COGNITIVE BEHAVIOURAL INTERPERSONAL SKILLS MANUAL



Acknowledgements

The development of the Cognitive Behavioural Skills Manual was initially sponsored by the Vancouver Island Health Authority. The General Practice Services Committee provided funding to tailor the manual for the Practice Support Program, a joint initiative of the BC Ministry of Health and the BC Medical Association.

The preparation of this manual has been a truly collaborative process. Many people have given freely of their time to contribute their experience with cognitive behavioural skills. We wish to acknowledge all of them and in particular:

Rivian Weinerman, MD, FRCPC - Past Site Chief of Psychiatry, Island Health

Helen Campbell, MD, FRCPC – Collaborative Care Director, USTAT, Island Health

Magee Miller, MSW – Clinical Therapist, Island Health

Janet Stretch, RPN – Nurse Therapist, Island Health

Anne Corbishley, PHD – Registered Psychologist

Nadine Groves, M.ED – Clinical Therapist, Island Health

This version of CBIS was further informed through a collaborative process between Island Health and the Tillicum Lelum Aboriginal Friendship Centre.

The project was supported by Shana Hall, BA ENT, Project Manger, Collaborative Care, Island Health

Any part of this manual may be reproduced in any form and by any means without written permission or acknowledgement. However, permission to alter or modify any part must first be obtained from the Collaborative Care Team, USTAT Clinic, 1119 Pembroke Street, Victoria BC, V8T 1J5, Phone 250-213-4400, Fax 250-213-4401.







IN	TRODUCTION	1
•	Patient Empowerment	2
•	Tips	. 3
•	Anxiety: Notes to Practitioners	5
•	The Many Faces of Anxiety	6
•	Medical Considerations	7
FL	OW CHARTS	. 8
AS	SSESSMENT MODULE	16
•	Diagnostic Assessment Interview	.17
•	Diagnostic Screening Worksheet	23
•	Problem List: What is Troubling You	.25
•	Action Plan	. 26
•	Resource List: What Gives You Strength	.27
•	Depression: Self-Assessment Questionnaire	. 28
•	Depression: Self-Assessment Profile	.30
•	GAD: Self-Assessment Questionnaire	. 33
•	GAD: Self-Assessment Profile	.35
ΕC	DUCATION MODULE	.37
•	Understanding Depression - Frequently Asked Questions	38
•	Understanding Generalized Anxiety - Frequently Asked Questions	. 40
•	Depression: System-Wide Crash	. 42
•	Anxiety: System-Wide Explosion	.43
•	Will Medication Help Me	44

... CONTINUED

AC	CTIVATION MODULE: GETTING GOING45
•	Wellness Activities
•	Depression's Energy Budget
•	Small Goals: Baby Steps
•	Problem Solving
•	Opposite Action
•	Chunk the Day
•	Improve the Moment
•	Appreciation Exercise
CC	OGNITION MODULE: STRONG MIND
•	The Circle of Depression
•	Common Thinking Errors
•	Thought Change Process
•	Self-Talk (Mean Talk)
•	Thought Stopping
•	Worry Time
•	Good Guilt / Bad Guilt
•	Assertiveness: Setting Healthy Boundaries
•	Setting Limits
•	Is Anger a Problem for You

	CONTINUED
R	ELAXATION MODULE: CALM BODY
•	Managing Stress
•	Belly Breathing
•	Grounding
•	Body Scan
•	Passive Relaxation
•	Stress Busters
•	One Minute Stress Break
•	Mindfulness
•	Mindfulness Meditation
ΑI	NXIETY MODULE: CALM MIND
•	Costs and Benefits of anxiety
•	How Anxiety Works
•	Panic Circle
•	Taking Control of Panic
•	Your Emotional Thermometer
•	Keeping Anxiety in Check
•	Anxiety Equation
•	Predicting Disaster92
•	Anxiety Lies
•	Coping Statements
•	Coping Plans
•	Taking Risks97
•	Assertive Behaviour 101
•	D.E.S.C. Script

		 MIINUEL
_IF	FESTYLE MODULE: WELLNESS	 101
•	Healthy Habits For Sleeping	 102
•	It's True: You are What You Eat	 103
•	Physical Activity	 105
•	The Wellness Wheel	 106



Introduction

The following modules have been designed to be user friendly for you and your patients.

The intent is that people be empowered through education and coping strategies to effectively deal with the impact of depression and anxiety on their lives.

The introduction section contains an explanation of self-management and patient empowerment strategies for you to help your patients implement self-management.

Patient Empowerment

- Self-management has been considered paramount in the management of chronic diseases such as diabetes, arthritis, and congestive heart failure.
- It is now being incorporated into the care of Major Depression, which is being recognized as a chronic disease.
- Self-management focuses on the impact patients can have when they take an active role in their health.
- Self-management is a collaboration of patients with their doctors and other health care providers around their health problems.
- The goal of self-management is to help patients become educated regarding their health, particular problems of their health, what to expect from their treatment, and what questions to ask about their care.
- Patients are involved in setting the priorities of their treatment, and establishing the goals of their care.
- In this manual we have expanded the scope and definition of self-management to include teaching skills to help patients take a more active stance in their treatment.
- Our intention is to assist patients in realizing that they can manage their symptoms and are actually able to change the way they behave, think, and feel.
- The intent of this manual is to help health care providers empower people with depression and anxiety by involving them in learning the skills to manage and/or change their symptoms.
- We have included assessment tools, educational handouts, and many easy-to-use skills handouts from modules including Activation: Getting Going, Cognition: Strong Mind, Relaxation: Calm Body, Anxiety: Calm Mind, and Lifestyle: Wellness.

Tips

Teaching

Strategies

 Explain how the self-management strategies impact the person's mental health and supplement any medication they may be taking.

Implementing

Bite Size

 Don't hand out the whole package of skills at once. Try one at a time. Select the skill/ activity that you think fits the person and that she/he is most likely to successfully accomplish.

Achieving Goals

 Set realistic goals and low expectations. In order to guarantee success, aim at the minimum the patient is certain of achieving over a specific period of time. Aim for a commitment of 75% or higher.

Building Skills

 Have them practice skill #1 the first week. In the second week they can expand to skill #2 or remain at skill #1. The end goal is to have a repertoire of well-practiced skills, which then become second nature.

Planning

Organize

 Schedule regular follow-up and remember to use bite-size pieces (one handout at a time) to fit with realistic office time. Set up binders with sleeves that contain copies of handouts for easy use, or photocopy and keep your favourites in accessible file folders. Keep notes on what handouts have been given.

TIPS (CONTINUED)

Supporting

Validate and Encourage

Acknowledge your patient's feelings, then firmly and gently encourage them to try a self-management strategy.

Monitoring and Praise

Ask about skill practice at every visit. Congratulate them on their effort, as well as their achievements.

Practice, Practice, Practice

· You may need to help your patients set specific times, frequency, where they will practice and how they'll remind themselves to practice.

Anxiety: Notes to Practitioner

Don't rush to treat anxiety after upsetting events.

Although difficult to tolerate, in most cases anxiety will resolve with time. Early treatment may interfere with the natural ability to process the anxiety.

Keep the person at work or in their usual role as much as possible.

"Taking a break" is usually not a good idea as it can reinforce avoidance.

All anxiety cannot be eliminated.

People will need to be convinced anxiety is an essential part of their survival system. A little anxiety is not harmful and can indeed be helpful.

Avoidance provides immediate relief from anxiety.

Avoidance however reinforces the anxiety and does not create confidence or empowerment. It can be difficult to convince people to give up avoidance in favour of new strategies that may initially increase anxiety.

Attempting new behaviours will increase anxiety at first.

The most difficult aspect of self-management for anxiety is that relief will not come until the person has done the cognitive work and also practiced new skills.

Anxiety is rewarded in our society.

Anxious people gain self-esteem through praise for being conscientious, careful, compliant and protective of others, as well as for not causing trouble and this can lead to burnout.

People with anxiety are generally less motivated for change.

Unlike depressed people, anxious people may be reluctant to engage in strategies that will initially increase anxiety, until their anxiety becomes severe and interferes with functioning.

The Many Faces of Anxiety

Panic Disorder With or Without Agoraphobia

- Recurrent unexpected panic attacks without an obvious trigger.
- Avoidance of situations where panic attacks have occurred.
 Example: A person may have bouts of intense fear, and avoid leaving the house alone (agoraphobia).

Social Anxiety Disorder

- Excessive or unrealistic fear of social situations or performance.
- Intolerance of embarrassment or scrutiny by others.
 Example: A person is so shy that they cannot speak in a group.

Obsessive Compulsive Disorder

- Presence of obsessions (intrusive thoughts, images, or urges that cause anxiety).
- Presence of compulsions (repetitive behaviours or mental acts that are performed to reduce anxiety).
 - **Example**: A person washes their hands repetitively until they are raw because they are afraid of germs.

Specific Phobia

• Unreasonable fear of a specific object or situation usually associated with avoidance.

Example: A person is so afraid of flying that they cannot travel by plane.

Generalized Anxiety Disorder

- Uncontrollable and excessive worry occurring most days about ordinary activities.
- Intolerance of uncertainty.
 Example: A person worries a lot about harm coming to their family members on a routine trip to town.

Post Traumatic Stress Disorder

- Occurs after a traumatic event to which a person responds with intense fear, helplessness, or horror.
- The person relives the event in memories or dreams; avoids reminders of the event and experiences symptoms of increased vigilance.
 - **Example**: A person returns from war and relives the battlefield traumas in his nightmares and startles at the sound of loud noises.

Medical Considerations

Most Common Medical Conditions That Mimic Depression and Anxiety

- Endocrine: Thyroid, menopause, adrenal disorders
- Cardiovascular: Congestive heart failure, mitral valve prolapse, angina, pulmonary embolus
- Respiratory: Asthma, COPD
- Metabolic: Diabetes, hypoglycemia
- CNS: Migraines, temporal lobe epilepsy, vestibular dysfunction
- Hematologic: Vitamin B12 deficiency, anemia
- Drugs: Caffeine, nicotine, alcohol, discontinuation syndromes, stimulants, some prescription meds like asthma medication

Baseline Lab Investigations

- **CBC**
- Fasting glucose
- Electrolytes, calcium, magnesium
- Liver enzymes
- Urinalysis, urine toxicology for substance abuse
- **TSH**
- ECG if indicated
- Pregnancy test if indicated



Flow Charts

This module contains flow charts that direct you to the appropriate treatment strategies in this manual.

When in doubt - go with the flow.

Remember there are 3 ways to navigate the manual.

- 1. Module or Action Plan
- 2. Symptoms
- 3. Self-Assessment Profiles

Action Plan

Patient Needs ···>	Try
Assessment	Diagnostic Assessment Interview
Education>	Understanding Depression
Lifesyle: Wellness	Healthy Habits for Sleeping
Activation: Getting Going	Wellness Activities.46Depression's Energy Budget.47Small Goals.49Problem Solving.51Opposite Action Strategy.52Chunk the Day.53Improve the Moment.54Appreciation Exercise.55

Patient Needs ···>	Try
Cognition: Strong Mind	The Circle of Depression
Relaxation: Calm Body	Managing Stress .71 Belly Breathing .72 Grounding .74 Body Scan .76 Passive Relaxation .77 Stress Busters .78 One Minute Stress Break .79 Mindfulness .80 Mindfulness Meditation .81
Anxiety: Calm Mind	Costs and Benefits of Anxiety. .84 How Anxiety Works. .85 Panic Circle. .87 Taking Control of Panic. .88 Your Emotional Thermometer. .89 Keeping Anxiety in Check. .90 Anxiety Equation. .91 Predicting Disaster. .92 Anxiety Lies. .94 Coping Statements. .95 Coping Plans. .96 Taking Risks. .97 Assertive Rehaviour 101 .90

Symptoms

		~J	
Depressive Symptoms	•••>	Try	
Vegetative Signs Not Attending to ADL Low Activity Low Motivation	•••>	Wellness Activities	
Tearful Sad Hopeless Helpless	•••>	Chunk the Day	
Negative Thinking Cognitive Distortions	•••>	The Circle of Depression	
Low Self Esteem Passive	· · »	Appreciation Exercise	

Anxious **Symptoms**

Try

Overwhelmed Chaotic **Panicky**

Wellness Activities
Small Goals
Problem Solving
Chunk the Day
Belly Breathing
Grounding
Passive Relaxation
Mindfulness

Ruminating **Obsessing** Worrying

Circle of Depression	7
Thought Change Process 6	0
Thought Stopping 6	3
Worry Time 6	4
Belly Breathing	2
Grounding	4
Passive Relaxation	7
Stress Busters	8

Agitated Anxious *Irritable* **Tense** Stressed

Managing Stress	1
Belly Breathing	2
Grounding	1
Body Scan	3
Passive Relaxation	7
Stress Busters	8
One Minute Stress Break79	9
Mindfulness)
Mindfulness Meditation	1

Anxious **Symptoms**

Try

Generalized Anxiety: Trouble sleeping Nervous *Irritable*

Social Anxiety: Anxious in social or public situations Fear of being judged or embarrassed

GAD: Self-Assessment Questionnaire	33
GAD: Self-Assessment Profiles	35
Understanding Generalized Anxiety	. 40
Anxiety: System-Wide Explosion	43
Belly Breathing	72
Passive Relaxation	77
Mindfulness	. 80
Costs and Benefits of Anxiety	. 84
How Anxiety Works	. 85
Common Thinking Errors	59
Your Emotional Thermometer	89
Thought Stopping	63
Worry Time	64
Anxiety Equation	91
Predicting Disaster	92
Anxiety Lies	. 94
Coping Statements	95
Coping Plans	. 96
Problem Solving	51
Taking Risks	97
Self-Talk (Mean Talk)	62
Good Guilt / Bad Guilt	65
Setting Limits	
Is Anger A Problem For You	

Anxiety: System-Wide Explosion 43
Belly Breathing
Grounding
Body Scan
Costs and Benefits of Anxiety
How Anxiety Works
Anxiety Equation 91
Taking Risks97
Self-Talk (Mean Talk)
Assertive Skills: Setting Boundaries 66
Setting Limits

Anxious **Symptoms**

Panic Attacks: Sudden and intense episodes of fear ie: pounding heart, shortness of breath, sweating, shaking, numbness

Anxiety: System-Wide Explosion	13
Belly Breathing	72
Grounding	
How Anxiety Works	35
Panic Circle	87
Taking Control of Panic	88
Anxiety Equation	91
Predicting Disaster	92
Coping Statements	95
Taking Risks	97

Try

Specific Phobia: Extreme fear of specific objects or situations ie: open spaces, heights, elevators, germs, snakes

Anxiety: System-Wide Explosion 43
Belly Breathing
Grounding
Body Scan
Taking Control of Panic
Anxiety Equation
Coping Statements 95
Taking Risks

PTSD Memories of trauma: **Nightmares Flashbacks** Hypervigilant *Irritable* **Avoid triggers**

Anxiety: System-Wide Explosion	3
Belly Breathing	2
Grounding	1
How Anxiety Works85	5
Panic Circle8	7
Taking Control of Panic	3
Coping Statements95	5
Taking Risks	7

OCD Intrusive, recurrent thoughts Repetitive response **behaviours** ie: handwashing, checking, counting

Anxiety: System-Wide Explosion	
Stress Busters	
Mindfulness Meditation	81
One Minute Stress Break	
Costs and Benefits of Anxiety	
How Anxiety Works	
Common Thinking Errors	59
Keeping Anxiety in Check	90
Thought Stopping	63
Anxiety Equation	91
Coping Statements	95
Problem Solving	51
Taking Risks	97

Profiles

Patient Profile

Try

Pleaser Profile

Pleaser Profile
Common Thinking Errors59
Self-Talk (Mean Talk) 62
Good Guilt / Bad Guilt 65
Assertiveness: Setting Boundaries 66
Setting Limits 67
Is Anger a Problem for You 69

Perfectionist Profile

Common Thinking Errors.....59

Over-Thinker **Profile**

Over-Thinker Profile32	
Improve the Moment 54	+
Appreciation Exercise55	5
Circle of Depression	,
Common Thinking Errors)
Thought Change Process	
Self-Talk (Mean Talk)	
Thought Stopping 63	
Worry Time	
Good Guilt / Bad Guilt	
Is Anger a Problem for You	,



Assessment Module

The Assessment Module contains a Diagnostic Assessment Interview (DAI) and worksheet. (S²IGECAPS A²GS P³OMP² CAGES)

There are two patient handouts: the "Problem List: What is troubling you?" and the "Resource List: What gives you strength?" Both elicit patients' participation in their assessment.

The Problem List worksheet helps formulate an action plan. The Resource List worksheet helps in carrying out this plan.

The Self-Assessment Questionnaire matches the section with the highest scores to the corresponding self-assessment profile.

CBIS MANUAL | JULY 2015 ASSESMENT | 16

Diagnostic Assessment Interview

S²IGECAPS A²GS P³OMP² CAGES

I am going to change my usual style and become quite mechanical in order to cover a lot of questions. This approach will give us a baseline and help us make a more accurate diagnosis. We want to make sure we are not missing any other important diagnosis. We might touch on some difficult things, but I will respect your boundaries, and will only stay on the surface. I will take note and we will follow up on things at a later appointment. It is important for me to know what you are dealing with in order for us to work together.

On a scale where 1 = the worst and 10 = the best, please answer on average these days: 1 Sadness a. How sad are you if 1 = the worst and 10 = the best, on average these days? 2 Sleep a. If 1 = the worst and 10 = the best, how would you rate your sleep on average c. How many hours do you sleep if you add them all up, even if they are interrupted? d. Do you feel rested or not rested when you wake up? e. Do you nap during the day? f. Do you snore? 3 Interest/pleasure in life a. How would you rate your interest/pleasure in life if 1 = the worst and 10 = the best, 4 Guilt a. How would you rate your guilt on average these days if 1 = the worst and 10 = the best? b. Most guilty about what? First thing that comes to your mind............

5	Energy level
	a. How would you rate your energy level if 1 = the worst and 10 = the best, on
	average these days?
6	Concentration
	a. How would you rate your concentration if 1 = the worst and 10 = the best, on
	average these days?
	b. Any history of learning disabilities or ADHD?
7	Appetite
	a. How would you rate your appetite if 1 = the most unhealthy and 10 = the most
	healthy, on average these days?
	b. Have you gained or lost weight in the past months and how much?
	c. Have you ever been anorexic (restricted your food) or bulimic (binge
	eat/purge/excessive exercise), or simply binge eat?
8	Psychomotor Retardation
	a. That dragged out feeling when you wake up and drag yourself through the day,
	how would you rate it if 1 = the most dragged out and 10 = not dragged out at all,
	on average these days?
	b. That edgy irritable feeling, 1 = the most irritable and 10 = the least, how would you
	rate it on average these days?
9	Suicide
	a. Now looking at suicide, first let's look at suicidal thoughts, then we'll look at
	suicidal intent.
	b. Looking at suicidal thoughts if 1 = thinking about suicide all the time and 10 = not
	thinking about suicide at all, how would you rate your thoughts, on average these
	days?
	c. Do you have a plan?
	d. Have you gathered materials to carry out suicide?

CONTINUED ON NEXT PAGE

	_	What keeps you going and/or gives you hope?
	f.	Looking at intent, how would you rate your intent, 1= I am definitely going to do it,
		you cannot stop me, and 10 = I have thoughts but I don't intend to do it?
	g.	Have you ever attempted suicide in the past?
		When? How?
	h.	Have you ever cut or burned yourself?
10	A	nger/Frustration
	a.	How much frustration/anger do you carry inside you if 1 = a lot and 10 = not
		much, on average these days?
	b.	Most angry about what?
	C.	Do you have any homicidal thoughts, and if so against whom?
11	A	nxiety
	a.	How much anxiety do you struggle with if 1 = the worst and 10 = the best, on
		average these days?
12	G	eneralized Anxiety
	a.	There are several types of anxiety; one is a generalized anxiety where a person
		is a worrywart. Have you ever been called a worrywart?
	b.	Do you worry more than most people about everyday things and have trouble
		controlling it?
	c.	Does it keep you awake at night or make you feel sick?
13	S	ocial Anxiety
	a.	Then, there is social anxiety where a person is painfully shy, avoids meeting new
		people, and worries about being embarrassed or humiliated.
		Can you relate to this?
14	Ρ	anic
	a.	Then there are panic attacks where suddenly, out of the blue, your heart is racing,
		you are breathing quickly, your mouth and fingers may be tingly, and you think you
		are going to die or lose control. It comes and goes very quickly.

	Can you relate to this?	
	If yes, how many panic attacks a day/week/month?	
15	Phobias	
	a. Any unrealistic or excessive fears of objects or situations like open spaces, clos	sed
	spaces, elevators, snakes, or spiders?	
	What?	
16	Post Traumatic Stress Disorder	
	a. Sometimes people have experienced sexual or physical abuse or suffered major	r
	trauma like MVA or war trauma, or multiple surgeries. Have you had any of thes	e?
	What?	
	b. People can experience symptoms like nightmares or flashbacks, or they startle	
	easily, become hyper-vigilant, space out and avoid anything that triggers them.	
	Have you had any of these symptoms?	
	What?	
17	Obsessive Compulsive Disorder	
	a. Do you have any obsessions/compulsions, for instance, do you wash your han	ds,
	check things repeatedly, count things, or need everything in perfect order?	
	Do you have repetitive distressing thoughts?	
	Do any of these activities take over an hour a day?	
	b. Do you have any hoarding, skin picking or hair pulling behavior?	
	c. Are you overly focused and unhappy with any part of your body?	
18	Mood Patterns	
	a. Some people have a low-grade unhappiness for more days than not that goes b	ack
	at least 2 years. We used to call this dysthymia but now we call this persistent	
	depressive disorder.	
	Can you relate to this?	
	CONTINUED ON NEXT PA	٩GE

CBIS MANUAL | JULY 2015 ASSESSMENT | 20

b. Sometimes this can dip into a deeper depression causing some of the symptoms
we mentioned at the beginning. If it lasts for 2 weeks solid or more we call it a
major depression. Then treated or untreated it may get better and if it occurs again,
we call it recurrent major depression.
Can you relate to this?
c. How many episodes have you had that have lasted 2 weeks or more?
d. What treatment helped you get over past depressions?
e. Looking at the opposite of depression, this is called bipolar or manic depressive
disorder. Here we are talking about staying up for nights on end without the need
for sleep, talking fast, thinking fast, spending money like it is going out of style,
getting into debt, feeling super sexual, being promiscuous. If this lasts for 4 days
solid or more we can call this a hypomanic or manic episode.
Have you had this experience?
19 Psychosis
a. Have you ever lost touch with reality, hearing voices or seeing things that others
don't, feeling that someone could magically put thoughts into your mind or take
thoughts out of your mind, or that you were getting messages from the TV or
radio, or being conspired against?
What?
20 Personality
a. Think of the person who knows you best; a person who knows both good and bad
things about your personality. What might they say about you and the way you
relate to others?

19

21	CAGE
	How many drinks might you have in a typical week?
	Are you concerned about your alcohol use?
	Cut down – Have you ever tried to cut down?
	Annoyed – Do you get annoyed when others comment on your drinking?
	G uilty – Do you ever feel guilty about your drinking?
	Eye opener – Have you ever had a drink first thing in the day to feel better?
22	Substances
	Do you use other substances?
	What?
	How often?
	Are you concerned about your drug use?
23	Is there a family history of depression, anxiety, schizophrenia, bipolar or substance abuse?
	abuse:
24	What medications have you been on?
	What medications are you on now?
	For how long?
	What percentage improvement have you felt on your present medications?

CBIS MANUAL | JULY 2015

Diagnostic Screening Worksheet

(SCALE: 1=WORST, 10=BEST)

S ² IGECAPS	1 TO 10	COMMENTS
Sadness		
Sleep		
Interest/Pleasure		
Guilt		
Energy		
Concentration		
Appetite		
Psychomotor • Slowing • Agitation		
Suicide Thoughts Plan Hope Intent		
A ² GS	1 TO 10	COMMENTS
Anger		
Anxiety		
Generalized		
Social		

DIAGNOSTICS ASSESMENT WORKSHEET (CONTINUED)

P³OMP²	1 TO 10	COMMENTS
Panic Attacks		
Phobias		
PTSD		
OCD		
Mood PatternsDysthymiaDepressionMania		
Psychosis		
Personality		
CAGES	1 TO 10	COMMENTS
Alcohol Cut down Annoyed Guilty Eye opener		
Substances		
Family Psych History		
Medication History	•	

Problem List: What is troubling you?

Please list below every problem that is troubling you. Don't leave any out. It could be anything from the past, in your current life, or about your future. It could be to do with you, your family, or your community.

We	will	gc	0	ve	r t	his	s I	is	t a	an	d	d	e	Ci	de	e t	0	ge	et	he	er	W	/h	at	t t	00	ols	s r	ni	gh	nt	be	: h	el	pf	ful	١.				
1 .					-																																			 	
2 .																																								 	
3 .																																								 	
4 .																																								 	
5 .					-																																			 	
6 .					-																																			 	
7 .					-																																			 	
8 .					-																																			 	
9 .					-																																			 	
10																																								 	
11																																								 	
12																																								 	
13																																									

Action Plan

ACTIVATION: GETTING GOING	COGNITION: STRONG MIND
RELAXATION: CALM BODY	ANXIETY: CALM MIND
LIFESTYLE: WELLNESS	MEDICATION
	REFERRAL

Resource List: What gives you strength?

List all the things that give you strength. For example, things inside you like intelligence, sense of humour, creativity, loyalty, spirituality and determination. Also, things around you like family, friends, pets, hobbies, activities, favourite places, nature, and positive memories.

These strengths help us cope with difficulties in our lives.

1	 						 																	 			
2	 						 																	 			
3	 						 																	 			
4	 						 																	 			
5	 						 																	 			
6	 						 																	 			
7	 						 																	 			
8	 						 																	 			
9	 						 																	 			
10							 																	 			
11							 																	 			
12							 																	 			
13							 																	 			

Depression: Self-Assessment Questionnaire

Is how you relate to the world around you causing you more distress?

Please rate how well each of the statements below describes your usual way of interacting with your world.

int	eracting with your world.
0 =	Never or rarely true to me; 1 = Somewhat true; 2 = Quite a bit true; 3 = Very true of me.
1	It's hard for me to say no to people even if I don't want to agree or don't have the time or energy.
2	I will do almost anything to avoid hurting people's feelings, whatever the cost to myself.
3	I do lots of things for others, even at the expense of meeting my own needs.
4	Sometimes I am overwhelmed by things I do for others and have no life or time of my own.
5	I am not confident about expressing my ideas or opinions to others.
6	Sometimes I think people take advantage of my willingness to help.
7	I am afraid that people would not like me if I said "no" to them.
8	I get very upset if I can't keep things organized and in control.
9	Lalways take on extra tasks, and Lam known for being efficient

10 I push myself to always do my best at everything — I hate making mistakes.

SELF-ASSESSMENT QUESTIONNAIRE (CONTINUED)

11 I would be very upset if people knew my faults.
12 I often struggle to get things done as well as possible.
13 Sometimes I take much longer than others to do things, because I want to do them right.
14 I am afraid that I would be rejected if I did not do excellent work.
15 When things go wrong, I tend to withdraw and isolate myself.
16 I spend a lot of time thinking about all the mistakes I have made, and all of my failures.
17 I often think I have done something wrong or there is something wrong with me.
18 It is very easy for me to see all my faults, but I downplay any good points about myself.
19 I get dragged down, sometimes for hours, by all the negatives in the world.
20 I often feel that I am inferior or unworthy compared to others.
21 I often think of the worst that may happen and imagine how things will go wrong.
Please circle any of the following that you feel describe you or that others have used to describe you.

UNASSERTIVE

OVER CONSCIENTIOUS

PLEASER

PERFECTIONIST NEGATIVE

PUSHOVER

CYNICAL

CONTROLLING

Depression: Self-Assessment Profile

Pleaser: High scores on questions 1-7

DESCRIPTION OF TYPE	DOMINANT	FEELINGS	ATTITUDE TOWARD SELF								
 Passive, unassertive Can't say no or stand up for self Does everything for others Reluctant to draw attention to self Scared of rejection or being disliked May have difficulty being alone 	WorriedHelplessScaredOverwheExhausteTorn diffe	elmed	 I am inferior I don't count I must be good Everyone wants a piece of me 								
	SIMPLE ST	TRATEGIES									
 Take small risks in sayir Express own ideas, preopinions Test out to see if expect occurs 	ferences,	•									

Depression: Self-Assessment Profile

Perfectionist: High scores on questions 8 – 14

DESCRIPTION OF TYPE	DOMINANT	FEELINGS	ATTITUDE TOWARD SELF		
 Afraid to make mistakes Over-controlling Over-organized Agonizes over mistakes Pushes self too hard Difficulty prioritizing Take on more than can manage May present well and be very successful but cost is high Afraid of rejection if others find out she/he is not perfect or as good as appears to be 	PressureAnxiousVigilantTense	d	 I am flawed and inadequate and mustn't let others see it I have very high standards and am worthless if I don't reach them all the time 		
	SIMPLE STRATEGIES				
 Prioritize instead of doin to same high standard Reduce expectations of Set more realistic standard Have days off from perference 	self	Leave unLoosen y	g "should" for a week planned spaces in the day our schedule ne engagements or		

Depression: Self-Assessment Profile

Over-Thinker: High scores on questions 15 – 20

DESCRIPTION OF TYPE	DOMINANT FEE	LINGS	ATTITUDE TOWARD SELF
 Brooding thoughts Predicts negative outcomes Self-blame Withdraws and socially isolates May be cynical Constant analysis of self and own performance for flaws May blame others or the system 	HopelessGloomyAlienatedDepressedMay be angry		 I am a failure I am worthless I never get a break Nothing goes right for me
	SIMPLE STRAT	EGIES	
 Get out and have at least one social contact a day Practice smiling at people Counter negative thoughts with more realistic and helpful thoughts Watch funny movies Do an active sport 		Try the armusic, da	ching the news rts like painting, playing ncing, or singing

GAD: Self-Assessment Questionnaire

Please rate how well each of the statements below describes your usual way of interacting with your world.

u = Never or rare	ely true to me; $1 = 8$	somewnat true; 2 =	= Quite true; $3 = ve$	ery true of me.

- 1 I spend a lot of time thinking about what might go wrong for the people I care about.
- $2\quad\dots$. I am always reminding my family and friends to be careful in what they do.
- 3 There seem to be so many dreadful things happening in society these days.
- 4 People say I worry too much, but they don't understand what could go wrong.
- 5 I always plan very carefully for events and try to think of everything that could go wrong.
- 6 Even after an event has turned out OK, I still think about what could have gone wrong.
- 7 I feel better going out if I have someone with me who could help me if I get anxious.
- 8 I can't understand people who say: "Don't worry; it will all work out."
- 9 I will do everything to protect my family from even the slightest harm.

GAD: SELF-ASSESMENT QUESTIONNAIRE (CONTINUED)

10 It's hard to feel safe anywhere.
11 I prefer to go places that are familiar to me and feel safe.
12 I don't seem to go out to as many places and events as I used to.
13 I have high standards for myself and expect to do my best at everything.
14 I am often overwhelmed by all the things I have to do.
15 I can't focus on one thing at a time and therefore nothing much gets done.
16 I always push myself very hard to do my best at everything.
17 Sometimes I am so worried about doing things right that I can't even get started.
8 People think I am reliable, conscientious and always willing to take on extra tasks
19 I get really mad at myself if I make mistakes.
20 I am afraid that I would be rejected if I did not do excellent work.

GAD: Self-Assessment Profile

Worrier: High scores on questions 1-9

Main Fears	Main Thoughts		Coping Behaviours	
 Something bad will happen to self or loved ones General fear of looming catastrophes (e.g. floods, disease, etc.) Belief that whatever happens will be unbearable and too overwhelming to cope with 	 The world is full of danger Something terrible is going to happen I won't be able to cope I won't be able to stand it 		 Worry endlessly Talk to others about worry topics Seek sympathy for worry Fail to engage in effective planning Over plan for every contingency Nag and remind people about being careful Rehash event afterwards, with focus on what might have happened 	
Suggested Strategies				
 Take a relaxing bubble bath Listen to soothing music Do a craft or puzzle Spend a few minutes appreciating nature Watch a funny movie Read a captivating book 		LigBaPeEn	end time in the garden that a fragrant candle ke cookies t your dog or cat joy a massage editation, yoga	

Stay Safe Avoider: High scores on questions 10-12

Main Fears	Main Thoughts	Coping Behaviours	
All of above plus Being left alone to cope with disaster	All of above plus I need to be protected I am not strong enough on my own	 All of above plus Restrict activities to "safe" zone Avoid going out or being left alone Keep mental list of dangerous places and times to avoid (e.g. night, crowds) 	
Suggested Strategies			
All of above plus Take small risks Call or visit a mentor, or friend		Get out of the houseTake action, start small	

GAD: Self-Assessment Profile

Hard Driver: High scores on questions 13-20

Main Fear	Main Thoughts	Coping Behaviours	
 Making mistakes Failing Not meeting own and others' standards or expectations Rejection Disappointing self or others 	 I have to be perfect but that's impossible I have to keep going No one knows the real mand how weak I am If I fail or make a mistake something terrible will happen I won't be able to cope I won't be able to stand it 	 Cram schedule too full Overextending and not setting limits Set standards and goals too high Procrastinate Use self-talk to push self and at the same time predict failure Multi-task to the point of inefficiency Assume 100% responsibility for failure 	
Suggested Strategie	s		
 Leave a project und Make a mistake on Schedule down tim Take a mini vacatio Stay in your PJs for Drop your towels or use them Ask for help Spend time apprec 	purpose e on r a day n the floor after you	 Let your answering machine get your calls Take spontaneous stress breaks Set limits with family and friends Do one thing at a time Focus on the moment Dare to be average Use affirmations (e.g. "I am worthy", "I don't need to be perfect") 	



Education Module

This module contains handouts providing basic information on depression, anxiety, and medication for patients and their families.

It includes information regarding the cause and symptoms of depression and anxiety.

Understanding Depression: Frequently Asked Questions

Who gets depressed?

Anyone. Depression can be triggered by many things; for example, a loss, a change for the worse, an increase in overwhelming responsibilities, or intolerable living conditions.

Here are some examples:

- 1 Since George lost his wife, he has become withdrawn, spends much of his day thinking about happier times, as well as his faults as a husband. He can see no reason to keep on living.
- 2 Isabelle has chronic back pain and cannot take care of her family. She feels guilty about this and also about her irritability. She has stopped taking care of herself and can see no hope for the future.
- 3 Tony is a single parent with three small children and a low-paying job. He feels overwhelmed trying to make ends meet and feels helpless to cope with all his problems. Most days, he'd like to just give up.

Why are some of us more vulnerable to depression than others?

Depression is more easily triggered in some of us. Those of us who have had trauma in our lives or who have a family history of depression may be more at risk than others. Some common beliefs can trigger depression; for example, "In order to feel good about myself I should always do well in everything..." "I must always please everyone..." "I must never make any mistakes..."

Newcomers and minority groups in communities can face huge cultural adjustments that can increase the likelihood of depression; loss of cultural identity, social isolation, language barriers, and the lack of culturally appropriate support can make people more vulnerable to depression. Even shifts in lifestyle can have profound effects on wellness levels; these include housing adjusments, eating different foods, and even changes in climate.

Isn't it just brain chemicals out of balance?

While brain chemicals are likely out of balance, this is only one aspect of depression; for example, our backgrounds, our circumstances, our social supports, and the resources we have influence whether we get depressed.

Why doesn't depression just go away?

Depression goes far beyond normal feelings of grief or sadness. Depression creates intense thoughts and feelings of worthlessness, helplessness, and guilt. The fatigue and slowness of depression can make us withdraw, procrastinate, or have trouble concentrating. Sleep, appetite and interest in sex can be affected. When we are depressed we have trouble enjoying life. Our thoughts turn to the most depressing and negative aspects of a situation. We become self-blamers. All of these symptoms make it almost impossible to cope, even with small everyday tasks. The less we see ourselves coping, the more depressed we become.

All of these feelings, thoughts, and behaviours help keep depression alive.

What can be done about depression?

The good news is that many things can help with depression. Research shows that using several approaches provides the best outcome in treating depression. These include (in various combinations) medication, therapy, and self-management activities.

A healthy outcome is most likely to occur if depression is tackled early using self-management.

Having a holistic view of mental wellness, including being in a state of balance with family, community, and environment is helpful.

In addition, identifying strengths of family and community has a key role in helping individuals regain their sense of balance.

Understanding Anxiety: Frequently Asked Questions

Who gets anxious?

Everyone! Anxiety is part of the natural way that the mind and body prepare for a possible threatening situation, event, or change.

What's the difference between anxiety and fear?

Fear is a strong emotion that we feel when faced with immediate danger or threat, such as a fire. Fear makes us prepare to "fight, freeze or flee". Fear is a protective reaction that can save our lives. Anxiety is a more general nagging fear about something going wrong in a situation that hasn't happened yet, and may not even happen. Anxiety wonders "What if?" Anxiety is not about what will definitely, immediately happen, only about what might or could happen.

When is anxiety a problem?

A little bit of anxiety, occasionally, is not a problem at all. In fact, being a bit anxious before an exam or a race or a job interview has been shown to actually improve performance. Anxiety is only a problem when it becomes excessive. Anxiety can be so debilitating that people are unable to write anything at all in exams; they become sick with worry; they even avoid places or activities that are unlikely to be harmful; they make more mistakes at work because they are too tense. Too much anxiety over things that could happen, but have not happened and may never happen, can interfere with a person's ability to function at home or at work, and may lead to physical illness.

Why do some people get over anxious?

Some people are born with a more sensitive emotional system so they tend to become anxious in situations that might not bother other people. If a child with this inborn tendency is constantly told how dangerous the world is, that child will most likely feel more anxious. Traumatic experiences also may contribute to increasing anxiety. Some people get over-anxious because of the way they cope with their anxiety. They try to avoid anxiety or they try to get rid of it, and it just gets stronger.

UNDERSTANDING GENERALIZED ANXIETY FREQUENTLY ASKED QUESTIONS (CONTINUED)

What is the treatment?

This kind of anxiety - when a person worries about a lot of different things to the point that their life is disrupted or their health affected - is called Generalized Anxiety Disorder. Cognitive Behavioural Therapy, which focuses on the relationship between thoughts, emotions, and behavior, has been shown to be very successful in treating anxiety. This type of therapy will not help you get rid of all your anxiety because you need some for everyday life, but it will help you learn to manage and reduce your anxiety. You and your doctor may decide that medications may also be helpful in some circumstances.

What can I do?

At home, in your daily life, practice all the exercises that you have been given. People who have the most success with managing anxiety are those who practice the most. Practice means doing things against the anxiety: taking very small risks; not avoiding places or activities; trying new things. When you first go against your anxiety, you will feel a little more anxious. As you continue you'll discover that most of the time what you were anxious about did not come true. Your anxiety will start to weaken until you feel little or no anxiety in situations that previously scared or worried you.

Alternative health practices such as meditation, yoga, and walking may also be helpful.

Depression: System-Wide Crash

Depression is not who you are. Depression is like a blanket or mask that hides your real personality.

Depression is not your fault; it is not because you are weak, or a "loser." Depression is an illness, with symptoms like any other illness.

These are some of the common symptoms of depression. Circle the symptoms that apply to you.

BODY	BEHAVIOUR	MIND	EMOTIONS
 No energy Sleep changes Appetite changes Weight changes Stomach problems No sexual interest Lump in throat Tense muscles Diarrhea Constipation Feel weighed down Pain 	 Agitated, restless Cry at least thing Can't start things Social withdrawal Can't finish things Clumsy Slowed down Snap at people Frantically busy Do nothing Stop hobbies, etc. 	 Easily distracted Poor memory Can't think clearly Body image worry Can't make decisions Slowed thinking Racing thoughts Spaced out Obsessive thinking Self-critical Negative focus Worrying Suicidal thoughts 	 Depressed, down Anxious, scared Hopeless Numb Discouraged Worthless, inadequate Ashamed, guilty Can't feel pleasure Helpless Lost Frustrated Alone

Anxiety: System-Wide Explosion

Anxiety has a big impact on people: their bodies, how they think, how they feel, and how they function.

The following is a list of symptoms that people with anxiety may experience.

To understand the extent of anxiety's impact, circle the symptoms that apply to you.

Body	Emotions	Mind	Behaviour
Tense muscles	Anxious	Easily distracted	Avoiding
Numbness, tingling	Nervous	Poor memory	Agitated, restless
Feeling hot or chilled	Fearful	Can't think clearly	Multi-tasking
Flushed face	Worried	Can't make decisions	Can't start things
Lump in throat	Frightened	Confusion	Can't finish things
Trembling, shaking	Terrified	Racing thoughts	Snap at people
Weakness, unsteady	Pressured	"Spaced out"	Frantically busy
Dizzy, lightheaded	Overwhelmed	Obsessive thinking	Social withdrawal
Sweating	Frantic	Worrying	Cry at least thing
Heart pounding	Panicked	Self-critical	Hypervigilance
Chest pain	Guilty	Negative thinking	Oversleeping
Insomnia	Shy	Suicidal thoughts	Unable to be alone
Weight loss	Uncertain	Frightening images	Seeking reassurance
Nausea	Self conscious	Nightmares	Compulsive behaviours
Diarrhea	Embarrassed		Self medicating
Shortness of breath	Irritable		Addictions
Dry mouth	Angry		

Will Medication Help Me?

For some people, taking medication can make a significant difference in their moods. It is especially helpful with sleep, energy levels, anxiety and severe mood swings.

Sometimes people need to have their sleep problems sorted out and their energy levels back in order to participate in counselling, start an exercise program, or make other important changes in their lives.

Talk to your doctor or mental health professional about the medications that are available and which ones might help you. Make informed decisions.

Questions to Discuss

- How might this medication help me?
- How soon might I notice a difference?
- What side effects might I get?
- How long do I need to stay on it?
- What if I miss a dose?
- Will my medication interact with other medications I take?

Be Patient

Most medications take time to work (up to 6 – 8 weeks for an antidepressant for example). Remember that a lot of people experience side effects before they get the benefits.

What Can You Do?

Take your medication at the same time each day.

Don't stop your medications without discussing it with your doctor.



Activation Module: Getting Going

This module has been organized so that material may be handed out to patients sequentially or chosen specifically to match the needs of the individual.

We recommend giving small amounts (one handout at a time) rather than overwhelming people with too much information.

These activities are ideal for people who are slowed down and need to be more active in their recovery. It includes wellness activities, goal setting, problem solving, appreciation exercises, and strategies for managing energy and mood.

Wellness Activities

The activities below are helpful for recovery and wellness. They are often the first to go when someone is not well. To start working on your recovery, put a check mark whenever you do one of the activites below. Push a little, often, but not to exhaustion. As you do this, day after day, you may gradually find your mood brightening and your energy returning.

	ACTIVITY	MON	TUE	WED	THU	FRI	SAT	SUN
1	Self-care (shower, shave, teeth etc.)							
2	Eat three meals, however small (check for each)							
3	Sleep (# of hours)							
4	Physical activity (# of minutes)							
5	Relaxation (# of minutes)							
6	Accomplish one small task or goal each day							
7	Social contact (enough but not too much)							
8	Something pleasurable or creative ie: hobbies							
9	Do something nice for yourself							
10	Do something nice for someone else							
11	Replace negative thoughts with helpful thoughts (check # times)							
12	(add your choice)							

Depression's Energy Budget

Often depression and anxiety can weaken or deplete our energy and resources. It is important to use our energy wisely to do what is necessary for survival and wellness.

It is also important to do activities that increase our energy and well-being.

This means we need to figure out how much energy we have each day and where to best spend it.

Living Within Your Energy Budget

- Putting food on the table - Making dinner from scratch	NECESSARY	EXTRAS
- Getting kids to school - Showering and dressing - Going outdoors - Doing an errand for someone - Taking kids to park - Shaving or putting on makeup - Going outdoors - Going for a long hike	- Attending mandated appointments - Getting kids to school - Showering and dressing	- Doing an errand for someone - Taking kids to park - Shaving or putting on makeup

Increasing the Size of Your Energy Budget

- 1 It is important to go slowly.
- 2 Use a bit of your daily energy to do self-care activities such as excercise, relaxation, hobbies etc.
- 3 Think hopeful thoughts; healthy energy and motivation are released and increased when you do.
- 4 Repeat and persist it is better to do a very small thing 100 times than to do a big thing once. You are trying to develop new habits, and these only come with a lot of practice.
- 5 Congratulate yourself for every effort you make no matter how small. The brain responds very well to this kind of appreciation and you will be rewarded with more resources, such as hope, well-being, energy, and self confidence.

Create Your Own Engergy Budget

NECESSARY	EXTRAS
-	-
-	-
-	-
-	-
-	-
	•

Small Goals: Baby Steps

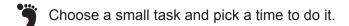
Depression can make people feel tired, forgetful, shut-down, and unable to do what they used to do

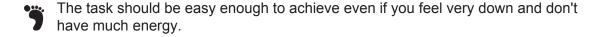
Depression feeds on withdrawal and inactivity.

A strategy to help people feel more in charge of their lives and improve their self-esteem is through the attainment of daily small goals.

The emphasis on small goals is important. It slows down the person who pushes too hard so they don't get overwhelmed, and gently encourages the withdrawn person to begin taking charge of their life.

Select a Small Goal





Have a clear idea of what you are going to do and when and how you are going to do it, e.g., "go swimming at the community centre pool this Thursday evening for 15 mintues" rather than, "go swimming."

If you don't complete the goal don't give up — choose another time or break your goal into smaller parts.

Goals that involve action and thoughts are easier to know you've reached them than those involving emotions.

When you meet your goal, or part of it, congratulate yourself.

Remember: Start small with a baby step — you can always do more when you are able to.

SMALL GOALS (CONTINUED)

Small Goals Worksheet

GOAL	WHEN	WHERE	ном	DONE 🗸
	•			
	•			
	•			
	• • • • • • • • • • • • • • • • • • • •			
	•			
	•			
				•
	•			
	•			
	•			
	•			
	•			
	•			
	•			•

Problem Solving

Depression and anxiety can make even everyday problems seem impossible. When worry and self doubt set in, people feel stuck. This worksheet will help you change your worry into action.

LIST the specific problem that you are worrying about.				
BRAINSTORM all possible solutions and options – don't leave any out.				
CHOOSE one of the options or solutions you've listed.				
DO IT!				
EVALUATE what worked or didn't work.				
REPEAT steps 3, 4 and 5 as necessary.				

Opposite Action Strategy

Here is an effective way to start fighting back against depression. Catch yourself acting or thinking the way depression wants you to — then do or think the opposite. By doing so, you DEFY depression and take back some control, even if only for a short while.

ACTIONS OR THOUGHTS THAT STRENGTHEN DEPRESSION	ACTIONS OR THOUGHTS THAT FIGHT DEPRESSION	
Don't get out of bed or take care of yourself.	Make yourself get up even for a short while. Shower and get dressed everyday.	
Call yourself names like "stupid," "loser," "useless," everytime you make a mistake.	Tell yourself that everyone makes mistakes and that you can try to do better next time.	
Worry about all your past mistakes, about how bad things are now and how things could go wrong in the future.	Distract yourself from your worries and think about things you are grateful for.	
Always talk about depressing topics or what is wrong in your life and how bad you feel.	Choose lighter topics. Focus on others. Take time out from depressive thoughts.	
Isolate from friends and family, by refusing invitations and ignoring the phone.	See or talk to someone for a short time each day, even when you don't feel like it.	
Tell yourself that everything you do must be done perfectly, or it's not worth doing at all.	Tell yourself that you just need to get through, not everything needs to be done perfectly.	
Take on all your usual tasks and expect to do them as well as usual.	Set realistic expectations that take into account your depressed mood and low energy.	
Pretend that nothing is wrong and get exhausted by the effort to keep up a good front.	Tell others that your energy is low (or whatever you feel OK sharing) and that this limits what you can do.	

Chunk the Day

Sometimes you feel unmotivated, too depressed, or too tired to face the day. Here is a way to help you attempt to accomplish something and get through the day:



1 Time: Decide on the smallest amount of time you can spend on a task: e.g., 10 min, an hour, or even a whole morning.

This is your **CHUNK** of time.



- 2 Decide on what you will do. Tell yourself: "I only have to keep going for this chunk. Then I can stop if I want."
- When the chunk is over, you can decide to rest, carry on with what you were doing, or change to something else for the next chunk.

FOR EXAMPLE:



Mary decides she can handle 10 minutes. In those 10 minutes she decides she can clear off the kitchen table and put the breakfast dishes in the sink.

Once she's completed this task she can then decide to carry on with another chunk, e.g., wash the dishes, rest for a while, or decide to do another chunk later in the day.



The key is to choose manageable chunks and activities. You can do a whole day in chunks. Most people who try this report that they actually get more done, and as a bonus, their mood improves.

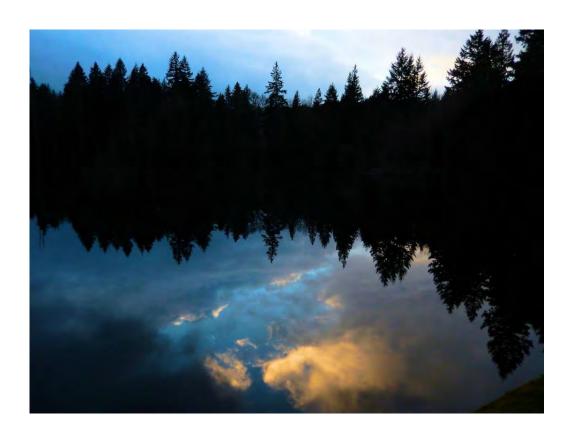
CBIS MANUAL | JULY 2015 ACTIVATION | 53

Improve the Moment

Choose to take a break from your negative thoughts and depressed moods.

Do something to make this moment or the next few minutes just a little better.

- Make a list of small things you love to do (e.g., pet the cat, stretch your body, light a candle, have a bath, step outside, hug your children, talk to a friend, treat yourself.)
- 2 Take a deep breath in, hold for a moment, let the breath out, and center yourself in your body.
- Tell yourself "I'm going to take a break from feeling so bad for a few minutes."
- Pick one of the items from your list and do it.
- 5 When the mood or depressed thoughts try to creep back in tell them: "I'm improving this moment so go away and don't bother me."



Appreciation Exercise

"Good for Me"

Most depressed people focus on their mistakes, what they should have done or could be doing, and compare themselves unjustly to others who are not depressed.

This is like a runner with a broken leg comparing herself to other uninjured runners.

Depression, like a broken leg, severely limits what you can do. You need to focus on baby steps and give yourself a pat on the back for making an effort, no matter how small.

- Every night, before you go to sleep, think of 5 things that you did that day which took a bit of effort on your part. Choose small every day things such as making dinner, showering, calling a friend etc.
- Monitor your self-talk. Be supportive and encouraging, even for small achievements, as you would a friend.
- Practice, practice, practice -- like all strategies this works best if you do it daily. Writing it down will show you, over time, how far you've come.

"Thank You"

List the things you are grateful for. As you do this you will find more and more to appreciate, which will help improve your mood.

If you're having trouble coming up with a list, you can always start with gratitude for your breath.

You can connect with your environment to promote healing and give gratitude for your surroundings (e.g., water, trees, sunshine, flowers).

With gratitude, your pain, sorrow, and stress can be offered to the universe to heal.

In order to create change in the future you can say "thank you" for those things as if they are already happening. This will help you move forward in the direction of your goals.



Cognition Module: Strong Mind

This module contains a handout that explains the basic cognitive-behavioural concepts and several exercises that begin to shift negative thinking.

It also contains strategies to address worry thoughts, guilt, boundaries and anger.

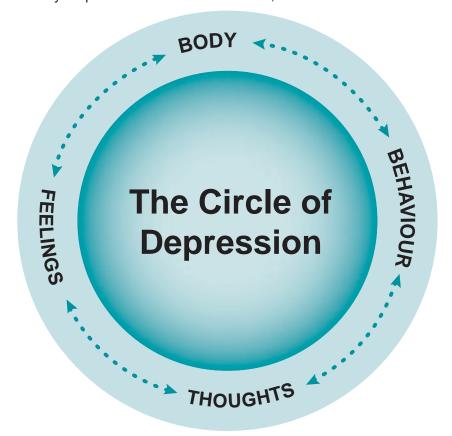
This module has been organized so that material can be handed out to patients sequentially or chosen to match patients' specific needs.

As a person begins to change their negative thinking and behaviour, it improves their emotional state and has a ripple effect on their family, extended family and community.

The Circle of Depression

Cognitive-behavioural treatment strategies for depression are based on the connection between behaviours, thoughts, emotions/feelings and body. All are parts of a circle where each part both affects and is affected by each other. This will cause a ripple effect.

- Our behaviour affects our body, what we think and how we feel.
- What we think affects our body, how we feel and our behaviour.
- Our emotions affect our body, how we think and our behaviour.
- Our body responses affect our behaviours, what we think and how we feel.



Changing feelings directly is almost impossible. The best way to feel better is by changing depressive behaviours and thoughts.

Since behaviours are easy to identify it is a good place to begin when you want to make changes to your thoughts and feelings.

THE CIRCLE OF DEPRESSION (CONTINUED)

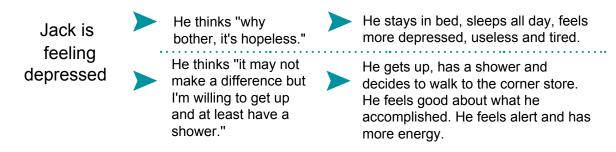
For example, Jack has become depressed since losing his job. He spends most of the day in bed. Changing his negative behaviours or thoughts will help Jack feel better.

Example 1: Changing behaviour



Jack was able to change his behaviour which influenced his thoughts, emotions and energy.

Example 2: Changing thoughts



Jack was able to change his negative thoughts with positive results and he felt good about what he was able to do.

Whether the circle spirals down into depression or leads up towards wellness, depends on the nature of your behaviours and thoughts.

Remember: As a person begins to change it has a ripple effect on themself, their family, extended family and community.

CBIS MANUAL | JULY 2015 COGNITION | 58

Common Thinking Errors

The situations we find ourselves in don't cause our depressed feelings — our ways of thinking about them do. Here are some distorted ways of thinking that often increase depression. Check the ones that most relate to you.

FILTERING

Everyone's life has some negative things. If you focus only on the negative and filter out all positive or neutral things, your life will indeed seem depressing.

EMOTIONAL REASONING

Emotions are based on what we think and often not based on facts. Don't always believe what you feel. Feelings are not facts.

OVER-INCLUSIVE

You think of one problem, then another and another, until you feel completely overwhelmed. Or you may take on the problems of family members as your own.

BLACK OR WHITE THINKING

You think only in extremes or absolutes, forgetting that most things fall in the middle and are shades of grey.

JUMPING TO CONCLUSIONS

You predict a negative outcome without adequate supporting evidence.

MIND READING

You believe that others are thinking and feeling badly about you and you react as if this is true.

PREDICTING THE FUTURE

You think that things may turn out badly and only focus on the bad things that might happen. You convince yourself that a bad outcome is sure to happen.

CATASTROPHIZING

You imagine the worst and make things seem like a bigger deal than they are. This increases your fear and makes it harder to deal with what is really going on.

SHOULD

You make rules for yourself and others about how things "should" be. You become angry or upset when these rules are not followed.

Thought Change Process

Thoughts go unnoticed as we automatically go through our day. This often leads to the belief that an event causes a feeling or behaviour. In fact it is how we think about the event that causes our feelings and behaviours.

AWARENESS

In order to change negative thoughts they first must be noticed.

- Slow down your thinking
- Consciously pay attention to your negative thoughts
- Don't judge your thoughts, just observe them

CHANGE

Once you are aware of your negative thoughts the next step is to begin changing them.

- Write down your negative thoughts
- · Ask yourself "Are these thoughts helpful?"
- Replace them with more realistic, helpful thoughts

Example 1

Adele gets criticized by her friend. She immediately thinks: "This is terrible. I'm a real loser. She won't hang out with me. I won't have any friends." She feels panicky and broods over the incident all evening.

If instead, Adele slowed down her thinking and paid attention to her negative thoughts she would see that these thoughts are not helpful. She may then decide it would be more helpful to talk to her friend and consider if the criticism is valid. She could then decide whether to make changes and she would be able to set aside the incident.

Example 2

Sam is standing in the line up at the bank and three people get called ahead of him. He immediately thinks "I am being ignored because of my race. I'm not worth anything." He becomes angry, storms out, and then feels worse.

If instead, Sam stopped and thought "Perhaps she didn't see me. This may not mean anything about me or my race." Sam may decide to use this as an opportunity to assert himself and say "Excuse me, I think I was next." Sam may leave the bank feeling better about himself.

THOUGHT CHANGE PROCESS (CONTINUED)

Thought Change Worksheet

SITUATION	NEGATIVE THOUGHTS	REALISTIC HELPFUL THOUGHT

Self-Talk (Mean Talk)

Depression brings on a flood of mean talk. Depressed people blame themselves. They pick out every little flaw and brood over little mistakes. They call themselves names like "stupid! useless!" They talk themselves into failure or giving up, saying, "You know you can't do this. You know you'll blow it. You always screw up."

This kind of mean talk to yourself is certain to keep you depressed and will definitely not help you feel better or be more productive or successful.

To help in your recovery from depression, decide to treat yourself the way you would treat someone you value, such as a friend dealing with some problems, a child you want to help do better in school, or a partner who is coping with a job failure.

The Talk Back Technique

- 1 **Be aware**: Listen to your own self-talk.
- 2 **Evaluate**: Decide if your self-talk is helpful or harmful.
- 3 Catch yourself: Notice your "mean talk." (You will be surprised how often you do this.)
- 4 **Stop**: Immediately tell yourself (in a firm, gentle voice) "Stop that's not helpful."
- 5 **Ask yourself**: "What would I say in this situation to a friend who was feeling down and needed encouragement and support?"
- 6 **Support yourself**: Say to yourself what you would say to a friend.
- 7 **Practice**, **practice**: The more you challenge your "mean talk" and replace it with caring respectful talk, the more likely it is that you will improve your mood.

CBIS MANUAL | JULY 2015 COGNITION | 62

Thought Stopping

Depression often makes people brood and worry about current problems, things that have gone wrong in the past and things that might go wrong in the future.

When unwanted thoughts won't get out of your head, try the suggestions in Step 1 and Step 2. See which ones work best for you. Remember: success depends on repetition.

Step 1: Stop the thoughts

- Picture a large STOP sign and shout "STOP" to yourself
- Say "I give this thought to the universe, it no longer belongs to me"
- Count backwards from 100
- Recite a poem or sing a song in your head
- Symbolically, brush off your shoulders or brow to wipe the thoughts off of yourself
- Imagine pressing a "delete" button

Step 2: Keep the thoughts away

As soon as the thoughts fade a little, do something to keep your mind and body busy. This will prevent the thoughts from coming back.

- Take a brisk walk and concentrate on what you see around you
- Talk to a friend and keep the conversation positive or pleasant: no complaining
- Read an inspirational book or story
- Play a game, do a jigsaw or crossword puzzle
- Do a household chore that requires concentration
- Listen to a guided relaxation exercise
- Do crafts or hobby work
- Connect with nature or work in a garden
- Give thanks for the good thoughts

Worry Time

If worries keep nagging at you, try this:

- 1 Pick a time near the end of the day but not close to bedtime, when you will sit down and be undisturbed for about 30 minutes (or schedule short periods throughout the day). You can decide on the amount of time. This is your worry time.
- 2 When a worry comes up during the day, tell it "Go away; I'll deal with you in worry time" and put it aside for the time being.
- 3 When the time comes up, go to your worry place. Think of all your worries and do nothing but worry hard for the full time you have set aside.
- 4 At the end of this time, go to a different room if possible and get involved in some activity that distracts you.



Good Guilt / Bad Guilt

A world without guilt would be a frightening place. Guilt is the internal pause button that encourages us to question our behaviours, feelings, intentions, beliefs, judgements, values and helps us decide whether something is right or wrong.

Guilt can be extremely helpful in keeping us on track as we navigate through life.

On the other hand, guilt can be crippling, leading to shame, self-doubt and depression. It can be a harmful weapon when we use it against ourselves or to control and influence another person.

Use the following questions to help you assess whether your feeling of guilt is helpful or harmful:

- 1 What happened that led to my feeling of guilt or shame?
- 2 What part am I responsible for in this situation?
- 3 What happened that may have contributed to this outcome?
- 4 Who else may have contributed to this outcome?
- 5 How much of the guilt belongs to what happened and/or other people?
- 6 What part of the guilt belongs to me?

Now what will I do with this guilt?

- Learn from my mistakes don't continue to beat myself up.
- Admit when I'm wrong and apologize.
- Avoid shaming myself. We all make mistakes.
- Accept that I can't change what has already happened.
- Forgive myself.
- Decide what to do differently next time.
- Give thanks for the life lesson and move forward.

Assertiveness: Getting Healthy Boundaries

Say yes when you mean yes, no when you mean no, and maybe when you mean maybe — assertiveness means being clear, not necessarily sure.

- David Richo

Healthy communication is a powerful tool. It involves the direct and honest expression of your feelings and desires in a way that respects yourself and others.

Assertiveness is the ability to:

- Be clear about your feelings, choices and agenda (with yourself and others)
- Ask for what you want
- · Take responsibility for your feelings and behaviour

We haven't all had the opportunity to grow up in a family that used healthy communication.

We become confused about our boundaries and our right to set healthy boundaries with others when it has not been modeled in our families.

Therefore, we often feel selfish when we need to set healthy boundaries for our own wellness and survival.

Clear communication and healthy boundaries are in the best interest of everyone: you, your family, and your community.

Setting Limits

Most of us like to be seen as helpful and generous, but for some people, saying "no" can be especially difficult. Cultural expectations can add to this difficulty. Consider the following questions when you are trying to set limits.

WON'T PEOPLE DISLIKE ME IF I SAY "NO" TO THEM?

They may be annoyed at first because they are used to you agreeing to everything they ask. Most people who learn how to say "no" find that in time they actually get a lot more respect from others. Saying "no" is for everyone's benefit.

IF I SAY "NO" WON'T I BECOME A SELFISH PERSON?

Setting limits doesn't mean saying "no" to every request, just balancing things so that others don't depend on you all the time for everything. This gives others a chance to learn how to manage their own lives as we all strive to live in balance.

WHAT IS THE PRICE FOR ALWAYS SAYING "YES?"

- You get completely overwhelmed and over time your health is likely to suffer.
- · You have less time and energy to spend with your family and friends.
- You become irritable, exhausted and perhaps depressed.
- You feel unappreciated for what you do.
- You begin to resent the people for whom you do so much.
- You put your personal needs, plans, and dreams on hold, perhaps forever.
- Others expect more and more, even take you for granted.
- Others don't learn to solve their own problems.
- Others don't learn to become independent.
- Others learn to take advantage of helpful people.
- Others fail to become helpful themselves.

HOW DO I START SETTING LIMITS WITH OTHERS?

Choose a small request someone has made that you know they can manage for themselves.

Decide what, when and where you will tell them.

Rehearse what you will say, and practice using a strong assertive voice.

Stay firm; don't argue or become defensive.

Use positive self talk.

Repeat this exercise with other small requests before moving on to more difficult situations.

SETTING LIMITS (CONTINUED)

	EXAMPLE	
1	Choose a small request.	Your son Joe always asks you to baby-sit
2	Decide what, when and where.	I'll call Joe right after dinner and tell him that I can't baby-sit for him this weekend, and that he'll have to find someone else.
3	Rehearse.	"Joe, I can't baby-sit for you this weekend and I want to give you sufficient time to find someone else."
4	Stay Firm.	"As I've already said Joe, I can't baby-sit for you this weekend. You'll have to make other plans."
5	Use positive self-talk.	My life is just as important as anyone else's. It's OK to say "No."

	WOKSHEET	
1	Choose a small request.	
2	Decide what, when and where.	
	Decide What, when and where.	
3	Rehearse.	
4	Stay Firm.	
5	Use positive self-talk.	

Is Anger a Problem for You?

Tom arrives home late. Mary expected him an hour ago. Mary thinks "He's out cheating... gambling... drinking... I'm so angry."

From this example, we can see that Mary believes that Tom is up to no good and may speak or act in a way that could result in an angry fight.

Mary, like many people, believes that Tom caused her anger by coming home late. Actually it's Mary's thoughts about what Tom has been doing that caused her anger.

Anger is a stress reaction that includes thinking, body changes and behaviours. Similar to an alarm system, its purpose is to let us know that "something is not OK."

Many people, like Mary, respond to the alarm by feeding the anger with more negative thoughts. Usually this makes things worse and is not helpful. Anger has huge costs to the person and their relationships.

Let's look at what could help Mary calm her anger and help her to deal best with the situation:

- **Information:** Make sure she has all the information and there are no misunderstandings.
- Slow down: Take time and think about what she wants to say before she reacts.
- Problem solve: Think about how this problem can be solved and what might be possible solutions.
- **Breathe:** Relaxation exercises such as belly breathing can reduce body reactions and allow her to think more clearly.
- **Communication:** Using "I" statements, Mary could say what she was reacting to, what her feelings are, and what she wants.
- Thought stopping: If she is becoming overwhelmed by her angry thoughts, she could silently and firmly say "STOP" and distract herself. She might need to repeat this several times.
- **Humour:** She could try to see the humour in the situation, laughter is great in decreasing anger.
- Time out: Remove herself from the situation until she's had time to cool off.

If you are concerned about your anger and want better ways to express your needs and solve problems you may want to speak to a counsellor. You can also seek out an Anger Management course.



This module has handouts that describe ways we can deal with stress and helps to provide a positive benefit to overall physical and mental health.

It includes various coping options that help us stay balanced and grounded despite life stressors.

This module includes informational handouts and instructional excercises on deep breathing, grounding, relaxation, mindfulness, and meditation.

These skills are easy to learn and more effective if practiced together wherever possible.

Managing Stress

Stress Response

- In today's world, stress is so common-place it has become a way of life.
- Stress isn't always bad. In small amounts stress can be helpful, as in competitive sports.
- Fight, flight, freeze is the body's natural response to real or perceived danger. Our body responds by releasing a flood of stress hormones which may cause bodily changes like tense muscles, rapid breathing, sweaty palms, and a racing heart.
- Excessive amounts of stress over long periods can damage this natural response and keep our bodies in a constant stress mode.
- Managing stress involves changing stressful situations when you can and changing your reactions when you can't change the situation. It also involves taking good care of yourself by making time for the healthy things that make you feel good.

Relaxation

- Relaxation helps to settle the fight, flight, freeze response and turn on the body's natural relaxation response.
- Relaxation skills can positively influence our mind, body, behaviour and emotions.
- Relaxation is a skill learned through repetitive practice.
- There are many ways to initiate relaxation. The key is to find the ones that fit for you.

Belly Breathing

What is it

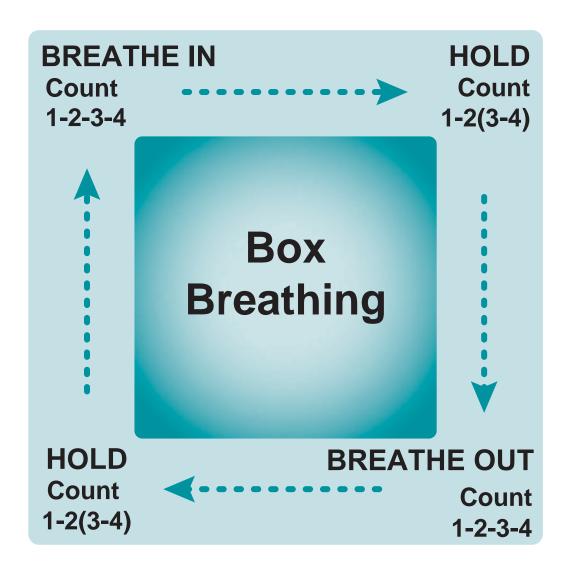
- Healthy breathing moves through the body like a wave.
- The breath begins by expanding the belly and then moving upward through the chest. It is released by letting the air flow from the chest and then the belly.
- Belly breathing is slow, deep, and full; it helps us feel calm, grounded and stable.
- Shallow chest breathing maintains the stress reponse while belly breathing promotes the relaxation response.

How to do it

- When practicing belly breathing, put one hand on your abdomen and one hand on your chest, close or lower your eyes.
- First, breathe out fully. Then, slowly breathe in, letting your belly expand. Imagine you are gently filling up a balloon in your belly.
- Allow the breath to move up like a wave to expand the chest.
- Now let go, breathe out slowly and feel the wave ebbing; the balloon emptying and your chest and belly flattening.
- The more fully you exhale, the easier it is to breathe in deeply.
- With every breath imagine you are connecting to the universe.
- Breathe in relaxation, breathe out tension.
- Practice breathing this way for 5 minutes twice a day.

Variation – Box Breathing

Box Breathing incorporates brief holding of breath after breathing in and out. This is very useful during severe anxiety or panic to slow down the breath and prevent hyperventilation.



Grounding

What is it?

Grounding includes calming and centering methods that help you to become more present in your body and connected to earth and the present moment. Like a tree rooted in the ground, it connects you with your power source and reminds you of your strengths and ability to cope.

How to do it

- One option is to sit in a chair with your feet flat on the floor and your hands placed palms down on the large muscles of your thighs. Gently press your feet into the floor for a few moments and release. Feel your strength.
- Alternatively, you can ground while walking or standing. Just become aware of your feet firmly planted beneath you.
- To calm the mind and help to focus in the present, take some deep breaths while repeating a calming statement. Choose one thought that you repeat each time you do the grounding, so that saying it becomes a habit. For example:
 - "I AM LEARNING TO STAY IN THE PRESENT."
 - "THIS IS ME. I AM HERE. I AM ALIVE. I WILL COPE."
 - "I AM LEARNING TO COPE."
- You could also ground by breathing and focusing on a detailed description of an object in your environment (e.g., colour and shape).
- You can do a more extensive sensory grounding referred to as "5-4-3-2-1" using
 what you see, what you hear and what you feel. Start by naming five things you
 see, five things you hear, and five things you feel. Repeat this process with four
 things, then three, then two, then one. You may repeat items.
- In extreme states of emotions you can use a ziplock bag with four or five ice
 cubes and a bit of water, and apply it to your upper cheeks for about 30 seconds.
 Take a break for a few seconds and re-apply at least three times. This technique
 is found to be most effective if the ziplock bag is also wet on the outside and if you
 sit, bend forward and hold your breath while you apply it.

GROUNDING (CONTINUED)

Sometimes we can be overwhelmed by stress and seem to lose connection with ourselves, our lives and our strengths.

Further calming and centering ideas are included in these four quadrants.

PHYSICAL

Breathing
Touch, massage
Exercise
Walking
Dancing
Singing
Warm bath

EMOTIONAL

Family
Friends
Community
Affection
Talking
Sharing
Creative expression

MENTAL

Laughing, humour
Beliefs, values
Meditation
Mindfulness
Cultural knowledge
Learning
Affirmations

SPIRITUAL

Ceremonies
Light candles
Faith, prayer
Elders, healers
Connecting with personal spirit
Music, singing
Nature

Body Scan

What is it

- Body scan is a relaxation exercise that can quickly highlight areas of tension.
- It is similar to passive relaxation in that you focus on the body and breathe into each body part, releasing tension with the out breath.

How to do it

- Body scan involves scanning your body from feet to head and doing two steps for each body part:
- 1 Focus on a body area and notice whether you feel tension in that part of the body.
- Where there is tension, imagine that your breath goes into that part of the body. As you breathe out, the tension is released with your breath.
- You can take 30 seconds or 5 minutes to do a body scan, which makes it useful in a variety of settings and situations.



Passive Relaxation

What is it

- Passive relaxation is a relaxation exercise that uses deep breathing and a body scan, taking about 15 to 20 minutes.
- It teaches you to recognize tension in your body and to train the muscles to relax.
- With regular practice you will increase the benefits of relaxation.

How to do it

- Get into a comfortable position. Close your eyes and concentrate on deep breathing for a few minutes.
- Focus your attention on each body part (feet, legs, buttocks, belly, back, hands, arms, shoulders, neck, jaw, eyes, scalp).
- Breathe into each area, connecting with the universe as you breathe out tension and breathe in relaxation.
- You may wish to use relaxing music or utilize a pleasant scent such as a scented candle.

Variations

- While you are relaxing, think of a special place in nature. Imagine what you see, hear, smell, taste and feel. Let yourself experience your special place through your senses.
- You may find these statements helpful by repeating them to yourself for each body part:

"My	.(name body part) is warm."
"My	.(name body part) is heavy."
"My	.(name body part) is relaxed."

Stress Busters

What is it

- Shorter exercises allow you to relax and/or release tension quickly in a variety of different settings (e.g. at lunch break, at a meeting, while waiting in line at a store, at a red light etc.)
- You can use these short exercises to calm yourself before, during or after stressful situations, and maybe even prevent a stress response.
- Find the examples that suit you best.

How to do it

- Take a few deep belly breaths.
- Sigh.
- Laugh.
- Yawn, unclench or move your jaw.
- Shrug your shoulders several times.
- Relax your shoulders.
- Gently massage your temples.
- Raise your eyebrows and hold them up until the count of 3; release and repeat several times.
- To relieve eye strain, rub your palms briskly together, cup hands and place them over open or closed eyes.
- With open or closed lids, rotate your eyes in circles slowly, top, right side, bottom, left side; relax and reverse. Repeat 3 times.
- Neck roll: Always move your neck very gently and slowly. Let your chin drop down
 to the center of your chest. Keeping your chin close to your body, slowly move your
 head to look over your left shoulder. Slowly return to center and repeat on the
 right side.
- Stretch.
- Use prayer or positive affirmations.

One Minute Stress Break



CBIS MANUAL | JULY 2015 RELAXATION | 79

Mindfulness

What is it

- Mindfulness is experiencing the present moment in a non-judgemental way. It is
 paying attention with a welcoming and allowing attitude...noticing whatever we are
 experiencing in our thoughts, behaviour, and feelings.
- Making changes in our life begins with awareness. Awareness means paying attention to what we are doing, thinking and feeling. We then have the option to either accept things or change things.
- Practicing mindfulness teaches us to relax and remain alert in the midst of the
 problems and joys of life. It encourages us to pause in the moment and respond to
 life with curiosity and a welcoming attitude.

How to do it

- The practice of mindfulness focuses on four areas: body, emotions, thoughts, and inner self or soul.
- Begin by becoming aware of your breath; simply notice the sensations of the breath in the nose, throat, lungs, or belly. Follow the breath just as it is. The goal is not to change it but only to observe and be mindful of each breath.
- Mindfulness can then extend to noticing:
 - body sensations such as pain, pleasure, heat, cold, tension, relaxation
 - emotions such as fear, anger, sadness, happiness
 - thoughts that arise in the mind in the form of sentences, words, fragments, or images
 - connection with the inner self and universe
- The purpose is to fully experience and be aware of whatever may arise within you.
- This practice can then continue as you move through your day, becoming more and more aware as you go through your daily activities.
- By staying in the present we are less likely to get caught up in worries about the future or regrets over the past.

CBIS MANUAL | JULY 2015 RELAXATION | 80

Mindfulness Meditation

What is it

 Meditation is a structured practice of concentrated focus upon a sound, object, visualization, the breath, or movement in order to increase awareness of the present moment. It is paying attention on purpose, to the present non-judgementally. It also reduces stress, promotes relaxation, and enhances inner balance and peace of mind.

How to do it

It is helpful to set a special time aside each day to practice meditation. You can start
with 5 to 10 minutes a day, increasing to 20 minutes over time. It can also be helpful
to practice at the same time and place each day.

Posture

- Seat find a solid, grounded, stable position on a chair or cushion
 - let body relax in the position, not too tight and not too loose
- Feet flat on the floor (grounded)
- Hands hands on thighs, palms down (grounded)
- Back as straight as possible
- Chest soft/open
- Ears above shoulders
- Chin ever so slightly in towards the chest
- Jaw relaxed
- Mouth slightly open, like "ah"
- Tongue softly touching roof of mouth
- Eyes open and gazing downward, using soft focus

MINDFULNESS MEDITATION (CONTINUED)

Breath

- Notice your breath going in and out. Not forcing or changing it just noticing it.
- Increase the length of the out breath. Each time you breathe out, allow yourself to let go and relax.
- Occasionally check your body posture, and then go back to paying attention to your breath.

Thoughts

- It's natural that thoughts will arise, and your mind will wander. That's okay.
- It may be a thought, an image, or an emotion just label it all "thinking" and bring your attention back to the "In and Out" of the breath.
- Be very kind to yourself when you notice your mind wandering. Gently say to yourself "thinking" and bring your attention back to the breath.

Variation

WALKING MEDITATION

- Walk slowly, hands in front or by sides as you would usually walk.
- Pay attention to your body; feel a sense of ease.
- With each step, feel the sensations of lifting your foot, moving it forward then placing it on the ground.
- Notice when the mind has wandered away, label it "thinking" and bring your attention back to your body and to moving each foot.
- You can say "lifting, swinging, placing" to yourself to help stay focused on your body.
- Paying attention to the in breath and out breath also helps you stay focused on your body in the present moment.



Anxiety Module
Calm Mind

This module contains additional cognitive behavioural strategies and exercises that may be helpful for symptoms of generalized anxiety, social anxiety, panic attacks, phobias, post traumatic stress and obsessive compulsive behaviours.

Use the flow charts to help you choose the handouts that correspond to your patient's diagnosis or needs.

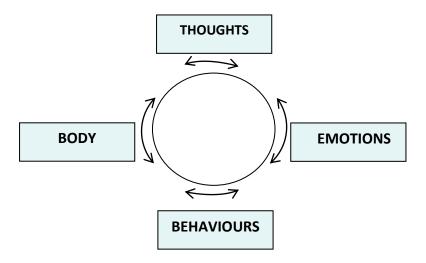
Costs and Benefits of Anxiety

Check below to see what benefits anxiety has brought you and what it has cost you.

BENEFITS	COSTS	
You do a great job at work.	You are always worrying whether you did things right.	
Your employer values your commitment and attention to detail.	You may take work home with you. You are too busy to spend time with family.	
You do everything you can to please people.	People start to take advantage of you.	
People talk about how kind, helpful, and generous you are.	People stop appreciating your efforts so you have to try harder to please them.	
	No one seems to think your needs are important. You feel resentful.	
You are very careful.	You get stressed if the least little thing goes wrong.	
You catch things when they start to go wrong so that you can head off bigger problems.	You over plan which takes the fun out of events. You are constantly on guard and can't relax.	
You do a thorough job with everything.	You are so afraid of making a mistake that you do things over and over which makes you less productive.	
People know they can rely on you to do everything well.	You procrastinate because you don't think you can do the task perfectly.	
You are very organized and orderly and other people value this about you.	You feel constantly stressed and overwhelmed.	
people value tills about you.	You are tough to live with because you try to make everyone else be as organized as you.	

- Your first task in limiting anxiety is to recognize what it costs you and others in your life. The
 goal is to balance the benefits and costs so that you keep some of the benefits and don't pay
 such a heavy price.
- Anxiety may increase for a bit as you start to tackle it, but with practice it will decrease
 over time. Come back to this page to remember that you are already paying too high a
 price for your anxiety.
- Reducing anxiety will get you feeling more relaxed and you'll be able to have more fun. Other people will be more comfortable around you. It is worth your effort to limit anxiety and not let it run (and ruin) your life.

How Anxiety Works



Managing anxiety is easier if you understand how thoughts, emotions, behaviours and body sensations are linked together and affect each other.

Example 1: Changing Thoughts

In the following example, the same situation seems to produce different feelings and behaviours depending on how Mary thinks about it.

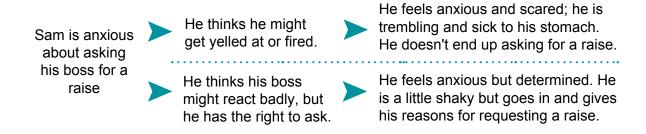


If Mary assumes something bad has happened, her anxiety will increase, she will have more difficulty coping and may be angry when her husband finally arrives home.

If Mary remains calm she will be better able to cope, even if something bad has happened.

Example 2: Changing Behaviours

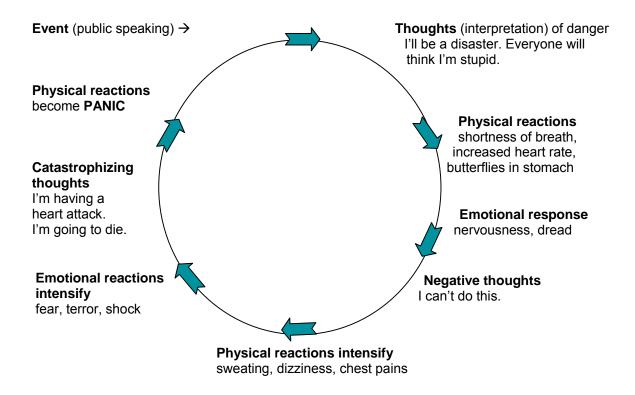
In this next example the same situation and similar feelings are dealt with in different ways, producing different outcomes.



If Sam lets his anxiety control his behaviour and avoids asking his boss for a raise, he will feel relieved at first but then resentful and bad about himself. The next time he faces a difficult situation, he will remember this incident and his anxiety will be even stronger. Avoidance feels good at the time, but makes anxiety worse. If he keeps giving in, over time, his anxiety will continue to grow.

If Sam asks his boss for a raise despite his anxious feelings, he will feel good about his effort. The next time he faces a difficult situation it'll be easier for him to act in spite of the anxiety. By taking risks and not avoiding anxious situations his anxiety lessens over time.

Panic Circle



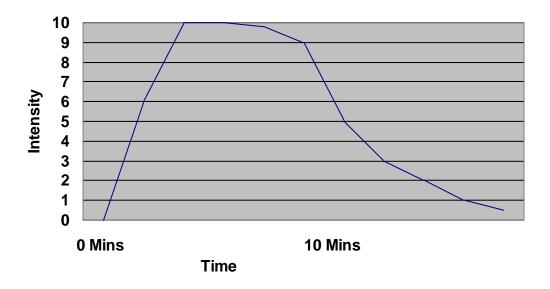
Anxious people are often overly aware, on guard and sensitive about normal body sensations. This increased focus on bodily sensations causes a negative loop between the body and the mind that leads to further anxiety and possibly panic.

Panic attacks certainly "feel" dangerous; however, our bodies are designed to deal with the increased adrenaline and eventually the symptoms will disappear as the body processes the adrenaline.

Taking Control of Panic

Anxiety symptoms peak quickly and begin to ease off in approximately 10 minutes, unless further fueled by worry thoughts.

It is very helpful if you can take steps to control the panic at the first hint of increasing anxiety. This may prevent a full blown panic attack.

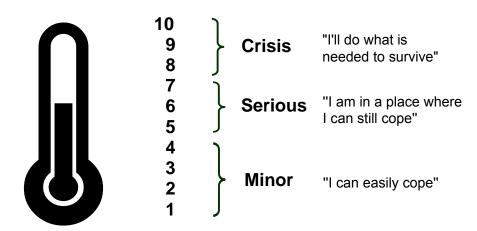


Steps for taking control of panic

- **Distract** yourself when you first notice the anxiety
- Start deep, slow belly breathing
- **Use** positive affirmations
- **Notice** the anxiety don't fuel it
- **Go** to a safe place in your mind
- Remind yourself that anxiety will pass
- Repeat all these steps as needed

Your Emotional Thermometer

- Imagine a thermometer marked from 0-10. The highest number 10 represents the most anxious you have ever felt, 0 is the calmest, and 5 represents midway. This is your anxiety thermometer.
- The numbers 8, 9,10 represent an anxiety level for events that involve a disaster that is about to happen or has already happened, such as serious accidents, fires, and illness. Events that warrant 8-10 are quite rare in most peoples' lives.
- The numbers 5, 6, 7 are for serious events that may have bad consequences, such as missing a job interview or your car breaking down on the highway at night. Even events that warrant 5-7 on the anxiety thermometer are still fairly unusual.
- Most of the things we get anxious about on a daily basis are not serious enough to
 deserve high levels of anxiety, although they may feel more intense to anxious people.
 Everyday events would be somewhere between 1 and 4 on the thermometer.
- Level 8-10 situations can be thought of as crisis and level 1-7 as different sized hassles.
- The next time you feel your anxiety rising, stop and ask yourself these two questions to help you calm down by putting the event in a realistic context:
 - 1. How serious is this, really, in terms of life and death?
 - 2. How much anxiety is it really worth?



Keeping Anxiety in Check

You may temporarily feel increased anxiety when you first try a new strategy. If you stay in the anxious situation until your anxiety begins to drop a little, your anxious brain learns that the danger it was warning you about wasn't really that harmful.

The following strategy will help keep your anxiety in check by not dragging it around with you from place to place.

Signals

Choose signals to help you stop one activity, such as work, and start another one, such as family time. For example, on the way home from work, make a rule for yourself that once you pass a certain spot you are not allowed to think about work or do anything connected with work. Refocus your thoughts on home and family; if possible, plan something pleasant for part of the evening.

This strategy stops one part of the day "leaking" into another and spoiling it.



Anxiety Equation

Anxiety arises out of exaggerating danger and underestimating coping ability.

Magnifying fears + + +

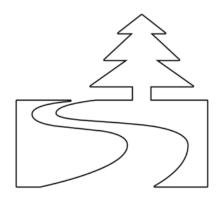
Leads to increased anxiety

Keeping it in perspective

Minimizing coping - - -

Recognizing our resilience

Leads to decreased anxiety



How can you reverse this equation to minimize fear and maximize coping? What part of this equation do you need to work on first?

- 1) **Top**: Minimize fear by making thoughts of danger more realistic.
 - a) Ask yourself: Is that a fear or a fact? What's exaggerated? Can I challenge it? Can I make it more realistic?
 - b) What are you saying or imagining that magnifies the fear?
 - c) What could you say to yourself to decrease the fear?
- 2) **Bottom**: Maximize coping by increasing coping resources.
 - a) Identify your internal and external coping resources, past and present.
 - b) Remind yourself that you have coped with other difficult situations.
 - c) Use coping statements, affirmations, problem solving, distracting, thought stopping, relaxation, assertiveness etc.

Remember coping means finding a path through

Predicting Disaster

There are two main thoughts that fuel anxiety:

1. "Something terrible is going to happen"

As long as you believe this, you are likely to feel anxious, panicky, scared, worried and even helpless.

In order to manage anxiety it is important to take a look at this "disaster thought" and decide for yourself how true it is. You can do this by asking yourself the following:

"If 100% is definite and certain, how absolutely sure am I, in this situation, that what I fear is definitely going to happen?"

In order to give an answer anywhere close to 100%, you need hard evidence, solid courtroom evidence, which proves for a fact that your fear will come true.

Think of all the other times in the past that you have worried and predicted disaster. Were you always right? Most people are not very good at predicting the future!

How often does this kind of disaster happen? Research will show you how infrequently really bad things happen to even the unluckiest of people.

Now, mark on this line, realistically, how probable or certain is it that what you fear will happen?

Very unlikel	/	Very	y likel	y
voi y aiminoi			,	,

If you decide that your fear is not very likely to come true, ask yourself the following:

"How much time and energy do I want to spend on worrying about something that is not certain and may not happen at all?"

If you have good evidence to believe that what you fear is very likely to happen, there are some ways you can prepare for it, but worrying prevents clear thinking and sensible decision-making.

PREDICTING DISASTER (CONTINUED)

2. "When something bad happens, I won't be able to cope"

If you worry about not coping, even before something bad occurs, the disaster will grow in your mind and you will feel overwhelmed and helpless. You will convince yourself that your feared situation will never get better and will completely destroy you.

If what you fear does come true and you already feel helpless and overwhelmed, it will be much harder for you to cope. Strong emotions interfere with clear thinking and realistic decision-making.

The following ideas suggest new approaches to coping:

Coping means finding a path through

Anxious people believe that "coping" means quickly managing every part of a situation perfectly; this is an unrealistic expectation to put on yourself. Problem situations are usually messy and confusing and there may be no way that anyone could manage quickly or perfectly.

Natural feelings of distress make it harder to cope in an ideal way. A more helpful definition of coping is "finding a path through a situation somehow."

Tell yourself: "I don't have to fix all of this really well, by myself, immediately. I just have to figure out a way to find a path through, somehow." Thinking like this allows you to relax a little more, and will actually help you cope better.

If you doubt your ability to cope, ask yourself the following:

"How many other difficult situations have I coped with in my lifetime?"

The fact that you are still alive and functioning is the only proof you need that you are resilient and experienced at coping.

Remind yourself: "I have dealt with many tough situations over the years and I will be able to find a path through this one."

This way of dealing with difficult situations promotes clear thinking and realistic decision-making.

Anxiety Lies

Anxiety tells you that what you are worrying about is going to happen and when it does, it will be catastrophic!

The following two questions will help you reduce anxiety:			
1.	. Is what I'm worrying about really going to happen?		
	a)	What am I worrying about?	
	b)	Is this a reality?	
	c)	Is it really, definitely going to happen?	
2.	Eve	n if it does happen, would it really be as bad as I'm imagining?	
	a)	What have I done to cope with similar problems in the past?	
	b)	What could I do to cope now?	

Coping Statements: *Positive Affirmations*

Anxious people often make the anxiety worse by telling themselves things such as "What if the car breaks down; this is going to be a disaster." These thoughts actually reduce our ability to cope.

The best way to cope with a difficult situation is to tell yourself things that help you calm down and stay grounded. Focus on the moment, rather than thinking about what might happen in the future.

Below is a list of coping statements to prepare you for difficult situations. You can add others that work for you. Print out the statements you find helpful on a small card and carry it with you.

- 1. I have coped with situations like this before and survived.
- 2. I just have to find a path through I don't have to fix everything, perfectly right away.
- 3. I can try to find someone else to handle part of this.
- 4. This is only going to last a little while longer I can handle a few more minutes.
- 5. Anxiety is uncomfortable but it won't kill me.
- 6. Worrying doesn't change anything. It only stresses me and wastes my time.
- 7. There isn't time to do everything perfectly. I need to prioritize and accept that many tasks can be done "good enough."
- 8. If I avoid things, my anxiety will get worse. If I fight anxiety, my life will get better.
- 9. Saying no is hard, but I'm not going to be a doormat for others to walk on.
- 10. A little anxiety is OK, it's harmless; I can ignore it.
- 11. I will start feeling less anxious if I hang on and think about other things.
- 12. Breathe.

Coping Plans

From time to time things will go wrong, whether you worry or not, however hard you try, because that's just the way life is.

You have a choice: you can either worry about things that might go wrong or you can make plans for how you will deal with them. If you have some idea of how you might cope, you will feel less anxious and you will cope much better than if you simply let your anxiety take over.

A coping plan is simply a list of steps you think out ahead of time that help you manage a difficult situation.

- 1. **List** what has to be done.
- 2. **Decide** what must be done first.
- 3. **Recruit** others who could help.
- 4. **Give** tasks to each helper.
- 5. **Focus** only on the task you are doing right at this moment.
- 6. **Delay** emotional reactions until you have done what needs to be done.
- 7. **Pause** no matter how much there is to do; you will cope better after a short break.
- 8. **Do** take care of yourself. Eat, drink plenty of fluids, and get adequate sleep.
- 9. **Reduce** alcohol and other drugs. They will make you less efficient at coping.
- 10. **Accept** that this will be a difficult time.
- 11. **Tell** yourself "I will find a path through this, one step at a time."

If you find yourself worrying about something that might go wrong, write out a coping plan using these steps and put it away in a safe place. Whenever you start to worry about the problem, remind yourself "I have planned as best I can for this. I refuse to think about it anymore."

Coping is a step-by-step process. Looking at the big picture and seeing every detail can overwhelm people. It is more calming and effective to think of coping with a situation one small chunk at a time. Concentrating on small pieces of the situation gives you a greater sense of control, which gives you space and time to use your best coping skills.

Taking Risks

Your anxiety is making you miss out on a lot of things in life. Taking a risk means doing everyday things that you've been avoiding.

The only way to get some of those things back in your life is to start doing them. This may sound scary to you. In fact, you may be feeling anxious just at the thought of doing risky things.

There is a way to make it easier to get back to a fuller and more enriched life. Each time you overcome an obstacle you gain strength and confidence.

- **List** some of the things you have been avoiding. Choose small everyday things such as going to a store or a movie.
- Number your list with #1 being the least anxiety provoking.
- Start with #1 on your list.
- Break it down into small manageable steps.
- Begin with the first step.
- Hang in there until your anxiety starts to drop.
- **Tell yourself** "Good for me. I'm teaching myself that I don't have to get so panicked about everything."
- Repeat daily until you can easily do the activity with little anxiety.
- When you have mastered one risk, pick the next from your list, and take the same steps

Remember, if you stop when your anxiety is rising you have just strengthened your anxiety and made it harder to repeat the activity. By waiting until your anxiety begins to drop, you learn that what you feared and avoided is not so dangerous.

Continue until you put anxiety in its place and take back your life.

Example: Kelly begins by making a list of everyday things she's been avoiding. She then numbers the list from the least to the most anxiety provoking. She begins with #1: Going to the bank, and breaks it down into small steps, which she works her way through. When her anxiety has sufficiently decreased, she proceeds to #2 on her list.

List		Number
•	Grocery shopping	4
•	Going to a movie	3
•	Coffee with a friend	5
•	Going to the bank	1
•	Taking a bus	6
•	Going to a mall	2

Breakdown #1 (going to the bank)

- Organize paperwork
- Prepare to go out
- Walk to bank
- Spend time outside bank
- Spend time inside bank
- Line up for teller
- Transaction with teller

Steps

- Begin with first step (organize paperwork)
- Hang in until anxiety begins to decrease
- Congratulate your effort
- Repeat (organizing paperwork) as necessary until anxiety is minimal
- Move on to next step (prepare to go out)
- Repeat each step until activity (going to the bank) causes little
- anxiety Repeat this procedure with #2 (going to a mall)

Assertive Behaviour 101

The following are a number of behaviours that are part of being assertive:

Eye Contact

A good way of engaging the person you are talking to and showing sincerity is by making culturally appropriate eye contact.

Body Posture

97% of what we communicate is through body language. Your message will be more effective if you face the person, stand or sit appropriately close to him, mirror the other person, and hold your head up while maintaining a relaxed body posture.

Gestures

Having your hands at waist height with open palms will seem non-threatening.

Voice

Quiet tones may not convince another person that you mean business, while shouting shows aggression and gets in the way of communicating. A level, calm, conversational tone is convincing without being intimidating.

Facial Expressions

Your facial expressions should match the message. Smiling or laughing while expressing anger is confusing and doesn't get your message across.

Timing

Sometimes you may need to take "time out" until you have your emotions in check and can express yourself calmly.

Content

Don't worry about saying something perfectly, it is more useful to speak honestly and spontaneously. It is important to be assertive, not aggressive, and use "I statements" that focus on behaviours rather than the person.

D.E.S.C. Script

Assertiveness doesn't guarantee that we will get all we want, all of the time. The following technique gives us a way of making sure we clearly say what we mean. This improves the chance of being understood and avoiding a defensive reaction.

Describe

- State what happened, just the facts
- Be objective

Example: "I came home from work and found the milk was left out on the counter."

Express

- State calmly how you feel
- Use "I" statements

Example: "I felt upset that the milk was warm and concerned about our money being wasted."

Specify

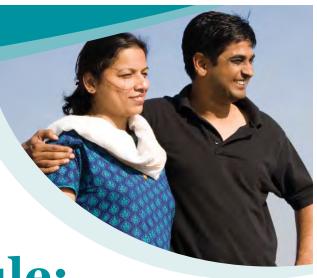
- State the specific behaviour you want changed
- Choose only one thing at a time

Example: "I need you to put the milk back in the fridge after you use it."

Consequences

- State appreciation for changed behaviour
- Set limits if outcome is unsatisfactory

Example: "I really appreciate your help with this. If it is left out again it will become your responsibility to buy more."



Lifestyle Module: Wellness

This module contains handouts on various lifestyle factors that promote mental, physical, and spiritual wellbeing, including handouts on sleep, nutrition, substance use, physical activity and a wellness wheel.

Choose the handouts that reflect what the person needs.



Healthy Habits for Sleeping

Depression and anxiety often cause a disruption in sleep patterns. Poor sleep contributes to daytime tiredness, low energy, increased anger, decreased concentration and increased depression. If sleep is a problem for you, practice the following tips.

- Work towards a consistent sleep routine.
- Try to get up at the same time everyday regardless of how poorly you slept.
- If you have not fallen asleep after 20 minutes, get up and do something relaxing like painting, drawing, or reading until you feel sleepy, then try again. (Repeat if necessary throughout the night).
- Turn off all screen devices (eg., phone, tablet, TV) at least 1 hour before bed.
- Use relaxation exercises or repetitive activities (e.g., counting backwards) or think
 of safe moments and pleasant memories.
- Limit naps to 20 30 minutes, early in the day, if needed.
- Create a good sleep environment, preferably a cool, dark, quiet room. Earplugs, eyeshades and white noise (e.g., fan) may be helpful.
- Develop a bedtime routine. Try a warm bath 90 minutes before bed as sleep is promoted as the body cools.
- Save your bedroom for sleep, healing and sex.
- Use nature, get fresh air and exercise regularly, preferably daily, but not within a few hours before bedtime.
- Reduce your daily consumption of caffeine, alcohol, and tobacco, especially close to bedtime.
- Be mindful of what you eat before bed. A light snack (milk, bananas or peanut butter are good choices) but try not to eat a large meal close to bedtime.
- Avoid sleeping medication, unless prescribed by your doctor.

It's True: You are What You Eat!

Healthy Eating

- Depression and anxiety might affect appetite, either increasing or decreasing it.
- · What we eat may also affect our mood.
- When possible, try to prepare a healthy balanced meal that is low in sugar, unhealthy fats and processed foods.
- Limit consumption of caffeine and junk food (e.g., fast food, soda, chips, etc).
- Try to choose nutritious snacks such as fruit, vegetables, nuts, yogurt, cheese and crackers.
- Work towards healthy eating habits with regular meals.
- If needed, decrease portion size, but make sure you eat something.
- Even if you don't feel hungry, build a routine and when possible eat healthy meals or snacks several times a day.
- Drink adequate water daily.

Substance Use

- Substance use may provide temporary relief but does not promote healing or wellness.
- Using drugs or alcohol increases the severity and degree of depressive and anxious symptoms.
- Substance use contributes to avoiding rather than facing problems.
 Avoiding emotional problems does not make them go away, instead it tends to worsen them.
- Reducing substance use to moderate levels, or even stopping, is essential for health, healing, wellness, and recovery.

Caffeine

- Caffeine comes in several popular forms coffee, tea, soft drinks and chocolate.
- It is a stimulant, acting on our nervous system much like anxiety does.
- · Caffeine is also an addictive substance.
- Some of its side effects are similar to symptoms of depression: sleeplessness, digestive problems, headaches and anxiety.
- Withdrawal from caffeine also mimics depression, with irritability, fatigue, appetite problems, and poor concentration.
- It's best to be aware of the effect of caffeine and to consider limiting its use.
- Please refer to the Caffeine Chart below determine your caffeine intake.

Caffeine Chart

PER 6 OZ CUP OF COFFEE, TEA, COCOA PER 12 OZ BOTTLE OF SODA	MILLIGRAMS OF CAFFEINE
Coffee, instant	60 – 70 mg
Coffee, percolated	
Coffee, drip	120 – 150 mg
Coffee, decaffeinated	3 – 10 mg
Tea bag, 5 minute brew	50 – 60 mg
Tea bag, 1 minute brew	30 – 40 mg
Cocoa	10 – 20 mg
Chocolate (dry, 1 oz.)	5 – 10 mg
Energy Drinks	70 – 100 mg
Coca-Cola	65 mg
Pepsi-Cola	43 mg
Dr. Pepper	61 mg
Mountain Dew	50 mg
7-UP/Sprite	

Physical Activity

Exercise

- Regular physical activity like going for walks on trails, beaches, or in the mountains, helps the treatment of depression by brightening mood, increasing energy, and improving sleep.
- Exercise can raise the levels of certain chemicals in the brain, including serotonin, which produces happier states of mind, thus helping in the recovery of depression.
- When you are depressed, it is good to know that you are taking positive action for your health and well-being.
- Exercise helps increase stamina and reduces the risk of diseases like diabetes, heart diseases, and bone loss.
- Physical activity helps the body deal with stress hormones and decreases anxiety.
- A realistic, relevant, flexible and fun activity has the best chance for success.
- Make a list of physical activities you enjoy, like going for a walk in nature or skipping rocks at the beach and decide which ones to start with.
- Start with baby steps, not with running a marathon. Increase your activity in stages, and give yourself credit for each step.
- Listen to your body; your goal is to feel pleasantly tired, a normal feeling after any physical activity.

The Wellness Wheel

