



[Version date: May 2022]

introduce class facilitator and welcome participants

Welcome to Class 1 of Cognitive Behaviour Therapy with mindfulness Classes.

These classes are designed to introduce you to the skills of Cognitive Behaviour Therapy and mindfulness. Please work through the material at your own pace. Although this material was first developed for people who were referred for treatment of anxiety or depression, these skills point to good ways for everyone to manage stress and build your resilience.

[Facilitators and sites are welcome to add their names and contact information at the beginning of each presentation. Please see the empty textbox below the session number on the slide.]

Ground Rules

Respect others

Please respect everyone's confidentiality

Please do not share with the class personal stories of trauma or suicidal or violent thoughts

Talk to us

If you are distressed, please talk to staff members individually

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WITH MINDFULNESS

This is a class, so we encourage you to ask questions and share information about what's been helpful for you so that everyone in the class can learn from each other. However, because this is a large group, it's not the right setting to discuss personal trauma or suicidal or violent thoughts, which may be distressing to others in the group. If you're in crisis and need to talk about any of these things, please approach one of the facilitators during a break or after class.

Class Outline

Why These Classes?

Mindfulness

What is CBT?

Realistic Thinking

Skills Practice

Cognitive Behaviour Therapy, the basis for these classes, is a structured approach. The classes follow a similar structure: there will be an outline, a mindfulness exercise, a review of the material from last class, new material, as well as some suggested skills practice.

Why CBT Classes?

CBT Works!

Rapid access
to brief CBT

Introduce
principles of
CBT

Practice basic
skills of CBT

Introduce self-
help resources

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Cognitive Behaviour Therapy, or CBT, was chosen for these classes because CBT works! There is research and scientific evidence that CBT helps individuals who struggle with anxiety & depression. Cognitive Behaviour Therapy also has good mental wellness skills that can be used to manage stress on a regular basis.

These classes aim to provide quick access to some basic CBT skills - 6 hours within 4 weeks. In these classes you will learn some of the theory of CBT then do some skills practice in session and have a chance to practice on your own.

As introductory skills, these classes offer different things for different people. For some people, it's all they want or need to change thinking and behaviour patterns. For others, it gives a sense of whether CBT would be helpful to explore further and is a starting point for treatment. For others who have already done work, it's a reminder of skills and good habits to keep you on track and help you continue making progress.

Lots of Self-Help Websites



Anxietycanada.com

Good quality site
Interactive
Great resources
Good videos of patient stories

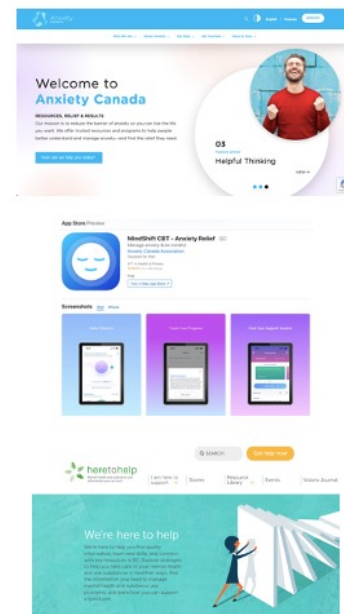


MindShift app

Good mobile application



Heretohelp.bc.ca



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There are many self-help online resources, but it is hard to know which sites are helpful. Through these classes, we want to help people find good quality resources, if you are looking for further information. We highly recommend these websites as self-help resources. These are Canadian sites that are interactive, with videos and have many free resources.

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Next we'll move on to try a mindfulness exercise.

Mindfulness Meditation – 5 min

Observe without judgment

Helpful for stress reduction

Apps

- Mindshift
- Mindfulness Coach

Anywhere, anytime

- Observe breath, object, activity, sounds

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There are multiple tools within CBT. Mindfulness can be helpful in taking a brief pause to relax. Mindfulness is a type of meditation practice that focuses on being in the present moment, noticing your thoughts, feelings, sensations, without judging them.

People sometimes misunderstand mindfulness, thinking it means you need to focus on one thing and you're doing it wrong if your mind wanders. But your mind will wander to other things, and your job is to gently bring it back into focus. People get frustrated when they are first learning mindfulness because they think they're doing it wrong. But it's an important skill, and it takes practice.

This practice can be useful to manage stress, coping with anxiety or depression and managing chronic pain.

Each class will try a different type of mindfulness exercise. You may find you like one style better than the other, or that a certain type of mindfulness suits you better. That's great – once you try them all you can stick with whatever works for you. Today we're going to try a mindfulness exercise from "Mindshift". "Mindshift" is a Canadian app that is available free for android and Apple devices. "Mindfulness Coach" is another resources you may like to try.

You can also try doing every day activities mindfully, such as mindful walking, or mindfully doing the dishes, mindful eating, or mindfully folding towels, to give you a few examples. To do any of these activities mindfully, you pay attention to the present moment. You can wash the dishes mindfully, being aware of the bubbles, temperature of the water, motions, and sounds.

The first mindfulness exercise, “Mindful Breathing”. This exercise will only take about 3 minutes. Start by sitting comfortably, with your feet flat on the ground, hands in your lap. You can have your eyes open or closed.

[Audio from Mindshift app, Chill Zone, Mindful Breathing can also be used or the following instructions.]

Find a comfortable sitting posture. Put your feet flat on the ground and try to straighten your back. Gently close your eyes. Let your shoulders drop down and away from your ears. Pay attention to your breathing and just allow yourself to continue to breathe naturally.

Now, rest your hands gently on your belly with the fingertips of each hand lightly touching in the middle. Breathe in smoothly through your nose. And exhale slowly through your mouth. Continue to take slow, smooth breaths. When you breathe in, notice your belly push your hands gently apart, as you fill your lower lungs with air. When you breathe out, notice your belly sink back towards your spine as you release your breath. You can imagine that your belly is a balloon. Fill it with air and then watch it deflate. Now continue to focus on the gentle inhalation and exhalation of your breath. In...and out... If any other thoughts or images come into your mind during this exercise, just notice them, and gently bring your attention back to your breath.

You may also become aware of physical sensations or feelings in your body. Simply notice them, and then again, bring your mind back to your breath. You don't need to analyze or give these thoughts or feelings any meaning in this moment. Simply acknowledge them without judgment and bring your mind back to your breath. It's normal for your mind to wander. Simply notice that your mind has wandered and gently bring your attention back to your breath. Continue to focus on your breathing and stay in this relaxed state for as long as you like. When you are ready, slowly open your eyes and bring your attention back to your surroundings.

[Ask: after the practice]: Do you feel <soothed> <distressed> <neutral> ? All of these experiences are common. Anything new can feel uncomfortable, but it gets easier

with practice, just like any new skill.

Class Outline

Why These Classes?

Mindfulness

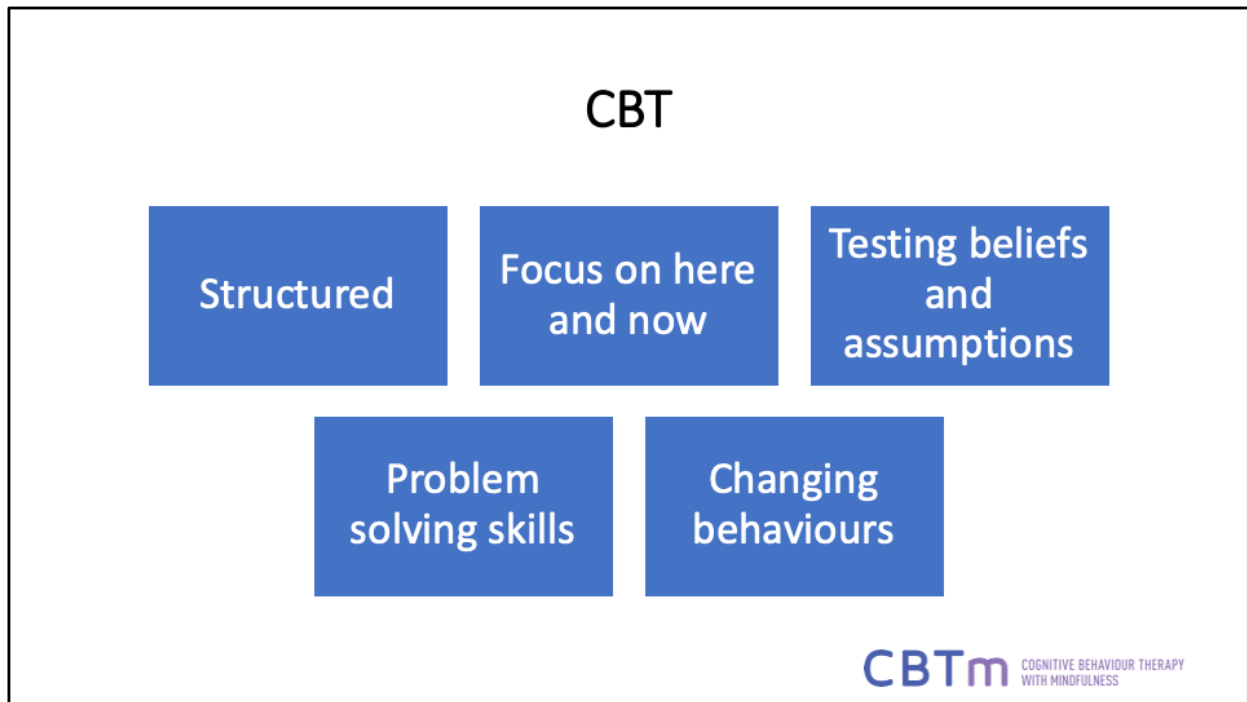
What is CBT?

Realistic Thinking

Skills Practice

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Next we'll move on to talk about the basic concepts of Cognitive Behaviour Therapy. Most people need some coaching to make changes, or improve their stress management and resilience. That's what these classes are all about.



There are many different types of therapy, such as Dialectic Behaviour Therapy (DBT), psychodynamic, supportive, Acceptance and Commitment Therapy (ACT). So what is Cognitive Behaviour Therapy?

In CBT, sessions are structured. Every session has an agenda, learning new skills, a review of the skills practice, and giving feedback to facilitators about the class. There is equal collaboration between facilitators and participants. For example, in these classes we're trying to get feedback and continuously updating the classes. In previous classes, participants asked us for information on insomnia and anger management. From this feedback, we added modules on sleep and assertiveness. We will ask for your feedback later on in this class.

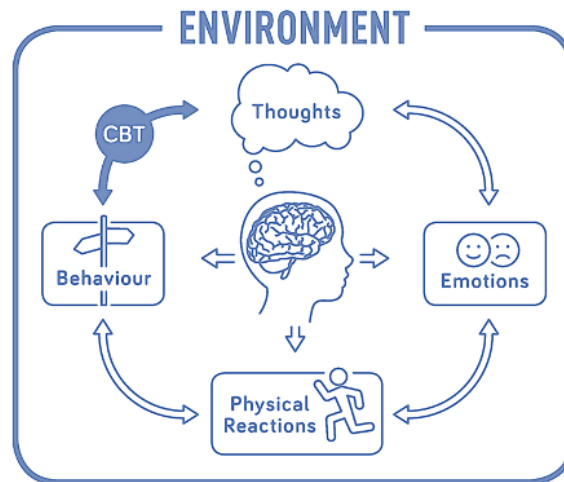
Other therapies may focus on events from the past. In CBT, we don't ignore the past, but ask: "How does your past affect you today, and how can you reach your goals in the present?"

One of the core ideas in CBT is testing one's beliefs and assumptions. When we have negative feelings, we tend to have negative and inflexible thinking. In CBT, you learn to step back and think about the situation more broadly. CBT is not about just

thinking positively, it is teaching you how to think accurately, in a balanced way.

CBT also has problem solving skills. These are important if you are struggling with relationship problems, sleep problems, assertiveness. Learning these skills helps bolster your resilience.

The CBT Model



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This diagram explains how Cognitive Behaviour Therapy works. CBT believes that thoughts, emotions, physical reactions and behaviours are connected, but CBT tries to change things by changing either your thinking patterns or your behaviour. Let's start at the "Emotions" square and work our way around the circle.

There are two types of feelings: emotional and physical. If I feel angry, my physical reaction might be <could ask the group this question> an increase in my heart rate, feeling hot or my face turning red. If I'm worried, I might have a stomach ache. These feelings influence both our thoughts and behaviours (our actions). Sometimes you feel anxious and don't know why. You can try and understand where it's coming from, but you may not figure it out. The goal in CBT is to reduce the anxiety to improve functioning, not to get rid of it.

The most common behaviours associated with anxiety and/or depression are avoidance and withdrawal. Avoidance is the main source of disability in anxiety disorders, which can be thought of as "The disorders of missed opportunities". Avoidance and withdrawal often lead to a sense of relief in the short term, but a sense of sadness and increased anxiety in the long term. We'll talk more about that in

Class 2.

- In any situation, you have certain thoughts about the situation. What you feel affects how you think, and vice versa. For example, trying to learn this material, you might be having certain thoughts. If you're having thoughts that this lesson makes sense, you might be feeling good about the classes and will log on to Class 2. The way you think affects how you feel. However, if you're feeling upset or anxious in the situation, this will affect how you view the situation. For example, if you had a panic attack in the grocery store, you are more likely to have anxiety in that same situation or in a crowd. You might not be thinking anything negative, but because you were anxious in that situation before (in the grocery store), you are more likely to experience the anxiety again (in the grocery store or other similar stores). You might start worrying about going to shop for groceries because you expect to feel anxious there.

Sometimes it's hard to figure out if something is a thought or a feeling. What is "I feel dumb?" (pause) It's a thought, because "dumb" is a judgement. The emotion might be "embarrassment" or "feeling foolish" leading one to judge oneself as "dumb". A key to understanding the difference between a thought and a feeling is: a feeling is one word that is descriptive and isn't a judgement. A thought, on the other hand, is an evaluation or an opinion.

Usually, people want to focus on changing their negative feelings, but this is hard to do directly. We have more control over thought patterns and behaviour patterns. By changing unhelpful thinking and behaviours, CBT can help you shift the connections between negative thoughts, behaviours and emotions.

CBT Myth

Myth Cognitive therapy is to help people think positively

Truth Cognitive therapy is to help people think flexibly and balanced

The Cognitive Behaviour Therapy model in the previous slide applies to everyone, not just those with mental health challenges. However, when we're not at our best and our stress levels are high, we may have more frequent and intense negative thinking – in more situations, more of the time. The goal of CBT is to teach you to have balanced, realistic and flexible thinking patterns, not just positive thinking. Pretending that only positive things exist can feel fake; pretending that everything is great when it's not, is often not helpful. When you're having a negative thought, it's important to ask yourself whether the way you're thinking about the situation is realistic and balanced.



What do you see?

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What do you see in this picture? <an old woman> <a young woman> <both>

The picture shows both a young woman and an older woman, and it illustrates the importance of seeing two different perspectives.

In some types of therapy, the therapist mainly helps the person see the positive in the situation. But this is not the focus of Cognitive Behaviour Therapy.

CBT helps you to take a step back and look at situation from different angles.

You can ask yourself “in the same situation, is there more than one side? Is there another way to look at the situation”?

When feeling stressed or worried, you may tend to have inflexible and negative thinking patterns – think about yourself wearing dark sunglasses all of the time, and not able to see everything in all types of light.

CBT does not involve only using positive thinking, but instead the focus is to use accurate, balanced, realistic thinking.

Cognitive Model



When we are feeling anxious, sad, or angry, we are usually thinking negatively



These negative thoughts can make the negative feelings stronger



If we can recognize this negative thinking, and change the thinking, it can help reduce the negative feelings

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Let's break down the Cognitive Behaviour Therapy model into two parts, the "C" part, or the part focused on cognitions, or thinking patterns, and the "B" part, the part focused on behaviour. Let's take a look at cognitions first.

- The Cognitive Model applies to everyone, so it's not just a model for those people with anxiety and depression.
- But, for those people whose stress or worry levels are higher than usual, they may have more frequent and intense negative thinking in more situations, more of the time.
- When you have a negative thought, it's important to ask yourself whether the way you're thinking about the situation is realistic and balanced.

Cognitive Theory of Depression



- Negative view of self
- Negative view of others
- Negative view of future

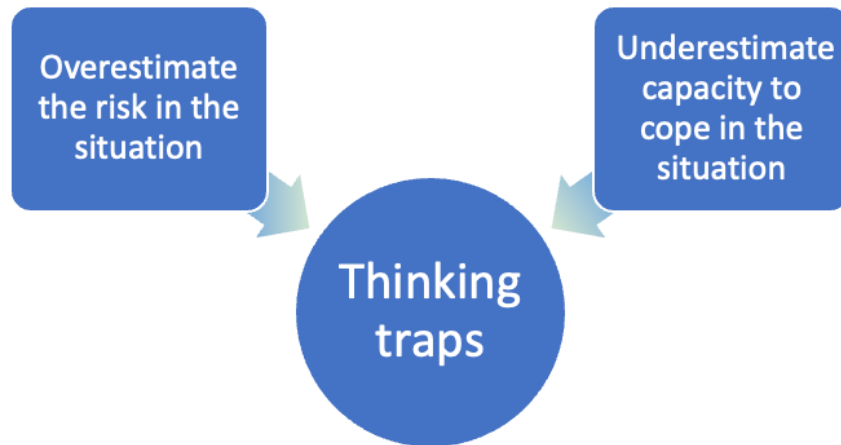
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The unhelpful thinking patterns that can begin when a person is feeling high stress, might turn into depression. This is how CBT views those unhelpful thinking patterns in depression.

A person with depression tends to think about the world in a negative way. Depression gets the person to think they are worthless or unlovable, that other people are unfriendly or uncaring, and that the future is hopeless and things will never get better for me.

CBT is like physiotherapy for your brain, and it helps bring back the flexibility in your thinking and helps to build up your resilience.

Cognitive Theory of Anxiety



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There are also unhelpful thinking patterns that can result in anxiety. There are two common traps in thinking that underlie problematic anxiety:

1. Overestimating the risk in a situation. For example: How likely a plane is to crash?. How likely you are to embarrass yourself when you speak in front of others? Statistics tell us that travelling in a plane is safer than travelling in a car and yet, the fear of a plane crashing is very common. Public speaking is another common situation where fear and anxiety tend to influence a person's self confidence and the risk or danger of failing.
2. The second thinking trap that anxiety gets you to believe is underestimating your ability to cope in the situation. For example: If I have to make a presentation at work, I will become overwhelmed and fall apart and then be unable to cope. Sometimes people worry if they have a panic attack it will go on forever unless they do something to stop it, which isn't true.

Using a Thought Record

Beck Institute

TESTING YOUR THOUGHTS (Example)

This worksheet is a version of a Dysfunctional Thought Record.

What is the situation? _____

What am I thinking or imagining? _____

How much do I believe it? a little medium a lot (or rate 0-100) _____

How does that thought make me feel? angry sad nervous other: _____

How strong is the feeling? a little strong medium very strong (or rate 0-100) _____

What makes me think the thought is true? _____

What makes me think the thought is not true or not completely true? _____

What's another way to look at this? _____

What's the worst that could happen? 'Would I still live through it?' _____

What's the best that could happen? _____

What will probably happen? _____

What will happen if I keep telling myself the same thoughts? _____

What could happen if I changed my thinking? _____

What would I tell my friend _____ if this happened to him/her? _____

What should I do now? _____

How much do I believe the negative thought now? a little medium a lot (or rate 0-100) _____

How strong is my negative feeling now? a little strong medium very strong (or rate 0-100) _____

Beck Institute

TESTING YOUR THOUGHTS (Example)

This worksheet is a version of a Dysfunctional Thought Record.

What is the situation? _____ *...some yard of me*

What am I thinking or imagining? _____ *...She'll never call me again.*

How much do I believe it? a little medium a lot (or rate 0-100) _____

How does that thought make me feel? angry sad nervous other: _____

How strong is the feeling? a little strong medium very strong (or rate 0-100) _____

What makes me think the thought is true? _____ *She seemed angry that...*

What makes me think the thought is not true or not completely true? _____ *She's gotten mad at me before but she seems to get over it.*

What's another way to look at this? _____ *...She's got a real temper but she does seem to stay mad.*

What's the worst that could happen? 'Would I still live through it?' _____ *...I'd lose my best friend.*

What's the best that could happen? _____ *...She'll see I backpedal away and apologize.*

What will probably happen? _____ *...She'll not have to call for a few days and then I'll call her.*

What will happen if I keep telling myself the same thoughts? _____ *...I'll keep feeling really upset.*

What could happen if I changed my thinking? _____ *...I could feel better, maybe call her sooner.*

What would I tell my friend _____ *Emily* if this happened to him/her? _____ *...Just sorry, but she'll also skip and call.*

What should I do now? _____ *...Call a different friend.*

How much do I believe the negative thought now? a little medium a lot (or rate 0-100) _____

How strong is my negative feeling now? a little strong medium very strong (or rate 0-100) _____

This is the handout we are using in the next section. Please find it to follow along.

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WITH MINDFULNESS

Next on the agenda is talking about realistic thinking. Realistic, balanced thinking is about challenging your thinking to see if there are other ways to look at a situation. It's also realizing that having a thought does not make that thought true. You can ask yourself, "Is my thinking helpful? Is it biased?"

If you examine your thoughts carefully – there may be some truth to them, but is there an overly negative slant?

A thought record is a tool that you can use to help you become aware of your thinking patterns and notice if there are any thinking traps.

Testing Your Thoughts

What is the situation?

What am I thinking or imagining?

How much do I believe it?

A little, medium, a lot (or rate 0-100)

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One of the core tools of CBT is the Testing Your Thoughts worksheet (also called a Thought Record), which is an exercise in balanced thinking.

Let's go through this together. Start by looking at the copy with the italicized example of "Joanne yelled at me."

In any situation, when you are very upset, there is often more than one negative thought in your head. The exercise is to review the situation and pick one thought. In this example, the thought that is coming up is "she'll never call me again." This is the thought that we'll be examining and testing in this exercise.

Testing Your Thoughts

How does that thought make me feel?

angry, sad, nervous, other...

How strong is the feeling?

a little, medium, very strong (or rate 0-100)

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The next few questions examine the intensity of feelings. Only one feeling is examined at a time in Testing Your Thoughts. The example shows us that “She’ll never call me again” is believed “a lot” and the feeling that comes from this thought is “sad”. The level of sadness is “very strong”. If you prefer, when filling out your own Thought Record, you can rate these on a scale from 0-100.

Testing Your Thoughts

What makes me think the thought is true?

What makes me think the thought is not true or not completely true?

What's another way to look at this?

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The next step is to examine the evidence for and against the thought “she’ll never call me again”. The question “What makes me think this thought is true?” is asked in order to examine the evidence in support of the thought. The next question, “what makes me think the thought is not true or not completely true” looks for evidence against the thought “she’ll never call me again.”

This exercise helps you train your mind to see different perspectives of the same situation. The next question is meant to examine what is likely, and to look for alternative explanations for the thought “she’ll never call me again.”

Testing Your Thoughts

What's the worst that could happen?

Would I still live through it?

What's the best that could happen?

What will probably happen?

What will happen if I keep telling myself the same thought?

What could happen if I changed my thinking?

What would I tell my friend if this happened to them?

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The next couple of questions look at the best and worst case, as well as what is most likely to happen. Again, these questions are meant to help you look at a situations from multiple points of view.

The question “what will happen if I keep telling myself the same thought?” is an important one because if I keep telling myself “she’ll never call me again” I will continue to feel very strong sadness. However, if I can work to change my thinking and see different perspectives of the same situation, “I could feel better, maybe call her sooner”.

Another way to test your thoughts is to think about what you might tell a friend in the same situation. Often we are kinder and more compassionate towards friends than we are to ourselves. I would talk to my friend “Charlene” and tell her “don’t worry, just wait two days and call”.

Testing Your Thoughts

What should I do now?

How much do I believe the negative thought now?

a little, medium, a lot (or rate 0-100)

How strong is my negative feeling now?

a little, medium, very strong (or rate 0-100)

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What should I do now? I should “call a different friend” – a great alternative to feeling sad about the thought Joanne will never calling me again.

When I test my thought again, I now believe the thought “she’ll never call me again” “a little” as opposed to “a lot” and my negative feeling (sadness) has gone from “very strong” to “medium”.

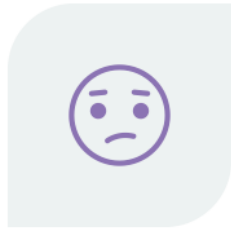
It is important to see that anxiety is still there, but it moved from high level to lower level.

This is the thought record. It is one of the core tools used in cognitive therapy.

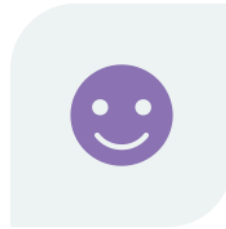
This exercise shows that it’s possible to work on changing thoughts and feelings to help yourself see things from another perspective and to feel better.

Remember, it takes practice! Try a new skill at least 6 times before deciding if it could be helpful!

Practice



IF YOU ARE ANXIOUS, SAD, OR
ANGRY NOW, DO A THOUGHT
RECORD ON THE CURRENT
THOUGHTS



IF NOT ANXIOUS, SAD OR ANGRY,
DO A THOUGHT RECORD
ON A RECENT SITUATION WHEN
YOU FELT THAT WAY

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Now we'll take a break and ask each of you to try doing a thought record on the blank Testing Your Thoughts Worksheet in your package.

It is a good idea to pick a thought that might be easier for you to tackle. For the purposes of this exercise, try not to pick a thought that is too complex; something like an argument with a friend or your spouse, or road rage would be good examples to work on. If you can't think of a situation, then it's ok to make one up in order to practice this tool.

If you are leading this class remotely, you might work on an example together with replies submitted via chat.

You might also cover examples of what doesn't work in this format:

Multiple thoughts (have to pick just one; write down a bunch then pick one)

Statements that are true like "work is hard" (may need to use the "downward arrow" technique to get at the worst thought)

Thinking Traps	Examples
Overgeneralizing Thinking that a negative situation is part of a constant cycle of bad things that happen. People who overgeneralize often use words like "always" or "never".	I wanted to go to the beach, but now it's raining. This always happens to me! I never get to do fun things!
All or Nothing Thinking (Black and White thinking) Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in black and white terms see a small mistake as a total failure.	I wanted to eat healthier, but I just had a piece of cake. This plan is a total failure! I might as well eat the whole cake!
Fortune Telling Predicting that something bad will happen, without any evidence.	I've been studying hard, but I know that I'm going to fail my test tomorrow.
Emotional Reasoning Believing that bad feelings or emotions reflect the truth of a situation.	I feel anxious when I fly, so airplanes must not be safe.
Labeling Saying only negative things about yourself or other people.	I made a mistake at work. I'm stupid! My boss told me that I made a mistake. My boss is a total jerk!
'Should' Statements Telling yourself how you "should" or "must" act. "Should" statements about ourselves lead to guilt. "Should" statements about others lead to anger and resentment.	I should be able to handle this without getting upset and crying!
Mind Reading Jumping to conclusions about what others are thinking, without any evidence.	My friend didn't stop to say hello. She must not like me very much.
Mental Filter Focusing only on the negative parts of a situation and ignoring anything good or positive.	I met a lot of great people at the party, but one guy didn't talk to me. There must be something wrong with me.
Catastrophic Thinking Exaggerating the importance of negative things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn't that bad.	I stumbled over my words during the presentation at work, so I'll probably lose my job.
Personalization You see yourself as the cause of some negative external event for which, in fact, you were not primarily responsible.	My husband looks irritable today. I must have done something to upset him.

Understanding Thinking Traps

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This is our next handout. Please find it to follow along.

Common Thinking Traps



There are some handouts that go along with this class. Take a look at the handout called “Healthy Thinking”. On page two of the handout is a list of Common Thinking Traps. (For an in person class (small or moderate size) we typically ask participants to take a turn reading the description and example aloud.)

We all have thinking traps! Those with anxiety and depression tend to have them more frequently, which can trigger and maintain anxiety and depression.

Overgeneralizing: Thinking that a negative situation is part of a constant cycle of bad things that happen. People who overgeneralize often use words like “always” or “never.” Example: I wanted to go to the beach, but now it’s raining. This always happens to me! I never get to do fun things!

All or Nothing Thinking (also called Black and White Thinking): Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in black and white terms see a small mistake as a total failure. Example: I wanted to eat healthier, but I just had a piece of cake. This plan is a total failure! I might as well eat the whole cake!

Fortune Telling: Predicting that something bad will happen, without any evidence.

Example: I've been studying hard, but I know that I'm going to fail my test tomorrow.

Emotional Reasoning: Believing that bad feelings or emotions reflect the situation.

Example: I feel anxious when I fly, so airplanes must not be safe.

Labelling: Saying only negative things about yourself or other people. Example: I made a mistake at work. I'm stupid! My boss told me that I made a mistake. My boss is a total jerk!

'Should' Statement: Telling yourself how you "should" or "must" act. "Should" statements about ourselves lead to guilt. "Should" statements about others lead to anger and resentment. Example: I should be able to handle this without getting upset and crying!

Mind Reading: Jumping to conclusions about what others are thinking, without any evidence. Example: My friend didn't stop to say hello. She must not like me very much.

Mental Filter: Focusing only on the negative parts of a situation and ignoring anything good or positive. Example: I met a lot of great people at the party, but one guy didn't talk to me. There must be something wrong with me.

Catastrophic Thinking: Exaggerating the importance of negative things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn't that bad. Example: I stumbled over my words during this presentation at work, so I'll probably lose my job, lose my house, and be living on the street.

Personalization: You see yourself as the cause of some negative external event for which, in fact, you were not primarily responsible. Example: My husband looks irritable today. I must have done something to upset him.

Practice

Go back to your thought record and identify which thinking trap (or traps) you notice



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Looking back on the Thought Record you completed, can you name the thinking trap that you were caught in?

[If leading the class remotely, ask participants to let you know via the chat.]

Don't be concerned if you can't say for sure which thinking trap it is; often there is more than one. The goal is just to recognize that there is a thinking trap at all.

Class Outline

Why These Classes?

Mindfulness

What is CBT?

Realistic Thinking

Skills Practice

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Let's move onto the Skills Practice for this upcoming week.

Skills Practice

Review materials

Mindfulness 5 min twice a day

One thought record & identify thinking trap(s)

Spend 15 min on anxietycanada.com or heretohelp.bc.ca

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WITH MINDFULNESS

Practicing the skills in this class are an important part of being able to use them to manage stress and build your resilience. This “skills practice” is not like the homework in school! You don’t need to hand it in, and no one will be marking it or evaluating it. The more effort and time you put into practicing, the more you’ll get out of these classes.

- The review and practice for upcoming week is:
 - To spend 10 minutes reviewing materials
 - Practice mindfulness meditation 5 minutes x twice/day
 - Complete one thought record + identify thinking trap(s)
 - Go online to Anxietycanada.com and/or HereToHelp.bc.ca and take a look at some of the resources there.
- Do you have questions about the review?

Resources

Anxiety Canada [www.anxietycanada.com]

Manitoba Health - <http://www.gov.mb.ca/health/mh/crisis.html>

Here to Help [www.heretohelp.bc.ca]

Mindshift app

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WITH MINDFULNESS

Here is a list of resources we referred to in class today, all of which are have hyperlinks.

Resources

Adult Mobile Crisis Unit (24/7) - (204-940-1781)

Klinik Crisis Line - (204-786-8686) OR (1-888-322-3019)

Crisis Response Centre - (204-940-1781)
→ Community Intake - (204-788-8330)

Manitoba Suicide Prevention & Support Line (24/7) - (1-877-435-7170)
→ <https://www.reasontolive.ca>

Addictions Foundation of Manitoba - (204-944-6200) OR (1-855-662-6605)

First Nations and Inuit Hope for Wellness Help Line - (1-855-242-3310)
→ An online chat feature is available on their website: <https://www.hopeforwellness.ca>

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

If you ever feel the need for help, the following resources are available to you in Manitoba

CBTm Class Evaluation



CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

[Your site may choose to collect feedback on what class participants think of today's content. *Evaluation of the CBTm Education Session* was developed for this purpose and can be found in the Facilitator's manual. If using it, you might say ...]

We're interested in what you think of today's session. Our classes have changed over time because of this feedback. Please complete the session evaluation form when you receive it.

[Some sites also want to evaluate if attending the sessions is helping their participants make desired changes. Some short, cost free questionnaires are recommended in the Facilitator's manual. If you are using some form of outcome monitoring, you might say ...]

We are interested in how you are doing and if the strategies taught here are making a difference. Thanks for filling out the tracking questionnaires. Sorry that these are a bit repetitious. We need to compare how you are doing over time to know if the strategies are helping.

[If you are not collecting any additional information from participants, you might change this slide to just say:]

THANKS!



[Version date, May 2022.]

Welcome to the second Cognitive Behaviour Therapy with mindfulness class.

[Facilitators and sites are welcome to add their names and contact information at the beginning of each presentation. Please see the empty textbox below the session number on the slide.]

Ground Rules

Respect others

Please respect everyone's confidentiality

Please do not share with the class personal stories of trauma or suicidal or violent thoughts

Talk to us

If you are distressed, please talk to staff members individually

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WITH MINDFULNESS

This is a class, so we encourage you to ask questions and share information about what's been helpful for you so that everyone in the class can learn from each other. However, because this is a large group, it's not the right setting to discuss personal trauma or suicidal or violent thoughts, which may be distressing to others in the group. If you're in crisis and need to talk about any of these things, please approach one of the facilitators during a break or after class.

Mindfulness

Class Outline

Review of Skills Practice

Review Realistic Thinking

Basics of Behaviour Therapy

Goal Setting

Skills Practice

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

CBT is an organized, structured approach. For each class there will be an outline of contents, a mindfulness exercise, review of material presented in the previous class (including review of last session's suggested skills practice), introduction of new material and new suggestions for skills practice.

Mindfulness Meditation – 5 min

Observe without judgment

Helpful for stress reduction

Apps

- Mindshift
- Mindfulness Coach

Anywhere, anytime

- Observe breath, object, activity, sounds

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Within CBT, there are multiple tools. One of them is helping people find ways to pause and relax. If you have problems with sleep, it can be helpful to do a relaxation exercise close to bedtime.

Mindfulness is a type of meditation practice. It focuses on being in the present moment, noticing our thoughts, feelings, sensations, without judging them. When feeling anxious, we are often thinking about the future. With depression, we are often stuck thinking about the past. Mindfulness helps bring you into the present. You can turn any daily activity into a mindfulness exercise by focussing on the present moment.

We will provide a different mindfulness exercise with each class so you have experience of a variety of methods, but there are other exercises that you can also try on your own to find out what works for you. To start, sit or lie in a comfortable position. Uncross your arms and legs. If sitting, rest your feet flat on the floor. Your eyes may be open or closed.

[For the mindfulness exercise either play Body Scan from the Mindshift App (Mindshift — Chill Zone — Body Scan) or use the following script.]

1. Notice the points of contact between that and your body.

2. Become aware of the sensations of your breath.

You may feel the breath going in and out of your nostrils, or passing through the back of your throat, or feel the chest or belly rising and falling.

3. When you're ready, move your awareness down into the big toe of your left foot.

Notice the sensations in your big toe with a sense of curiosity. Is it warm or cold? Now expand your awareness to your little toe, then all the toes in-between. What do they feel like? If you can't feel any sensation, that's okay.

4. As you breathe, imagine the breath going down your body and into your toes.

As you breathe out, imagine the breath going back up your body and out of your nose. Use this strategy of breathing into and out of each part to which you're paying attention.

5. Expand your awareness to the sole of your foot.

Focus on the ball and heel of the foot. The weight of the heel. The sides and upper part of the foot. The ankle. Breathe into the whole of the left foot. Then, when you're ready, let go of the left foot.

6. Repeat this process of gentle, kind, curious accepting awareness with the lower part of the left leg, the knee and the upper part of the left leg.

7. Gently shift your awareness around and down the right leg, to the toes in your right foot.

Move your awareness up the right leg in the same way as before. Then let it go.

8. Move up to the lower torso, the lower abdomen and lower back.

Notice the movement of the lower abdomen as you breathe in and out. Notice any emotions you feel here. See if you can explore and accept your feelings as they are.

9. Bring your attention to your chest and upper back.

Feel your rib cage rising and falling as you breathe in and out. Be mindful of your heart beating if you can.

10. Go to both arms, beginning with the fingertips and moving up to the shoulders.

Breathe into and out of each body part before you move to the next one, if that feels helpful.

11. Focus on your neck.

Move your mindful attention to your jaw, feel your lips, inside your mouth, your cheeks, your nose, your eyelids and eyes, your temples, your forehead and checking if it's frowning, your eyes, the back of your head, and finally the top of your head.

12. Gently bring your attention back to the room and slowly open your eyes.

Now that you have done the mindfulness exercise, do you feel more relaxed that you did 5 minutes ago? Do you feel more distressed or worked up? Do you feel no change? These are all normal responses. Different exercises work for different people. Anything new usually feels uncomfortable because it's unfamiliar. It gets easier with practice, just like any new skill. If you have been practicing mindfulness at home since the last class, what have you noticed about it?

Class Outline

Mindfulness

Review of Skills Practice

Review Realistic Thinking

Basics of Behaviour Therapy

Goal Setting

Skills Practice

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Now let's review the suggested skills practice from last class.

REVIEW OF SKILLS PRACTICE



Review
materials



Mindfulness
5 min twice/day



1 thought record



Spend 15 min on
anxietycanada.com
or **heretohelp.bc.ca**

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Skills practice, or trying things on your own, is a main component of CBT. The ideas are presented in class but the real work, to try out and establish a new skill, occurs in regular life. The more effort and time you put into doing the skills practice, the more you'll get out of these classes.

What did you learn from doing another thought record? Did you find it difficult to focus on just one thought? If so, try listing them all on another sheet and then pick out just one.

What did you learn from review of the two websites mentioned in the last class? Can you think of a reason why you might consult either website in future?

Class Outline

Mindfulness

Review of Skills Practice

Review Realistic Thinking

Basics of Behaviour Therapy

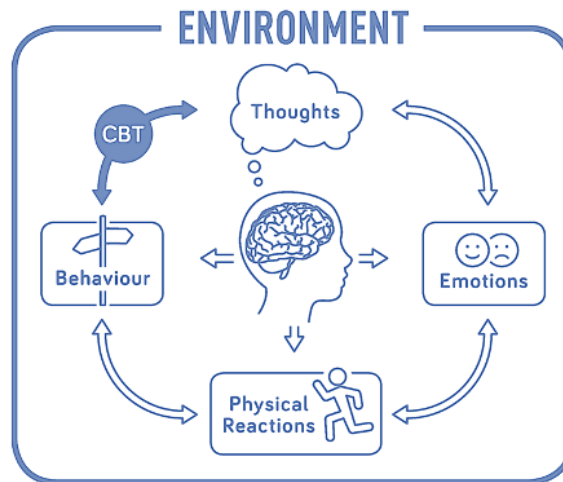
Goal Setting

Skills Practice

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Here we begin a review of the realistic thinking material that was presented last class.

The CBT Model



CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

This is a brief review of CBT theory from Class 1. Let's start at the top of the diagram and work our way around the circle.

THOUGHTS

In any situation, you have certain thoughts about the situation. What you think will affect how you feel. For example, if you are thinking "This makes sense. I get this." Then you might be feeling confident. If you think, "I have no idea what my thoughts are. How can I even begin to identify them." Then you might feel discouraged. Thoughts and feelings influence behavior, too, so if you thought "I don't know how to identify my thoughts" and felt discouraged, then you might drop out of the classes.

FEELINGS

There are 2 types of feelings: emotions and physical reactions. If I felt sad, my physical reaction might be tears. If I felt nervous, my physical reaction might be for my hands to shake. If I noticed my hands shaking when I had to give a speech, I might think "Everyone can see how nervous I am" and then feel even more nervous with worse shaking hands. You're beginning to see how everything affects everything else. Thoughts and feelings affect your actions and you might decide to cancel the talk.

Sometimes it's hard to decide if something is a thought or a feeling. What is "I feel stupid?" (pause) It's a thought, because "stupid" is a label or judgement. The emotion might be "confused" or "uncertain" leading one to judge oneself as "stupid".

To complete the circle, what you do, your actions, can change what you think and how you feel. For example, staying in bed all day when feeling discouraged sends yourself the message that you are not capable of doing things, and takes away any opportunities for positive experiences that could lift your mood. When you go out and interact with people, there are usually some positive experiences (social rewards), and you also send yourself the message that you're able to be active.

Cognitive Theory of Depression



- Negative view of self
- Negative view of others
- Negative view of future

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

For any situation, if you're feeling sad, anxious or angry, it can shift your thinking in a negative direction, consistent with your feelings.

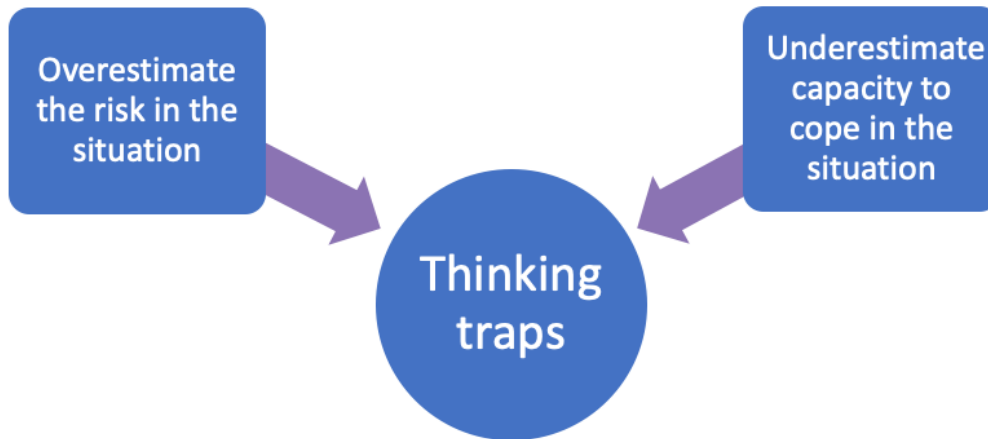
Feeling depressed, and the experience of depression, seems to be supported by some characteristic ways of thinking. When we start to think like this, we are likely to feel more depressed.

These characteristic thoughts, in response to a situation, are "It's me – there's something wrong with me"; "nobody understands" and "It will always be like this".

To resist depression, it's important to remind ourselves that

- Situations are complex, I'm only one part of the mix
- Others may not be aware of my concerns and might be helpful given a chance to understand, and
- Things are always changing, sometimes for the worse and sometimes for the better

Cognitive Theory of Anxiety



CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

The idea that we develop thought habits or thinking traps was presented in the last session. The experience of persistent anxiety often goes along with two specific, mutually supportive thinking traps – Overestimating the risk in a given situation and underestimating one’s ability to cope in that situation. Resisting anxiety means challenging oneself to a realistic estimate of the actual risks involved. As well as acknowledging the skills needed to do our jobs and manage our emotions. If I’m anxious because I think I will fail a test that I never studied for, have I made a realistic estimate of the actual risk? (pause) Yes, I’m likely to fail because I never learned the material. However, if I’m still very anxious despite lots of preparation, then I’ve likely fallen prey to the two thinking traps.

Common Thinking Traps



CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

You may pause and review these thinking traps.

CBT Myth

Myth Cognitive therapy is to help people think positively

Truth Cognitive therapy is to help people think flexibly and balanced

CBT is actually about thinking in a flexible, balanced and realistic way.

This concludes the review of material from the first class.

Class Outline

Mindfulness

Review of Skills Practice

Review Realistic Thinking

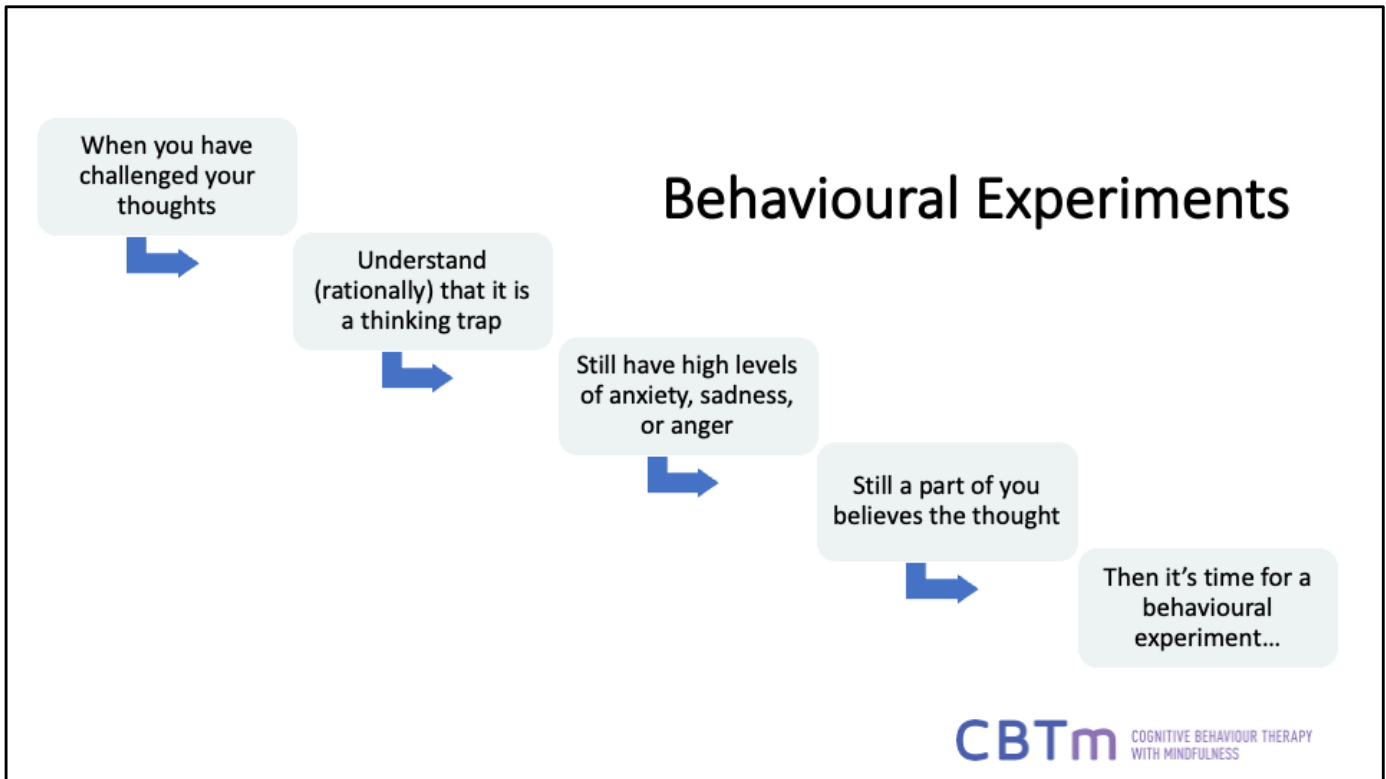
Basics of Behaviour Therapy

Goal Setting

Skills Practice

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Here we begin discussion of the first new topic in Class 2 – Basics of Behaviour Therapy.

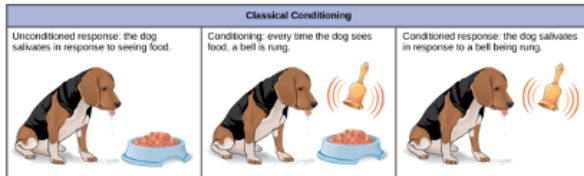


In the last class, we focused on becoming aware of our thinking patterns, noticing if there were negative judgements or biases in our thinking, and learning a tool to shift to more balanced thinking. That was the “C” in CBT.

In this class, we’ll look at our behaviour patterns. This is the “B” part of CBT. What do we tend to do when we have strong negative feelings or strong negative thoughts? Do our actions in these moments help or hinder our resilience to stress?

Behaviour therapy in general is set up like a scientific experiment. Our thoughts often include a prediction or hypothesis about what we think will happen if we choose to do something. For example, I might think “If I go back to school now I’m so far behind the times that I’ll look stupid”. If I do a thought record for this thought, I might realize that I would tell a friend “go and learn what you can, it will make you so much smarter.” And I might recognize that the thinking trap is Fortune Telling. Still, I’m nervous about taking this step. So...the potential is there to take this on as a behavioral experiment, to take the action and see if my prediction is proven or disproven.

Behavioural Experiments



- Can you test your thoughts?

- Prediction
- Experiment
- Outcome
- Learning

*Beginnings of behavioural therapy

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WITH MINDFULNESS

A behavioural experiment requires taking the prediction you are making in your thoughts and writing it down. Often we let these thoughts go unchecked and never call them into question. The next step is finding an opportunity to test the prediction and observe what really happens. We might think “If I make a mistake, people will laugh.” The way to test the prediction is find an opportunity to make a mistake and observe what people actually do. We might learn that others don’t notice or that they jump in to help, rather than laugh.

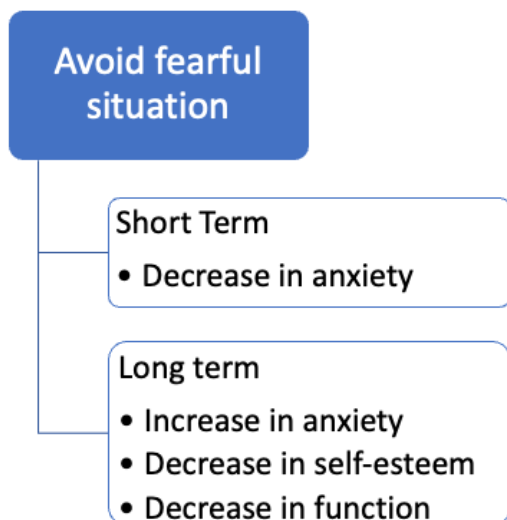
Another example of a behavioural experiment is provided in the handout (Next slide has handout)

<p>Prediction What is your prediction? What do you expect will happen? How would you know if it came true?</p> <p>Rate how strongly you believe this will happen (0-100%)</p>	<p>Prediction What is your prediction? What do you expect will happen? How would you know if it came true?</p> <p><i>If I speak in public I will shake so much that people will notice and laugh at me</i></p> <p>Rate how strongly you believe this will happen (0-100%)</p> <p>90%</p>
<p>Experiment What experiment could test this prediction? (where & when) What safety behaviors will need to be dropped? How would you know your prediction had come true?</p>	<p>Experiment What experiment could test this prediction? (where & when) What safety behaviors will need to be dropped? How would you know your prediction had come true?</p> <p><i>Speak up at the next meeting on Monday - I could present some of the data that I have been meaning to show. Would need to gesture with my hands, and not hold on to the table I could ask my friends if they noticed me shaking when I talk</i></p>
<p>Outcome What happened? Was your prediction accurate?</p>	<p>Outcome What happened? Was your prediction accurate?</p> <p><i>I was really nervous and was very aware of my hands My friends said I spoke well and that they could not see me shake</i></p>
<p>Learning What did you learn? How likely is it that your predictions will happen in the future?</p> <p>Rate how strongly you agree with your original prediction now (0-100%)</p>	<p>Learning What did you learn? How likely is it that your predictions will happen in the future?</p> <p><i>Although I feel nervous when speaking it's not as obvious to other people</i></p> <p>Rate how strongly you agree with your original prediction now (0-100%)</p> <p>50%</p>

BEHAVIOUR THERAPY
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This handout describes the basic strategy of a behavioural experiment. There is more information to come about how this applies to times when we feel worried or really discouraged.

Behavioural Theory of Anxiety

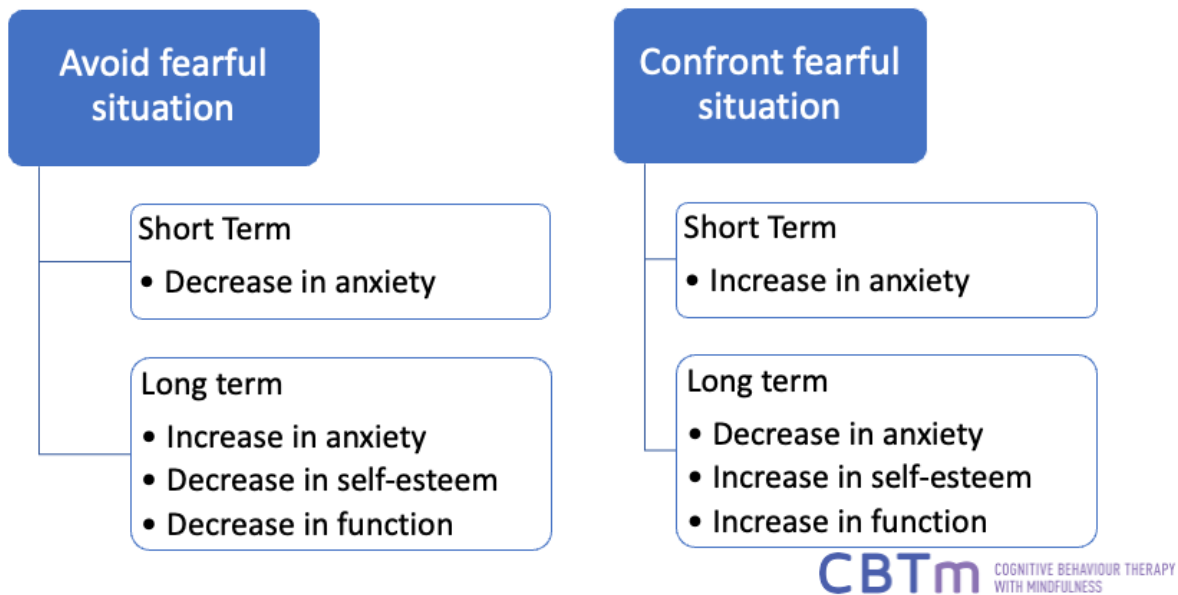


CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Science has quite a lot to tell us about how we, human beings, react to things we fear, whether these situations are truly dangerous or we imagine them to be. The behavioural reaction to a situation that causes anxiety is often avoidance. In the short-term, we may feel great relief to have avoided this situation but in the longer term the avoidance may cost us. The anxiety will still be there the next time we're in that situation and we may begin to think of ourselves as less capable, and actually become less capable over time if we continue to step away. Avoiding the situation stops us from learning that our prediction may not be true, the situation may not be as dangerous as we imagine, and we actually may be able to cope with whatever difficulties come along.

For example, we might think that flying is very dangerous and avoid taking planes. In fact, statistics show that more people are injured driving cars than from flying. If we avoid flying, we remain just as frightened, we never learn that we can find ways to manage the anxiety and we lose the ability to easily travel long distances.

Behavioural Theory of Anxiety



If we choose to confront a situation that causes anxiety, the gains can be substantial, provided we keep the following in mind:

- It's important to know that anxiety is unpleasant but not dangerous. Anxiety/fear is a signal of danger but is not dangerous itself.
- Avoidance feels good in the short term! That's why avoidance patterns are so hard to break. It's perfectly natural to want to avoid something that triggers anxiety in you.
- However, in the long term avoidance leads to increased anxiety, decreased self-esteem, and decreased function.
- Facing the feared situation leads to anxiety in the short-term. That's why it's difficult to do on your own, and you need strategies and support.
- However, in the long term facing your fears leads to decreased anxiety, increase in self-esteem and increase in function.
- When your anxiety gets triggered in a situation that is not actually dangerous (or very unlikely to be dangerous), given some time the anxiety will go down on its own without you doing anything to change it.
- When you face a fear, you learn that it's not as dangerous as you thought, and you also learn that you have a greater ability to cope than you thought!

Exposure



Facing your fears
in a planned and
repeated
manner

Starting with
fears that are a
3-4 out of 10 for
an anxiety rating

Delay the
avoidance

If possible stay in
the anxious
situation for 30
min or until
anxiety drops by
50%

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Exposure is the primary behavioural tool in anxiety treatment and is a very powerful strategy. The basic idea is to set up a way to face your fears in a series of thoughtfully planned steps.

First, rate your anxiety in the situations you are avoiding on a scale of 0-10, where 0=no anxiety and 10=overwhelming panic.

Then, start exposure practice with a situation that triggers 3/10 level of anxiety, and keep repeating the exposure exercise until your anxiety drops to 1-2/10. At that point, it's time to pick another situation that causes 3/10 anxiety, and so on, to progress towards your goal.

Stay in the situation without doing anything to try to reduce anxiety (For example, distracting yourself, holding a lucky rabbit's foot or taking a pill) for 20-40 minutes or until the anxiety drops substantially, by at least 50%.

Our bodies know how to bring us back to our regular physiologic state; it's called homeostasis.

Anxiety/fear is a signal of danger but is not dangerous itself.

We are all built with the fight/flight/freeze reaction. Any situation that we fear will set off this reaction, causing our heart to pound and our breathing to quicken. The reaction is not dangerous and will diminish in its own time, returning us to homeostasis.

There are two handouts for this class that give a lot more information:

What is Exposure Therapy? - 1 page

Facing Your Fears: Exposure - 3 pages

What is Exposure Therapy?

Exposure therapy is the most effective psychological treatment for anxiety. Exposure means 'facing your fears' and is the opposite of avoidance. When we avoid something that we fear, the fear only gets stronger by avoiding we don't get to learn anything about our ability to cope. If we confront our fears and learn that we can cope then we become more able to manage similar situations in the future. Exposure can be done to real situations or to imagined ones. In psychological terms exposure leads to the extinction of a learned fear response.

What is exposure used for?

Exposure is an effective treatment for any type of fear including:

- Phobias – fears of specific objects, events, or situations
- Post-traumatic stress disorder (PTSD) – fear associated with painful memories of traumatic events
- Panic attacks – fear of particular body sensations
- Obsessive compulsive disorder (OCD) – various fears, eg. of being contaminated, of causing harm to others

How exposure works

One helpful way to think about how exposure works is to consider memories. A scary event creates a 'fear memory' linking the object, event, or situation with a feeling of fear. This then activates the fear memory and make you feel afraid. It is not possible to get rid of old memories, but it is possible to create helpful new ones which will outnumber the old ones. Exposure therapy creates new memories linking the feared object, event, or situation with feelings of control, safety, or achievement. With successful exposure, whenever you are reminded of the object, event, or situation on your mind learns to recall a good memory and you feel ok.

Let's consider an example:

Step 1: Learning to be afraid of something

Bob is involved in a car crash. He feels very frightened at the time. A memory is created in Bob's mind which links cars with feeling afraid.



Step 2: The problem of fear

Memories of the crash activate Bob's fear memory and make him feel afraid. His fear means that he avoids travelling in cars or on the road. This avoidance means that he doesn't get to learn how safe travelling by car normally is.



Step 3: Exposure therapy

As part of his treatment Bob is gradually exposed to cars in a variety of different situations. Nothing bad happens so he begins to feel safer around cars. He starts driving again.



Step 4: Anxiety is reduced

Exposure doesn't make the fear memory go away, it just creates new 'safe' memories. In potentially scary situations the old fear memory and the new 'safe' memories 'compete' - whenever a reminder comes along Bob can be reminded of either the old fear memory or the new 'safe' memory. The more exposure therapy he has done the more positive memories he will have to rely on and the more capable he will feel.



Graded exposure

Graded exposure is a gentle way of facing your fears. Fears are faced in order of increasing intensity, starting with something that is not too scary. Steps for graded exposure:

- Identify a ladder of increasingly fearful situations
- Starting with the easiest, confront the object, event, or situation and stay there until your fear subsides
- Don't move up the ladder until you feel comfortable at each step

PSYCHOLOGYTODAYS

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Facing your Fears: Exposure

adapted from AnxietyBC

It's natural to want to avoid things that you fear. The purpose of fear is to alert us to when we're in danger and need to do something to protect ourselves. However, when our fear response is going off at the wrong time (when there is no danger or very little danger), the fear response itself becomes a problem. In this type of situation, avoidance leads to worsening anxiety, and prevents you from learning that the things you fear are not as dangerous as you think.

An important step in managing anxiety involves facing feared situations, places or objects, so that you can learn through experience that these situations are not as dangerous as your body thinks. The process of facing fears is called **exposure**. Exposure involves gradually and repeatedly putting yourself in feared situations until your fear level drops. Exposure is not dangerous to your health. After repeated exposures to a situation, your anxiety will naturally lessen.

It's important to start with small goals, with things that are not too frightening or overwhelming. After repeatedly facing things that are mildly scary, you will build confidence in those situations and will feel ready to gradually face more challenging situations over time. For example, if you have a fear of dogs, a first exposure goal might involve looking at pictures of dogs. Once you have done this repeatedly, any anxiety you have when looking at pictures of dogs will naturally lessen. Next, you could move on to watching videos of dogs on the internet, and keep doing that exposure activity until it no longer triggers much anxiety, and so on.

Exposure is very effective, but it takes planning and patience to make it work for you. Many individuals with anxiety have doubts about trying exposure. You might have tried it in the past and found it didn't work. However, you might have tried to face something too scary too soon, which can be overwhelming. Or, you might not have had a chance to practice repeatedly in order to get the benefits of exposure. Be willing to try again!

The following steps can help you make exposure work for you.

Step 1. Make a list

Make a list of situations, places or objects that you fear. If we go back to the example of dogs, the list might include: looking at pictures of dogs, watching videos of dogs, standing across the park from a dog on a leash, standing in the same room as a dog on a leash, standing a few feet from a dog or petting a puppy. If you're afraid of social situations, the list might include: saying 'hi' to a co-worker, making small talk with a cashier, going for coffee with coworkers, or calling a friend on the phone.

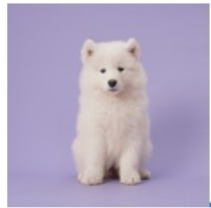
Tip: Group Fears Together.

Some people have a lot of different fears, so it can help to group similar fears or specific fear themes together. For example, if you have a fear of bugs and a fear of heights, make different lists for each of them.

CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

This is what it will look like in your handouts.

Exposure Example – Fear of Dogs



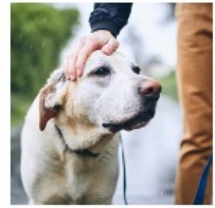
View pictures of dogs

View videos of dogs barking



Go near dogs in kennels

Pet small, cute dog



Pet large friendly dog

CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

The idea is to set up a series of steps that are within your control and not objectively dangerous (although they might be felt as dangerous) to get to the goal. In this example, the goal is being able to tolerate being around dogs. The handout <Facing your Fears> describes the steps followed in exposure therapy.

Exposure Example – Fear of Flying



Imaginal exposure



Writing script of worries



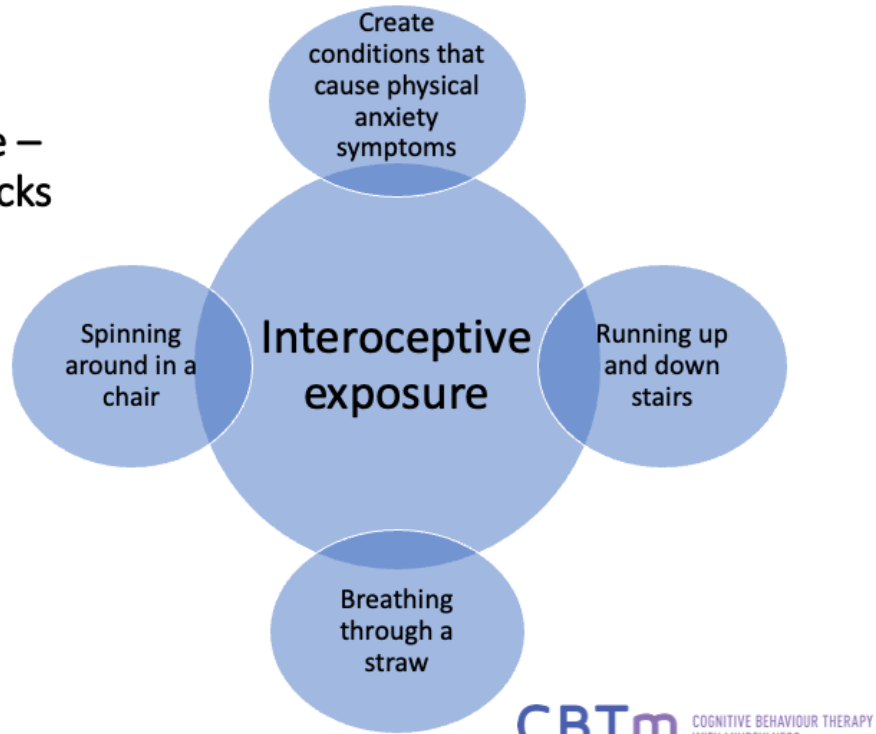
Mimicking conditions related to fear

E.g., crowded spaces, hard to escape, turbulence

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

In behavioural therapies, there are also creative ways to approximate situations so that people have a chance to practice tolerating thoughts or physical sensations that would otherwise cause them fear. This is done in a carefully planned way with an experienced therapist.

Exposure Example – Fear of Panic Attacks



A panic attack is the fight/flight/freeze response in its extreme. We can't get rid of these physical sensations because, at times, they happen naturally when we begin to experience fear. For those who have experienced a panic attack, a physical sensation, heart pounding for example, can trigger a thought like "Something bad is going to happen" or "I can't handle this." Which you also can see are predictions. A special type of exposure, interoceptive exposure, tries to mimic the physical sensation, so it is possible to disprove the prediction and learn that the unpleasant sensation can be tolerated.

Behavioural Theory of Depression

The individual is not getting enough positive feedback from his or her environment

Avoidance

Feeling down

Further avoidance

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Avoidance is also a factor when we're feeling down and discouraged. While we may not be experiencing outright depression, our actions may follow a similar pattern, and we step back. In the short run, life is a bit simpler and it may be easier to cope. In the longer term, we can cut off a sources of positive interactions and enjoyment.

Behavioural Activation

Begin

- Begin doing things you used to enjoy, even if you no longer enjoy them as much or at all.

Don't wait

- Don't wait until you feel better to start doing things again!

Record

- Record your mood when you are not active and compare it to when you are active.

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

The rationale behind behavioural activation (another type of behavioural experiment) is not to wait until you feel better to do things, do these anyway– even if you don't feel like it, or if you don't enjoy it as much or at all.

Engaging in hobbies and interacting with friends can provide satisfaction that will help lift your mood and rebuild your confidence. A simple behavioural experiment is to record your mood before an activity and compare it to how you feel during or after the activity. If you need some ideas about possible activities, look at the handout. Behavioural activation: Fun and Achievement for the fun activities catalogue. There are 185 ideas for activities listed.

Getting Started With Behavioural Activation

Fun Activities Catalogue

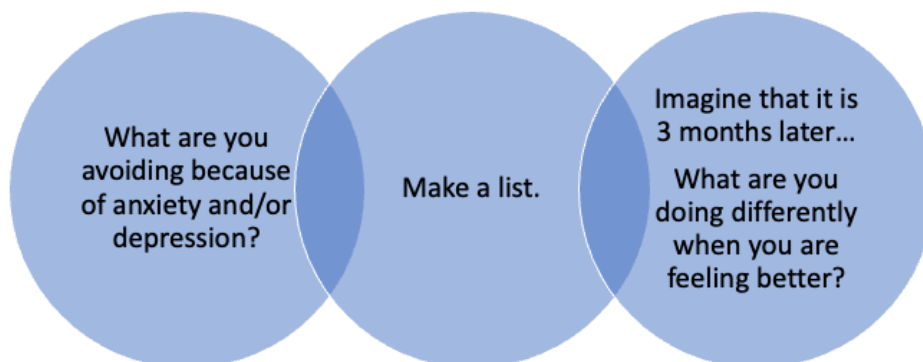
The following is a list of activities that might be fun and pleasurable for you. Feel free to add your own fun activities to the list.

1. Soaking in the bathtub
2. Planning my career
3. Collecting things (coins, shells, etc.)
4. Going for a holiday
5. Recycling old items
6. Relaxing
7. Going on a date
8. Going to a movie
9. Jogging, walking
10. Listening to music
11. Thinking I have done a full day's work
12. Recalling past parties
13. Buying household gadgets
14. Lying in the sun
15. Planning a career change
16. Laughing
17. Thinking about my past trips
18. Listening to others
19. Reading magazines or newspapers
20. Hobbies (stamp collecting, model building, etc.)
21. Spending an evening with good friends
22. Planning a day's activities
23. Meeting new people
24. Remembering beautiful scenery
25. Saving money
26. Card and board games
27. Going to the gym, doing aerobics
28. Eating
29. Thinking how it will be when I finish school
30. Getting out of debt/paying debts
31. Practising karate, judo, yoga
32. Thinking about retirement
33. Repairing things around the house
34. Working on my car (bicycle)
35. Remembering the words and deeds of loving people
36. Wearing sexy clothes
37. Having quiet evenings
38. Taking care of my plants
39. Buying, selling stocks and shares
40. Going swimming
41. Doodling
42. Exercising
43. Collecting old things
44. Going to a party
45. Thinking about buying things
46. Playing golf
47. Playing soccer
48. Flying kites
49. Having discussions with friends
50. Having family get-togethers
51. Riding a motorbike
52. Sex
53. Playing squash
54. Going camping
55. Singing around the house
56. Arranging flowers
87. Buying clothes
88. Working
89. Going out to dinner
90. Discussing books
91. Sightseeing
92. Gardening
93. Going to the beauty salon
94. Early morning coffee and newspaper
95. Playing tennis
96. Kissing
97. Watching my children (play)
98. Going to plays and concerts
99. Daydreaming
100. Planning to go to school
101. Thinking about sex
102. Going for a drive
103. Listening to a stereo
104. Refurbishing furniture
105. Watching TV, videos
106. Making lists of tasks
107. Going bike riding
108. Walks on the riverfront/foreshore
109. Buying gifts
110. Travelling to national parks
111. Completing a task
112. Thinking about my achievements
113. Going to a footy game (or rugby, soccer).

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WITH MINDFULNESS

You may find it helpful to review this list for ideas.

What are you avoiding?



CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Now that the basics of behavioural strategies to treat anxiety and depression have been described, we suggest putting these ideas to use to assist your own stress management.

Complete this exercise now. Write down two activities or tasks that are important to you but you are avoiding due to worry or discouragement. Now imagine that three months have passed and your worry and discouragement have vanished. What do you want to see yourself capable of doing with respect to these activities? Can there be a series of smaller steps along the way leading to how you would ultimately like to see yourself functioning? Is there a step that rates no more than 3 of 10 for anxiety? Is there a step that you can do this coming week? Regular, consistent practice in small, manageable steps will help you progress to your overall goal.

The next section will help you be very specific about manageable steps to make progress.

Class Outline

Mindfulness

Review of Skills Practice

Review Realistic Thinking

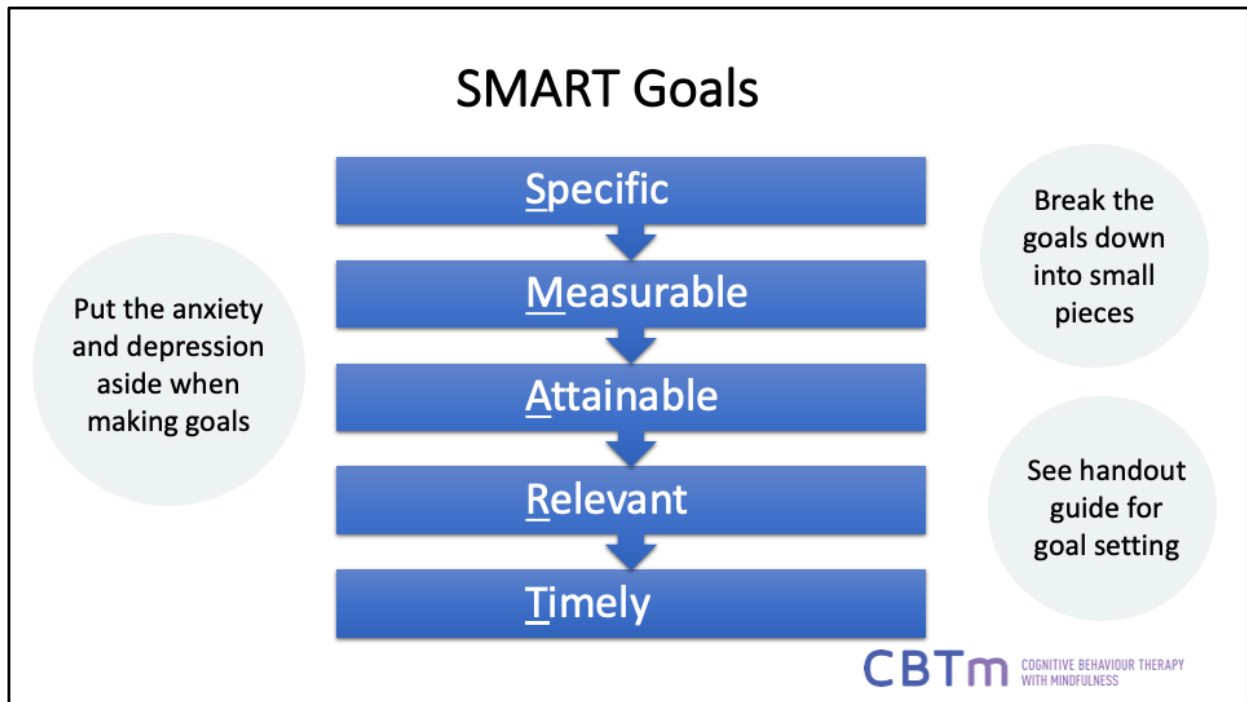
Basics of Behaviour Therapy

Goal Setting

Skills Practice

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Here we begin discussion of the second new topic in Class 2 – Goal Setting.



Setting good goals for yourself requires a bit of thought. Since our energy is precious, it's important to focus on things that are key problems.

- See <Guide for Goal Setting> from AnxietyCanada for a good description of how to begin when you're not sure where to start.
- Try to choose goals that are related to your feelings of stress, anxiety or discouragement. That way, you are working on the problem at it's source.
- What have you been avoiding? Do you want to start doing any of those things in a small way?

If the answer is "Yes" turn that into a SMART goal.

Specific means what,

Measureable is where, when, how often and other quantifiables

Attainable means there is a 90% likelihood it can be done this week. "Run 10k" may not be attainable but "Walk on the treadmill for 10 minutes" might be

Relevant means this activity contributes to achieving your overall goal.

Timely means you are ready and the activity can be incorporated into your schedule now. For example, if you were recovering from the flu, "walk on the treadmill for 10

minutes” might be best left until next week.

Examples

Poor Examples of Goals	Good Examples of Goals
<ul style="list-style-type: none">• Eat better	<ul style="list-style-type: none">• Eat at least one piece of fruit each day
<ul style="list-style-type: none">• Go back to school	<ul style="list-style-type: none">• Take a writing course at the community college in September
<ul style="list-style-type: none">• Meet new people	<ul style="list-style-type: none">• Sign up for a hiking course and have a conversation with a new person on every hike
<ul style="list-style-type: none">• Save money	<ul style="list-style-type: none">• Put \$100 in my savings account each month
<ul style="list-style-type: none">• Travel	<ul style="list-style-type: none">• Go on a trip to Paris for my 40th birthday
<ul style="list-style-type: none">• Be less anxious	<ul style="list-style-type: none">• Practice relaxation exercises once a day
<ul style="list-style-type: none">• Practice exposure exercises	<ul style="list-style-type: none">• Complete exposure exercises weekdays between 7 and 9 pm

Using the SMART criteria, can you explain what makes the goals on the right the better ones? Can you identify the SMART components in the better goals?

We often want to make changes in our life, but sometimes don't know where to start. Goal setting can help you identify where you want to go and the steps needed to get there.

How To Do It

STEP 1. IDENTIFY YOUR GOALS

Take some time to think about the things that you would like to do or that you want to change in your life. Try to identify some short-term goals (for example, things you would like to work on over the next couple of weeks or months), medium-term goals (for example, things you would like to be able to do in six months or a year from now) and long-term goals (for example, things you are hoping to accomplish in your life-time). Goals can be related to a variety of life areas such as:

- Relationships (friends and family)
- Career/School
- Finances
- Health
- Lifestyle
- Personal development

Tip: People who suffer from anxiety problems often limit their lives because of anxiety. When trying to think of your goals, imagine a life without anxiety. What would you like to be able to do? You can use goal setting as a way to help you practice your tools for managing anxiety, or to move forward with your life as your anxiety becomes more manageable.

Goals should be:

1. Realistic

Make sure that your goals are realistic and attainable. If you set your goals too high, it will be too difficult to accomplish them and your motivation will suffer. For example, if you have never worked out, expecting yourself to go to the gym for 1 hour 4 times a week is unrealistic. A more realistic goal would be to go to the gym once a week for 30 minutes. Your long term goal may be to go to the gym 4 times a week, but you need to start with smaller goals and work your way up to the long term goal.

Tip: People often have goals about never feeling anxious or making mistakes. However, these goals are unrealistic because it is normal to feel anxious, and everyone makes mistakes sometimes.

2. Concrete and Specific

More on SMART Goals

You are far more likely to accomplish your goals if you make them concrete and specific rather than vague. If goals are too vague, it will be difficult to determine what steps you need to take to accomplish them. If your goals are specific, it will be easier to know when your goals have been met. For example, "exercise more" is not a very good goal, because it is too vague. How will you know when you are exercising enough? How often do you want to exercise? For how long? "Exercise twice a week for 30 minutes" is a better goal because it is more specific - you will know exactly when you have completed it successfully.

Poor Examples of Goals	Good Examples of Goals
• Eat better	• Eat at least one piece of fruit each day
• Go back to school	• Take a writing course at the community college in September
• Meet new people	• Sign up for a hiking course and have a conversation with a new person on every hike
• Save money	• Put \$100 in my savings account each month
• Travel	• Go on a trip to Paris for my 40 th birthday
• Be less anxious	• Practice relaxation exercises once a day
• Practice exposure exercises	• Complete exposure exercises weekdays between 7 and 9 pm

Key: Write down your goals! You are more likely to stay on top of your goals if you make a list of them.

STEP 2. BREAK GOALS INTO SMALLER STEPS

Many goals can be broken down into smaller steps. This is especially true of medium and long term goals. For example, if your goal is to develop some friendships at work, an initial goal may

A good review of SMART goals is found in this handout.

Skills Practice

Thought records

Mindfulness 5 min twice a day

Make 1 specific goal and write it down

Check against SMART goals

- Specific
- Measurable
- Attainable
- Relevant
- Timely

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WITH MINDFULNESS

This concludes the new material for this session.

Skills practice is a main component of CBT, and a large part of the work occurs between sessions. The more effort and time you put into doing the practice, the more you'll get out of these classes.

Practice for upcoming week:

- Continue with completing a thought record, whenever you encounter a strong feeling (worry, discouragement, frustration, sadness).
- Mindfulness practice 5 minutes x twice/day
- Write down one specific goal for this week, and check to make sure it fits the SMART criteria. Use the <SMART goal worksheet> to record your goal. There is space for two goals but we've only asked for one.

Resources

Adult Mobile Crisis Unit (24/7) - (204-940-1781)

Klinik Crisis Line - (204-786-8686) OR (1-888-322-3019)

Crisis Response Centre - (204-940-1781)
→ Community Intake - (204-788-8330)

Manitoba Suicide Prevention & Support Line (24/7) - (1-877-435-7170)
→ <https://www.reasontolive.ca>

Addictions Foundation of Manitoba - (204-944-6200) OR (1-855-662-6605)

First Nations and Inuit Hope for Wellness Help Line - (1-855-242-3310)
→ An online chat feature is available on their website: <https://www.hopeforwellness.ca>

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WITH MINDFULNESS

Here is a list of resources that you may use if you ever feel the need for help.

Resources

Anxiety Canada [www.anxietycanada.com]

Manitoba Health - <http://www.gov.mb.ca/health/mh/crisis.html>

Here to Help [www.heretohelp.bc.ca]

Mindshift app

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Here is a continued list of resources that you may find useful.

CBTm Class Evaluation



CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

[Your site may choose to collect feedback on what class participants think of today's content. *Evaluation of the CBTm Education Session* was developed for this purpose and can be found in the Facilitator's manual. If using it, you might say ...]

We're interested in what you think of today's session. Our classes have changed over time because of this feedback. Please complete the session evaluation form when you receive it.

[Some sites also want to evaluate if attending the sessions is helping their participants make desired changes. Some short, cost free questionnaires are recommended in the Facilitator's manual. If you are using some form of outcome monitoring, you might say ...]

We are interested in how you are doing and if the strategies taught here are making a difference. Thanks for filling out the tracking questionnaires. Sorry that these are a bit repetitious. We need to compare how you are doing over time to know if the strategies are helping.

[If you are not collecting any additional information from participants, you might

change this slide to just say:]

THANKS!



[Version date May 2022]

Welcome to the third Cognitive Behaviour Therapy with mindfulness class.

[Facilitators and sites are welcome to add their names and contact information at the beginning of each presentation. Please see the empty textbox below the session number on the slide.]

Ground Rules

Respect others

Please respect everyone's confidentiality

Please do not share with the class personal stories of trauma or suicidal or violent thoughts

Talk to us

If you are distressed, please talk to staff members individually

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WITH MINDFULNESS

This is a class, so we encourage you to ask questions and share information about what's been helpful for you so that everyone in the class can learn from each other. However, because this is a large group, it's not the right setting to discuss personal trauma or suicidal or violent thoughts, which may be distressing to others in the group. If you're in crisis and need to talk about any of these things, please approach one of the facilitators during a break or after class.

Class Outline

Mindfulness

Review Behaviour Therapy

Review of Skills Practice

Healthy Living

Sleep

Skills Practice

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Similar to the previous classes, we will be practicing a mindfulness exercise, reviewing skills practice from last session. We will also be providing you with new material on healthy living strategies and sleep tips.

Mindfulness Meditation – 5 min

Observe without judgment

Helpful for stress reduction

Apps

- Mindshift
- Mindfulness Coach

Anywhere, anytime

- Observe breath, object, activity, sounds

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

We are now going to try a mindfulness exercise, which often can be helpful in taking a pause and relaxing. We will be talking about sleep today. If you have difficulties with sleep, you may want to try this exercise close to bedtime.

Mindfulness focuses on being in the present moment, and noticing our thoughts, feelings, and sensations, without judging them. When feeling anxious, we are often thinking about the future. With depression, we are often stuck thinking about the past. Mindfulness helps bring you into the present. Mindfulness can be practiced in hundreds of different ways. For example, you can slow down the drinking of a cup of coffee, noticing the warmth of the cup in your hands, its aroma and the taste as you take your first sips. Or you can pay attention when you are doing a chore, like raking leaves or outside tasks. Notice the crunching of the leaves and their shapes and colours. Also notice the air temperature on your face and the smells associated with the season, such as wood smoke or flowers in bloom.

Sometimes people think that if their mind wanders during mindfulness, that they're doing it wrong. But your mind will wander to other things and your job is to gently bring it back into focus. People get frustrated at the beginning. But it's important to remember that mindfulness takes practice.

We'll try one mindfulness exercise today, but there are also other choices that you can try on your own and find what works for you. To begin, sit or lie in a comfortable position. Uncross your arms and legs. If sitting, rest your feet flat on the floor. Your eyes may be open or closed.

*** Mindfulness Exercise – Engaging your senses ***

Imagine you are sitting or standing in the middle of a stream. The water is flowing away in front of you.

Notice if there is any sound from the running water. Notice if there are any trees, etc. on the banks of the stream.

Now see leaves floating down the stream away from you. They can be any shape, colour, or size. As thoughts come into your mind, be aware of what the thought is, and then place it on a leaf.

Now watch it float away down the stream. Do this with each thought as you notice it.

As you acknowledge each of your thoughts, you do not need to hang onto them. There is no need to become attached to the thought. Just acknowledge it and then place it on a leaf.

By watching it float away, it loses its hold on you and its intensity.

Do the same thing for each sensation or feeling that arises. Notice and label each experience as a thought, feeling, sensation, judgment, and place it on a leaf, watching it float down the stream.

When you are ready, begin to bring your awareness back to the feeling of your body on the chair, the sounds in the room, and slowly open your eyes.

Now that we've completed the mindfulness exercise, take a moment to ask yourself a few questions:

Do you feel more relaxed than you did 5 min ago? More distressed? 3) No different? Any answer is a normal one. Different people will have different reactions to the same exercise. And it is just important to try to stay present and aware during the exercise, without judging yourself.

As a practice opportunity, can you pick one relaxation exercise and practice it twice a

day for 5 minutes? We encourage you to try this

This practice has been incorporated into many types of treatment and can be useful for managing stress, coping with anxiety and depression, and managing chronic pain.

Class Outline

Mindfulness

Review of Behaviour Therapy

Review of Skills Practice

Healthy Living

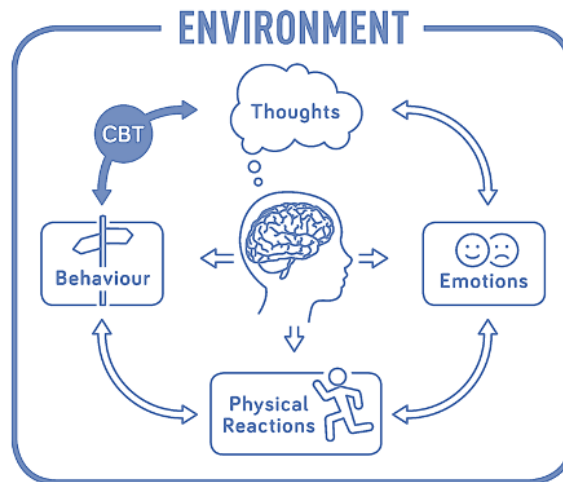
Sleep

Skills Practice

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Next, we'll review the basic concepts of behaviour therapy for anxiety and depression as discussed during Class 2.

The CBT Model



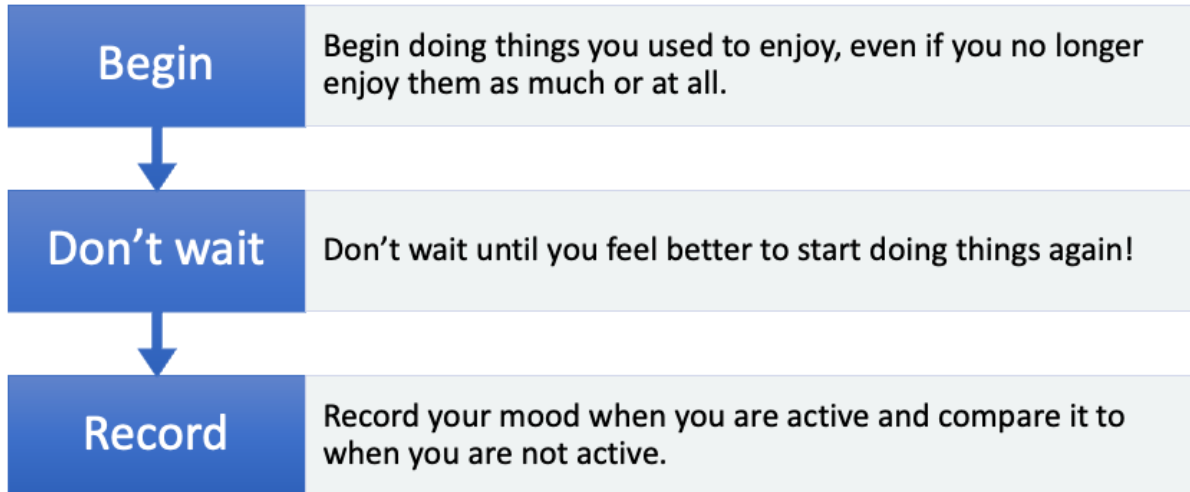
CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

You've seen this model before, in Classes 1 and 2. This is a brief review of Cognitive Behaviour Model.

It's important to understand this model because it can impact wellness and stress management. For instance, if you saw a friend across the street and they didn't say hello, you might think to yourself, "They are ignoring me. Did I do something wrong?" This might make you feel worried, which might produce physical reactions like your heart beating a little faster and having sweaty palms. This might lead you to lead you to ignore the person the next time you meet. What if however, you had thought, "maybe they didn't see me?" or "maybe they had a lot on their mind today". This might lead you to feel concern for them, or neutral. This might not affect your physical reactions and might lead to a behaviour of calling out to them and asking if everything is ok. Same situation, different thoughts, different feelings, different behaviours.

When we have negative feelings, it's hard to change them directly. But we have more control over thought patterns and behaviour patterns. CBT can help you shift to more balanced thinking and behaviours, which can improve your overall wellbeing.

Behavioural Therapy for Depression

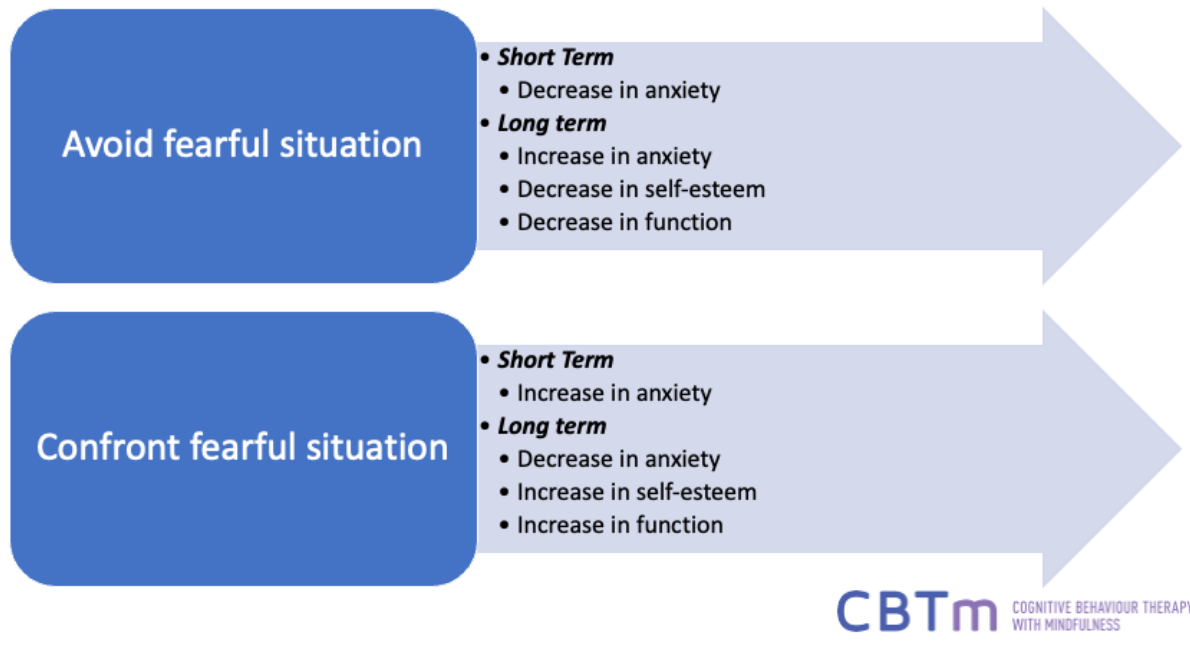


CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

As a brief review from last class:

- If you wait until you feel better to do things, you might not get all the way better and you might find yourself in negative behaviour cycle where you are avoiding activities until you are feeling happier. A tip is to decide to engage in regular and pleasurable activities anyway – even if you don't feel like it, or if you don't enjoy it as much or at all.
- This is because we know that doing things will help lift your mood, increase your energy and improve your motivation. If you've ever not felt like doing something (such as exercise), but challenge yourself to do it anyway and feel better afterwards, this is what we are referring to. This is called behavioural activation.
- Please review the behavioural strategies handout if you'd like more information.

Behavioural Therapy for Anxiety



Here, we're continuing our review and this slide summarizes about the behavioural theory of anxiety.

Science has quite a lot to tell us about how human beings react to things we fear, whether these situations are truly dangerous, or we imagine them to be. The behavioural reaction to a situation that causes anxiety is often avoidance. In the short-term, we may feel great relief to have avoided this situation but in the longer term the avoidance may cost us. The anxiety will still be there the next time we're in that situation and we may begin to think of ourselves as less capable, and actually become less capable over time if we continue to step away. Avoiding the situation stops us from learning that our prediction may not be true, the situation may not be as dangerous as we imagine, and we actually may be able to cope with whatever difficulties come along.

For example, let's look at a fear of public speaking which is one of the most common fears for people. If we continue to avoid public speaking, we may feel relief in the short term. But we might experience much more anxiety and a lack of confidence when we have to do it at an event that's important to us, such as speaking at a friend's wedding. However, if we challenge ourselves and take the opportunities to

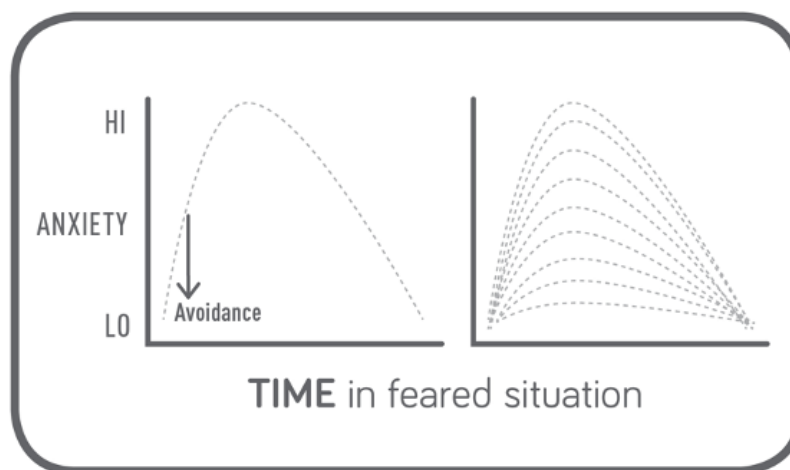
Speak up, we will eventually get more comfortable with speaking in front of others and our confidence will also increase.

Exposure

Delay the avoidance



If possible stay in the anxious situation for 30 min or until anxiety drops by 50%



*see handout

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Exposure is the primary behavioural tool in anxiety treatment and is a very powerful strategy. The basic idea is to set up a way to face your fears in a series of thoughtfully planned steps.

First, rate your anxiety in the situations you are avoiding on a scale of 0-10, where 0=no anxiety and 10=overwhelming panic.

Then, start exposure practice with a situation that triggers a level of anxiety that is approximately 3 out of 10. Keep repeating the exposure exercise until your anxiety drops to 1 or 2 out of 10. At that point, it's time to pick another situation that causes 3/10 anxiety and so on, to progress towards your goal.

Stay in the situation without doing anything to try to reduce anxiety (for example, distracting yourself with music or tv, holding a luck charm or drinking alcohol) for 20-40 minutes or until the anxiety drops substantially, by at least 50%.

Our bodies know how to bring us back to our regular physiologic state; it's called homeostasis.

Anxiety and fear are challenging, but it's important to remember that these are a signal of danger, but are not dangerous in themselves.

We are all built with the fight/flight/freeze reaction. Any situation that we fear will set off this reaction, causing our pulse to quicken and our breathing to become rapid. The reaction is not dangerous and will diminish in its own time, returning us to homeostasis.

Please read the handout <what is exposure therapy> from Class 2 if you'd like to read further on this topic.

As well, even if anxiety is not something in your life, understanding how exposure works can help get you back into activities in your life in a gradual way.

Review of Skills Practice

Thought records

Mindfulness 5 min twice a day

Make one specific goal and write it down

Check against SMART goals

- Specific
- Measurable
- Attainable
- Relevant
- Timely

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Skills practice, is one of the ways that you can try the skills we're presenting in CBTm Class. Skills practice at home gives you a chance to establish these new skills and be able to use them in your regular life. The more time and effort you can put into it, but more you'll get out of these classes.

What did you learn from setting goals for yourself? Were you able to hone your goal to fit the SMART criteria?

As a reminder, SMART stands for:

Specific, meaning try to make your goal as specific as possible

Measurable is the where, when and how often

Attainable is checking your goal to make sure it's not too challenging. You want to choose a goal that is 90% achievable.

Relevant means it's important to you, and fits your values.

Timely means you are ready to begin working on the goal now, and working on it can be fit into your schedule in a realistic way.

Group Discussion

Review of skills practice from last week



CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Were you able to do any of the skills practice from last class?

Congratulations! Keep up the good work.

Class Outline

Mindfulness

Review of Behaviour Therapy

Review of Skills Practice

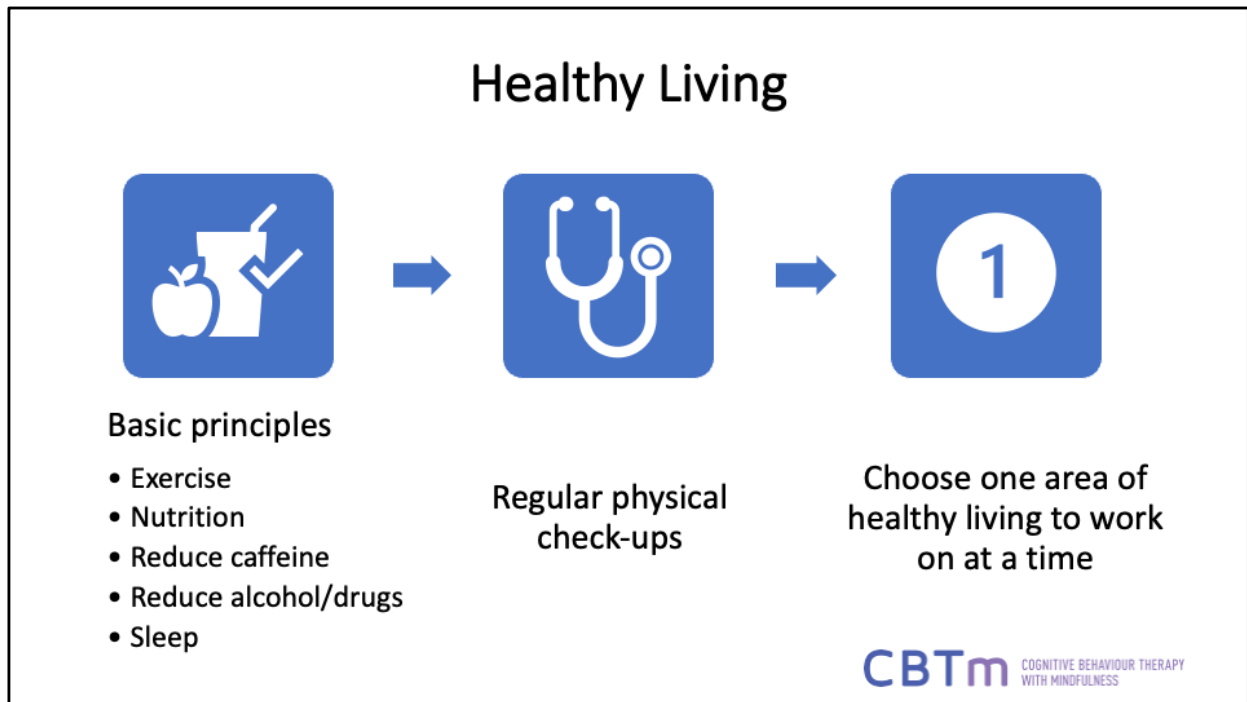
Healthy Living

Sleep

Skills Practice

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Let's begin to talk about the new material for Class 3: Healthy living.



Healthy living strategies are about being a detective about your own health, finding your right balance of food, exercise and stress management strategies for optimal mental wellness and resilience.

We know that the mind & body are fundamentally integrated; what affects one affects the other.

For instance, both anxiety and depression symptoms can occur in the context of physical illnesses, and the symptoms of some illnesses can feel just like anxiety and depression, e.g. thyroid disease. It's important to have a regular physical health review with your primary care provider.

The basic building blocks of physical and mental wellness are good self-care strategies: sleep, exercise, nutrition, reducing substance use (caffeine, alcohol, illicit drugs, nicotine).

We are going to mention many possible areas of attention and change. Much of this information you might already have heard. Some of it may be new. Remember, we only want you to consider a change if you think there is a difficulty to resolve. And to

take on changes one at a time.

Exercise

Physical and mental health benefits

Mental health benefits happen faster

Exercise is the most underused antidepressant!

Rate your mood before and after exercise



CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

There are many health benefits to exercise, but we also know that anything good for your body, is also good for your brain.

The physical health benefits of exercise can take time and they have long term benefits over the lifespan.

But...science tells us that exercise has a measurable impact on our mental health almost immediately. The mental health benefits of exercise occur the same day and build over time – with regular exercise you will feel more substantial effects. You don't have to take our word for it! You can try a behavioural experiment: rate your mood when you've been doing no physical activity for hours, then rate it after you do some physical activity.

Something to keep in mind: Physical activity does not have to be high intensity and does not require a gym membership in order to have a positive impact on your mood! Walking for 20-30 min 3-4 times per week has benefits.

Nutrition

- Weight can be a major problem for people with anxiety and mood symptoms
 - Impact of illness, inactivity, medications...



Basic principles

Fruits, vegetables, protein, healthy fats
Minimize processed foods, especially sugars
Consider meeting with a dietitian

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Nutrition is another building block of mental wellness. What you put into your body affects how it functions, both physically and mentally.

For your brain to work properly, it needs good quality fuel!

- Most of us eat far too much sugar! This is a problem for mood regulation, as sugar causes energy spikes and drops, and can be a contributor to weight management issues.
- Try to minimize processed foods.
- Buying fresh fruit and vegetables can be expensive, but frozen is just as good and sometimes better.
- Getting enough protein does not have to mean eating meat, if you don't want to or can't afford it – nuts, nut butters, cheese, Greek yogurt, beans/legumes and eggs are all healthy sources of protein.
- Healthy fats come from fish, nuts, avocado

- When you eat well you feel better.

Nutrition - Ways to access a Registered Dietitian



Find a Dietitian <https://wrha.mb.ca/nutrition/dietitian/>



Dial a Dietitian 1-877-830-2892



Call your local Access Centre to self-refer for an appointment



Contact your primary care provider



Private practice Registered Dietitians for those with extended insurance benefits
<https://www.collegeofdietitiansmb.ca/find-a-dietitian/private-practice/>

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There are several ways to access a Registered Dietitian

You can visit the online website to find a Dietitian at: <https://wrha.mb.ca/nutrition/dietitian/>

Or Dial a Dietitian 1-877-830-2892, Callers will be connected to a registered dietitian, who will help guide callers to make the best decisions based on their needs.

You can also call your local Access Centre to self-refer for an appointment

Your primary care provider may be able to provide tips and recommendations

Lastly, for those with extended insurance benefits there is a website listed here where you can find private practice Registered Dietitians

<https://www.collegeofdietitiansmb.ca/find-a-dietitian/private-practice/>

Nutrition - Health Education Groups



Health Management Group Program Guide
<https://wrha.mb.ca/groups/>

Offers a variety of groups facilitated in-person, online or recorded sessions to view on your own schedule



Nutrition for Busy People

Addresses basic nutrition principles with lots of practical tips



Craving Change

Registered program to learn more about your relationship with food



Women's Health Clinic

Weight-neutral approach to a healthy relationship with food
204-947-2422 ext 537

or email:
whcdietitian@womenshealthclinic.org

CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

There are a number of Health Education Groups available to you.

Online you can access the Health Management Group Program Guide <https://wrha.mb.ca/groups/> They Offer a variety of groups facilitated in-person (when possible), on-line or recorded sessions to view on your own schedule

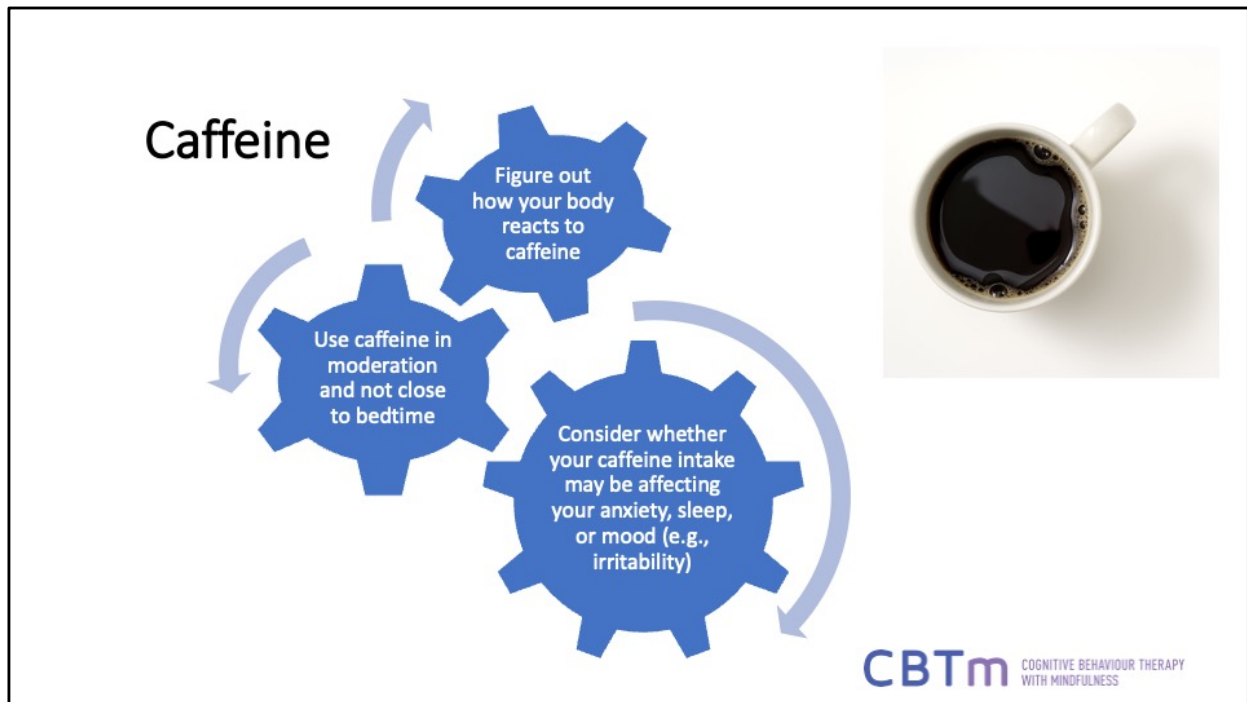
Another great resource is Nutrition for Busy People. It's a great group to address basic nutrition principles with lots of practical tips

Also - Craving Change is a registered program that focuses on around your relationship with food

Women's Health clinic offers Eat your Heart out a weight neutral approach to a

healthy relationship with food, 204-947-2422 ext 537 or email
whcdietitian@womenshealthclinic.org.

The contact details for everything we just mentioned will be on the “Class Resources” slide



Are you someone that drinks coffee or tea? Caffeine is a substance found in coffee, tea and many other “energy” drinks and foods.

- Any substance you ingest will have an impact on body functioning and mental functioning.
- But everyone is different, and how your mind and body react to a substance will be different than how someone else reacts to a substance. If your caffeine intake isn't a problem for you and it's not interfering with your sleep, there's no need to change it.
- Caffeine is a stimulant:
 - It acts like epinephrine, which is a chemical released in the body during the fight or flight response.
 - Caffeine can lead to increased alertness and physiological arousal.
 - It can also mimic the physiological effects of anxiety.
 - Caffeine can induce or heighten panic attacks.
 - It can also affect sleep: Be careful of a possible vicious cycle: feeling tired leads to increased caffeine in the morning (coffee or tea), which may lead to feeling jittery and overstimulated, which leads to trouble sleeping. Having difficulty

sleeping may lead to using sleeping meds, which leaves you tired in morning (groggy from meds or poor sleep), which brings you back to feeling tired and needing caffeine in the morning and the cycle keeps repeating.

Low Risk Guidelines for Alcohol Use



10

No more than 10 standard drinks per week, with

0-2

Drinks a day most days

The Centre for Addiction and Mental Health advocate these limits to avoid negative health effects from alcohol, including cancer and liver disease.

Low-risk drinking helps support healthy lifestyles.

19%

of drinkers consume above the recommended limits, according to CAMH



15

No more than 15 standard drinks per week, with

0-3

Drinks a day most days

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Science tells us that there are some possible cardiac benefits with low use of alcohol, but the benefits are not enough to recommend that anyone start drinking. The pros of drinking alcohol do not outweigh cons, so only drink alcohol if you enjoy it for its own sake.

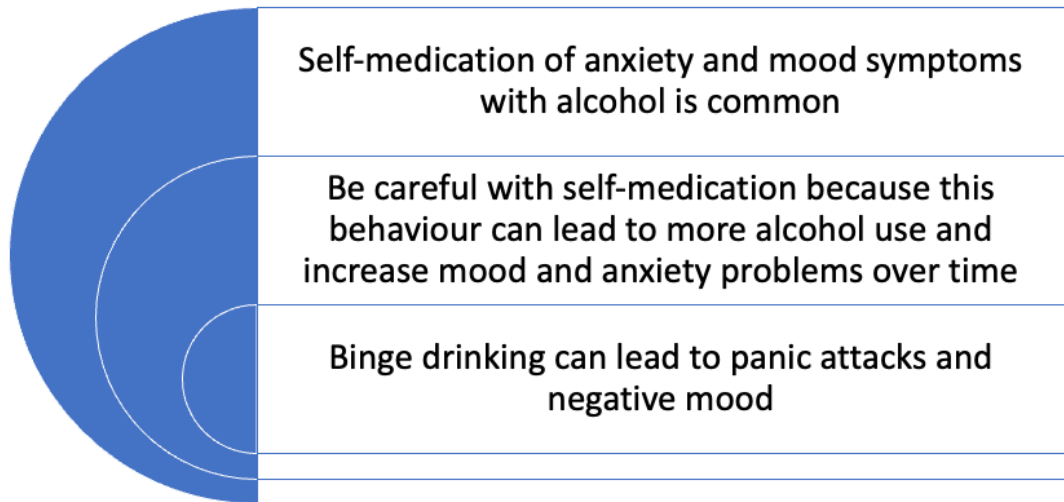
Alcohol is a depressant, and so it can negatively affect mood. The effect on your mood is not always obvious however; the drink(s) you have on Friday evening can cause your mood to be down the following Tuesday.

If alcohol is consumed in excess, it can chemically mimic depression.

Something to keep in mind is to follow the directions from your healthcare provider on the interaction of alcohol and medication; for example, there is a dangerous interactions with benzodiazapines (pams) – lorazepam, diazepam, clonazepam, etc.

And for individuals with anxiety, alcohol use can become a type of “chemical” avoidance: alcohol use may reduce anxiety in the short run, but increases it in the long run. Alcohol also interferes with learning.

Alcohol Use



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WITH MINDFULNESS

Using alcohol to help with mood can be problematic because it can lead to increased use over time in order to numb feelings and the problem can escalate.

The point of this discussion on healthy living and alcohol use is not to lecture, but to give you some food for thought for some areas of your life that you may want to tweak.

For more information and tips for what safer drinking means, please see the included handouts showing the recommended guidelines from CAMH.

More about low-risk guidelines for alcohol use...

For these guidelines, "a drink" means:

 Beer 341 ml (12 oz) 5% alcohol content	 Cider/ Cooler 341 ml (12 oz) 5% alcohol content	 Wine 142 ml (5 oz) 12% alcohol content	 Distilled Alcohol 69 ml (2.5 oz) 40% alcohol content
---	--	---	---

- YOUR LIMITS**
Reduce your long-term health risks by drinking no more than:
 - 10 drinks a week for women, with no more than 2 drinks a day most days
 - 15 drinks a week for men, with no more than 3 drinks a day most days
 Plan non-drinking days every week to meet developing a habit.
- WHEN ZERO'S THE LIMIT**
Do not drink when you are:
 - driving a vehicle or using machinery and tools
 - Taking medicine or other drugs that interact with alcohol
 - Doing any kind of dangerous physical activity
 - Living with mental or physical health problems
 - Living with alcohol dependence
 - Pregnant or planning to be pregnant
 - Responsible for the safety of others
 - Making important decisions
- PREGNANT? ZERO IS SAFEST**
If you are pregnant or planning to become pregnant, or about to breastfeed, the safest choice is to drink no alcohol at all.
- DELAY YOUR DRINKING**
Alcohol can harm the way the body and brain develops. Teens should speak with their parents about drinking. If they choose to drink, they should do so under parental guidance never more than 1-2 drinks at a time, and never more than 1-2 times per week. They should plan ahead, follow local alcohol laws and consider the **Safer drinking tips** listed in this brochure.
Youth in their late teens to age 24 years should never exceed the daily and weekly limits outlined in **Your limits**.

Low-risk drinking helps to promote a culture of moderation.
Low-risk drinking supports healthy lifestyles.

SAFER DRINKING TIPS

- Set limits for yourself and stick to them
- Drink slowly. Have no more than 2 drinks in any 3 hours.
- For every drink of alcohol, have one non-alcoholic drink.
- Eat before and while you are drinking
- Always consider your age, body weight and health problems that might suggest lower limits.
- While drinking may provide health benefits for certain groups of people, do not start to drink or increase your drinking for health benefits.

Low-risk drinking helps to promote a culture of moderation.

Low-risk drinking supports healthy lifestyles.

CCSA wishes to thank the partners who supported development of Canada's Low-Risk Alcohol Drinking Guidelines. For a complete list of the organizations supporting the guidelines, please visit <http://www.ccsa.ca/Eng/Topic/low-risk-drinking-guidelines/Pages/default.aspx>

Visit our website to find out more!
www.ccsa.ca

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Canada's LOW-RISK ALCOHOL DRINKING GUIDELINES

Drinking is a personal choice. If you choose to drink, these guidelines can help you decide when, where, why and how.

Canadian Centre on Substance Use and Addiction
Published in partnership with

You will be able to find the following guidelines in your handouts. We are learning more and more about the effects of alcohol use from studies that follow large numbers of people over time. These guidelines are developed using the results of such studies.

Drug Use

Same issues as self-medication with alcohol

Drugs (e.g., cocaine, meth) can cause panic attacks, worry and negative mood

Drugs can interact negatively with current medications you may be taking

Talk to your treating physician or family doctor for more information



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WITH MINDFULNESS

Self-medication for mood and anxiety symptoms using drugs is also common. Again, it's important to recognize that self-medicating can be problematic because it can lead to increased use over time and the problem further escalates.

Other drugs, such as cocaine and ecstasy can cause panic attacks, worry and negative mood.

These and other drugs can also have a significant impact on any current prescribed medications you may be taking, this can result in your medications not being able to function they were intended to.

If you are concerned about medications you're currently taking and how they may interact with other drugs, please talk to your treating physician and/or family doctor for more information and advice.

Cannabis Use



Despite legalization, regular use of cannabis can lead to adverse health outcomes, including symptoms of depression and anxiety (Canadian Centre on Substance Use and Addiction, 2020)

Lack of evidence showing long-term cannabis use can improve mood or anxiety symptoms (Lowe, et al. 2019)

Evidence shows cannabis use can intensify mood and anxiety symptoms (Black, et al. 2019; Lowe, et al. 2019)

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In 2018, non-medical cannabis became a legal substance in Canada and is now widely available. The following information is intended to provide you with information on the current state of research on the link between cannabis and symptoms of anxiety and depression.

Cannabis is still a substance that we don't have much long-term research on. More research is underway across Canada and the US, but for now, the literature suggests that there is no clear long-term benefit of cannabis on improving mood and anxiety symptoms.

In fact, the current evidence suggests that the regular use of cannabis for the treatment of mental health symptoms, including anxiety and depression, may intensify these symptoms over time.

Using non-medical cannabis is a personal choice that can have both short- and long-term effects on your health.

If this topic is a concern for you or you have further questions, please consult with your treating physician and/or family doctor to get more information. We have also

included recommended tips regarding cannabis use from The Centre of Addictions and Mental Health (CAMH) in your handouts if you're interested in learning more.

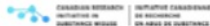
Canada's Lower-Risk Cannabis Use Guidelines (LRCUG)



Recommendations

- Cannabis use has health risks best avoided by abstaining
- Delay taking up cannabis use until later in life
- Identify and choose lower-risk cannabis products
- Don't use synthetic cannabinoids
- Avoid smoking burnt cannabis—choose safer ways of using
- If you smoke cannabis, avoid harmful smoking practices
- Limit and reduce how often you use cannabis
- Don't use and drive, or operate other machinery
- Avoid cannabis use altogether if you are at risk for mental health problems or are pregnant
- Avoid combining these risks

The LRCUG are an evidence-based intervention project by the Canadian Research Initiative in Substance Misuse (CRISM).



Reference: *American Journal of Public Health*, 2017

The LRCUG have been endorsed by the following organizations:



Lower-Risk Guidelines for Cannabis Use

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Find the following guideline in your handouts.

Healthy Living Goals

1

Choose one area of healthy living to work on at a time

2

Set yourself up for **SUCCESS!**


- 90% likelihood of completing the task

3

Choose something that you can easily do 3 times per week

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WITH MINDFULNESS

To sum up: if you're going to choose an area of healthy living to work on, use the SMART criteria to set some goals that are workable. Also, it's a good idea to choose one area of healthy living to work on at a time. When you've reached that goal, choose a new one to work on.

Tips for Healthy Living from AnxietyBC	Tips for Healthy Living from AnxietyBC
<p>Our lifestyle can have a big impact on how we feel. When we don't take care of ourselves, we can experience a number of problems, including sleep difficulties, fatigue, low energy, trouble concentrating, and increased tension and stress. These problems can leave us vulnerable to anxiety and depression. Making healthy choices will help you feel better. Remember, the goal of developing a healthy lifestyle is to help us function at our best, not to eliminate anxiety or sadness, because that would not be realistic. Having a healthy lifestyle puts us in a better position to manage the stresses of life. Here are some ideas for building a healthy lifestyle.</p> <ul style="list-style-type: none"> • Set a routine Establish a routine by setting specific times for meals, work, housework, quiet time, and bedtime. We feel more secure when there is some predictability to our day. It also helps us get things done and reminds us to take time for ourselves. Having a routine can help you to set the stage to better manage your anxiety or depression. • Regular exercise Regular exercise can have a positive impact on both your emotional and physical health. In fact, exercise is one of the most powerful tools for managing stress, anxiety and depression. However, it can be hard to start a regular exercise program. So, start small and work your way up. Aim for at least 20 minutes of physical exercise 3 to 4 times a week. You'll be more likely to stick with a program if you choose something you enjoy (such as skiing, hiking, gardening, or dancing). Try joining a gym, signing up for an exercise class, or finding a workout buddy. Find little ways to increase your physical activity. For example, park further away from the door, or take the stairs. • Eat healthy Having a well-balanced and healthy diet can make you feel better. Eat consistently throughout the day and don't skip meals. Your diet should include a variety of foods. Wondering how to eat healthier? Try to reduce your salt and sugar intake, eat more fruits and vegetables, and drink more water. Aim for 3 meals a day and 1 to 2 healthy snacks. For more ideas on how to improve your diet, talk to your doctor or a dietitian, or refer to the Canada Food Guide. • Get a good night's sleep Sleep difficulties can contribute to anxiety problems and make it difficult to cope. Aim to get about 7 to 8 hours of sleep a night. However, this is just an estimate. People differ on how much sleep they need and this amount can change with age. If you are experiencing sleep problems, talk to your doctor or refer to the sleep handouts. • Establish social supports It is important to have people in your life that you can count on. It helps to be able to talk to a friend when you have had a bad day or are struggling with a problem. Having a good social network has been linked to greater well-being. Having at least 1 good supportive friend can make a difference. 	<ul style="list-style-type: none"> • Learn to relax Using relaxation strategies can help lower your overall tension and stress levels. However, relaxation is more than just sitting on the couch watching television. What makes a difference is "deep" relaxation, which is the opposite of what your body experiences when it is under stress. Mindfulness exercises are tools to help your mind and body relax. • Manage your time Learning to manage your time more effectively can reduce stress. Use a day planner to schedule your activities. This will help you see if you're taking on too much, and help you make time for the things you need to do. Remember to schedule some time for relaxation and fun activities each day. • Reduce stimulants Excessive caffeine can lead to sleep problems and heightened anxiety. Try to reduce your caffeine intake, which includes coffee, some teas, soda, and chocolate. If you drink a lot of caffeinated beverages, it's better to gradually reduce the amount of caffeine that you have every day. Nicotine is also a strong stimulant. In addition to the health benefits, quitting smoking may also leave you less prone to anxiety. • Avoid alcohol and drugs It is never a good idea to use alcohol or drugs to help you cope with anxiety – this just leads to more problems. If you have problems with anxiety, try to avoid using drugs and alcohol as a way to cope with negative feelings. If you think that you may have a problem with drugs or alcohol, talk to your doctor. • Get a check-up Make sure you are taking care of your body. See a doctor for regular check-ups. • Reduce stress Sometimes life's demands become too much. Stress can have a negative impact on your health. Look for ways to reduce stress. Deal with problems, lean on supports, and take time for self-care. For instance, plan some time for yourself each day to read a book, go for a walk, watch a favorite TV program, or relax. You can also reduce stress by giving yourself a little extra time to get to places so that you're not rushing. Try giving yourself an extra 5 minutes – it can make a big difference! <p>HELPFUL HINTS:</p> <ul style="list-style-type: none"> • Start Small: Making small changes can have a large impact on your life. Don't try to do everything all at once. Instead, pick 1 or 2 things and try them consistently. When you're ready, try adding a new strategy. See Guide for Goal Setting handout. • Be Patient: These strategies can take time to have a positive effect. Hang in there and stick with it!
	

You can find a brief review of the presentation and some additional ideas in this handout.

Class Outline

Mindfulness

Review of Behaviour Therapy

Review of Skills Practice

Healthy Living

Sleep

Skills Practice

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WITH MINDFULNESS

Finally, we have included a section on sleep because so many individuals report difficulties with sleep, and it is so important for our overall health and well-being.

Sleep

Sleep problems are common in individuals who have mood and anxiety symptoms

Strong cognitive and behavioural components to sleep

CBT-I: special type of CBT for insomnia

Free app: **CBT-I Coach**

The Insomnia Workbook, S. Silberman

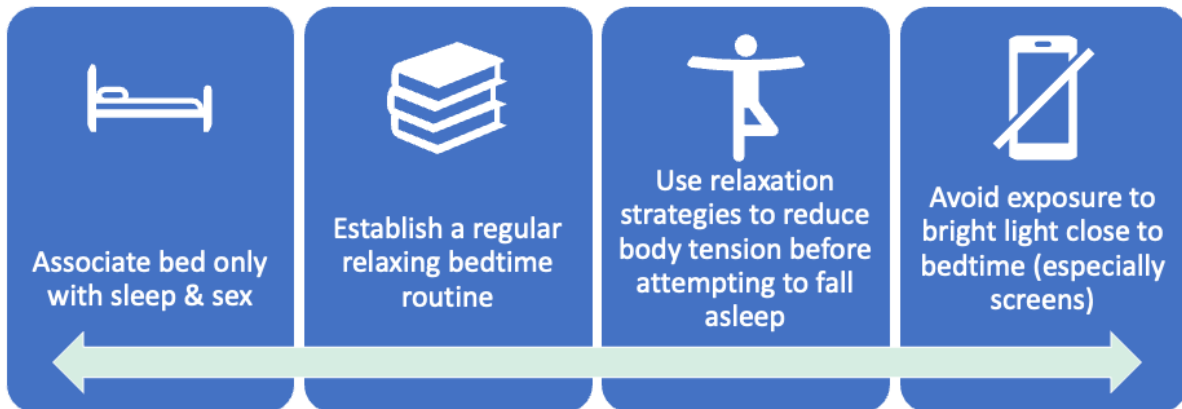


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WITH MINDFULNESS

Begin by asking yourself, “Do I get good quality sleep for a long enough time on most nights?”; “Is my sleep affected when I’m under a lot of stress?”

If so, here are some tips to help you work on sleep problems. However, it is also important to know that there is help out there especially for sleep! For example, CBT-I is a specific kind of cognitive behavioral therapy geared towards insomnia. There are also self-help resources you might want to try, like the CBT-I Coach app on your phone, or a workbook.

Sleep tips



CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

Many strategies for improving your sleep are about training your body to sleep by association and routine, as well as about limiting the amount of stimulation you are getting before bedtime (e.g., exercise, relaxation, lights). The strategies on the screen reflect these overall tips: Associate your bed only with sleep and sex, and not other activities. Establish a regular, relaxing bedtime routine, to cue you mind and body that it's nearing time to sleep. And avoid exposure to bright light close to bedtime, so that your brain doesn't get confused that it's still day and therefore, time to be awake.

A big part of treating insomnia is changing your relationship with sleep. When we work hard to go to sleep – and are unsuccessful – we can have negative thoughts about sleep, like “I should be sleeping by now, I need to get up in 3 hours!” as well as negative feelings about sleep like anxiety and frustration, which can make it harder to actually sleep. By training your body into good sleep habits, we take away some of the pressure on ourselves to sleep when and how we want to or “should” be sleeping.

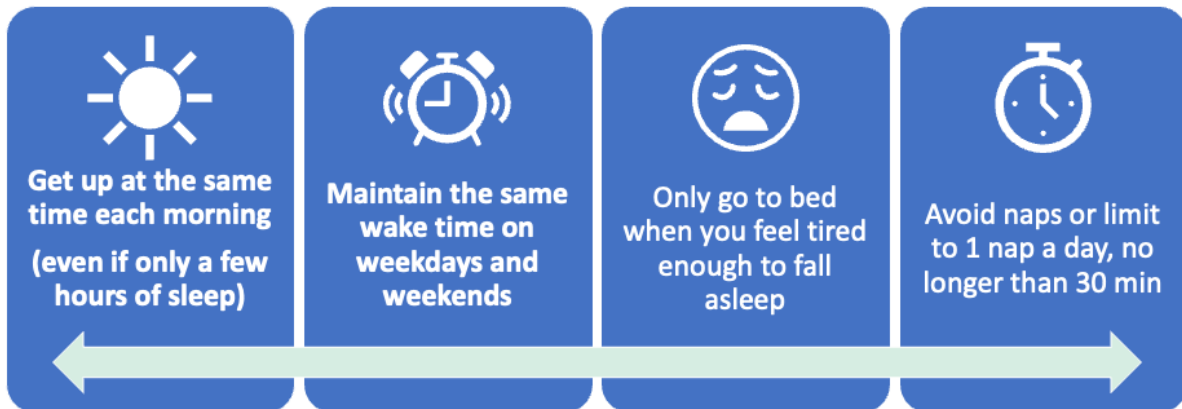
Sleep tips



CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Ensure that your sleep environment is the most effective that it can be for good sleep –that this space is relaxing, comfortable, dark, and quiet. We have covered the important stress reducing effects of exercise, and how regular exercise can be an important energy boost. However, consider the timing of your exercise, and try not to wake yourself up right before bed by engaging in vigorous activity. Eating large meals in the late evening will also keep your digestive working hard into the night which can impact sleep. Finally, caffeine and cigarettes are stimulants that can contribute to keeping you awake when you don't want to be, and alcohol, while a depressant, can reduce sleep quality.

Sleep tips



CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

The following two tips are so important for regulating sleep that we have bolded them. There is a myth about sleep out there that it is the time you go to bed that matters, that if you are sure to get to bed early on a regular basis that you'll get better sleep. In actuality it is the time that you wake up that is key, and specifically, the importance of waking up at the same time each morning. This is because your circadian rhythms are set based on your wake-up time, and so if you're waking up at the same time each day, you'll be getting sleepy at the same each night as well. Although this is not a popular tip, that is why the recommendation is to maintain the same wake-up time through the weekdays and weekends, and to avoid sleeping in. If you change your wake-up time, you will quickly disrupt your sleep pattern.

Another tip is to only go to bed when you feel tired enough to fall asleep. If we go to bed at the time, we think we "should" but before our bodies and minds are ready, we will just find ourselves awake and in bed getting more and more frustrated about why we are still not sleeping, which will keep us awake for longer, and this negative cycle could go on and on.

Finally, if you experience difficulties with sleep, we encourage you to avoid taking naps during the day, or to limit your naps to one short nap per day. Doing this will

help to consolidate all of your sleep to one period time (usually nighttime for most people) instead of spreading your sleep throughout the day.

Sleep tips



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WITH MINDFULNESS

We've talked a little bit already about how, if you lay in bed awake, you are likely to have negative thoughts about why you're not falling asleep, which will likely frustrate you more and more and keep you awake for longer. So, if you find yourself in bed and unable to fall asleep within 20 minutes, we recommend you actually get out of bed and leave the bedroom completely and engage in a relaxing activity for a little while before trying to go back to bed. You might fix yourself a cup of decaf tea, for example, or read a few pages of a book, but refrain from looking at a television, phone, or iPad screens, and from eating or smoking for the reasons that we discussed earlier. When you're starting to feel sleepy, try returning to bed, but repeat this pattern until you're able to fall asleep within 20 min.

Sleep tips for shift work

Alternate sleep times and napping

- 1 longer daytime sleep and smaller (20 min) nap

Sleep environment modifications

- e.g., black out curtains, white noise machines or fan

Nutritional suggestions

- If you're hungry before going to sleep, try having a light meal with healthy fats and low sugar, like eggs, nuts, and cheese, or toast with peanut butter

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WITH MINDFULNESS

Some of the previous sleep tips are about our routine and are great if you are a night sleeper. However, for shift workers, not all the previous tips will be doable or relevant for you. Now we'll go over some tips specific to shift workers.

Naps can be a restorative way to feel refreshed if you haven't slept well the night before. The key is to remember that you're not trying to "catch up" on all of the sleep that you've lost; you're trying to have a brief rest, wake up refreshed and be able to get through the rest of your day. Then you go to bed on your same schedule. If you're working shifts, the best kind of sleep is to try for one longer daytime sleep that will mimic a "night" sleep. If you have a second sleep in the day it should be shorter, more like a nap. That helps your body understand that it's had a longer sleep similar to a night and will help with your circadian rhythm. For shorter naps, 20 minutes is the recommended maximum length of time.

Your sleep environment should be cool, dark and quiet. It can be helpful to have a white-noise machine, especially during the day when there can be more street noise around you. It's difficult to turn our phones off, but it's important to allow yourself undisturbed time for sleeping, so try utilizing voicemail and setting alarms, but keeping your phone on silent while sleeping, if possible. As for light disturbances,

getting black-out curtains or using eye masks can help block out excess light. New pillows that support your body for chronic pain issues might also be a consideration.

As for nutrition, if you're working a night shift, you may choose to have caffeine at the beginning of or throughout your shift, but as mentioned previously, it's best to avoid caffeine as you get closer to the end of your shift, especially if you're caffeine sensitive. The same can be said for sugar-rich food, as these can keep you awake longer once you're off shift and ready to try sleeping. If you're hungry coming off a shift and need to eat before going to sleep, try to eat something light but with good nutritional value.

Sleep tips for nightmares

1

Talk to yourself rationally about the nightmare.

Resist catastrophic thinking.

2

Have a plan for calming your mind and your body.

Follow the plan.

Make it predictable and repetitive so you do not have to problem-solve.

3

Include your partner in the plan.

4

Use “white noise” to mask sounds that could be activating.

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

Some of you might experience difficulties with nightmares, which can be very distressing. You might wake up from these nightmares feeling fear and experiencing cold sweats and your heart beating quickly. If you experience nightmares, here are a few tips that we encourage you to try. 1) Try talking to yourself rationally about the nightmare (e.g., “I’m safe, that dream wasn’t real” etc.). 2) If you prepare a plan in advance for calming/relaxing things you can do after a nightmare, then when you wake up you will know exactly what to do. Making it predictable and repetitive will also help with this plan becoming automatic for you so that you don’t have to problem-solve in the moment when you’re feeling distressed and maybe disoriented. Maybe you will engage in a mindfulness exercise, or pet your dog/cat, or read a funny comic. If you have a partner, it would be helpful to include them in the plan so that they can support you and help remind you what you need to do. To end off this section, if there are sounds that are activating you and keeping you awake, like frequent sirens or the stairs creaking, consider using a white noise machine to mask out other noise.

If sleep is a problem for you...



Review sleep tips



Consider making one sleep goal



Does the goal meet SMART criteria?



Consider doing a sleep diary this week (handout)

<http://sleepfoundation.org/sleep-diary/SleepDiaryv6.pdf>

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

If you experience sleep difficulties, we encourage you to review these sleep tips over the coming week, and consider creating a SMART goal related to sleep to perhaps start putting some of these tips into practice. We also encourage you to consider completing a sleep diary in order to better understand what's getting in the way of good sleep for you.

Improving sleep

Daily Sleep Diary

Complete the diary each morning ("Day 1" will be your first morning). Don't worry too much about giving exact answers, an estimate will do.

Your Name _____ The date of Day 1 _____

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Enter the Weekday (Mon, Tues, Wed, etc.)							
1 At what time did you go to bed last night?							
2 After settling down, how long did it take you to fall asleep?							
3 After falling asleep, about how many times did you wake up in the night?							
4 After falling asleep, for how long were you awake during the night in total?							
5 At what time did you finally wake up?							
6 At what time did you get up?							
7 How long did you spend in bed last night (from first getting in, to finally getting up)?							
8 How would you rate the quality of your sleep last night?							
1 2 3 4 5 V. Poor V. Good							

10 Rules for Improved Sleep Hygiene

If you have problems sleeping, then it is important that you practice good Sleep Hygiene. This means doing things which are known to improve sleep, and avoiding those things which are known to disturb sleep. Here are 10 things you should know about getting better sleep; each of these points is based on scientific research, and could help you to get the most out of your sleep.

Remember, this advice applies only if you have a sleep problem:

- 1 Products containing caffeine (tea, coffee, cocoa, chocolate, soft drinks, etc.) should be discontinued at least 4 hours before bedtime. Caffeine is a stimulant and can keep you awake.
- 2 Avoid nicotine (including nicotine patches or chewing gum, etc) an hour before bedtime and when waking at night. Nicotine is also a stimulant.
- 3 Avoid alcohol around bedtime because although it can promote sleep at first, it can disrupt sleep later in the night.
- 4 Avoid eating a large meal immediately before bedtime, although a light snack may be beneficial.
- 5 Try to do regular (even mild) physical exercise if you are able, but avoid doing this in the 2 hours before bedtime.
- 6 Keep the bedroom calm and tidy. Select a mattress, sheets, and pillows that are comfortable.
- 7 Avoid making your bedroom too hot or too cold.
- 8 Keep the bedroom quiet and darkened during the night, but try to spend some time in daylight (or bright artificial light) during the day.
- 9 Keep your bedroom mainly for sleeping; try to avoid watching television, listening to the radio, or eating in your bedroom.
- 10 Try to keep regular times for going to bed and getting up.

CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

Here are the handouts on improving sleep. If you aren't sure why you are having a problem with sleep, a sleep diary can provide important information.

Skills Practice

Mindfulness 5 min twice a day

2 goals for this week

Include at least one Healthy Living goal

- Exercise
- Nutrition
- Reduce caffeine
- Reduce alcohol/drugs
- Sleep

As in previous classes, we have some recommended practice assignments for this week in order to help you incorporate these strategies into your day-to-day lives. Skills practice is a major component of CBT, and a large part of the work occurs between sessions since these classes are only approximately 1.5 hours of your week. The more effort and time you put into doing the skills practice, the more you'll get out of these classes.

Please continue practicing mindfulness exercises for 5 minutes x twice/day. Also, write down two goals that you can work on this week, including at least one healthy living goal.

Resources

CBT-I Coach (app)

WRHA Nutrition & Food Resources

- Health Management Group Program Guide: <https://wrha.mb.ca/groups/>
 - Dial a Dietitian: 1-877-830-2892
 - Nutrition for Busy People - <https://wrha.mb.ca/groups/nutrition-for-busy-people/>
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Private practice Registered Dietitians

- For those with extended insurance benefits
<https://www.collegeofdietitiansmb.ca/find-a-dietitian/private-practice/>
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Craving Change

- <https://www.cravingchange.ca/>
-

Women's Health Clinic

- Call 204-947-2422 ext. 537
 - Email: whcdietitian@womenshealthclinic.org
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Here is a list of resources we talked about in class today.

Resources

Anxiety Canada [www.anxietycanada.com]

Manitoba Health - <http://www.gov.mb.ca/health/mh/crisis.html>

Here to Help [www.heretohelp.bc.ca]

Mindshift app

CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

If you ever feel the need for help, the following resources are available to you in Manitoba.

CBTm Class Evaluation



CBTm COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS

[Your site may choose to collect feedback on what class participants think of today's content. *Evaluation of the CBTm Education Session* was developed for this purpose and can be found in the Facilitator's manual. If using it, you might say ...]

We're interested in what you think of today's session. Our classes have changed over time because of this feedback. Please complete the session evaluation form when you receive it.

[Some sites also want to evaluate if attending the sessions is helping their participants make desired changes. Some short, cost free questionnaires are recommended in the Facilitator's manual. If you are using some form of outcome monitoring, you might say ...]

We are interested in how you are doing and if the strategies taught here are making a difference. Thanks for filling out the tracking questionnaires. Sorry that these are a bit repetitious. We need to compare how you are doing over time to know if the strategies are helping.

[If you are not collecting any additional information from participants, you might

change this slide to just say:]

THANKS!