

Gaining Control of Your Life

A Self Help Workbook for Managing Depression





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Disclaimer

The author has made every effort to ensure the accuracy and reliability of the information in this workbook. However, it is not intended to be a substitute for medical advice or treatment. Any person with a condition requiring medical attention should consult a qualified medical practitioner or suitable therapist. Evidence suggests that self-help material is most effective when you are supported by an appropriately qualified clinician. We strongly advise that when using this workbook you stay in touch with your named clinician. If for any reason you are unable to reach them and you are feeling concerned about your mental health we recommend that you go to see your Doctor. Other agencies that can help you are listed at the back of the Workbook.

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About this book

This workbook is different from other books you may have read. Gaining Control of your Life is a practical guide and introduces you to a number of techniques to manage your moods.

All the techniques in this self-help guide need practice – don't expect instant results.
Stick with it and your symptoms should decrease

The programme is designed to build your knowledge and confidence step by step to help you work steadily towards your goals. The techniques in this workbook come from "cognitive behavioural therapy". This is a type of therapy used by psychologists and others to help people manage all sorts of problems. The "cognitive" part deals with how you think, and how this can affect your moods. The "behaviour" part deals with how you can manage your moods by changing what you do.

Who is it for?

This book is for anyone with difficulties managing their moods. It could also be useful if you are supporting someone with depression.

The book has been written by a Clinical Psychologist (Alison Sedgwick-Taylor) and a patient (Lauren Thomas) who has suffered from anxiety and depression. Lauren has been the patient adviser during the writing of this work book and has provided invaluable comments and feedback. She is quoted throughout the book. The techniques that are presented are 'evidence-based', that is, they have been extensively researched and shown to be effective in the management of mental health difficulties. All the techniques, when used alone but particularly when used together, have been shown to be effective.

Through
experience I know a lot
about mental health, by that, I
mean anxiety, depression and other
life messing conditions. I have tried and
tested many ideas and given most things
a go in order to make the journey through
my life easier. So, when you think it's all
hopeless and you are in despair –
remember there is always something
you can do to feel better.

Lauren, patient adviser

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Meet David, Cassie, Pauline and Simon

Throughout the programme you will be introduced to four characters, David, Cassie, Pauline and Simon who will help to bring the techniques to life. You can follow their progress during the programme if this is helpful. Do not worry if you do not exactly recognise yourself or your problems in the cases described. Depression presents in many ways and for many reasons. Our four characters are fictional but based on typical real life situations.









Hello, I am David. I did this programme and found it very helpful in getting me active again. I'd lost all confidence in myself as a result of my depression. I felt so ill when I was low but gradually I became my old self.

My name is Cassie. I am a single mum with a beautiful little girl called Anya. I have had a pretty tough life so far, made tougher by my own high standards. I think I've learnt that I'm a perfectionist and that 100% perfect is just not practical. Learning to cope with "it'll do" and "good enough" has been the key for me in making me happier about me and life. I've a long way to go but this has been a good start.

I am Pauline, a person who you would not expect to have depression. It's something I've hidden for many years and felt too ashamed to admit to myself, never mind anyone else. Finally acknowledging there is a problem, with a name and a treatment that might help has been a real relief.

I'm Simon and am a student and have been struggling with attending college. I'm a bit phobic of other students and am a bit of a worrier. My mum has been really supportive but I need to get out more and on with my life. The thought of facing situations that made me anxious was plain terrifying. The book teaches you how to take small steps towards your goals – that makes it so much more manageable!

Getting the most out of the workbook

You can choose whether you do the programme in full or just read some of it now and then. You can dip in and out of the book if this is helpful to you. If you want to follow the programme in full we recommend you take between 8–12 weeks. However, if you want to take less or more time to read and take in all the information that is fine. If you have someone with whom you can discuss your progress on a regular basis this will also be beneficial.

We want you to find the techniques that work best for you so we suggest you read and try them all. If you prefer particular techniques and they are working for you stick to them. However, we advise you spend no less than a week practising the techniques presented in each new section.

Diary sheets are available at the back of the book should you wish to use them.

Reading about the techniques is not enough. For this programme to work you need to put the suggestions into practice repeatedly. This takes time and considerable determination. Throughout the programme there will be many opportunities for you to write down your thoughts and feelings. The homework is a very important part of the programme and will really help to make a difference.

You need to have decided that things need to change for you to be regaining control of your life. You need to stick at it. Each little step can add up to a major change for the better.

By picking up this book you are saying that you want things to change. Of course you want to feel better. This workbook is packed full of suggestions on how to start feeling better but they do take a bit of effort to put into practice. Do not worry if you cannot do all that is suggested, or even half of what is suggested. If you do just one thing that is described in the book, at least you have taken a step in the right direction.

Summary

This self-help programme is for anyone struggling to manage their moods. It could also be useful if you are supporting someone with depression. The workbook teaches cognitive and behavioural techniques that have been shown in research and clinical practice to be very effective. Reading the workbook will not be enough. You will need to practise and use the techniques over time to feel the benefits.

All the techniques
in this self-help guide
need practise – don't
expect instant results.
Stick with it and your
mood should
improve

The workbook is here to help, not to be another thing to worry about. Make it yours to use as and when feels right to you.

Lauren, patient adviser

If you feel you are at risk of harming yourself, contact your GP or the Samaritans on 116 123 or email Jo@samaritans.org

Find out whether you are anxious and depressed

Visit our website to find out more about your scores. (www.talk2gether.nhs.uk)

Over the last 2 weeks, how often have you been bothered by any of the following problems?

Please tick	Not at all	Several days	More than half the days	Nearly every day
Feeling nervous, anxious or on edge	0	1	2	3
Not being able to stop or control worrying	0		2	3
Worrying too much about different things	0	1	2	3
Trouble relaxing	0	1	2	3
Being so restless that it is hard to sit still	0	1	2	3
Becoming easily annoyed or irritable	0	1	2	3
Feeling afraid as if something awful might happen	0	1	2	3
GAD7 Anxiety Total score				

Anxiety Scores None 0 - 5 Mild 6 - 10 Moderate 11 - 14 Severe 15 and above

Over the last 2 weeks, how often have you been bothered by any of the following problems?

Please tick	Not at all	Several days	More than half the days	Nearly every day
Little interest or pleasure in doing things	0	1	2	3
Feeling down, depressed, or hopeless	0	1	2	3
Trouble falling/staying asleep, sleeping too much	0	1	2	3
Feeling tired or having little energy	0	1	2	3
Poor appetite or overeating	0	(1)	2	3
Feeling bad about yourself – or that you are a failure or have let yourself or your family down	0	1	2	3
Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
Moving or speaking so slowly that other people have noticed or moving around a lot more than usual	al 0	1	2	3
Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3
PHQ9 Depression Total Score				

Depression Score None 0 - 4 Mild 5 - 9 Moderate 10 - 14 Severe 15 and above

Summary

- Make a decision to change and set your goals
- Give yourself the time you need to change
- It's not about making enormous changes in your life, the small steps add up
- Practice is the key to any successful self-help program. The more you do the techniques the more they will become a natural part of your life



Understanding depression

We understand that Depression is one of the most painful and demanding experiences to endure. One of the most difficult aspects is the thought that nothing can change, or that you will not get better. However, people do recover. Research and the experience of many people has taught us how depression starts, what impact it has and what can be done to make things better.

If you want to read about how to help yourself right away skip this chapter and go directly to PART 3.

Come back and read this another day

For lots more helpful information please visit www.talk2gether.nhs.uk for managing depression and anxiety

We also know that there are techniques that you can use that can help to lift your mood quicker. This workbook will introduce you to these techniques and encourage you to practise what you learn so that these new skills become part of your life. In this way you will get better and have more of a chance of staying well.

Important notes

- You are not alone. More than 15% of adults will get depressed at some time in their lives
- It can happen to anyone. Getting depressed does not mean you are weak. You will see from the case examples that depression does not discriminate on the basis of colour, class, age or sex
- Depression is hard to diagnose yourself. Our moods can dramatically affect our judgements about ourselves
- Use our questionnaires to find out whether you are depressed and repeat after a few weeks to see if there is an improvement

What is depression?

Depression comes in many forms and has many causes. Depression isn't just about feeling sad but lots of other symptoms too. Symptoms can include changes in your emotions, your thinking, your physical functioning and the way you behave.

Some common symptoms of depression that help us to diagnose the condition are described below. You may wish to tick the ones that apply for you:

SYMPTOM	YES	NO
Low or sad mood		
Loss of interest or pleasure		
and at least 4 of the following syn	nptom	s <i>:</i>
Disturbed sleep		
Guilt or low self worth		
Pessimism or hopelessness		
about the future		
Decreased sex drive		
Mood variation during the day		
Poor concentration		
Suicidal thoughts or acts		
Loss of self confidence		
Fatigue or loss of energy		
Agitation or slowing of		
movement or speech		

Remember depression does pass. These feelings will not last forever and your life can change.

Lauren, patient adviser

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Meet David

My name is David I am 58 years old. I was made redundant from my managerial position 3 years ago. I was given a generous financial settlement

and found other work within 4 months. I am now in a management position of a small local company. I work regular hours and am able to be at home to prepare dinner for my family.

I am married with two grown up children, Clare who is 24 and Paul 22 years. Both children are in further education but only Paul lives at home. My wife, Catherine, is 51 years old and is in full time employment. She is in a senior administrative position within a large parcel distribution company. She enjoys her work and commutes daily.

I have visited my GP 3 times in the last 6 months with lots of symptoms including tiredness, poor sleep, lower back pain, headaches and dizzy spells. I was concerned about my blood pressure and thought this could explain my symptoms. On testing, my BP was normal. The Practice Nurse whilst taking blood began to talk to me about my mood. In conversation, I began to feel tearful and spoke for the first time about how useless I felt. I described having felt low for about two and a half years and talked about my intake of alcohol being quite high at the moment. I have put on weight as I can't be bothered to exercise. I feel on a downward slope to retirement and do not feel hopeful about improving my job prospects so late in life.

I am angry with my previous employers about the redundancy and the way they broke the news to me. I felt the other staff who joined the company after me had been favoured. My opinion of myself was very low.

I felt that my wife was attractive, successful and I worried that she was losing patience with me. I felt that my children deserved a better father.

When my wife arrived home I was often lying on the sofa, watching TV and I had started drinking lots of wine. I was struggling to get on with jobs around the house and often felt ill and tired. I was irritable with my family over small things.

Why me, why now?

There are a number of factors that cause and maintain depression. Each of the factors listed below plays a part in causing depression, and depression also then has an impact on these factors. A vicious cycle of inactivity, low mood, isolation, fatigue and negative thinking can feel like it is spiralling beyond your control. The longer it goes on the more you feel like you cannot get out of the trap. Start somewhere to do something differently and it can help to make you feel a bit more in control and slow down the depressive vicious cycle.

Situation

We know that there is often, but not always, a difficult life situation that triggers depression. We also know that particular situations can make depression worse. Some situations that have been associated with depression include:

- Major life events, particularly around loss. For example the death of a loved one, job losses and/ or relationship breakdowns
- Limited social contact. Being socially isolated is a significant risk factor in depression
- Relationship Difficulties. Unhappiness in our relationships can contribute to the onset and continuation of depression
- Job Stress. Risk factors include friction with colleagues, overwork, or job insecurity
- Stress related to physical health. This is particularly associated with chronic conditions and those where the person is in substantial pain

Remember
depression does pass.
These feelings will not
last forever and your life
can change.

Lauren, patient adviser

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Thoughts

Clinical and research evidence has shown that depressed individuals have very particular ways of thinking about themselves, others and the world. These ways of thinking can trigger, and worsen the experience of depression.

Each of us is affected differently by situations, depending on how we think about them. Imagine a phone call that is expected from a close friend that does not happen. One person, for example, David, may regard this as evidence that the friend does not want to speak to him, is bored of his moaning about his employers and thinks the friend is avoiding him. David's mood would then become further depressed and he would not call the friend. He feels hurt, upset and fearful of reaching out to anyone else in case they are also bored of him. His thinking is negative and unrealistic and makes him feel more depressed and behave in an avoidant way which does not give him an opportunity to disprove his thoughts.

Another person may be curious about the missed call but think that the friend is busy or have forgotten. They would call the friend themselves to have the conversation that was planned and their mood would be unaffected.

This changed thinking has been described as the Negative Triangle. When you are depressed you can often think negatively about yourself, about life, other people and about your future:

Negative about
yourself

Judging yourself in
an unfair, often
critical and harsh

manner

Negative about your future

Anticipating a future that is bleak, and exaggerating the most negative outcomes

Negative about life and others

Viewing your life and other people in an unrealistically pessimistic and negative way

You need professional assistance if you have thoughts of suicide. Telling someone is the first step to feeling better. You can think and feel differently with help.

Contact your GP or the Samaritans on 116 123 or email Jo@samaritans.org

if you feel you

are at risk

Emotion

When depressed we can feel not just sad but overwhelmed by feelings of despair. A profound feeling of anxiety and often a sense of impending doom can accompany these depressed feelings. Others feel numb and detached. Some writers talk about this ability to switch off as a way of protecting ourselves against intense psychological pain. In the same way as your thoughts can become unrealistic and negative your emotions can become extreme and unrealistic too.

Physiology

Depression can lead to very significant changes in your physical functioning. One of the most important changes is in sleep behaviour. You may be sleeping too much, waking early, having broken nights or struggling to get to sleep. Appetite is often also affected.

The physiological changes of depression make it harder to cope with the demands of life. Some people find that antidepressant medication is helpful to lift mood and can help you regain sleep and appetite. We also know it is even more helpful if you learn cognitive and behavioural techniques as presented in this book. Research tells us that the recovery is more likely to last if you have learnt some coping skills.

Behaviour

Depression can have a big impact on how you behave. It can make you withdraw from your family and friends, stop you taking care of yourself, stop you doing things you used to enjoy and stop you getting on with your daily tasks.

Below are some common examples and their likely results

Withdrawing from others

Examples

- Refusing social invitations
- Avoiding telephone (making or receiving) calls
- Reducing regular social activities

Likely result

- Takes you away from warmth and feelings of connection with others
- Confirms your belief that no one wants to be with you/likes you, etc
- Limits opportunities for feeling pleasure or a sense of achievement

Not caring about yourself

Examples

- Not caring about personal appearance
- Reduced exercise
- Eating too much, eating too little or eating 'rubbish'

Likely result

- Adds to low self esteem
- Limits emotional and physical benefits of exercise
- Adds to feelings of fatigue

Not doing the things you used to enjoy

Examples

- Not doing hobbies
- Not having any fun
- Stopping doing something you used to enjoy

Likely result

- Inactivity becomes a habit
- Makes life seem very dull
- Stops you receiving personal satisfaction.

Neglecting your everyday duties

Examples

- Leaving everyday tasks for someone else
- Putting off tasks
- Not finishing tasks

Likely result

- Adds to your sense of inadequacy
- Frustrates others
- Your life can feel out of your control

By changing
the way you think
and behave you can
recover from depression
and reduce the
likelihood
of relapse



Summary

Depression comes in many forms and has many causes. It affects not just mood, but also the way we behave, think and feel. 1 in 4 adults will get depressed and/or anxious at some point in their lives and it can happen to anyone. Our moods can dramatically affect our judgements about ourselves. There are a number of factors that cause and maintain depression, including our behaviour, difficult life situations, our emotions, physiology and the way we think. The depressive vicious cycle can be interrupted by you using only one of the techniques described in this workbook.



Setting goals

What do you want to change?

The first and most important part of any self-help program is to set goals for what you want to achieve. You may have made all sorts of previous attempts to change, but unless you have a clear plan and try to stick to it, change will be very difficult. Choosing which areas you want to try and change is a key part of successfully moving forward.

All the
techniques in this
self-help guide need
practice – don't expect
instant results. Stick with
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should improve

Check whether your goals are SMART:

Setting goals

The first and most important part of any self-help program is to set SMART goals.

SMART stands for:

- Specific-make your goal specific enough so you know exactly what you are working towards. Make it involve the presence and not the absence of something
- Measurable-how much, by when, with whom? This way, you know when you have achieved it
- Achievable-make it realistic. Start small and build up
- Rewarding-make your goal enjoyable, rewarding and meaningful to you
- Time-limited-by when are you going to achieve it?

Goals involve hard work but the rewards are worth it! REMEMBER: It has taken you months or years to get to where you are, so it will take time for things to change. With perseverance and practice you can get there!

Your goals for this programme

Write down some goals to work on during this programme. These may change over time but it is important that you think about what you are trying to achieve.

Goal 1

Goal 2			

Goal 3

Goal 4			

Goal 5

Writing down
your goals makes it
more likely that you will
achieve them. Goals are
about deciding to
make small
changes and
starting now



Meet Cassie

I am 23 years old.
I am a single mum of
Anya. I have coped well
with raising my child
alone with help from my
older sister who has three

children. I have been working in a local record shop and trying to get a recording contract as a singer in a band. Anya is doing very well and is a happy and popular little girl at school.

I have a history of depression.

At 15, I asked to be put in care. My mother had loads of boyfriends, and life with my family was not good. My mum always loved us but she was lonely and broke. I have memories of one of her boyfriends interfering with me. This is why I asked to be put in care. I was placed with a great family and I am still close to them.

I have tried to hurt myself lots of times. I have taken 4 overdoses and cut my arms.

This has got better over the last few years but I still get very low. I shut myself off and cry sometimes. I really struggle to keep up with the housework and caring for Anya. I am very house proud and like it looking right. I worry that I don't look after Anya as well as other mums and this can make me feel bad about myself. Sometimes I really hate myself and life feels a mess. My sleep is bad when I get low and I struggle to work. When I am tired I skip band practice and miss out on loads of gigs.

Attend band practice once a week for 1.5 hours. Arrange child-care in advance.

Have 10 minutes each day as 'Me' time to do hair or nails or take a warm bath.

Do this programme to understand and change bad thoughts about myself.

Read sleep advice (found in the back of this workbook) and try the suggestions.

Summary

- Make a decision to change and set your goals
- Give yourself the time you need to change
- It's not about making enormous changes in your life, the small steps add up
- Practice is the key to any successful self-help program. The more you do the techniques the more they will happen automatically

Homework

 Decide on some mini goals for the coming week and write them down. If you only want to set one goal that is fine.

Cassie's initial goals were as follows:

Keep up with the housework

Care properly for Anya

Attend band practise

Keep hair tidy

Sleep better

After talking to her doctor and sister Cassie modified her goals to the following:

Set a realistic list of housework tasks for the week and spend no more than half an hour each day doing the tasks listed.

Play with Anya for 15 minutes each day.

• Do you have someone you could ask to support you with this programme? It is very useful to have an objective opinion on how you are progressing and to have someone to encourage you to stick with the programme. Approach this person. If you prefer to do this alone or there is not anyone you can approach that is not a problem.



Self monitoring

What do you want to change?

We understand that you cannot change things until you know more about the problem. This is why we encourage you to keep detailed diaries of your activities, thoughts and feelings. We want you to learn more about the way you behave, think and feel. By recognising patterns in your behaviour, thoughts and feelings you can be clearer about what needs to change.

All the
techniques in this
self-help guide need
practice – don't expect
instant results. Stick with
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should improve

In this part you will be introduced to 2 kinds of self-monitoring:

Activity monitoring and Thought monitoring. (See page 63 to page 65 for your own copies).

Both types of monitoring are equally important. Both take time and effort. Both are effective. Completing diaries may not be easy at first. It takes practice to get used to monitoring ourselves in this way. However learning more about how you think and behave can help you to understand what triggers your depression and also helps you to pinpoint what you can do to make it better. The way you think and the way you behave are the keys to unlocking the prison in which you find yourself.

Activity monitoring

Depression can have a big impact on how you behave. It can make you withdraw from your family and friends, stop you taking care of yourself, stop you doing things you used to enjoy and stop you getting on with your daily tasks.

Increasing the amount of activity in your day, particularly the achievement and pleasure you experience in your activity is a key to your recovery. You may find it helpful to complete Activity Sheets to monitor this aspect of your life. The aim of the sheet is to help you see:

- how you are using your time
- whether you are planning your time
- whether your activity is social, rewarding, pleasurable
- whether your activity is not social, is used for unhelpful thinking and is unrewarding
- which activities give most pleasure, reward and sense of achievement
- what can be changed to get you feeling better

Have a look at Cassie's Activity Monitoring Diary for Monday

Cassie is rating pleasure (P) 0-10 (0 = no pleasure, 10 = intense pleasure) and Achievement (A) 0-10 (0 = no sense of achievement, 10 = strong sense of achievement)

HOURS	MONDAY
6am	Awake since 5am P=0 A=0
7am	Waking up Cassie/B/fast P=3 A=5
8am	Same as above and school run P=2 A=6
9am	School Office to help with fabric samples for craft class P=4 A=8
10am	Bus to shops P=0 A=2
11am	Met Charlie unexpectedly P=7 A=2
Noon	Lunch in record shop with boss, been dreading this! P=2 A=8
1pm	Did it! Travelling and arriving home P=2 A=9
2pm	Flying round house tidying up. Tearful now P=2 A=0
3pm	School Run. Pick up Anya's friend too. Drop her off home P=4 A=5
4pm	Preparing tea and tidying house (hoovering lounge and put a wash on) P=2 A=4
5pm	Received phone call from Charlie about going out tonight. Ring Claire and ask her to babysit Anya P=3 A=7
6pm	Joined Anya in her bath tonight. Used bubbles from Xmas. Washed each others hair and got self ready P=7 A=8
7pm	Waiting for lift. Anya asleep P=2 (feel scared) A=7 I'm coping!
8pm	Band practise P=6 A=8
9pm	As above P=8 A=6
10pm	Home P=2 A=6
11pm	Asleep P=10!
12pm	Asleep. What a day! I faced a lot of stuff I had been dreading. I want to have more fun!
1-6am	Asleep.

Using activity diary sheets

- For each hour of the coming week, write down what you actually did
- For each entry rate how much pleasure (P) you experienced (0–10 scale) 0= no pleasure, 5= reasonable amount of pleasure and 10= intense pleasure)
- For each entry rate how much achievement (A) you felt (0–10 scale)

This activity diary sheet can become a regular feature of your programme if you find it helpful. Use it to monitor and plan your levels of Pleasure and of Achievement. You can also use it to plan how to become more active generally in you life. (See Part 5.) If you choose not to complete this diary sheet that's OK but still try to increase pleasure and achievement. The diary sheet is in the back of the book if you want to use it.

Thought monitoring

Is your thinking balanced, fair and realistic? Probably not. When you are depressed, your thinking is depressed too. We know that thinking changes with our moods. If you have been lucky enough to be very in love in your life you will remember seeing the world through rose tinted spectacles. For example, strangers on the street seem kind, the weather is lovely, the future is bright and you are attractive. In sharp contrast when we are low our thinking becomes unfair and unrealistic. Strangers are out to get you, the weather is awful, there is little hope for the future and your are a failure!

Remember the negative thinking triangle...

Keeping diary recordings is a key skill and needs practice to master. If you really cannot get to grips with recording your thoughts in this way do not worry. It's designed to be helpful and if it's not, leave it alone. Do not let this become something else you are not managing. This is your programme and you will find other things that suit you and are more helpful.

Using thought diary sheets (Stage 1)

In order to complete the diary sheet follow these instructions:

Situation

Think about how you have been feeling over the last week. Do any days and/or situations stand out for having made you feel an increased intensity of a particular emotion? Think in detail about the situation in which you felt the emotion. Where were you? What were you doing? What had just happened? What time of day was it? Were you alone or with someone? Write down the situation in Column 1 of the thought diary

Emotion

Write down the emotion in Column 2 of the thought diary. Usually emotions can be expressed in one word – Sad, Nervous, Disappointed, Humiliated, Embarrassed, Hurt, Scared, Excited, Panicky, Irritated, Happy, Anxious, Depressed, etc.

Emotion rating

Rate out of 100 the strength or intensity of the emotion in column 3

Thoughts

Can you recall any of the thoughts that were going through your mind just before or as the emotion surfaced? Write down the thoughts in Column 4 however distressing, irrelevant or true the thought seems now. The more you can catch your thoughts the quicker you will be able to catch and control the mood before it takes over. Ask yourself the following questions:

- What is or was going though my mind?
- What am I afraid might happen?
- What does this mean to me?

Throughout this programme you will be encouraged to complete thought diaries. This is an important skill which, once mastered, will help you feel more in control of your mood. You will learn what situations and, in particular, what thoughts are making you feel so bad. Once you understand that the way you think can lead to a lowering of your mood, you can start to appreciate that by changing the way you think, you can change the way you feel.

Thinking errors

There are a number of ways of thinking that can be unhelpful and can make depression worse. Overleaf are the most common thinking errors that occur when we are depressed. Do you recognise yourself in any of the descriptions?

David's thought diary

1. Situation	2. Emotion	3. Emotion rating	4. Thoughts
At home alone waiting for wife and son to return. Good day for me	Afraid	80%	Where is Catherine? Maybe she decided to stay on and go to the bar with colleagues. She could have rung me.
at work but I know this is a risky time for me with	Worried	60%	I'm a fool if I cannot handle this. I should be able to handle this.
the drink. Both are late. Catherine was due home half an hour ago and Paul	Depressed	92%	I feel pains in my chest and feel so unwell. I am sure there is something going on with my health.
is always late. Not responding to mobile.	Angry	38%	I am going to ring her again. Maybe there has been an accident.
			I need a drink.

Tick the ways of thinking that you recognise in yourself. More than one (sometimes all) will apply:

Jumping to negative conclusions

Drawing a negative conclusion when there is little or no evidence to support it. For example, you may think the worst e.g. "My wife is late – she has had a car accident". Or you may convince yourself that things will turn out badly, e.g. "They won't like me, so why even try to join in?"

Fortune telling

Predicting the future in a negative way based on your feelings not necessarily on fact; e.g. "I'll get rejected, I'll make a fool of myself."

Catastrophising

Exaggerating the impact of events and convincing yourself that if something goes wrong it will be totally unbearable and intolerable, e.g. "If I don't get this job I will never work again", "I've got pains in my chest – there is something wrong with my heart".

All-or-nothing thinking

Seeing things in black and white, e.g. Thinking "I fail at everything", "nothing works out for me". A common form of black-and-white thinking is expecting perfection from ourselves, e.g. "If I don't succeed in this job I'm a total failure."

Mind reading

You think you know what others are thinking about you and it's always negative. You react accordingly and rarely check out the truth. For example "I bet they think I'm a loser – I will look away and not come into the canteen again".

) Personalising

Blaming yourself for anything unpleasant, and taking too much responsibility for things that are not under your control, such as other people's feelings or behaviour. For example, if someone doesn't say "hello" we may think we have done upset them, when they may have just forgotten to wear their glasses!

) Filtering

Only looking at the bad never the good. People who think in this way tend to reject their achievements, compliments and other positive experiences by insisting that they "don't count" for some reason, e.g. "He only gave me that compliment because he knows I feel bad at the moment."

Overgeneralisation

Expecting that because something has gone wrong once or twice, that it will always go wrong. An example is thinking after an unpleasant experience, "I tried that before, it (and other things I try) are bound to go wrong next time".

Labeling

Undervaluing yourself and putting yourself down. For example, "I'm so stupid/weak/useless" and "I don't deserve any better".

Meet Pauline

I am a Dentist and married to Clive, who is also a dentist. I am 41. We live in a rectory that we are restoring. The project has occupied many years of our life but is near completion. We have chosen to not have children. We have a passion for foreign travel and once

the house is completed we plan to travel around the world. We have property in Bulgaria where we plan to settle. I have struggled with my mood for many years and have been on and off medication. I have learnt to hide my problems well. I take a pride in my appearance and would hate anyone to know how I sometimes feel.

I am competent and confident at work. But, when I am at home I can't be bothered to keep up appearances. I often go to bed before 9pm to hide myself away. I find it difficult to take an interest in home life. I have little interest in my husband and often think I don't love him any more. I feel my life is empty and shallow.

Pauline's thought diary

1. Situation	2. Emotion	3. Emotion rating	4. Thoughts
8.30pm Friday evening Watching TV with Clive. Just eaten supper. Had 2 glasses of wine Sat am. Clive going out Sat 12 noon call from girl friend suggesting a game of tennis	Lonely Sad Afraid Angry Panic	95% 97% 65% 40% 70%	I am not happy in my marriage. I want to go to bed but it's too early. What will we do this weekend? I do not want to do the house. I feel so frightened of life – like something dreadful is about to happen Furious that he is going out. What am I going to do all day? I feel too low to run around a tennis court. I would make a fool of myself. Nice of her to offer but she is just feeling sorry for me.

Summary

- Learning to monitor your activity levels and thoughts are important to your recovery from depression
- Monitoring your activity will help you see how much or how little pleasure and achievement you are experiencing and help you plan to make this more balanced
- Monitoring your thinking will help you to understand the link between your thoughts and your feelings.
- Learning about the thinking errors you might be making will help you to start changing the way you think

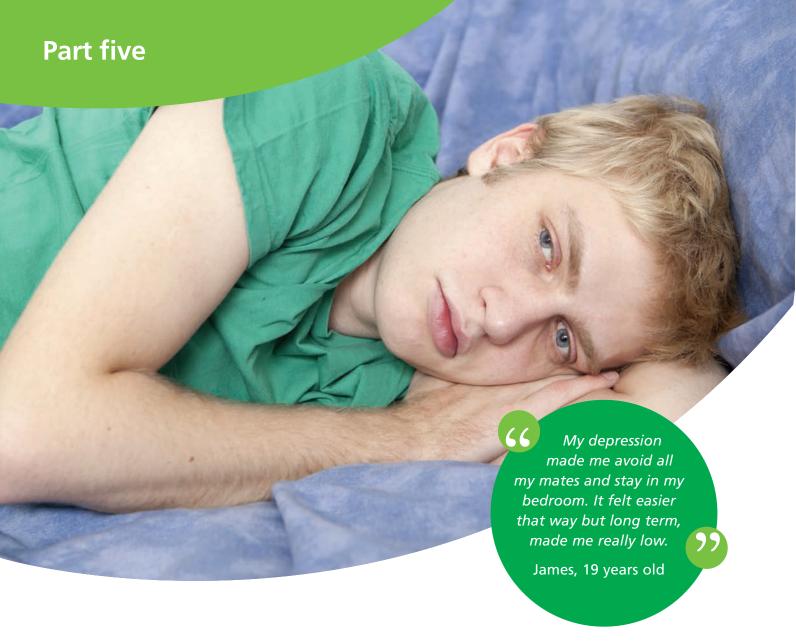
Homework

We would like to encourage you to start monitoring yourself. Use the diary sheets provided at the back of the book if you find this helpful. You can use your own method of monitoring yourself. Some people use their own personal journal, others a tape machine. It's best to write down your activity and your thoughts as you go, rather than waiting for the end of the day. Our memories are never as reliable as we imagine and this is particularly true when we are depressed.

There are 3 things that would be useful for you to do in the coming week:

- 1. Complete the activity monitoring diary for the next week
- Complete the thought diary (Stage 1) over the next week. Write down the
 ups and downs in your emotions in the way suggested. Notice any patterns
 in your emotions, thoughts, or the situations where they arose.
 Make a note of your observations
- 3. Decide on at least one mini goal for the coming week and write it down below so you can commit to achieving it:

Diary sheets are in the back of this book. See page 63 to page 65.

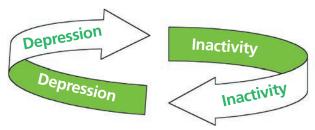


Changing the way you behave

If you are following the programme in full you will have started monitoring your activity levels and may have noticed that you have become more inactive as a result of your depression. When you are depressed you often stop doing the things that make you feel good about yourself and your life. You avoid phone calls that could be invitations, you stop doing your hobbies because you are so tired. You stop exercising and feel more tired. You feel so low, you comfort yourself by being less active.

All the
techniques in this
self-help guide need
practice – don't expect
instant results. Stick with
it and your mood
should improve

Opting out of life gives us short term relief but actually makes us more depressed. The more inactive you become, the more depressed you feel.



Often you think that you will wait until you feel better and then you will get active. DON'T WAIT. The longer you wait the harder it gets and the more entrenched your depression will have become. The solution is to gradually get more active. This workbook will help you decide on ways in which you can start now to recover. You may think that the goals you write are so little that they will not make a difference. However, we know that small steps can build up to some significant change and eventually to recovery.

Note down in the spaces below all your ideas on how you could be getting more active starting NOW. At the end of this part of the workbook you can make these ideas into goals.

Not withdrawing from others

Examples

Picking up phone calls, making contact with others, going to a class or social group, attending social occasions

Your thoughts on how you could be more active							

Self care

Examples

Getting dressed each day, eating healthily, exercising, making an effort with personal grooming

Your thoughts on how you could be more active

Personally rewarding activities

Examples

Taking up a new hobby, revisiting an old interest, walking in the open air, watching a favourite DVD

Your thoughts on how you could be more active

Everyday tasks

Examples

Facing opening mail, pay bills, clean house, iron clothes, run errands. Do what you've been putting off

Your	thoughts	on how y	ou could	be more a	active

Summary

- Depression can make us opt out of life which gives us short-term relief but in the long term makes depression worse.
- Getting more involved with family and friends, improving how you care for yourself, doing more rewarding activities and picking up your everyday tasks can lead to an improvement in your mood.

For lots more
helpful information
please visit
www.talk2gether.nhs.uk
for managing
depression and
anxiety

Meet Simon

I am 19 and am a student at college studying for an HND in electronics. I live at home with my mum and dad. My older brother is at University and my sister is married with a baby. My family are close and supportive. I liked to work hard at school but this got me teased by other kids.

A couple of months ago, my mum was worried about me and took me to see my GP, I have been crying a lot at night and feeling something awful was about to happen. I've gone off my food, can't concentrate on anything and can't get to sleep. I felt suicidal when I was bullied at school but luckily don't feel like this at the moment.

I have some good mates but feel like an outsider at college. I think, they think that I am weird and a 'boffin'.

I have started taking sandwiches which I eat alone. I did try and go into the canteen but hated people looking at me. I went to the chess club once but felt so nervous that I had to leave before my first game. In the past I was a County Badminton player but haven't played recently.

It is getting harder to go to college and I have had several days off sick. I have been waking up with headaches and pains in my stomach . I am locking myself away in my bedroom. My mum is losing patience with me.

My doctor said this workbook might help me feel better about myself.

These were some of the ideas I wrote down to change the way I behave:

- To go to college everyday and eat my sandwiches in the canteen at least one day a week
- Text Tom on Sunday night and arrange to go out this week
- Go to chess club again before end of term
- Find out about Badminton Club at college
- Wash hair every morning and wear different clothes each day
- Help mum more around the house

Completing activity diaries. See page 63

If you are completing activity diary sheets you will be starting to notice changes in your mood throughout the day and week. You may also be noticing which activities make you feel better and which make you feel worse.

Consider the following questions:

HELPFUL HINT Are there times of the day or days in the week when your mood is brighter or lower?

- Are there situations that seem to depress or lift your mood?
- Which activities seem to make you feel better about yourself and about life?
- Which activities make you feel worse about yourself and about life?
- What is the balance between chores, pleasure, achievement, and socialising? Does this feel OK for you?
- Can you use this information to improve your mood?

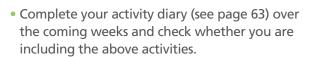
Depressed mood can lift when you start getting more active, particularly if the activity involves of achieving something

Homework

 Choose two activities that you have not been doing recently. Choose from different areas, for example, self care and everyday tasks. Write these activities below. Remember to make your goals achievable and specific.

A	C	4/	/[τу	<i>!:</i>

A .: :. 2		
Activity 2:		



- Continue to complete diary sheets to help you notice moods and thoughts.
- If you have additional, smaller goals for the coming week write them down below as it may help you to achieve them:





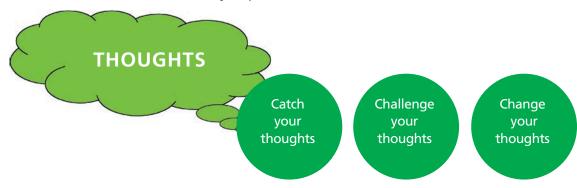




Changing the way you think

Once you have started to notice your thinking you have an opportunity to look at your thoughts and change them in a way that could make you feel better both now and in the future.

There are 3 things you need to do to control depressed thoughts. It may help to remember the 3 Cs:



Catching your thoughts

When we are feeling low it is difficult to recognise unhelpful thoughts. They come and go very quickly, so you might not even be aware you are thinking them.

The diary sheets can help you to practise catching the thoughts that lead to changes in your mood. This does not mean you will need to be completing diary sheets for ever but it would be helpful to do this at least whilst you are on the programme, so that you can get the hang of it. Catching thoughts may be difficult at first because we are not used to it, but it gets easier with practise.

Challenge your thoughts

When you are familiar with the kinds of things you say to yourself when under stress, you can begin to challenge these thoughts and find better ways of thinking.

Questions to ask yourself to help challenge your thoughts

- Might I be making thinking errors, for example: jumping to negative conclusions; fortune telling; catastrophising; all-or-nothing thinking; mind reading; personalising; filtering; overgeneralising; labeling
- Is there a possibility that this thought is not completely 100% true?
- Is there an alternative explanation?
- How else could you see the situation? Try to think of as many alternative explanations as possible
- If a friend was in this situation and had this thought, what would I tell him/her? Imagine a friend was thinking your thought, would you still agree with it?
- Have I been here before, thought this before and found later that my thoughts were not entirely correct?
- What's the worst that could happen? How likely is it to happen? Even if it did happen, could I live through it?
- Five years on from now, will I look back on this situation and think differently?

Completing diary sheets/ Stage 2

You have reached Stage 2 in your thought monitoring. You have been learning to catch your thoughts. Now you need to practise challenging your thoughts and coming up with a changed thought. This is not easy and will take practise. Some people find that this is the key to their recovery. Others don't get this bit at all. Don't worry there is evidence that the other techniques can help just as much. Have a go and if you have a worker who is supporting you, speak to them about your thoughts. It may also help to speak to a supportive friend or member of your family to help you with this. After all if you were learning a new language, to drive a car or learn to swim, you would ask for help when you needed it.

What we ask you to do is to continue to complete the diary sheets as you have been doing but to also complete columns 5, 6, 7 and 8.

The 8 steps are as follows:

Stage 1

- 1. Situation
- 2. Emotion
- 3. Emotion strength rating
- 4. Immediate thoughts

Stage 2

5. Evidence for the thought

Pick the most troubling thought for you. Check this thought against the evidence for and against it. What evidence do you have to support the idea that your thought is 100% TRUE? Are you using additional information to support the thought? If so write it down in Column 5.

6. Challenges against thought

Look at the questions on the previous page and ask yourself these questions. Is there a possibility that the thought you are having is not 100% true? What is the evidence against your thought? Is there another way of looking at the situation? What would you say to a friend who was thinking this way?

7. Changed thought

Now that you have considered the evidence for and against your thought and challenged it, can you come up with a fairer, more realistic, balanced thought? Has your thought changed at all? If not, go back to your evidence columns and the questions on the previous page to check you have not missed anything.

8. Changed mood?

Do you feel different or has your mood stayed the same? Make a note of it in column 8.

Have a look at one of Simon's diary sheets shown below,

Simon's diary sheets.

More diary sheets for your use can be found on pages 63 to page 65

If you feel you are at risk of harming yourself, contact your GP or the Samaritans on 116 123 or email Jo@samaritans.org

More diary sheets for your use can be found on pages 63 to page 65								
1. Situation	2. Emotion	3. Emotion rating	4. Thoughts	5. Evidence to support the thought	6. Evidence AGAINST the thought	7. CHANGED thought	8. Emotion rating now	
4.30 am awake in bed thinking about day ahead	Sad, Depressed Afraid, (I feel sick with worry)	90% 85% 99%	I'm going to be shattered if I don't get some sleep NO ONE LIKES ME! Maybe I should leave college I never have good friends who I feel comfortable with	I have no friends I don't fit in People think I'm a Geek. I know that for a fact!	I have some friends but not at college It's early days Others might be shy too If I make more effort to join in maybe others will get to know me It's so hard for me to join in but I guess that doesn't mean I never will	People might like me if they got to know me. I have made friends in the past. Keeping away from people isn't going to help. I don't know for a fact that people think I'm a Geek!	60% 40% 50%	
8.30am Going to college. A group of girls are looking at me	Fear embarrassed	80%	I feel stupid Why is it so hard to fit in I look like an idiot THEY ARE GOING TO LAUGH AT ME!	It's happened in the past. They are looking at me	They are only looking at me – they may fancy me. Ha Ha! They are smiling not laughing	I have a real fear of being laughed at – that doesn't mean it's going to happen. I need to look up more as I often don't check whether they are laughing – I just believe they are	40%	

Troubleshooting for thought challenging

"I can't 'catch' my thoughts"

Write down your thoughts, as soon as you have them if you can. As soon as you notice yourself getting low, ask yourself "What's going through my mind?" If your thoughts are in the form of questions: "Are they thinking I'm stupid?" write them down in statement form: "They think I'm stupid" – it is easier to argue with statements than questions.

"I can't remember my challenging questions/ self-statements when I need them"

Write down your challenging questions/ self-statements in full. They will have more impact, be easier to recall later and you will find you are challenging your thoughts more effectively. You may want to write them on a card and carry them around with you so you can quickly read them when you're feeling your emotions are getting out of control.

"It's not working"

Practise. Again, this is a skill; do not expect fantastic results immediately. Eventually, rational responses to worrying thoughts will be as automatic as you find the depressive response is now.

Sometimes we find we are just too tired, anxious or upset to challenge our thoughts at the time. Try not to worry about this but go back to them later when you feel brighter and think through the evidence for and against

Changing your thoughts

Once you have identified and challenged your worrying thoughts you may be able to recognise how unbalanced your thinking has been. Unbalanced thoughts are usually pessimistic, irrational and untrue. When our thinking becomes more balanced we begin to feel better about ourselves and our mood can begin to lift.

Think of an alternative, more positive way of seeing the situation. Use the list of questions above and on the previous page to ask yourself questions about your thoughts and then replace them with less worrying thoughts.

Examples

"I'm hopeless"

I'm not perfect, but then nobody is. Everyone's good at some things and not so good at others. I am very good at some things. I am putting myself down.

"I can't stand it"

I can probably bear this – I've felt like this before and survived in the past.

"I'm going to get anxious and upset in front of everyone and look stupid"

I probably feel more anxious than I look. Anyway, even if it does show, people are a lot more understanding than I think. What's wrong with showing emotion anyway? Being anxious is not the same as being stupid!

"Nobody likes me – they're talking to me to be polite"

There are people who like me. I've had friends in the past and will do again in the future. They wouldn't be talking to me at all if they really disliked me. I don't need to be liked by everyone all the time.

"What's the point in trying?"

If I don't try, I won't know. I have to try things to get better at them. Nobody is expecting me to do it perfectly. I can't predict the future.

"I'm going to be late for that meeting. They'll think I'm no good at the job and start looking for someone else"

I'm not going to be sacked just because I turn up late for one meeting. I'm probably not going to be that late, and if I apologise I'm sure no-one will mind. I am catastrophising.

Helpful 'self-statements'

Some people find it useful to make a list of statements they can say to themselves when they are having depressed thoughts. These will be very similar to the kinds of 'changed thoughts' mentioned on the previous page. Here are a few examples:

Some helpful 'self-statements'

"One step at a time."

"Is this really worth getting upset about?"

"In the long run, does this really matter?"

"I can bear anything for a while."

"This unpleasant situation will soon be over."

"My thinking is not realistic whilst I am depressed."

"I am not alone."

"I am a worthwhile person. I am not perfect but I am valued."

"I've got through worse things than this – I'll be fine."

"If this doesn't work, it's not the end of the world."

"I'm doing really well. I might be depressed, but I'm here, facing it. That's something to be proud of."

Watch out for your rule book

Your rule book consists of the thoughts you carry around about the way you SHOULD, OUGHT, MUST live your life. You believe and obey them as if they were the TRUTH. These are the common unhelpful rules by which people who get depressed tend to live. Notice that the consequences of not following the rules are believed to be catastrophic.

- I must be liked by everyone at all times or I am not popular or a good person
- I must do everything I can to avoid criticism or I am a failure
- I should not be depressed or show emotions as it is a sign of weakness
- I must succeed at everything I try or else I am a failure
- I must always be in control or else I will be in chaos
- I must always get things right or I will be judged badly

Changing your rule book

Often, you will need to watch out for these thoughts in the coming months and the growing awareness of yourself may help you to begin to think differently. Sometimes just recognising that you have a particular way of thinking is enough for it to change. Sometimes you have to actively and repeatedly challenge your rule book by asking yourself the following questions:

- What would be the consequences of not following the rule?
- Is this rule helpful to me?
- Is this rule realistic?
- Where might this rule come from?
- Is there an alternative, more realistic and fair rule?

Have a look at the work of David before doing your own rule book exercise.

When I thought about the rule book questions I recognised that my beliefs were not at all helpful, realistic or fair. The redundancy completely threw me psychologically and I have been depressed as a result. I have needed to re-evaluate the beliefs on which I was basing my life. It has helped to begin to realise that no-one is judging me. My friends and wife love me for me and that there is so much more to me and life than a big salary. This will take a long time for me to really believe but realising that my old beliefs were not 100% truths has made it so much easier to get on with life.

Rule book exercise

Pick one particularly difficult and recurring thought from your diary sheet. If you have not been completing diaries, you can pick a thought that often pops into your mind and makes you feel bad.

Now do a check of your beliefs with the following questions:

Is this rule helpful to me?

Is this rule realistic?

Where might this rule come from?

If you broke the rules what might be the consequences?

Is there an alternative, more realistic and fair rule?

Mindfulness and depression

You can change your relationship with your thoughts by becoming more mindful.

Mindfulness, or paying attention to and accepting your thoughts and sensations rather than battling with them, can be learnt through meditation, mindful breathing and/or yoga. Breaking free of self blame and rumination can lead to greater resilience and well-being.

1. Situation	2. Emotion	3. Emotion rating	4. Thoughts	5. Evidence to support the thought	6. Evidence AGAINST the thought	7. CHANGED thought	8. Emotion rating now
Answer phone message from old friend and colleague to invite me and Catherine to dinner on Saturday night	Panic Embarrassment Sadness	90% 50% 60% 70%	I don't want to go and will make up an excuse I AM ASHAMED OF MY JOB I am a failure Can't face all His questions about work Catherine will want to go and I will be letting her down again	He is secure in a very senior position and I am in a go nowhere position He will be shocked when he knows the facts about my salary	At least I have more time for my family. I know he rarely gets home before 8pm. Money isn't everything Success isn't everything in life I am putting myself down I am jumping to conclusions about what Mike will think about me	I want to accept the invitation for Catherine and me Mike wants to catch up with me as a person I do not need to be ashamed of my job. It is rewarding I do not have to be at the top of my career to be a worthwhile person	Excited 30% Dread 20% Panic 10% Embarrassment 35% Sadness 0%

Summary

Changing the way we think is another key skill.

- Catching thoughts is not easy but the diary sheets do help with this skill
- Before the mood has overwhelmed you, try challenging the thought using the questions provided
- There are a number of questions that you can ask yourself that might help you to examine your thoughts. You can check whether or not you are making any thinking errors, such as jumping to conclusions or mind reading. Once you have done this, you can consider alternative explanations
- Once your thoughts have been challenged, they can become more balanced, fair and realistic
- Look out for your rule book. Although you have believed these rules for a long time, it may be time to re-examine them

Homework

Over the coming 2-3 weeks

 Choose a further two activities that you have not been doing recently. Choose from different areas, for example, personally rewarding activities and everyday tasks. Write these activities below:

Remember to make your goals realistic and specific

Activity 1:			
Activity 2:			

For lots more helpful information please visit www.talk2gether.nhs.uk for managing depression and anxiety

- Continue to complete your activity diary (if helpful) and check whether you are including the above activities as well as the goals set in the last part.
 Notice how you are feeling when you increase your level of activity in particular areas
- Complete a thought diary (Stage 2) to help you notice moods and begin to challenge your thoughts. Notice any rules emerging. See page 65
- If you have additional mini goals for the coming week write them down below as it may help you to achieve them. Remember small changes build up





More helpful techniques

In this section we will give you some ideas on how you can increase your confidence by learning to be more assertive. It will also look at methods to solve your problems, manage your time, improve your confidence and make changes to you lifestyle, including:

The workbook is here to help, not to be another thing to worry about. Make it yours to use as and when feels right to you.

Lauren, patient adviser

Assertiveness
Time management
Problem solving
Improving self-confidence
Managing your lifestyle

We suggest you read all the sections, but work on the areas that seem most relevant to you over the coming weeks and months.

Assertiveness

In our relationships our behaviour can be:

Passive

By being passive we communicate to others that we are not as important as they are. We allow the other person's needs, wants and rights to take priority over our own and don't express our own needs and wants. Passive behaviour can lead us to feel like doormats or victims.

Examples

Simon is waiting to enter a lift at college. A large group of students push by and enter the lift, leaving him standing and without any space to enter the lift. One of the young men notices and says: 'Sorry mate, you coming in?' Simon says: 'No you're alright, I'm waiting for a friend'. He then has to wait for the next lift, feeling embarrassed, humiliated and angry.

Aggressive

Aggressive behaviour involves forcing your needs and wants on another person. It is saying that your needs, wants and rights are more important than the other person's. The aggressive person attempts to overpower the other person by not allowing him/her a choice. Aggressive behaviour creates a "winlose" situation; i.e. the aggressive person wins by ensuring that the other person loses. Aggressive behaviour can lead to later retaliation and resentment.

Examples

Cassie is making arrangements for her sister (Kate) to baby-sit Anya. Cassie says: 'I want you to come over before 6pm' Kate tries to explain that 6pm is too early but Cassie says: 'It's just not good enough, you are going to have to do this or I will start to get ill again. Why do you have to make such a fuss over nothing? Thanks a bunch for making me feel upset again!!!!' Kate agrees and comes at 6pm but feels angry at her sister. She also vows to her husband that she will never do it again.

Assertive

Assertiveness is active, honest and direct. It communicates an impression of respect for oneself as well as for the other person. It says that my wants, needs and rights are just as important as yours. Assertive behaviour requires influencing, listening, and negotiating skills so that the other person feels that their point of view is being respected, even if you don't agree with it. The hope is that both you and they will co-operate willingly with whatever course of action is decided upon. This should lead to open, honest relationships and

success without retaliation and resentment: a "win-win" situation.

Examples

Pauline wants a weekend away from the house. She is worried about taking time out but says to her husband Clive: 'I am aware that we have a lot on in the house, and we have both been working really hard. I need a break and have, therefore, arranged to go and visit Stella in Brighton. I will go on Friday evening and be back for about 5 o'clock on Sunday.

Clive is surprised and angry. He says: 'Well that's just great, you go and have a good time and leave me to deal with the roofers. You knew that these next few weeks were critical. I need a break too...'

Pauline interrupts and says: 'Clive, I can see that you need a break too and that you are not happy about me having made this arrangement. However, I want to go and see Stella and this weekend, although not perfect, is good timing for both of us. There is nothing I can do with the roofers. Jonathon can oversee their work. I am going away this weekend for a break.'

Assertive communication – how to do it

There are three simple steps to assertiveness. It is important that you understand and practise all three:

- Actively listen to what is being said and then show the other person that you both hear and understand them. In this way, you can demonstrate understanding and empathy for their point of view, even if you don't agree with it. By listening you are respecting their right to express themselves and sending a message to them that they matter.
- 2 Say what you THINK and what you FEEL. This enables you to directly state your thoughts or feelings without insistence or apology. Make sure you own your feelings by using 'I' statements.
- Say what you want to happen. This is essential so that you can indicate in a clear and straightforward way what action or outcome you want without hesitancy or insistence.

Compare and contrast the following examples of aggressive, passive and assertive behaviour in the context of an unsatisfactory meal in a restaurant. It is your Birthday and the meat is tough and the vegetables were cold. How would you react when asked if everything was alright?

Would you be passive?

Waitress: 'Is everything alright with your meal?'

You: 'Fine thanks'

You (to your friends): 'It was terrible, I'll never come here again'

Would you be aggressive?

Waitress: "Is everything alright with your meal?"

You: "No, it was rubbish. I have never eaten such muck. You should be ashamed to work here. Get me the Manager at once. I am not paying. My Birthday has been ruined."

Would you be assertive?

Waitress: "Is everything alright with your meal?"

You: "Actually the meat was tough and the vegetables were cold. I do not want to pay for my meal. I would like to talk to the Manger to sort this out please."

What are the consequences of being assertive?

- We maintain our integrity and increase self respect and the respect of others
- Our personal relationships are more authentic and satisfying when others are confident of our honesty
- Others know where they stand with us when we let them know our opinions, feelings and needs
- We increase control over our own life by making our own choices
- We strengthen our own judgement when we act on it, allowing us to be independent of the judgement of others
- Increased feelings of confidence and self-esteem.

How to say 'no'

Remind yourself every now and then that:

- You have the right to say no, without feeling guilty
- It is OK for the other person to say no to you
- Saying yes when you mean no may reduce your feelings of self worth
- It's better to say no at the time than to let somebody down later
- Saying yes to extra work or obligations causes you stress
- Taking on too much can mean that other people in your life don't get enough attention
- It might not be such a big deal for the other person to get a no response
- Being respected and respecting yourself is more important than being liked
- And most importantly everything you say yes to is a no to something else

- Try saying no in a casual or impersonal situation where you might otherwise drift into saying yes
- Be firm but polite
- Give a reason for your "no" response if you feel it's appropriate, but not as an excuse.

The process

- If you need time to think, say "I'll get back to you," and make sure that you do
- Ask for more information. How long will it take?
 Is there anyone else who can help you?
- Use body language to show that by saying no you are not being hostile. Demonstrate that you mean what you say and are not going to be manipulated
- Stay calm and relaxed drop your shoulders and breath deeply, keep your voice slow and calm
- Think it through by listening to the other person you might actually realise that you want to say yes after all
- Don't be manipulated but it is alright to change your mind if you want to.

Summary

Assertive behaviour is active, honest and direct. It communicates an impression of respect for oneself as well as for the other person. It says that my wants, needs and rights are just as important as yours are – not more so or less so. The consequences of being assertive are that:

- We maintain our integrity and increase self respect and the respect of others
- Our personal relationships are more authentic and satisfying when others are confident of our honesty
- Others know where they stand with us
- We increase control over our own life by making our own choices
- Increased feelings of confidence and self-esteem.

Homework

- Write down below your personal assertiveness goals. You may wish to be more assertive in particular situations or with certain people in your life. Remember to make your goals achievable, realistic and specific
- Over the next few weeks practise being assertive in the situations or with the people that you have listed above. Start off with something easy, like

saying no to a stranger and build the confidence to use it in more difficult situations

- Continue to manage your moods by gradually increasing your activity levels. Use the activity monitoring diary
- Continue to challenge your negative thoughts using the Stage 2 diary sheets.

Time management

Your time is valuable so be clear about how you want to use it. Good time management means setting goals and planning priorities, not wasting time on low priority jobs or situations beyond your control

To help you to be in control of your time, here are some useful tips:

Prioritise

Prioritise all jobs needing to be tackled
Without setting priorities as to which job is the
most important, it is very easy to feel exhausted
and overwhelmed as we rush from one job to the
next.

Prioritise all the jobs on your list into four categories: A, B, C or D.

A Absolutely

B Better done today

C Could wait

D Delegate

Tackle the high priority tasks first. If a job does not have to be done today, leave it for another more convenient time.

Assess how you use your time

In order to manage time effectively, you need to know how you currently use your time. For two days, log all your activities and how long each task takes. Reflect on how your time could be better managed.

Plan

Take ten minutes per day to plan. Make a list of all the tasks (major and trivial) and cross them off when they have been completed. When planning your day allow time for interruptions and unforeseen delays. Remember to plan time for pleasure, leisure and relaxation as well!

Watch out for perfectionism

Looking for perfection in yourself or others only invites disappointment and will increase demands on your time and cause stress for all concerned. Remember that you are human and can make a mistake. Good enough is good enough.

Do not put off decisions

Unresolved problems and unfinished business are a source of tension and use up your energy unnecessarily. If you have time and all the facts you need, tackle tasks now.

For a quick way to remember these time management strategies think of:

The 5 Ps of time management



Homework

- Write down below your personal time management goals. Remember to make your goals achievable, realistic and specific:
- Over the next few weeks practise time management skills. Start off with something that is easy, like taking time every morning to plan your day
- Continue to manage your moods by gradually increasing your activity levels. Use the activity monitoring diary
- Continue to challenge your negative thoughts using the Stage 2 diary sheets.

Problem solving

Problems big and small occur throughout our daily lives. Most of them can be solved and usually we sort them automatically without being aware of what we have done. Sometimes problems can seem insurmountable and this is where using a problem solving plan can be a valuable tool in your mental wellbeing toolkit.

The 4 stages of problem solving:

1. Define the problem

- What is the problem?
- When is it a problem?
- Where is it a problem?
- With whom is it a problem?

This will enable you to describe in detail the nature, intensity, severity, frequency, duration and current consequences of the problem.

2. Planning

- Consider the possible solutions.
- Ask yourself what would someone else do if they were you?
- List the pros and cons
- Make a decision.

Implementation

- Put a solution into practice
- If you do not try, you will never know if you could be successful or whether you can achieve a reasonable solution.

Evaluation

- Evaluate the degree of success. Don't look for 100% perfection, as that may not be achievable
- Try another solution if that didn't work as well as hoped

In effective problem solving or decision making it is also important to consider the following factors:

Behaviour

How do you normally behave? Don't assume that because you have always done things in a certain way that you cannot try something different

Thoughts and attitudes

Do you have any negative or destructive attitudes, either towards the people concerned, towards yourself or the about the problem itself?

Feelings

Even though you may be feeling physically or emotionally uncomfortable, it does not mean that life has to go on hold, or that you cannot solve the problem. Use your deep breathing exercises and

4.

relaxation techniques and don't forget to congratulate yourself once you have achieved solution.

Problem solving exercise sheet

Think of a problem that has been on your mind and try out the techniques now.

1. Define the problem
• What is the problem?
• Where does the problem occur?
where does the problem occar.
• When does the problem occur?
• Whom is the problem better with? Who makes the problem worse?
the problem worse:
Library de ce the correlation medica year feel 2 W/bet in
• How does the problem make you feel? What is your worst fear?
2. Think of solutions
Think of as many alternatives as possible – at least 3
1.
2.
3.

3. Evaluate the solutions	Summary				
Think of the consequences of each solution: 1.	 Problem Solving is a well defined method for tackling the problems and dilemmas that life throws at us 				
2.	 The stages of Problem Solving are: Define the problem Think of solutions Evaluate the solutions Select the best solution 				
3.	Plan your action Act on your plan Review the plan Reward yourself				
4. Select the best solution	Homework				
Select the best solution and start working	Homework				
with it:	 Write down up to 3 problems that need tackling in your life and use the suggested method. 				
5. Plan					
Think carefully how you can put the solution into action. Jot down a few ideas:					
	 Over the next few weeks put one of your Problem Solving plans into action. Start off with something small and achievable 				
	 Continue to manage your moods by gradually increasing your activity levels. Use the activity monitoring diary 				
	 Continue to challenge your negative thoughts using the Stage 2 diary sheets. 				
6. Implementation					
Put your plan into action and note here how it went					
7. Review					
Check the plan is OK and continue the plan					

until completion.

worthwhile.

8. Reward yourself

Remember to reward yourself even if it is only to recognise that you have achieved something

Improving self-confidence

There are different ways to help increase your confidence through being assertive and learning to say no, through managing your time better and through problem solving. Below are further tips for building confidence:

Guiding principles of self-confidence

- We gain confidence by achieving small goals
- Practise techniques
- Behave as if you are more confident than you feel
- Be flexible in your behaviour
- · Learn from your mistakes
- Speak encouragingly to yourself
- Be kind to yourself
- Watch out for the double standards: unfairly strict on yourself and generous with others

REMEMBER:

Self-confidence comes from taking action and discovering that it wasn't as bad as you thought it was going to be.

 Do the best you can, don't put yourself down for not being perfect

- Spend time with people who make you feel good
- be.

 Check out your rule book. In your diary sheets you may have noticed the rules by which you live your life. It may be time to give up or modify these rules if they keep

making you feel bad about yourself

Managing lifestyle

Your day-to-day lifestyle can be adapted in order to reduce stress. Try these modifications:

Watch what you eat

Food is where we get our energy from and so it is important to have a balanced diet. Make sure you eat three meals a day – skipping breakfast or other meals makes the blood sugar level unstable and can make the symptoms of anxiety worse. Try to eat foods that are high in fibre (cereals, potatoes, rice, pasta, wholemeal bread) and eat fewer foods that are high in fat (cakes, pastry, fried food, butter and margarine) or sugar (sweets, cakes, fizzy drinks). High fat and high sugar foods may give you a burst of energy but this disappears very quickly, leaving you feeling tired. High fibre foods are metabolised more slowly and release sugar (energy) into the blood at a steadier rate. This gives you energy for longer and avoids the fluctuations in blood sugar level that can increase anxiety. Eat plenty of fresh fruit and vegetables. You should also include high protein foods such as meat, fish, eggs, beans or pulses.

Cut down on tea, coffee and coca cola

These all contain caffeine, a stimulant that mimics symptoms of anxiety. A general guideline is that you should drink no more than 5 cups of tea and/ or coffee a day; otherwise the caffeine can increase your feelings of anxiety.

Cut down on smoking

Nicotine can act as a stimulant and may increase anxiety symptoms. Smoking may seem to relax you but may have the opposite effect and increase tension.

Take regular exercise

Exercise is a very useful way of reducing depression and anxiety. Try to get into the habit of taking some regular exercise. The Dept of Health recommends 2.5 hours of moderate intensity exercise each week. Choose something that you enjoy, as you will be more likely to stick to it and it won't feel like a chore! Start with small and achievable goals and build up if you can.

Try to sleep well

Use the relaxation techniques before you go to bed to aid a good night's sleep. Read the sleep hygiene appendix.

Set aside time each day for yourself

Use this time for relaxation or to do something you enjoy. Even if you have a very busy life, finding half an hour each day to do something pleasurable or relaxing is an important part of managing your moods.

Recognise your strengths and achievements

Praise yourself for your strengths and weaknesses. Do not only look at problems and difficulties. Understand that nobody is, or should expect themselves to be, perfect.

Don't let stress build up

Talk to friends and seek advice from those around you.

Slow down

Rushing around causes adrenaline to be released in the body, which increases feelings of anxiety. If it's not essential that you rush; slow down. You will feel more relaxed and will achieve more.

Don't avoid things or situations that cause you stress

You will never know that you have the strength and strategies to cope unless you confront your fears.

Homework

- Write down below your personal lifestyle goals.
 Remember to make your goals achievable, realistic and specific:
- goals into action. Start off with a goal that is manageable, for example, 15 minutes exercise every other day

Over the next few weeks and months put your

- Continue to manage your moods by gradually increasing your activity levels. Use the activity monitoring diary
- Continue to challenge your negative thoughts using the Stage 2 diary sheets.

For lots more helpful information

helpful information
please visit
www.talk2gether.nhs.uk
for managing





Bad days, setbacks and relapse

Congratulations! you have made it through this workbook and we hope that it has been helpful to you.

The good news is that you now have a number of techniques to use in the management of your moods. We recommend that you continue to use these techniques in your everyday life. When we start to feel better there is a temptation to stop managing our moods. We understand that if you are feeling 'good enough' you may not want to keep up the weekly activity and thought monitoring. However this chapter will help you identify a plan of action should you begin to feel you are losing control of your mood again.

Think about the TOP 5 techniques that have been most useful to you during this programme. These will be the ones that you need to keep up over the long term, even after you feel better:

1.

2.

3.

4.

5.

Identifying a relapse

It is important that you don't see every set-back or

It is important that you don't see every set-back or disappointment as a failure; this will undermine your confidence. Instead look on your setbacks as opportunities to learn. Every recovery programme will have its ups and downs; everyone has good and bad days. But if you do feel that you are relapsing, answer the following questions:

 Are your symptoms of depression as intense as they were when they first occurred?

YES NO

 Are your symptoms increasingly disrupting your day-to-day routine?

YES NO

 Are you experiencing depression as often as you were before you started your self-help programme?

YES NO

 Are your symptoms increasingly disrupting your day-to-day routine?

YES NO

 Are you experiencing depression as often as you were before you started your self-help programme?

YES NO

If you answer "yes" to any of the above questions, you may be experiencing the beginnings of a relapse. Don't worry, there are ways of preventing this stage reaching a complete relapse. Complete the questionnaires at the beginning of the workbook and visit www.talk2gether.nhs.uk to find out more about your scores.

There are several reasons why people relapse. Firstly, when recovering from depression we are more vulnerable to stress. Sometimes we forget to use the coping techniques regularly. There could also be a problem with labelling depression correctly after having difficulty with it for so long. It may just be a bad patch.

Mood emergency action plan

If you think you may be starting to relapse, follow this action plan:

Stop and think

What caused you to feel low?
If you can't find a trigger, fill in the thought and or activity diary for a week or two.

Manage your lifestyle

Is your lifestyle healthy? Are you getting enough exercise, are you eating well and getting enough rest? Alcohol can also increase the symptoms of depression and anxiety.

If you have

serious concerns

about your mental

health, you should

consult your GP for

further advice

Take your time

Don't try to take on too much all at once. If you have been fine for a while and then suddenly experience low mood, you may be trying to take on too much.

Increase rewarding activities

Remember what you learnt about what makes you feel good. Look back at your entries in the workbook and check that you are still getting the balance right.

Try not to panic

A few days of feeling low need not be the start of a relapse. Don't exaggerate the problem. If you do feel low for a few days don't see it as a relapse – look on it as a learning experience.

Reduce your obligations

Reduce the demands on yourself. You know enough about yourself now to judge how fast the pace should be and how much you can cope with at any one time. Go easy on yourself for a while.

Ask for help

It may be worth seeking professional help if your mood is sliding down again. Give a friend or family member permission to tell you when you seem to be getting low.

Be kind to yourself

This is a time to be very kind and compassionate to yourself.

Go gently and take good care of yourself. Try to not judge yourself or battle with your thoughts and feelings. Breathe gently and allow the feelings to pass.

If you feel
you are at risk of
harming yourself,
contact your GP
or the Samaritans
on 116 123 or email
Jo@samaritans.org



Anxiety

Anxiety and fear are natural human emotions. Anxiety that is not managed often contributes to the onset of depression. Anxiety and Depression often present together which is why this information is included.

Although the reasons why people feel anxiety can be varied, there are common symptoms which most people feel when anxious. Some of them are listed below.

Tick the energy high emply to your	
Tick the ones which apply to you: Physical symptoms	Diarrhoea
Tense muscles	Headaches
Erratic breathing	Feeling sick in stomach
Dry mouth	Tired all the time
	Emotional symptoms
Dizzy spells	Irritability
Racing heart	····cas····cy
	Angry outbursts
Knots/butterflies in stomach	Feeling anxious
Frequent need to go to the toilet	
	Panic attacks

	Feeling of hopelessness
	Depression
	Not feeling good enough
	Feeling bad about yourself
	Loss of confidence
	Teary
	Fear of criticism
	Difficulty concentrating
	Forgetful
	Feeling under pressure
	Feeling confused
	Difficulty making decisions
Beh	avioural symptoms
	Avoiding situations
	Increased smoking
	Increased alcohol drinking
	Increased or decreased eating
	Trouble sleeping or sleeping too much
	Nail biting
	Not wanting to go out socially
	Blushing
	Non-stop talking
	Obsessive actions e.g. checking locks all the time
	Not taking as much care with your appearance
	Thot taking as mach care with your appearance

Anxiety is a normal reaction

Anxiety is normal. It is the natural response to danger or stress, and helps us survive by preparing our bodies to deal with the threat. Anxiety acts as the trigger for our bodies to release adrenaline, which makes the body work faster and harder so that it can cope with danger by either fighting or running away. This is known as the 'fight or flight' response.

How your body changes when you are anxious

Adrenaline affects many different parts of the body, getting the body into a state of readiness to deal with the threat. It is adrenaline that produces many of the uncomfortable physical feelings that are associated with anxiety, such as 'butterflies' in the stomach, tense muscles, rapid heartbeat and sweating. When adrenaline is released our senses also become more acute, and our thinking may change – for example we may not be aware of other things, and may become preoccupied with whatever it is that is making us anxious.

What happens to my body?

Increased adrenaline affects the body in a number of ways which causes physical symptoms of anxiety. When you become anxious you may experience some, or all of these symptoms.

Increased adrenaline makes vision sharper
After effects = visual disturbance e.g. blurring

Body stops producing saliva

Dry mouth, difficulty swallowing

Airways widen to let in more oxygen
Breathlessness, dizziness

Heart pumps harder to send oxygen to muscles
Heart beats faster,
palpitations

Liver releases stored energy. Blood and energy is diverted away from skir to muscles

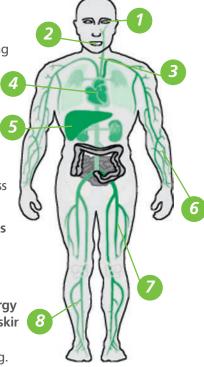
Stomach feels funny e.g.

"knotted" tummy, "butterflies". Nausea and sickness, diarrhoea

6 Skin sweats to cool hot working muscles
Sweating

Blood in skin is diverted to muscles
Pale skin

8 Muscles in use, tense, ready to act faster
Tension, aches and pains in muscles, "shaky" feeling



Helpful and unhelpful anxiety

The 'fight or flight' response is automatic. As soon as you sense a threat, this response occurs. This was very useful in prehistoric times as there were many dangers such as wild animals, and prehistoric man needed to react to these quickly. This response helped us to be ready to run away or fight immediately after sensing a threat, and so helped us to survive.

Of course, today we don't have to worry about wild animals attacking us. But there are other dangers which mean we still need this response. For example, if you are crossing a road and see a car coming quickly towards you, the 'fight or flight' response occurs. Adrenaline is released into your bloodstream, which prepares your body to jump out of the way. This is obviously a very helpful response.

We also get anxious about all sorts of other things – for example, taking a driving test or speaking in public. These situations can trigger the same reaction, even though there may be no physical danger. A moderate amount of anxiety may still be helpful in these sorts of situations as it can make us more alert and focused and so improve our performance. For instance, some anxiety when going for a job interview or sitting an exam can be useful as it helps us to concentrate. However, if the anxiety is out of proportion to the situation or if it goes on for too long then it can become a problem.

When this happens we can feel physically uncomfortable because the body's reaction makes us ready to fight, but there is no danger to fight. So the tendency is to 'run away' or escape from the situation as this helps us to feel better. Unfortunately, this means that when we are faced with the same situation again we will try to avoid it, as experience has shown that this will make us feel better. But this means that we never learn to deal with situation. We are then left with only one rather unhelpful option of running away every time we are faced with that situation. It is much better to face your fears and learn to control the symptoms of anxiety.

Why me?

Everyone experiences anxiety and has anxious thoughts, but it is more of a problem for some people than for others. This may be due to a variety of reasons including; personality, family history, life stresses, coping skills, and lack of support.

Anxiety affects people differently. The following are the most common forms of anxiety

- Generalised anxiety disorder (GAD)
- Phobias
- Social anxiety

- Health anxiety
- Panic disorder
- Obsessive compulsive disorder (OCD)

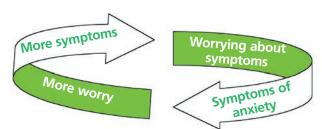
What keeps anxiety going?

Our responses to anxiety (ie what we think and what we do when we feel anxious) can actually maintain it as a problem. Vicious cycles are often created that mean the anxiety either persists or gets worse.

Fear of fear

Although the bodily feelings associated with anxiety are harmless, they can be unpleasant and quite frightening. When we experience anxiety symptoms we may worry that we are ill or that something bad is going to happen. This worry makes us even more anxious, which increases the physical symptoms of anxiety. This causes a vicious cycle which makes anxiety worse and stops it going away.

We may also worry about becoming anxious and getting anxiety symptoms. We may say unhelpful things to ourselves such as "What if my mind goes blank", "I'll blush and everyone will look at me", or "This always makes me feel dreadful". Worrying about becoming anxious can actually bring on anxiety, and can make the anxiety symptoms appear. This leads to an increase in anxiety and so the symptoms also increase. Again, we have fallen into a vicious cycle, known as the 'fear of fear' cycle.



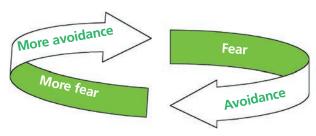
Avoiding situations that provoke anxiety

It is perfectly natural, when we find a situation distressing, that we will try to avoid that situation in the future. But when anxiety is a problem in our life we may find ourselves avoiding places, activities and thoughts which are not real dangers. For example, supermarkets, going to work, making eye contact, being alone, remembering certain images, using public transport. These are all important and necessary parts of everyday life, and avoiding them can be very restrictive to us and to others.

Avoiding something may seem to bring relief, but it does not help in the long term:

 The relief is only temporary. Our anxiety may increase as we worry about how to avoid the situation again in the future

- It makes the situation harder to face in the future because we believe that it will always cause anxiety
- Gradually we grow to avoid more things
- It starts a vicious cycle:



Loss of confidence

Over time, anxiety can reduce confidence. It makes it harder to do things that were once easy, and so we may try to avoid doing these things altogether because we are afraid of failing. Loss of confidence also makes us feel bad. If our confidence is low, we may think that others are judging us negatively (e.g. thinking that we're odd or stupid) and we are probably also judging ourselves negatively.

Ways of thinking

You may have noticed that how we think plays an important part in fear, avoidance, and loss of confidence. The thoughts we have play a major role in increasing or decreasing our anxiety, and thinking negatively when we are feeling anxious can make things seem worse than they really are, which makes the anxiety more difficult to control. See Part six for more information.

Relaxation

Learning effective relaxation and controlled breathing techniques is important for our wellbeing. Remember that mind and body are connected and one can affect the other. There are a range of different relaxation techniques that you can learn, and it may be worth trying a few to see what suits you best. In this section you will learn two breathing exercises and a 'progressive muscle relaxation' technique.

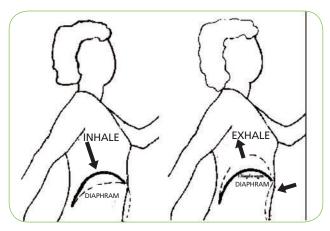
Controlled breathing

It may seem strange to talk about "learning" breathing, but there are right and wrong ways of breathing, and the wrong way can cause unpleasant physical sensations. You can learn to correct your breathing by using either of the following techniques:

Exercise 1: Controlled breathing

 Place one hand on your chest and the other on your stomach

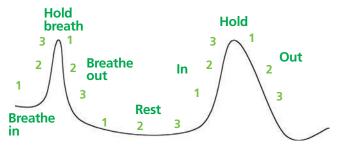
- Breathe in through your nose, filling your lungs completely so that your stomach comes out.
 Try to keep the movement of your upper chest to a minimum
- Slowly and evenly breathe out through your nose.
 Allow your stomach muscles to relax
- Repeat, and try to get a rhythm going. About 8–12 complete breaths a minute would be relaxed breathing. Don't take lots of deep breaths quickly, as this can make you feel dizzy and uncomfortable



Exercise 2: the "Castle breathing technique"

This exercise can be used for 2–3 minutes at a time, for general relaxation, distraction, or to help you sleep. It is particularly helpful when you are about to enter a stressful situation when it can be used to relax and calm yourself.

- Breathe in for two counts (counting at a pace that is slow, but comfortable for you)
- Hold the breath for two counts
- Breathe out for two counts
- Rest for two counts
- Count the same number for the in-breath, the hold, the breath out, and the rest period before breathing in again
- As you get more practised you can either count slightly slower, or count "1, 2, 3". Always keep the counting evenly and steadily. You can also do this breathing exercise by counting in time to your footsteps when you are out and about



Relaxation guidelines

 Regular practise is essential. If possible set aside a regular time to practise each day

- Make sure you choose somewhere quiet to practise where you will not be disturbed
- Start the exercise by lying down in a comfortable position. It is easier to relax while you are lying down
- Make sure you are wearing comfortable clothes, and that the room isn't too hot or cold
- Don't try to practise relaxation if you are hungry or have just eaten
- Don't tense your muscles too hard, or you may make them ache
- Don't tense any part of the body that is painful or injured
- Do not expect too much of yourself at the start.
 Remember that this is a skill and skills have to be learnt and practised before they are mastered.

Progressive muscle relaxation

This exercise is called "Progressive muscle relaxation". It will be difficult to read the instructions and relax at the same time, so you may find it useful to record it onto a tape, try to memorise it or get a friend to read it out to you.

Progressive muscle relaxation means that the muscles are relaxed one after the other, starting with the hands and arms and ending with the feet and leg muscles.

Each stage of the exercise focuses on a different group of muscles. At each stage you should concentrate on noticing the feelings in the part of the body you are working on. Tense the muscles tightly (but not too hard) and really concentrate on the feeling of tension. Hold this for five seconds, then release for ten to fifteen seconds, letting the muscles go as relaxed as possible. Try to learn the difference between tight and relaxed muscles by concentrating on the feeling in the muscle as it goes from tight to loose.

The exercise involves doing this for all the parts of your body:

Hands and arms:

 Clench your fists, feel the tightness in your hands and arms, slowly relax them. See how far they can relax, but do not push or strain. Relax and let everything go. Repeat

Shoulders and neck:

 Drop your chin to your chest. Hunch your shoulders tightly, bringing them up and in. Circle your shoulders then let them drop. Relax. Repeat

Face:

 Concentrate on tensing your face bit by bit, first pull your eyebrows together, then screw your eyes up tight, and then bite your teeth together. Gradually ease off and relax. Repeat

Chest and abdomen:

 Tense your stomach muscles, by pulling your tummy in tightly, slowly breathe out letting go of your stomach muscles and relax. Repeat

Thighs and lower back:

 Keeping the rest of your upper body relaxed; squeeze your thighs and buttocks together.
 Relax. Push your heels down hard against the floor, feel the tightness in your thighs, gradually let go. Repeat

Calves:

 Point your toes down towards the ground, feel the tension in your legs, gradually let the tightness go. Then pull your toes up towards your face. Again, gradually relax. Repeat

Whole body:

 Concentrate on your whole body, scanning for any tension. Relax any muscles that feel tense.
 Breathe slowly, calmly and evenly, letting every feeling of stress or tension go with each breath out. Allow your breathing to deepen your feeling of relaxation

Mind:

• Finally relax your mind. Think of something really soothing and restful: for example, lying by a gentle river, under a warm sun and blue sky. Picture a scene that works best for you. Breathe slowly through your nose, filling your lungs completely. Feel yourself getting heavier and heavier. Do not get up and rush about straight away: Getting up too quickly might make you feel dizzy, or make you tense up again straight away. Continue resting for a minute of two, then when you are ready get up, move slowly and stretch gently. Try to keep the relaxed feeling for as long as possible. Do whatever activity you had planned in a slow, calm way

As you get better at this exercise you can practise it while sitting or standing, or move from a quiet environment, such as your bedroom, to one that is not so peaceful. In this way you will learn to relax in a variety of situations and stand a better chance of coping in 'real life'.

Mindfulness

Mindfulness is about developing a new relationship with your thoughts and feelings and can be a great way to manage anxiety and depression. It is a technique to be mastered over time. There are 3 steps to this Mindfulness exercise:

- 1. While you sit comfortably, notice all of the thoughts going through your mind. Just observe those thoughts, as if they were separate from you. Let these thoughts float through your mind as if they were clouds, not judging your thoughts or following a train of thought just 'being'.
- Now focus your awareness and attention onto your breathing. If your attention wanders from the breath, be pleased you have noticed it and come back to the feeling of air through your nose.
- 3. Finally, open your mind to pay attention to your body and your experience in your body. Scan through your body from your head to your toe and focus on how you are feeling in your body. Notice any physical discomfort. Spend the remaining time experiencing your body as a whole and feeling more grounded.

You can also extend this exercise to daily routines such as cleaning your teeth or eating. For example, focus your attention on the experience of cleaning your teeth or the taste of the food in your mouth. This can help you to manage stressful or negative thoughts, and can make you feel more relaxed.

Sleeping better

Sleep problems are very common and are usually referred to as insomnia. People can become very distressed when they feel that they are not getting enough sleep and it can be one of the more troubling experiences for depressed and anxious people.

How much sleep do we need?

The need for sleep varies from person to person and depends also on our age and levels of activity. Studies show that people range between needing 4 hours a night up to 10 hours a night or more. As we get older, our sleep patterns change – as babies we can sleep for 17 hours each day whereas in adult life most of us need between 7 and 8 hours a night. We need less sleep when we are older and sleep becomes lighter and more broken. The natural rhythm of sleep can be disturbed because the pattern of when we sleep changes, sometimes causing us to fall asleep during the day.

What if I don't sleep?

People can become very worried when they feel that they aren't getting the amount of sleep that they need and this can make it even harder to fall asleep. The occasional sleepless night has little effect on our physical and mental health but if this becomes quite frequent you will start to feel tired, drowsy and may find yourself dropping off to sleep during the day. This can be very dangerous if you are driving or operating heavy machinery. You will find it difficult to concentrate and make decisions and you may start to feel depressed.

Types of sleep problems

Knowing what sort of sleep problem you have can help when it comes to trying to deal with it. (Tick the boxes that apply to you):

Getting to sleep (onset insomnia or anxiety) Difficulty with falling asleep is the most common problem that people experience, particularly those with anxiety. It can take several hours for some people to get to sleep but usually the quality of sleep is good when it happens.
Staying asleep This includes a disturbed sleep pattern, with frequent waking in the middle of the night and difficulty getting back to sleep.
Early morning waking (early-morning insomnia or depression) This includes waking earlier than desired, sometimes

several times during the early morning hours and having difficulty getting back to sleep. This is common in depression.



Poor quality sleep

Not getting enough sleep, sleeping lightly, with restless, disturbed and inconsistent sleep and feeling un-refreshed upon wakening.

Causes of sleep problems

There are a number of reasons why sleep problems can develop. These include:

 The natural effects of ageing as we age we sleep less often and less deeply

Medical reasons

- The need to go to the toilet increases in later life and due to pregnancy
- Pain and discomfort such as arthritis or an injury
- Emotional upset following bereavement or loss
- Medication can sometimes interfere with your sleeping patterns

Depression and low mood

Disturbed sleep is common when someone is depressed. It is common for a depressed person to have problems getting to sleep or to wake up early in the morning and then struggle getting back to sleep again

Stress, anxiety and worry

Your sleep can be affected by the way that you feel. If you are stressed or worried about something then you may have difficulty falling asleep because your mind is working overtime

Surroundings

The environment around us can make a big difference to our sleep. For example, a bedroom that is too hot or too cold, too noisy or too light and a mattress that is too hard or too soft can affect the quality of our sleep. Sleeping in an unfamiliar place can also affect our sleep

 Unusual or disrupted sleep routines
 Working shifts that frequently change can affect the pattern of a person's sleep

Good sleep habits

Develop regular sleep times:

Go to bed and get out of bed at about the same time, regardless of how tired you are. Try not to take naps during the day because naps may make you less sleepy at night

 Avoid caffeine, nicotine and alcohol late in the day Caffeine and nicotine are stimulants and can keep you from falling asleep. Alcohol can cause waking in the night and interferes with sleep quality

Get regular exercise

Avoid exercising close to bedtime because it may stimulate you and make it difficult to fall asleep

Don't eat a heavy meal late in the day.
 However, a light snack may aid sleep

Surroundings:

Make your sleeping place comfortable by ensuring that it is dark, quiet and the right temperature. If there is too much light try using a sleeping mask. If noise is a problem, try earplugs, a fan or a 'white' noise to cover up the sounds

Pre-sleep routine:

Follow a routine to help you relax and unwind before going to sleep, such as reading a book, listening to music or taking a bath

Use your bed for sleep and sex:

Try not to associate your bed with other activities that create arousal such as talking on the phone, reading and worrying. Avoid anxiety arousal just before bedtime (e.g. avoid arguments and challenging tasks)

Do not try to fall asleep:

This will only increase your frustration and anxiety. Try saying to yourself "I will only concentrate on the relaxing feelings in my body" because this paradoxically is an effective way of increasing sleep by giving up trying to fall asleep!

Challenge your worrying thoughts

If you are lying awake for more than 15 minutes, get up and go into another room. Write down your negative automatic thoughts, such as "I will never get to sleep" and "I'll get ill if I don't get enough sleep" and challenge them. Be more realistic – the most likely consequence of not getting enough sleep is that you will feel tired and irritable

Practise relaxation and breathing techniques. Visualise a relaxing scene or try to make your mind go blank to enhance restfulness

Don't expect immediate results.
 Give yourself time to unlearn your disturbed sleeping patterns

For lots more helpful information please visit www.talk2gether.nhs.uk for managing depression and anxiety

Medication

This section is to provide information about antidepressants. It discusses briefly how antidepressants work, why they are prescribed and their effects and side-effects.

There are different types of antidepressants and they are commonly divided into the four groups seen below. The antidepressants listed below also have brand names and these are shown in brackets.

Type of antidepressant

Tricyclic Antidepressants: Amytriptyline (Tryptizol, Lentizol), Amoxapine (Asendis), Clomipramine (Anafranil), Dothiepin/ Dosulepin (Prothiaden), Doxepin (Sinequan), Imipramine (Tofranil), Lofepramine (Gamanil), Maprotiline (Ludiomil), Nortriptyline (Allegron, Aventyl), Protriptyline (Concordin), Trimipramine (Surmontil)

Selective Serotonin Re-uptake Inhibitors (SSRIs/5-HT Re-uptake Blockers): Citalopram (Cipramil), Fluoxetine (Prozac), Fluvoxamine (Faverin), Paroxetine (Seroxat), Sertraline (Lustral). Related drugs: Nefazodone (Dutonin), Trazodone (Molipaxin)

Mono-Amine Oxidase Inhibitors (MAOIs): Isocarboxazid (Marplan), Phenelzine (Nardil), Tranylcypromine (Parnate)

Serotonin and Noraderenaline Reuptake Inhibitors (SNRIs): Reboxetine (Edronax), Venlaflaxine (Efexor, Efexor-XL)

What are antidepressants used for?

When a person is depressed, the naturally occurring chemical messengers in the brain that regulate mood are not as effective or as active as normal.

Antidepressants are therefore used to increase the amount/activity of chemical messengers in the brain to help improve mood.

Antidepressants are similarly effective but can produce different side effects. It is possible to try another if the drug you are on does not suit you (please seek medical advice before stopping the antidepressant that you are on).

How do I take my antidepressant?

Tablets/capsules should be swallowed with at least half a glass of water, whilst sitting up or standing, to ensure they do not stick in the throat.

If your antidepressant is a liquid it should be measured out carefully. Your pharmacist can provide you with a medicine spoon or an oral syringe to do so.

When should I take my antidepressant?

Take your antidepressants as directed on the medicine label. They will not work if you don't. You can take Trycyclics and SSRIs with or after food. With SSRIs this may help with feelings of sickness (feelings of sickness may be present for the first few weeks of taking them, seek advice from your doctor if it continues). If directed to take your SSRI tablets once a day, sometimes this is better at night as they can make you drowsy at first. If instructed to take your MAOI once a day, this may be better in the morning as they can make you feel more alert (although they do sometimes have the opposite effect on people).

How long should I take the antidepressant for?

This should be discussed with your doctor. To help inform you, research has shown that your chances of becoming depressed again, after a first episode of depression, are much lower if you keep taking the antidepressant for 6 months after you are well again. For a second episode, your chances are lower if you keep taking the antidepressant for 1–2 years after you have become well again. For a depression that keeps coming back, continuing to take an antidepressant has been shown to have a protective effect for at least 5 years.

It will often take 2 weeks or more before the antidepressants start to have any effect and maybe up to 6 weeks to give their full effect.

Are antidepressants addictive?

Antidepressants are not addictive, but if you have taken them for 8 weeks or more you may experience some mild 'discontinuation' effects while your body re-adjusts.

It is not advisable to stop taking antidepressants suddenly. Depression can return if treatment is stopped too early and you may experience some discontinuation effects (e.g. headaches, restlessness, nausea, lethargy, sleep disturbance). You should discuss stopping your drugs or reducing them with your doctor.

What if I forget to take my antidepressants?

If you forget to take your antidepressant you should start again as soon as you remember. Do not try to catch up by taking two or more doses. Inform your doctor of any missed doses at your next appointment. If you have difficulty in remembering to take your doses ask your pharmacist, doctor or nurse for some support with this.

Will they make me drowsy?

Antidepressants may make you feel drowsy so do not drive or operate machinery until you know how they affect you. Antidepressants are not sleeping tablets, although when taken at night they may help you to sleep. Seek advice from your doctor about your particular antidepressant as some people find that their antidepressant can make them feel more alert/awake.

Will my antidepressant cause weight gain?

Some people may experience weight gain when on antidepressants due to an increased appetite or a reduction in metabolic rate. If you do start to put on/ lose weight and are concerned about this, please consult your doctor.

Should I avoid anything?

When taking Trycylclics, SSRIs or SNRIs alcohol is best avoided except in moderation (it can make you feel sleepier). Alcohol may also reduce the effect of your antidepressant.

When taking MAOIs alcohol should be avoided. Seek advice from your doctor if you intend to drink. There are also foods that are to be avoided when on MAOIs and your doctor should provide you with a list.

Some antidepressants make you sleepy and slow down your reactions and you should therefore seek advice from your doctor if you intend to drive on them or operate heavy machinery.

If you have any reason to believe that you may be pregnant please consult your doctor.

Will I experience side-effects

The lists of side-effects may look worrying to you. Most people however get only a small number of MILD effects if any at all. As your body gets used to taking a new medication these side-effects may wear off. Please talk any side-effects over with your doctor. Only stop your antidepressant if your side-effects are really disagreeable, and if they are, book an urgent appointment with your doctor.

It is important to inform your doctor of any other drug you are taking before starting an antidepressant.

Trycyclics

- Common side-effects: Drowsiness, constipation, dry mouth, blurred vision, weight gain, and sweating
- Uncommon: nausea, headache, urine retention, low blood pressure, a fast heart beat, reduced desire for sex, difficulty in reaching orgasm
- Rare: Feeling shaky, skin rashes

(Trycyclic drugs are dangerous in overdose)

SSRIs

- Common side-effects: Nausea and vomiting, insomnia, reduced desire for sex, difficulty in reaching orgasm
- Uncommon: restlessness/anxiety, drowsiness, headache, loss of appetite, diarrhoea
- Rare: dry mouth, skin rashes, feeling shaky

MAOIs

- Common side-effects: feeling dizzy or faint after standing, drowsiness, dry mouth, constipation
- Uncommon: urine retention, headaches
- Rare: swelling in the legs, sweating, insomnia, blurred vision, skin rashes

SNRIs

- Common side-effects: feeling sick, headaches, drowsiness, dizziness
- Uncommon: not sleeping well, low blood pressure, weight gain, wheeziness, reduced desire for sex, difficulty in reaching orgasm
- Rare: Skin rashes

If you have found that your questions have not been answered by this information, please consult your doctor.

Source: Bazire, S. and Branch, S. (2001) Drugs used in the treatment of mental health disorders: FAQs. APS Publishing.

Supporting someone with depression

If someone close to you is experiencing depression it is not easy at times. When they are finding life difficult it can often be hard to know what to say or do. They may need a lot of support and their behaviour can be out of character and worrying. Sometimes our worry and concern about someone means we fail to look after ourselves. It is important to look after yourself. You may find it useful or helpful to talk someone. Ask friends or relatives for help and support. Remember your emotional well being is important too!

There are a number of things you can do to help someone with depression:

Listen

let the person know you are concerned and are available to listen without being judgemental. This can provide them with an opportunity to discuss their feelings.

Talk openly

Talking about depression may help someone know you are open-minded about depression and make it easier for them to talk about their feelings.

Don't tell them to cheer up

This may be our first reaction when someone is feeling depressed. However this may seem impossible to the person and may appear as if you are not taking their feelings seriously.

Encourage them to seek help

When people are depressed it is important that they receive the correct help and advice. Their GP is often the first step to receiving help and may refer them on to someone who is a specialist in dealing with mental health problems, such as a nurse or therapist.

Offering to go along with them when they have their appointment may be helpful to them.

Learn about depression

Having some idea how others feel may help you to understand their problems and the reasons for their behaviours and moods.

Distraction

Helping someone forget their problems for a while might be beneficial. This may include supporting them with activities that they have neglected.

Practical help

Providing practical help with everyday tasks. For example, making sure that the person has sufficient food to eat.

Time for yourself

Having time for yourself is important and can help you relax, whether it is simply time spent alone or doing something you enjoy. Looking after yourself will benefit the person you are supporting.

Get active

It may be the last thing you feel like but increasing your activity level day by day will start to make you feel better. Start with a small change and build up to your bigger goals.

Do something you enjoy every day

You may not believe that you can ever feel pleasure again, or may believe you don't deserve it. Think of something small that used to make you feel good and plan to include it in you life.

Stop avoiding people

Facing people, phone calls and social occasions can feel like a chore, an ordeal, a nightmare. However, we need other people and it does eventually help us to get better.

Learn to manage your thinking

When we are depressed we are not thinking straight. Our thoughts become unfair, unrealistic and very negative. You can learn to Catch, Check and Change the way you think. This can lead to immediate relief of your low mood and give you a technique to start regaining control of your moods and your life.

Learn to relax

Sounds simple but relaxing is a very useful for when we get wound up by situations and our own thoughts. Relaxation exercises are described in this book or you can purchase a relaxation tape or CD.

Exercise regularly

We should all be doing more exercise, but particularly if we are under stress. Regular exercise does improve mood and can prevent further depression.

Get a hobby and do it

Finding something that will occupy your mind, albeit temporarily, is a good thing. Sometimes even if it does not interest you, go through the motions as it will help you to start regaining control.

Be assertive/look after your needs

Learning to be assertive, not passive, nor aggressive will be a useful skill for you now and for the rest of your life. There are techniques described in this book that may prove useful.



10 Top Tips for managing depression

If you need a summary list of things to do differently to manage your mood they are listed over the page:

If you feel
you are at risk of
harming yourself,
contact your GP
or the Samaritans
on 116 123 or email
Jo@samaritans.org

1. Get active

It may be the last thing you feel like but increasing your activity level day by day will start to make you feel better. Start with a small change and build up to your bigger goals.

2. Do something you enjoy every day

You may not believe that you can ever feel pleasure again, or may believe you don't deserve it. Think of something small that used to make you feel good and plan to include it in you life.

3. Stop avoiding people

Facing people, phone calls and social occasions can feel like a chore, an ordeal, a nightmare. However, we need other people and it does eventually help us to get better.

4. Learn to manage your thinking

When we are depressed we are not thinking straight. Our thoughts become unfair, unrealistic and very negative. You can learn to Catch, Check and Change the way you think. This can lead to immediate relief of your low mood and give you a technique to start regaining control of your moods and your life.

5. Be kinder to yourself

When we are feeling low, the last thing we need is to be critical of ourselves and yet this is often what happens. Try to be kinder and more compassionate to yourself. You are doing really well given how you have been feeling.

6. Learn to relax

Sounds simple but relaxing is a very useful for when we get wound up by situations and our own thoughts. Relaxation exercises are described in this book or you can purchase a relaxation tape or CD.

7. Exercise regularly

We should all be doing more. We also know that regular exercise does improve mood and prevent further depression. It does not have to be lycra clad trips to the gym – you can do something physical every day that will start to improve you mood.

8. Get a hobby and do it

Your concentration may be poor and you will probably feel you cannot be bothered to take up a hobby. However finding something that will occupy your mind, albeit temporarily, is a good thing. Sometimes even if it does not interest you, go through the motions as it will help you to start regaining control.

9. Be assertive/look after your needs

Learning to be assertive, not passive, nor aggressive will be a useful skill for you now and for the rest of your life. There are techniques described in this book that may prove useful.

10. Learn to manage your anxiety

Anxiety that is intense and persists can be depressing. Learning to manage our anxiety can be the key to unlocking our depressed mood.



Six months on...

Changing some of the ways you behave, think and live in order to lift your mood takes time and effort. Six months on from the programme our sincere hope is that you will be continuing to feel more in control of your moods. The workbook is yours to keep and continue to use. At different times in our lives, new challenges present and you may benefit from revisiting the techniques that helped before and from reading about some other ideas that did not seem so relevant before.

David

The programme has been incredibly helpful to me. My relationship with Catherine is so much better and my mood is much brighter. I wish I had seen the workbook or read something on this approach when I was first made redundant. I got into such a negative circle

o f thoughts about myself and thought that others were judging me. Accepting what I am and what I do, as being OK has been the key. I no longer feel a failure and can have a laugh again. I am now looking forward to my retirement (without alcohol I might add).

Cassie

I am a bit better now, particularly about organising my time. I get lots of pleasure from my daughter and I make sure I spend good quality time with her most days even if it's doing the housework together. I still like 100% and don't feel really great about myself. At least I know that's not a helpful way of thinking now.

When Anya is a bit older I might get some counselling to sort myself out a bit more. The programme was helpful for getting me back in routine. I do get out more now and the band is fun even if it doesn't make me famous!

Pauline

Life goes on much the same for me but what has changed is my ability to say NO. I needed a break and the real key was realising that I did not have to always be achieving something. Learning to relax and accept myself and just be still sometimes has helped both Clive and myself. Generally my mood is good but I have to

keep an eye on it. If I am feeling wobbly I know to call a friend and arrange something social. I used to take to my bed. Knowing which techniques to use and when has been really helpful. I have recommended it to a number of my friends, colleagues and patients because so many people seem to be struggling with these difficulties.

Simon

I have finished my first year and did well in my grades. I am still taking the happy pills but want to talk to my GP about coming off. I am not depressed anymore. Big groups still make me nervous but I don't avoid things so much anymore. Keeping busy and exercise has really helped. I'm playing Badminton again and this keeps me busy and makes me feel life is worthwhile. I will

always be a bit of a Geek I suppose but the difference is I quite like myself now and before I didn't.

The key message is that there is always something you can do to help yourself. Remember: if you feel you cannot manage and that you are losing control of your emotions, go and speak to your GP who will be able to talk through additional help that may be available.

For lots more helpful information please visit www.talk2gether.nhs.uk for managing depression and anxiety



Further reading and helpful contacts

Anxiety and worry

Overcoming Social Anxiety and Shyness. Butler, G. (2009) Robinson: London

Feel the Fear and do it Anyway. Jeffers, S. (2007) Vermillion: London

Overcoming Anxiety. Kennerly, H. (2009) Robinson: London

Overcoming Worry. Meares, K. & Freeston, M. (2008) Robinson: London

Overcoming Panic and Agoraphobia. Silcove, D. (2009) Robinson: London

Overcoming Health Anxiety. Willson, D. & Veale, D. (2009) Robinson: London

Relationships with others

Overcoming relationship problems. Crowe, M. (2005) Robinson: London

The Selfish Pig's Guide to Caring. Mariott, H. (2003) Polperro Heritage Press: Worcestershire

Low mood and depression

Understanding Depression by Dr Kwame McKenzie. Family Doctor Series in association with BMA, available from Lloyds Chemists, Boots and Tesco stores

Overcoming Depression. Gilbert, P. (2009) Robinson: London

Postnatal Depression: Facing the Paradox of Loss, Happiness and Motherhood. Nicholson, P. (2001) Wiley: Chichester

Overcoming Mood Swings. Scott, J. (2010) Robinson: London

Mind Over Mood. Padesky, C. & Greenberger, D. (1995) Guildford Press: London

The Mindful Way Through Depression: freeing yourself from chronic unhappiness (with accompanying Meditation CD). Williams, M., Teasdale, M., Segal, Z. & Kabat-Zinn, J. (2007) Guildford Press: London

Stress and emotional well being

5 Steps to Emotional Wellbeing, Let's Talk, ²gether NHS Foundation Trust, 2011. Visit: www.talk2gether.nhs.uk

Understanding Stress by Professor Greg Wilkinson. Family Doctor Series in association with BMA, available from Lloyds Chemists, Boots and Tesco stores

Feeling Good: The New Mood Therapy. Burns, D. (2000) Avon Books: New York

Manage Your Mind: The Mental Fitness Guide. Butler, G. & T. Hope (2007) Oxford University Press: Oxford

The Relaxation and Stress Reduction Workbook.

Davis, M. & Robbins-Eshelman, E. (2008) New

Harbinger Publications: California

Overcoming anger and irritability. Davies, W. (2009) Robinson: London

Overcoming Low Self-Esteem. Fennell, M. (2009) Robinson: London

How to assert yourself. Lindenfield, G. (1992)

Thorsons: London

Assertion Training: How to be who you really are. Rees, S., Graham, R. & Kowalski, R. (1991) Routledge: London

Overcoming Body Image Problems including Body Dysmorphic Disorder. Willson, R., Veale, D. & Clarke, A. (2009) Robinson: London

Helpful contacts

Gloucestershire & Herefordshire Section 1: Health

Let's Talk, ²gether NHS Foundation Trust

Improving Access to Psychological Therapies provides talking therapies for Anxiety, Stress and Depression

Open: Mon to Fri: 9am to 5pm

Tel: 0800 073 2200

Email: 2gnft.Talk2gether@nhs.net **Website:** www.talk2gether.nhs.uk

Community Health Trainers, Gloucestershire

Community Health Trainers offer support, information and guidance to people who want to make changes to their lifestyle whatever their faith or culture

Email: info@independencetrust.co.uk **Website:** www.independencetrust.co.uk

Telephone: 0345 8638323

Gloucester Health Access Centre

For walk-in & registered patients and those who are not registered with a GP in the county

Eastgate House, 121-131 Eastgate Street, Gloucester

GL1 1PX

Tel: 01452 336290 Open: 8.00am to 8.00pm (including Sundays & Bank Holidays)

Website: www.asapglos.nhs.uk **Tel:** 111 (24 hours a day, 7 days a week) **Website:** www.nhs.uk/symptom-checker

Herefordshire GP Access Centre

For walk-in & registered patients and those who are not registered with a GP in the county

Asda Building, Belmont Road, Hereford, HR2 7JE

Tel: 0330 123 9309 (out of hours GP number)

8am - 8pm, 7 days a week & every day of the year.

Website: www.herefordshiregpaccesscentre.nhs.uk

Section 2: Counselling & support

Gloucestershire Counselling Service

Tel: 01453 766310

Website: www.gloscounselling.org.uk

Listening Post Counselling

Open: Mon: 9.30am to 4.30pm & some evenings

Tel: 01452 383820

Email: lpostcounselling@listeningpost.org.uk

Relate

Confidential counselling service for couples experiencing relationship problems

National booking line: 0300 100 1234

Tel: 01242 523215

Website: www.relate.org.uk

For lots more helpful information please visit www.talk2gether.nhs.uk for managing depression and anxiety

Samaritans

Tel: 01452 306333 / 01242 515777 (Gloucester)

01432 269 000 (Hereford) 116 123 (National)

Website: www.samaritans.org

Share

Young peoples counselling service

Open: Thursday evenings, 6pm to 9pm

Tel: 07928 775015

Email: shareypcs@yahoo.com

ISIS Women's Centre

Offers support, guidance and practical help in Gloucestershire to women offenders and those who are at risk of offending

Open: Mon to Fri: 9am to 5pm (24 hr answerphone)

Tel: 01452 397690

Website: www.isiswomenscentre.com **Email:** info@isiswomenscentre.com

Gloucestershire Domestic Abuse Support Service

Free and confidential service to help men and women affected by domestic abuse throughout Gloucestershire

Open: Helpline manned Mon to Fri: 10am to 4pm

In emergency dial 999

Tel: 0845 602 9035 (Confidential Helpline)

Website: www.gdass.org.uk
Email: gdass.admin@gdass.org.uk

Cruse Bereavement Care

Promotes the well-being of bereaved people and enables anyone bereaved by death to understand their grief and cope with their loss

Tel: 01432 359469

0844 477 9400 (National Helpline) **Website:** www.cruse.org.uk

Herefordshire Tel: 01432 359 469

Email: herefordshire@cruse.org.uk

Gloucestershire Tel: 01242 252518

Email: gloucestershire@cruse.org.uk

Herefordshire Rape & Sexual Abuse Support Centre

A free and confidential service supporting women survivors of rape and sexual abuse

Tel: 01432 344777

Website: www.hrsasc.org.uk Email: isva@hrsasc.org.uk

West Mercia Women's Aid

Offering support for woman and children affected by domestic abuse

Tel: 0800 783 1359 (24 hour support line) 01432 356146 (general enquiries) Email: info@westmerciawomensaid.org

Men's Advice Line

Advice and support for men in abusive relationships

Tel: 0808 801 0327

Marches Counselling Service

Registered charity **Tel:** 01432 279906

Website: www.marchescounselling.org **Email:** marches.counselling@gmail.com

Herefordshire Mind Recovery & Wellbeing Service

Community based services available to Herefordshire who

have experience of mental distress **Tel:** 01432 271643 or 278569

Email: info@herefordshire-mind.org.uk

Marriage Care

Supporting marriage, relationships and family life

Tel: 0800 389 3801

Website: www.marriagecare.org.uk

CLD Youth Counselling Trust

Young people's counselling service

Tel: 01432 269245

Website: www.thecldtrust.org

West Mercia Constabulary non-emergency line

For non-emergency and general enquiries.

Open 24 hours a day

Tel: 101

Website: www.westmercia.police.uk

FDS (Family Drug Support)

Offering support to families, friends and carers who are affected by a family member's substance misuse

Tel: 01981 251155

Email: support@familydrugsupport.com **Website:** www.familydrugsupport.com

The Haven

Breast Cancer Support Centre

Tel: 01432 361061

Email: herefordreception@thehaven.org.uk **Website:** http://www.thehaven.org.uk

Herefordshire Carers Support

Providing practical support and advice to the carer community in the county

Tel: 01432 356068

Email: help@herefordshirecarerssupport.org **Website:** www.herefordshirecarerssupport.org

Section 3: Cultural support and services

Churches in Hereford Diocese Action Team (CHAT)

In Hereford the Churches in Hereford Diocese Action Team (CHAT) is working all year to ensure that there is hot food available seven days a week from one of the churches in the City

Tel: 01432 373300

Email: diooffice@hereford.anglican.org **Website:** www.hereford.anglican.org

All Nations Community Centre

African Caribbean Community

61-63 Chase Lane, Eastern Avenue, Gloucester, GL4 6PH.

Tel: 01452 414254

GARAS

Gloucestershire action for refugees and asylum seekers 111 Barton Street, Gloucester GL1 4HR

Tel: 01452 550528

Email: info@garas.org.uk

Gloucestershire African Caribbean Association

213 Barton Street Gloucester GL1 4HY Mrs Pauline Reynolds – Manager

Tel: 01452 387754 (Mon to Fri: 9.00am to 5.00pm)

Email: glosaca 1@hotmail.com

Gloucestershire Chinese Women's Guild

Voluntary Agencies Unit

1st Floor 75-81 Eastgate Street Gloucester GL1 1PN

Mrs Mew Ning Chan-Edmead – Chairperson **Tel:** 01452 332088 or 01452 382886

Email: mewningchan@gcwg.org.uk

Gymnation

Registered charity providing health and fitness facilities and other activities for people of all nationalities in Gloucester – its ethos is to try to encourage healthy lifestyles for its members, helping them to gain confidence and increase their physical and mental wellbeing

Tel: 01452 525044 (Mon to Fri: 9am to 11.45am; weekend mornings 9am to 12pm; Mon to Fri

4.30pm to 9pm)

Email: imran@_thefriendshipcafe.com

Gloucestershire Polish Community Portal

Tel: 01242 231811 **Email:** gpc@inbox.com

Website: www.poloniagloucester.co.uk

The Friendship Cafe

Interfaith charity which arranges a number of wellbeing activities in the Barton & Tredworth Area of Gloucester

109-113 Barton Street Gloucester GL1 4HR

Tel: 01452 308127

Email: imran@thefriendshipcafe.com

Traveller Service

Principal Traveller Services Officer – Paul Kenyon, Gloucestershire County Council

Tel: 01452 426397

Jo Rogers - Herefordshire Council's Traveller

Liaison Officer **Tel:** 01432 261759

Email: info@herefordshire.gov.uk

Marches Counselling Service

(registered charity) **Tel:** 01432 279906 **Mob:** 07527579488

Email: www.marchescounselling.org

MIRA - Herefordshire Council

The Migration and Integration in Rural Areas Project.

Offering support, guidance and signposting to
newcomers to the county

Tel: 01432 260633

Email: diversity@herefordshire.gov.uk

Herefordshire Language Network

Translation and interpretation service

Herefordshire Council **Tel:** 01432 260216

Email: diversity@herefordshire.gov.uk

Section 4: Benefits

Benefits & Welfare Take up

Gloucester City Council Herbert Warehouse

Gloucester GL1 2EQ Tel: 01452 396979 Open: 8.45am to 5pm

Email: benefits@gloucester.gov.uk

Disability Living Allowance (DLA) & Attendance Allowance (AA) Unit Disability Living Allowance

Disability Living Allowance

(if born on or before 08/04/1948): 0345 6056055

Disability Living Allowance

(if born after 08/04/1948): 0345 712 3456 Attendance Allowance: 0345 6056055

Jobcentre Plus

All new claims: 0800 055 6688

Queries about existing claims: For queries about existing claims, please visit www.gov.uk/contact-jobcentre-plus to find the relevant number.

Budgeting Loans: 0345 603 6967 **Jobcentre Plus:** 0345 606 0234

Please see index for local branch phone numbers

Website: www.jobcentreplus.gov.uk

Housing and Council Tax Benefits

Herefordshire Council Benefits PO Box 224

Hereford HR1 2XW **Tel:** 01432 260333

Email: benefits@herefordshire.gov.uk

Welfare Benefits Herefordshire Council

Welfare and Financial Assessment Team St Nicholas House Hereford HR4 0DD

Tel: 01432 383444

Email: welfarerights@herefordshire.gov.uk

Pension Service

Tel: 0800 731 7898 (8am to 6pm, Mon to Fri) **Website:** www.thepensionservice.gov.uk

(with online enquiry form)

ABLE Information and Advice

provides support for individuals with an illness or disability with accessing benefits, leisure and employment

Tel: 01432 277770 9:00am - 5:00pm Mon to Fri

Website: www.ablehereford.com

Department for Work and Pensions

Disability Living Allowance/Personal Independence

Payment

Tel: 0800 917 2222 *Attendance Allowance* **Tel:** 0345 605 6055

Website: www.dwp.gov.uk

Section 5: Other useful organisations

Age UK Gloucestershire

Tel: 01452 422660

Website: www.ageuk.org.uk

Cheltenham Borough Council

Tel: 01242 262626

Email: enquiries@cheltenham.gov.uk

Citizens Advice Bureau

General and specialist advice service

Tel: 03444 111 444

Website: www.citizensadvice.org.uk

Gay-Glos

Tel: 01452 306800

Email: help@gay-glos.org Website: www.gay-glos.org

Gloucester Citizens Advice Bureau

General and specialist advice service

Tel: 01452 527202

Gloucestershire County Council

Tel: 01452 425000

Email: customerservices@gloucestershire.gov.uk

Gloucester City Council

Tel: 01452 396396

Email: heretohelp@gloucester.gov.uk

The Terence Higgins Trust

Terence Higgins Trust is the leading and largest HIV and

sexual health charity in the UK

Tel: 0808 802 1221 Email: info@tht.org.uk

Age UK Gloucestershire

Tel General Enquiries: 01452 422660

Website: www.ageuk.org.uk

Age UK Herefordshire & Worcestershire

40 Saint Martin's Street Hereford HR2 7SG

Tel: 01432 351 774 (Local office) 0800 008 6077 (General Enquiries)

Email: office@ageukhw.org.uk

Herefordshire Council

Brockington 35 Hafod Road Hereford HR1 1SH

Tel: (01432) 260000

Email: info@herefordshire.gov.uk

Opening Hours 8:30am-5:15pm Mon to Thurs

8:30am-4:45pm Fri

Section 6: Housing

Gloucester City Homes

Tel: 01452 424344 Customer Services **Email:** customer.services@gch.co.uk

Two Rivers Housing

Tel: 0800 316 0897

Email: customerservices@2rh.org.uk

Shelter

Housing advice centre **Tel:** 0808 800 444

Website: www.shelter.org.uk

Herefordshire Housing

Herefordshire Housing is a not-for-profit Registered Provider, which provides affordable homes throughout Herefordshire

Tel: 0300 777 4321

Website: www.hhl.org.uk

Home Point

Affordable Housing in Hereford

Tel: 01432 260300

Email: info@home-point.info

For contact details of the other district councils please visit these County Council websites:

www.gloucestershire.gov.uk or www.herefordshire.gov.uk

For details of all other organisations please go to:

 $www.guide\hbox{-}information.org.uk$

Activity diary

Use this diary to monitor and plan your activity hour by hour. Getting more active and balancing achievement and pleasure in our daily lives can help us recover from depression.

Hours	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6am							
7am							
8am							
9am							
10am							
11am							
Noon							
1pm							
2pm							
3pm							
4pm							
5pm							
6pm							
7pm							
8pm							
9pm							
10pm							
11pm							
12pm							
1-6am							

Instructions:

- For each hour of the week, write down what you actually did.
- For each entry rate how much Pleasure you experienced (0 -10 Scale).
- For each entry rate how much Achievement you felt (0 10 Scale).

Thought diary - Stage one

Complete this thought diary over the next week. Write down the ups and downs in your emotions in the way suggested. Notice any patterns in your emotions, thoughts, or the situations where they arose. Make a note of your observations.

Situation	Emotion	Emotion rating	Thoughts

Notes:

Situation- write down where you were and what was happening when you began to feel a change in your emotion.

Emotion-how did you feel? Emotions can usually be expressed in one word, for example; sad, frightened, ashamed etc.

Emotion rating-how intense is the emotion? You may find it helpful to rate the intensity in a percentage, 0% (not feeling the emotion at all) to 100% (feeling this emotion very intensely)

Thoughts-at this stage just try and notice what was going through your mind. You will need to practise catching thoughts before you can begin to challenge them.

Thought diary - Stage two

When you have learnt to catch your thoughts, try challenging them by looking at the evidence for and against the thought. In this way, you can learn to think and feel in a more balanced way.

Situation	Emotion	Emotion rating	Thoughts	Evidence to support the thought	Evidence against the thought	Changed thought

Is there a possibility that this thought is not completely true?

Is there an alternative explanation? It is unlikely that what you have thought is the only way of seeing things. How else could you see the situation? Try to think of as many alternative explanations as possible. This should lessen your belief in the original thought.

If a friend was in this situation and had this thought, what would I tell him/her? It is often easier to spot irrational thinking in others than in ourselves. Imagine a friend was thinking your thought, would you still agree with it?

Might I be making thinking errors, for example;

- Jumping to conclusions
- Catastrophising
- All-or-nothing thinking

- Mind reading
- Personalising
- Filtering

Have I been here before, thought this before and found later that my thoughts were not entirely correct?

What's the worst that could happen? How likely is it to happen? Even if it did happen, could I live through it? If your worries are irrational then it's highly unlikely that what you're worrying about will actually happen. But if this doesn't reassure you, think of what your plan of action would be should the worst case scenario actually happen. It may be unpleasant for a while, but if you can cope with the worst possible outcome, you can feel confident that you can manage the situation, whatever happens.

Five years on from now, will I look back on this situation and think differently?

Find out whether you are anxious and depressed

Visit our website to find out more about your scores. (www.talk2gether.nhs.uk)

Over the last 2 weeks, how often have you been bothered by any of the following problems?

Please tick	Not at all	Several days	More than half the days	Nearly every day
Feeling nervous, anxious or on edge	0	1	2	3
Not being able to stop or control worrying	0		2	3
Worrying too much about different things	0		2	3
Trouble relaxing	0		2	3
Being so restless that it is hard to sit still	0		2	3
Becoming easily annoyed or irritable	0		2	3
Feeling afraid as if something awful might happen	0	1	2	3
GAD7 Anxiety Total score				

Anxiety Scores None 0 - 5 Mild 6 - 10 Moderate 11 - 14 Severe 15 and above

Over the last 2 weeks, how often have you been bothered by any of the following problems?

Please tick	Not at all	Several days	More than half the days	Nearly every day
Little interest or pleasure in doing things	0)	(1)	(2)	(3)
Feeling down, depressed, or hopeless	0	1	2	3
Trouble falling/staying asleep, sleeping too much	0	1	2	3
Feeling tired or having little energy	0	1	2	3
Poor appetite or overeating	0	1)	2	3
Feeling bad about yourself – or that you are a failure or have let yourself or your family down	0	1	2	3
Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
Moving or speaking so slowly that other people have noticed or moving around a lot more than usual	0	1	2	3
Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3
PHQ9 Depression Total Score				

Depression Score None 0 - 4 Mild 5 - 9 Moderate 10 - 14 Severe 15 and above

You have now completed the programme. Complete the questionnaires above again to see how you are feeling. Come back to these questionnaires in the future to keep an eye on your progress. Remember, that if your anxiety is increasing or mood dropping, you may need to work harder with the techniques. Seek help if the mood change persists.

Write your own notes here:





Let's Talk Gloucestershire ²gether NHS Foundation Trust Rikenel, Montpellier Gloucester, GL1 1LY

Let's Talk Herefordshire ²gether NHS Foundation Trust Benet Building, Ruckhall Lane, Belmont, Hereford, HR2 9RP

Tel: 0800 073 2200 Email: 2gnft.Talk2gether@nhs.net Website: www.talk2gether.nhs.uk Trust website: www.2gether.nhs.uk





