressed about?)

I have a group assignment due for my class. I asked a fellow classmate to be my partner, but she declined.

Alternative Thoughts and Images: (Are these thoughts helpful? Are the depressed thoughts 100% true/accurate, 100% of the time? What are other ways of looking at this? What is the bigger picture?)

She might already have a partner.

I've done well in this class so far, so I might not be stupid.

Not everyone is going to like me and that is okay.

#### Alternative Behaviors:

(What could you do that would be more helpful for you, others, &/or the situation? What are coping strategies that might be helpful?)

# Coping Strategies I Can Use:

- **☑** *Deep breathing*
- ☐ *Distract myself*
- ☐ Seek support from a friend/family member
- ✓ Do a pleasurable activity
- ☐ Use alternative response worksheet
- □ Other\_\_\_\_\_
- □ Other\_\_\_\_\_

#### **Alternative Feelings**:

(What are feelings that are more helpful? What if you acted and thought differently about the situation? How might these changes help you feel differently?)

Optimistic

Confident

Relaxed

Neutral

**Outcome:** (What was the original outcome? Using these new alternatives, what would you like the outcome to be in the future?)

Original outcome: I left class early and e-mailed my professor to assign me a partner. Next time: I would like to say, "thanks anyway" and will ask a person with whom I have worked well in the past.

# **Alternative Response Worksheet**

<b>Situation</b> (When? Where? What? With whom? What did you feel depressed about?)				
Altornative Thoughts	Altornativo Dahaviava	Altornativo Faclings		
Alternative Thoughts and Images: (Are these thoughts helpful? Are the depressed thoughts 100% true/accurate, 100% of the time? What are other ways of looking at this? What is the bigger picture?)	Alternative Behaviors: (What could you do that would be more helpful for you, others, &/or the situation? What are coping strategies that might be helpful?)  Coping Strategies I Can Use: Deep breathing Distract myself Seek support from a friend/family member Do a pleasurable activity Use alternative response worksheet Other	Alternative Feelings: (What are feelings that are more helpful? What if you acted and thought differently about the situation? How might these changes help you feel differently?)		

**Outcome:** (What was the original outcome? Using these new alternatives, what would you like the outcome to be in the future?)

#### Challenging the Unhelpful Thinking Styles

# All or nothing thinking



Things aren't either totally black or white, all or nothing. There are gray areas. Where is this on the spectrum?

#### Overgeneralizing

"nothing good ever happens" Am I making global evaluations for a specific experience? Is it 100% true, 100% of the time? Am I describing what I actually see and have evidence for.

#### Mental filter



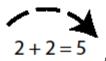
Am I using my negative schema as a filter? What if I approached the situation from a different perspective?

# Disqualifying the positive



Am I only noticing the bad stuff? Am I filtering out the positive? Am I using my negative schema as a filter?

# Jumping to conclusions



Am I assuming that I know the future? Am I assuming that I know what other people are thinking? Have I tested my assumptions?

#### Magnification (catastrophising) & minimization



Thinking of the worst possible things that could happen is not helpful right now. What's most likely to happen? What's the bigger picture?

# Emotional reasoning



Just because it feels bad, doesn't necessarily mean it is bad. My feelings are a reaction to my thoughts and my thoughts aren't necessarily 100% true or accurate.

# should must

Am I putting more pressure on myself? Are these unrealistic expectations? What would be more realistic?

#### Labelling



Would I say this to my best friend?

#### Personalization

# "this is my fault"

Is this something that I am 100% responsible

Adapted from http://psychology.tools PSYCHOLOGYT #LS

#### If you're having trouble, ask yourself these questions...

#### **Alternative THOUGHTS:**

- 1. What are other ways of looking at this situation?
- 2. Am I looking at the whole picture?
- 3. What might be a more helpful way of thinking about this situation?
- 4. What unhelpful thinking styles might I be using here?
- 5. What is the evidence that my thoughts are true? Is there an alternative way of thinking about this situation that is more accurate?
- 6. What is the probability that my thoughts will happen? What are some other things that could happen that are equally, if not more, probable?
- 7. Have I had any experiences in the past that suggests that this thought might not be COMPLETELY true ALL of the time?
- 8. Can I really predict the future? Is it helpful to try? What is more helpful?
- 9. Am I exaggerating how bad the result might be? What is more realistic?
- 10. Can I read people's minds? What else might they be thinking?
- 11. If a friend or loved one were in this situation and had this thought, what would I tell them?

#### Alternative BEHAVIORS:

- 1. What could I do in the moment that would be more helpful?
- 2. What's the best thing to do (for me, for others, or for the situation)?
- 3. If my feared situation happens, how will I cope? What coping skills can I use to handle my feared situation? What have I done in the past that was successful?
- 4. Do I need to work on acceptance, letting go of control, being okay with less than perfect, or having faith in the future and myself?
- 5. Breathe: Focus your attention on your breathing. Imagine you have a balloon in your belly, inflating on the in-breath, deflating on the out-breath.

#### Alternative FEELINGS:

- 1. What might it feel like if I acted/thought differently?
- 2. When I'm not feeling this way, do I think about this situation differently?
- 3. Are there any strengths or positives in me or the situation that I might be ignoring?
- 4. What else might this feeling be related to? Is it *really* about feeling \_\_\_\_?
- 5. Tell yourself: "This feeling will pass. It's a normal body reaction."

#### **Other Helpful Thought Tips**

- 1. **Stopping.** Interrupt a thought as it begins. Use a strong image or a word to interrupt the thought.
  - Strongly state it, either internally or aloud.
- 2. **Distracting.** Redirect your mind to something else internally or externally, preferably something pleasant and engaging.
- 3. Mindful Observing. Watch,
- label, or log your thoughts. Use the language "I am thinking ..." or "My mind is having the thought that..." to distance yourself from the thought.

- 4. **Understanding**. Begin to understand where thoughts come from by asking a number of questions, including: What is the purpose of this thought? Does it tie to a specific schema?
- 5. **Mindfully Letting Go.** Use imagery or words to visualize thoughts passing by. Good examples are clouds in the sky or leaves on a stream.
- 6. **Gratitude.** Try to focus on something that you are grateful for from the past, present, or future.

## **Helpful Behavioral Tips**

The following lists of ideas are meant to get you thinking about possibilities for helpful behaviors. The activities do not have to be huge commitments; focus on small baby steps. Choose activities that are do-able for you when you are feeling down. The more success you have in doing the little things, the more likely you will be motivated to try more things.

<u>Ideas f</u>	<u>for Socializing</u>	
	Watch a movie with a friend	Go to a gym class, dance class, martial arts class, etc.
	Go to an intermural or CP game	Go eat free samples at Farmer's Market
	Go to the library, coffee shop, or dorm lounge to study	Plan to eat a meal with a roommate/friend
<u>Ideas 1</u>	for Pleasant Activities	
	Play with a pet	Color/Paint/draw/sculpt
	Go shopping or window shopping	Write poem, music, play, story
	Fix/tinker with something	Read for fun
	Listen to music	Watch the sunset/rise at the beach
<u>Ideas í</u>	for Mastery Activities	
	Wash a dish or two (even if they aren't yours)	Read a chapter or a page of your homework assignment
	Do laundry	Take out the trash
	Return a phone call	Pay a bill
	Write that email to your professor	

#### Other Helpful Behavioral Tips for Managing Depression

- 1. Get sunlight:
  Aim for 5 to 15
  minutes of
  sunlight a day.
  Sunlight increases the brain's
  release of serotonin, which is
  associated with boosting mood.
- 2. **Get a massage**: Massage boosts serotonin and decreases stress hormones. Try giving yourself a massage by lying on or leaning against a tennis ball or rolling it against your muscles.
- 3. **Practice Yoga:** Yoga works to improve mood and has benefits similar to that of exercise and relaxation techniques.

Yoga poses that incorporate back bends and opening the chest help to increase positive emotions.

- 4. **Stand up straight:** Your body tells your brain how to feel. Stand up straight and open your chest to feel more confident.
- 5. **Smile** (even if you're faking): When you smile, you are more likely to perceive positive emotions in other people, which can positively impact your mood.

  Smiling will lead your brain to believe that you are happy.

6. **Laugh** (*even if you're faking*): Your brain does not distinguish



between real and fake laughter. If your brain gets signals from your body that you should feel happy,

then it is more likely to feel happy.

- 7. **Do Progressive Muscle Relaxation:** Flex a tight muscle for a few seconds and release. Pay particular attention to your facial muscles as those have the largest effect on emotion.
- 8. **Create/listen to music**: Music can help regulate your emotions. It can be soothing and help you feel calm and/or it can be energizing and pump you up.
- 9. **Dance**: Dancing combines music and physical activity so it is a double whammy.
- 10. **Journal:** Labeling your emotions and writing your story can be cathartic and help you organize your thoughts.

Adapted from Alex Korb's "The Upward Spiral"

# My Personalized Plan

1.	My schemas [pages 8-9]:
2.	My depressive symptoms (e.g., lack of motivation, self-criticism) [page 10]:
3.	My unhelpful thinking styles (e.g., catastrophizing) [pages 22-23]:
4.	My unhelpful behaviors (e.g., isolating) [pages 24 & 27]:
5.	One sleep and one exercise tool I plan to use [page 14]:
6.	Two thought exercises I plan to use (e.g., alternative responses, self-affirmations) [pages 35 & 37-40]:
7.	Two behavioral tips I plan to use (e.g., pleasant event, mastery activity) [pages 41-42]: