

The plan for the day

AGENDA

Please review the schedule below. Note that all times are in Central daylight time zone.

9:00AM – 10:00AM	BACKGROUND: CBTM
10:00AM – 10:15AM	OVERVIEW OF TRAINING - SHAY-LEE BOLTON, PHD
10:15AM – 10:30AM	BREAK
10:30AM – 11:30AM	CLASS 1: CBT MODEL & COGNITIVE THERAPY - CHERYL MAXSOM, MSW RSW
11:30AM – 12:30PM	CLASS 2: BEHAVIOUR THERAPY & GOAL SETTING - CHERYL MAXSOM, MSW RSW
12:30PM – 1:00PM	LUNCH BREAK
1:00PM – 2:00PM	CLASS 3: HEALTHY LIVING & SLEEP - TANYA SALA, MD
2:00PM – 3:00PM	CLASS 4: PROBLEM SOLVING - TANYA SALA, MD
3:00PM – 3:15PM	BREAK
3:15PM – 4:15PM	CLASS 5: STRESS & WELLNESS PLANNING - TANYA SALA, MD
4:15PM – 4:45PM	IMPLEMENTATION AND RESEARCH - SHAY-LEE BOLTON, PHD
4:45PM – 5:15PM	QUESTIONS AND EVALUATION OF THE TRAINING

WELCOME

TO COGNITIVE BEHAVIOUR
THERAPY WITH MINDFULNESS
(CBTM) – FACILITATOR TRAINING

CBTm

COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS
THÉRAPIE COGNITIVO-COMPORTEMENTALE DE LA PLEINE CONSCIENCE



ACKNOWLEDGEMENTS

The 5-session Cognitive Behaviour Therapy with mindfulness (CBTm) class content was developed in partnership by a team of psychiatrists, psychologists, clinical social workers, and other mental health professionals, as well as with feedback from previous CBTm participants.

Funding for this work has been supported by a Manitoba Patient Access Network grant (2016-2017); Manitoba Health, Wellness and Recovery; Canadian Institutes of Health Research grant (S-L. Bolton); and a Health Sciences Centre Foundation grant (S-L. Bolton).

The CBTm Hub was established in October 2021 as a provincial collaborative team of facilitators and other professionals from different sites to address the need for increasing access to CBTm. The work of the CBTm Hub has been funded by the Manitoba Government in partnership with Shared Health. Additional members of the CBTm Hub are listed below:

- Allan Dubyts
- Antonio Paletta
- Ben Fry
- Brent Anderson
- Cheryl Maxsom
- Corey Mackenzie
- Dean Smallwood
- Debbie Whitney
- Ela Partyka
- Erin Knight
- Essence Perera
- Jacquelyne Wong
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- Jolene Kinley
- Kelsey Papineau
- Kristin Reynolds
- Meredith Seager
- Natalie Mota
- Oai Truong
- Pamela Holens
- Paula Conte
- Richard Hawe
- Shay-Lee Bolton
- Tanya Sala
- Uchenna Onwurah

1	Background: CBTm PAGE 01
2	Class content <ul style="list-style-type: none">• Class 1, PAGE 10• Class 2, PAGE 59• Class 3, PAGE 120• Class 4, PAGE 180• Class 5, PAGE 251
3	Mindfulness Exercises PAGE 313
4	Next Steps - Facilitator registration on CBTm website PAGE 322
5	Mentorship PAGE 323
6	Evaluation + key outcomes PAGE 324
7	Collecting feedback PAGE 329
8	Handling common issues in class PAGE 331
9	CBTm Fidelity Checklist PAGE 333
10	How to respond to "What's next?" PAGE 335

Land Acknowledgement

The University of Manitoba campuses are located on original lands of Anishinaabeg, Cree, Oji-Cree, Dakota, and Dene peoples, and on the homeland of the Métis Nation.

We respect the Treaties that were made on these territories, we acknowledge the harms and mistakes of the past, and we dedicate ourselves to move forward in partnership with Indigenous communities in a spirit of reconciliation and collaboration.

OBJECTIVES

- Background: Development of the CBTm classes
- Science: Research on CBTm
- Implementations: Examples of where and how CBTm has been used

ACKNOWLEDGEMENTS

- A. Beck MD, J. Beck PhD
- CBTm clients and families
- CBTm Hub Team
- Funding Partners
 - Manitoba Patient Access Network, Canadian Institutes of Health Research, Health Sciences Centre Foundation, True Patriot Love Bell Let's Talk, Workers Compensation Board of Manitoba, Manitoba Medical Services Foundation, Government of Manitoba, Doctors Manitoba, Rady Faculty of Health Sciences, Atlas Institute for Veterans and Families

WHAT IS CBT?

- Cognitive behavioural therapy
- Evidence-based psychotherapy
- Involves efforts to change unhelpful patterns of thinking and behaving
- Recognize unhelpful thoughts
- Better understand how thoughts and behavior can impact your mood
- Learn coping skills

WHY CBT?

- Gold standard treatment for mood and anxiety
- Shown to prevent/delay onset of mental health issues among vulnerable groups**
- Low intensity CBT interventions (bibliotherapy, online) with minimal therapist assistance is a cost-effective method to improve access**
- Unmet need for psychotherapy > unmet need for medications*

*Statistics Canada Report 2023; ** Delgadoillo BJP 2017

Background:

CBTm

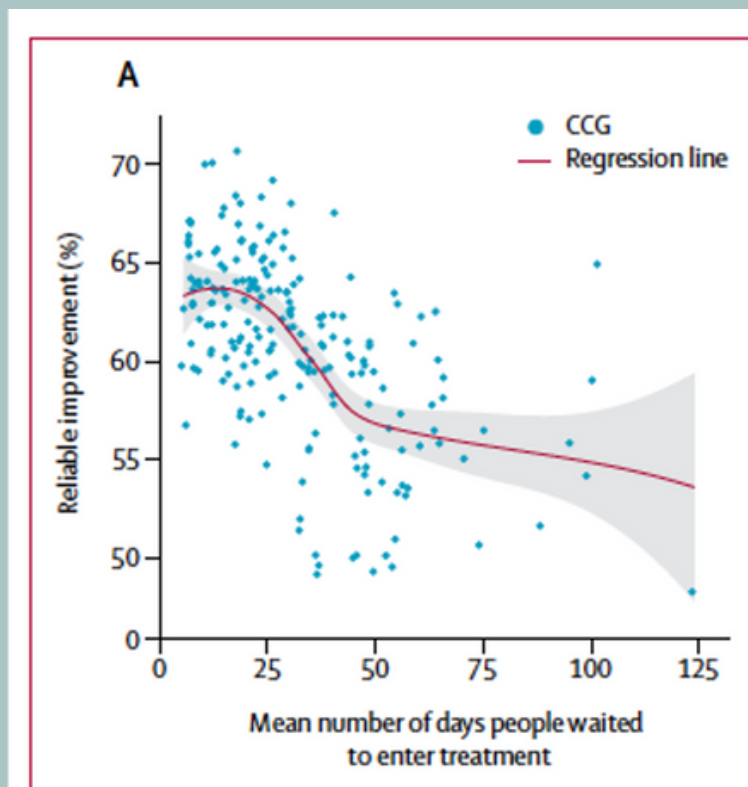
Why is it important to reduce waiting times and improve access to CBT?

- Delays in access reduce the likelihood of recovery!

Improving Access to Psychological Therapies Programme* – United Kingdom

- Annually 957,000 people are assessed by IAPT
- 537,000 people receive 2 or more sessions of therapy (mostly CBT)
- Stepped care model

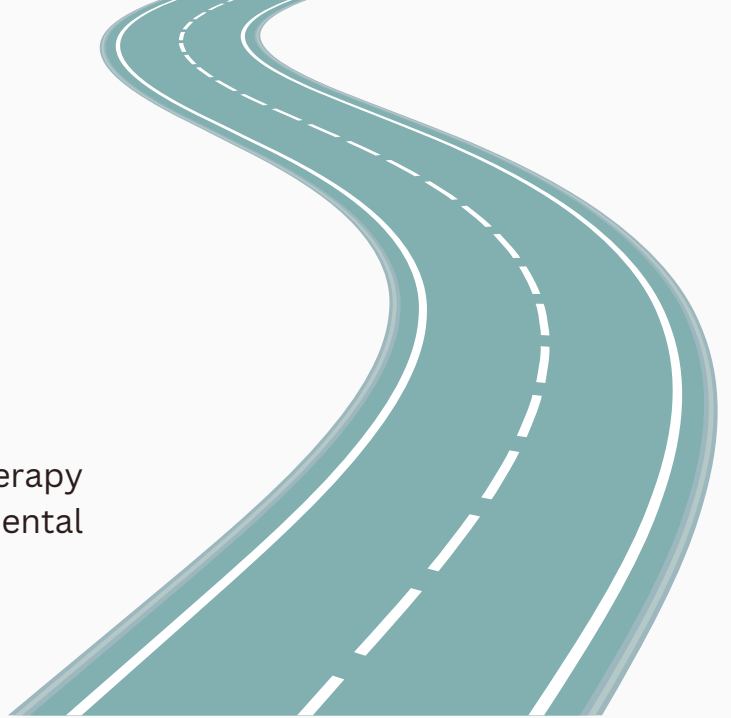
Longer delays in access to treatment and missed appointments are associated with lower likelihood of recovery



*CLARK ET AL LANCET 2018

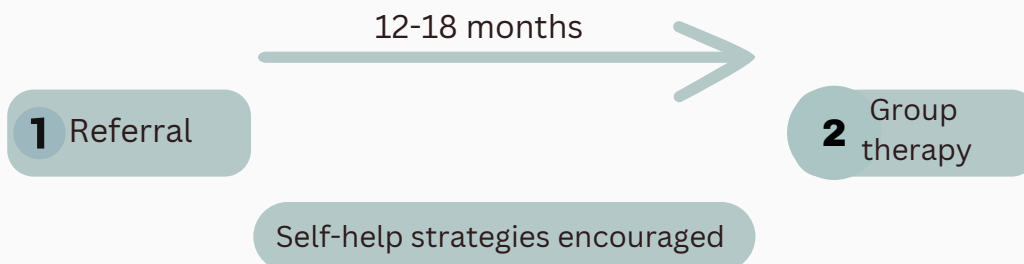
VISION

Increase access to Cognitive Behavior Therapy (CBT) for prevention and treatment of mental health and substance use problems

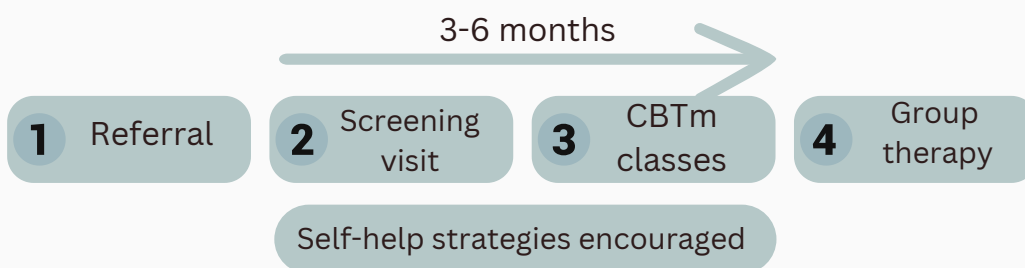


CASE EXAMPLE: CBTM AT MB HEALTH SCIENCES CENTRE

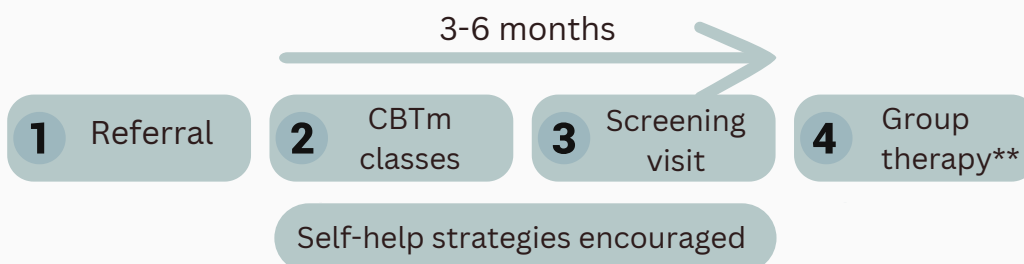
A. Prior service delivery model – prior to 2013



B. Revised service delivery model – stepped care began in 2014



C. New service delivery model – began during COVID pandemic (2020)



**Patients must attend education classes in order to be eligible for group therapy

What is CBTm?

- Selected key CBT skills
- 'm' for mindfulness
- Reduce stress, increase resiliency, improve emotion regulation
- Class-based model
- Large vs. small group or individual format
- Fewer (5 vs 6-8) sessions, less intensive

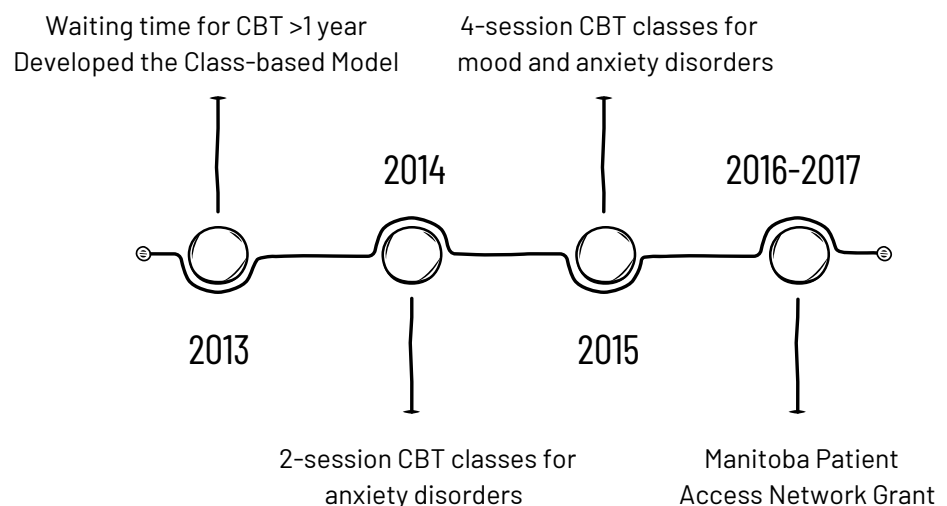
Evidence: Large group psycho-education can improve mental health (Delgaillo et al., 2016)

- 4451 participants in UK
- "Stress Control" 6 workshops - didactic (up to 100 people)
- Pre-post effect size $d = 0.70$ (GAD-7)
- Effect size lower when less classes completed (<4)
- "Large group psychoeducational CBT is clinically effective, organisationally efficient and consistent with a stepped care approach to service design."

Classes are innovative in delivering therapy

- Everyone has been in a class, not everyone has been/wants to be in therapy
- Psycho-education format provides a less intensive environment
- After attending the classes people are more socialized to the expectations for therapy
- Self-selection into more intensive therapy
- Diagnosis not required (e.g., below threshold symptoms, does not impact health insurance, can be preventive, etc)

Timeline



DURING THE CBTM CLASSES, INDIVIDUALS LEARN:

- The principles of CBT for depression and anxiety
- The structure and process of CBT
- Basic mindfulness skills
- Good quality, free, self-help CBT and mindfulness resources

OVERVIEW OF TOPICS

- CBT Model
- Relaxation strategies
- Cognitive restructuring
- Behaviour therapy
- Healthy living
- Sleep, nutrition, substance use, exercise
- Problem solving and anger management
- Responding to stress and wellness plan

STRUCTURE AND PROCESS

- 90 minutes, once per week for 5 weeks
- Classes can vary in size (10-50+)
- Family member or support person invited
- No exclusion criteria

CBTM WEBSITE | [HTTPS://CBTM.CA](https://cbtm.ca)

- Established June 2017
- Free online content and resources for clients
- CBtm class offerings and program access points
- Access to all materials for trained facilitators (with registration)
- Since inception >25,000 people have accessed the site

KEY GOALS OF MANITOBA PATIENT ACCESS NETWORK (2016-2017)

- Improve quality of class content using a quality improvement framework
- Develop a client binder
- Develop a facilitator manual
- Hold facilitator training workshops
- Develop an online website

CBTM HUB COLLABORATIVE TEAM- EST. 2021

- A partnership between Shared Health Manitoba, Mental Health & Addictions, Psychiatry, Psychology, Clinical Health Psychology
- Vision:
 - Enhance access
 - Reduce jurisdictional barriers
 - Increase coordination
 - Training/capacity building – facilitator training
 - Increase opportunities for evaluation and quality improvement

Class Options in Manitoba

Option 1: Zoom videoconference

- Resembles in-person classes, led by a facilitator, group-based

Option 2: Web-based online course

- Self-directed, no facilitator, progress monitored by research staff and clinicians

Option 3: In-person

- Offered at some sites, most often in groups, some providers use material one-on-one

Facilitator Training

- Nearly 500 people trained across Canada
- Training and capacity building
- First workshop held in 2016
- First virtual workshop held in May 2021
- Held twice per year
- Diverse backgrounds and clinical experience
 - Non-profit, self-help, public safety, hospital-based, community-based, etc.
 - Physicians, pharmacists, peer support, family docs, etc.

Program Adaptations

- Turning Pages (50+ years, CMHA)
- First Nations communities (Quest Health)
- Public safety, first responders, military, and veterans
- Health care workers (physicians, nurses, allied health, etc)
- Cancer populations (Southern Health)
- Perinatal women
- Adolescents

Research on CBTm Program

Tertiary care

- Reduction in waiting times from 1 year to < 3 months (Palay et al., 2018)
- Anxiety and depressive symptoms reduced by 20% during the classes (Thakur BMC Psychiatry et al., 2019)

Operational Stress Injury Clinic (Veteran, military and first responders)

- Attendance in CBTm classes increased likelihood of completing group therapy (Whitney, Maxsom, Mota et al., in preparation)

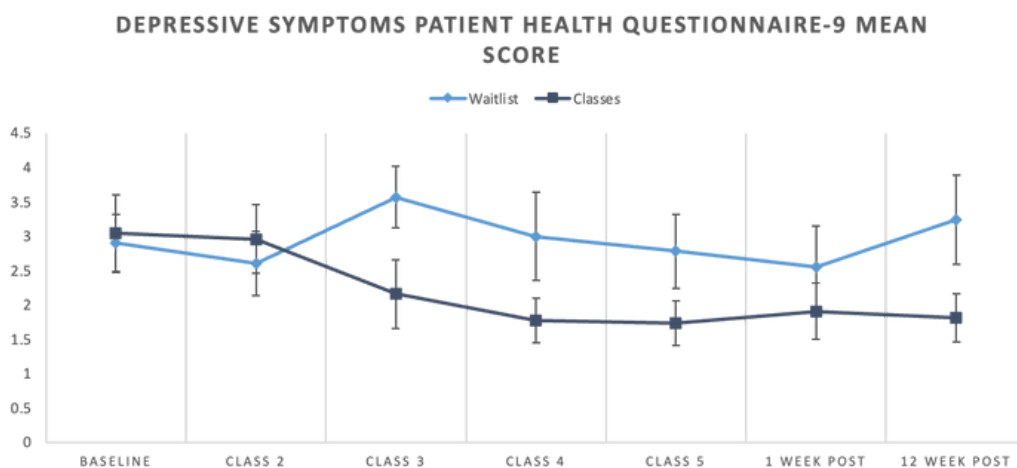
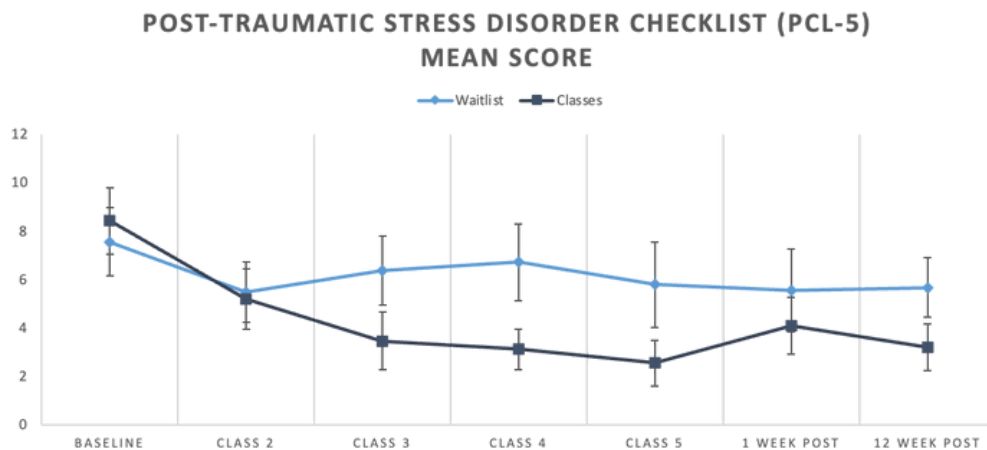
Rural communities – Interlake Eastern Regional Health Authority

- Anxiety and depressive symptoms reduced
- No difference between telehealth vs in-person classes (Davidson, Kinley et al., J Rat-Emot Cognitive-Behav Ther, 2022)

Creating Resilient Workplaces (CReW) Study

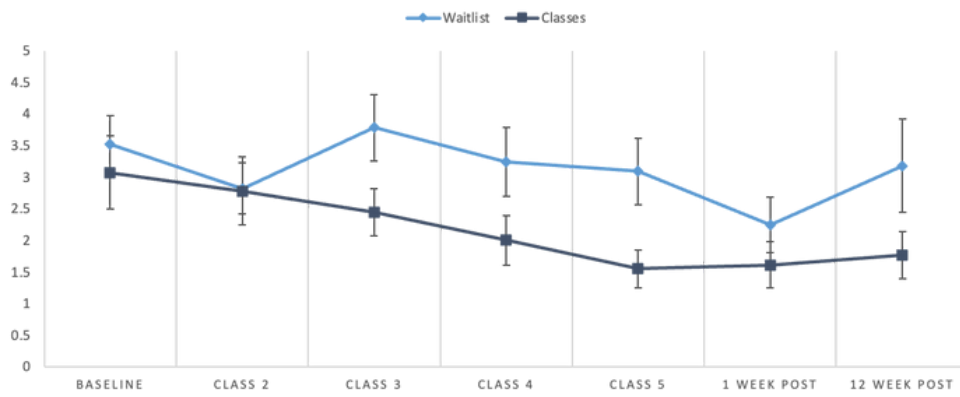
- Randomized controlled prevention trial, started in August 10, 2019
- Public safety personnel
 - Police officer, firefighter, paramedic, call dispatcher, or corrections officer
- “Healthy” cohort
 - Mental health symptoms below clinical cutoffs
 - No recent history of treatment
- 60 participants:
 - 28 received CBTm classes
 - 32 were placed on waitlist
- Questionnaires completed at baseline, prior to each class (x5), 1 week and 3 months post-classes

CReW Study Results

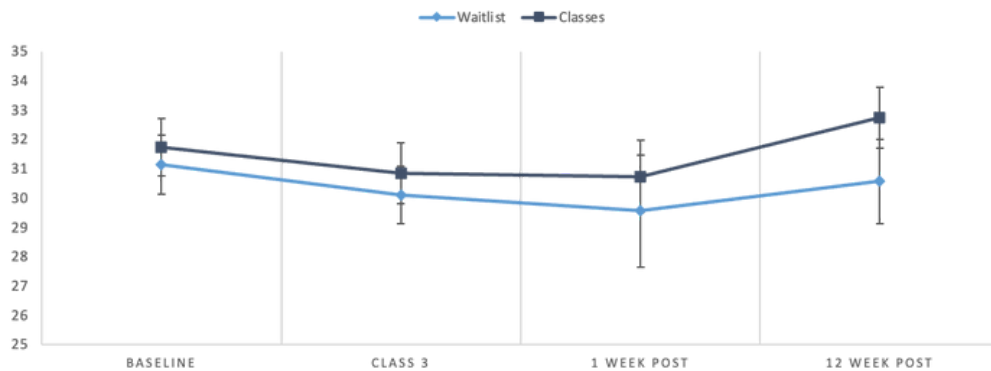


CReW Study Results

GENERALIZED ANXIETY DISORDER (GAD)-7 MEAN SCORE



CONNOR DAVIDSON RESILIENCE SCALE-(CD-RISC) MEAN SCORE

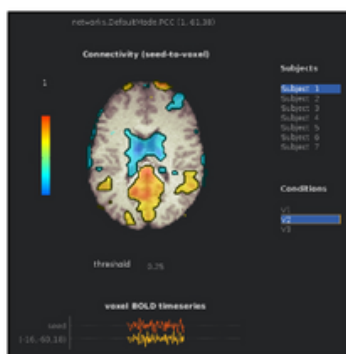


Do cognitive behavioral therapy skills classes increase a resiliency-related brain connectivity pattern to posttraumatic stress disorder?

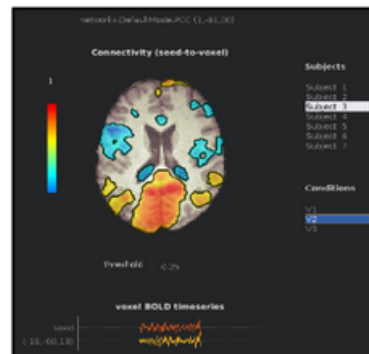
Ji Hyun Ko, PhD; Natalie Mota, PhD, C.Psych

- fMRI study – building on what we know:
 - CBTm seemed beneficial for reducing PTSD symptoms in PSP.
 - The VLPFC (Ventrolateral Prefrontal Cortex) is associated with cognitive control of memory (Badre & Wagner, 2007).
 - PCC (posterior cingulate cortex) has been associated with the recollection of prior experiences (Raichle, 2015).
 - CBTm increased connectivity btw VLPFC and PCC.
- Potential Interpretation
 - CBTm strengthened the cognitive control (VLPFC) over self-referential memory (PCC) and thus reducing/preventing PTSD symptoms.

5-week waitlist (n=14)



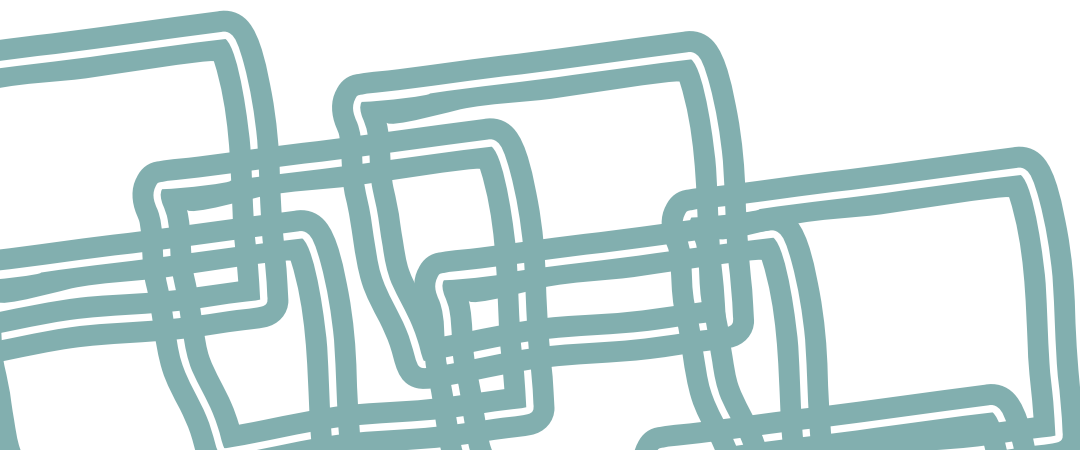
5-week CBTm (n=11)



PROGRAM IMPLEMENTATION EXAMPLE - CBTM IN RURAL MANITOBA

Interlake-Eastern RHA, Southern RHA, Prairie Mountain RHA

- Began as in-person service, now fully virtual
- Within Community Mental Health Program
- Service option at intake before/instead of a Community Mental Health Worker (CMHW) / other program
- As a part of treatment with CMHW (e.g., as exposure, behavioural activation, more frequent service)
- As a solidification of skills learned at the end of treatment
- Make service delivery more efficient
- Some people decide not to go on to more intensive / individual treatment





[Version date: Apr 2024]

[Introduce class facilitator and welcome participants]

Welcome to Class 1 of the Cognitive Behaviour Therapy with mindfulness classes.

These classes were designed to introduce you to the skills of Cognitive Behaviour Therapy and mindfulness. Although this material was first developed for people who were referred for the treatment of anxiety or depression, these skills represent helpful ways for everyone to manage their stress and improve their mental wellness.

[Facilitators and sites are welcome to add their names and contact information (if appropriate) to the title slide. Please use a text box in the lower right corner.]

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

CBTm

We'll start by covering a few ground rules.

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, this is not the right setting to discuss personal trauma, suicidal or violent thoughts, or other information which may be distressing to others in the group.

If you are in crisis or become distressed during the class and need to talk to someone, please approach one of the facilitators during a break or after class.

Also, we ask that you please help us to make this a safe and confidential space by not sharing any personal details or identities of anyone in this program.

Class Outline

Why These Classes?

Mindfulness

What is CBT?

Realistic Thinking

Your Action Plan

CBTm

CBT uses a structured approach. For each class there will be an outline of the contents, a mindfulness exercise, review of material presented in the previous class (including review of last session's suggested action plan), introduction of new material and suggestions for practicing the skills and developing an action plan for the upcoming week.

Why These Classes?



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

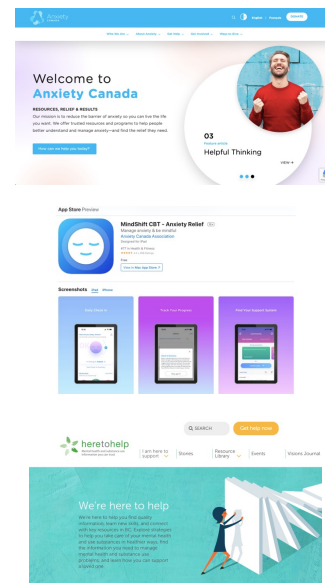
These classes aim to provide quick access to some basic CBT skills – approximately 7.5 hours within 5 weeks. In these classes you will learn some of the theory of CBT, then do some skills practice in session, and have a chance to practice on your own between and after classes.

You will be introduced to multiple tools within these classes, one of them is mindfulness. 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, and sensations, without judging them.

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



CBTm

There are many self-help online resources available to us, but it can be hard to know which sites are truly helpful and trustworthy. Throughout 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.

Class Outline

Why These Classes?

Mindfulness

What is CBT?

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

Mindfulness Meditation – 5 min

Observe without judgement

Helpful for stress reduction

Apps

- Mindshift
- Mindfulness Coach

Anywhere, anytime

- Observe breath, object, activity, sounds

CBTm

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

People sometimes misunderstand mindfulness, thinking it means you need to focus on one thing and that you're doing it wrong if your mind wanders. But your mind will naturally wander to other things – and that's okay - your job is to notice your attention has wandered and gently bring it back into focus. People can 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.

The practice of mindfulness can be useful to manage stress, to cope with anxiety or depression, and for managing chronic pain.

We will provide a different mindfulness exercise with each class, this way you can experience a variety of different ways to practice mindfulness. There are also other exercises that you can try on your own to find out what works best for you!

You can try doing everyday activities mindfully, such as mindful walking, 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. For instance, you can wash the dishes mindfully by being aware of the bubbles, the smell of the soap, the temperature of the water, the motions of your hands, and the different sounds.

The first mindfulness exercise is '**Mindful Breathing**'. This will take about 3 minutes.

[Mindful Breathing can be practiced with the following instructions, or you can use audio recordings from the Mindshift app, Chill Zone]

Find a comfortable sitting posture. Put your feet flat on the ground, with your hands in your lap, 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.

Continue to focus on the gentle inhalation and exhalation of your breath. In...and out...

If any thoughts or images come into your mind during this exercise, just notice them, and gently bring your attention back to your breath...

You may 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

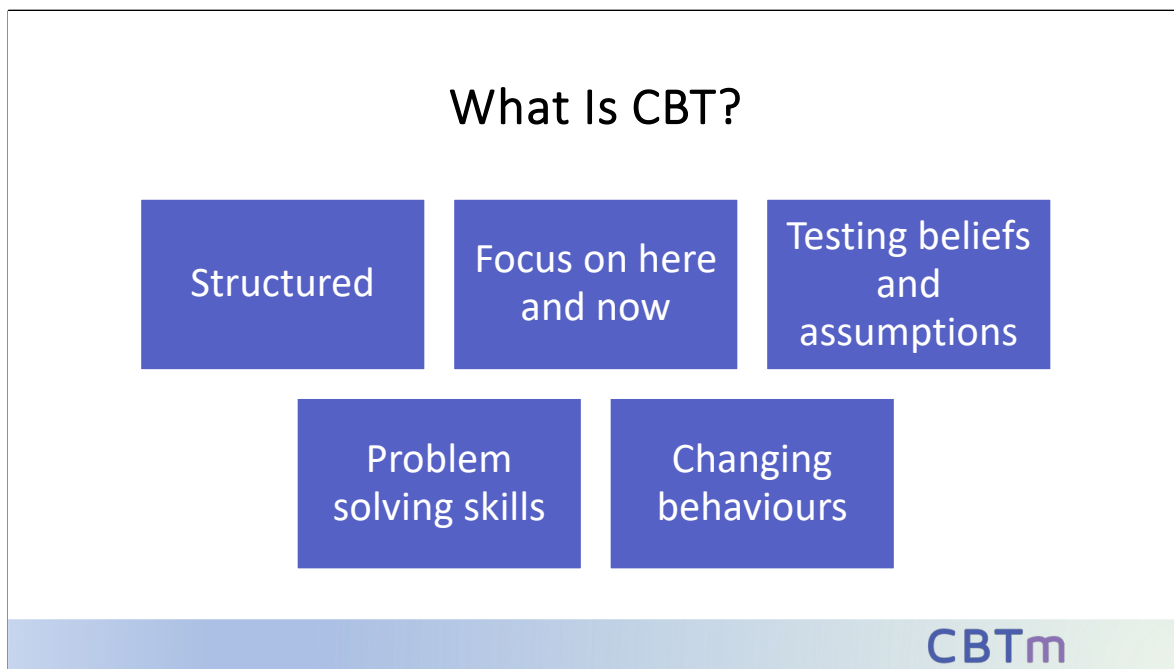
What is CBT?

Realistic Thinking

Your Action Plan

CBTm

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



There are many different types of therapy, can anyone name any? [pause for group to answer]

[Possible answers: Dialectical Behaviour Therapy (DBT), psychodynamic, supportive, Acceptance and Commitment Therapy (ACT) etc.].

So, what is Cognitive Behaviour Therapy?

In CBT, sessions are structured. Every class has an agenda, learning of new skills, and a review of the skills practice. There is equal collaboration between a therapist and participant.

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 painful feelings, we tend to have unhelpful and inflexible thinking. In CBT, you learn to step back and think about the situation more broadly. Difficult and painful feelings can sometimes feel hard to bear or tolerate, but they are normal and are part of the range of human emotions. CBT is not about avoiding the difficult, inflexible, and painful thoughts and feelings, rather it is about teaching you how to manage your thoughts and feelings in a realistic and balanced way.

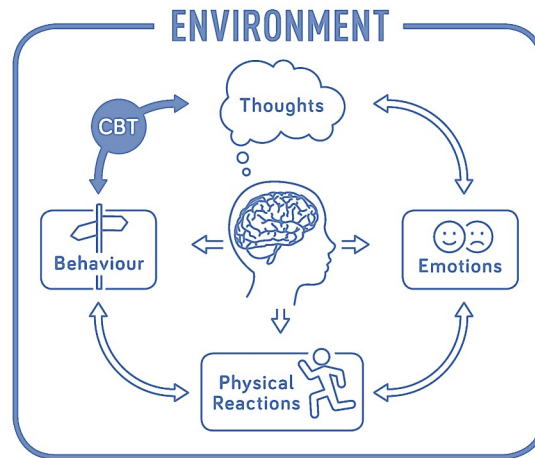
CBT also focuses on problem solving skills. These are important skills, especially if you are struggling with problems in your life – for example with your relationships, sleep, or assertiveness. Learning these skills helps boost your ability to cope with stress and stay well.

That was a brief explanation of some core skills of Cognitive Behaviour Therapy. So, what is CBTm and how is it different from CBT? CBTm is a Manitoba made psychoeducation program that focuses on building mental health skills and improving your mental wellness. The aim is to provide quick access to some brief Cognitive Behaviour Therapy and mindfulness skills. In these classes, we value your feedback.

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 in this class.

[NOTE: there has been a language change to identify thoughts and emotions. Instead of terms such as positive/negative or good/bad, they have been changed to painful/distressing or helpful/unhelpful.]

The CBT Model



CBTm

This diagram explains how Cognitive Behaviour Therapy works. CBT tells us that our thoughts, emotions, physical reactions, and behaviours are all connected. CBT tries to change these connected areas by changing either our thinking patterns or our behaviour. Let's start at the "Thoughts" bubble and work our way around the circle.

In any situation, you will have certain thoughts about the situation. What you feel affects how you think, and vice versa. For example, in trying to learn this material, you might be having certain thoughts about the classes. If you're having thoughts that this lesson makes sense, you might be feeling good about the classes and will be eager to come back for Class 2. The way you think affects how you feel. However, if you're feeling upset or anxious in the situation, this will also 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 in the future. You might not be thinking about anything distressing, 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 like a failure?" (pause) It's a thought, because "failure" is a judgement. The emotion might be "embarrassment" or "shame", leading one to judge oneself as a "failure". A key to understanding the difference between a thought and a feeling is: A feeling is typically one word that is descriptive and isn't a judgement. A thought, on the other hand, is an evaluation or an opinion that is usually more than one word.

There are two categories of feelings: emotional and physical. In the CBT model, we separate feelings – that is things that you "feel" into these two categories – emotions and physical sensations.

[Ask]: If I feel angry, what are some of the things I might notice happening in my body?

[Answer]: My physical reaction might be 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 our behaviours (our actions).

Sometimes you may 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 difficult feeling 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.

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

CBT Myth

Myth Cognitive behaviour therapy is to help people think positively

Truth Cognitive behaviour therapy is to help people think flexibly and balanced

CBTm

The Cognitive Behaviour Therapy model from the previous slide applies to everyone, not just those who experience challenges with their mental health. However, when we're not at our best and our stress levels are high, we may have more frequent and intense unhelpful thinking – in more situations, more of the time. But if we're trying to think and feel better, why doesn't CBT try to help people just think positively? 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 distressing thought, it's important to ask yourself if the way you're thinking about the situation is realistic and balanced.



What do you
see?

CBTm

[Ask]: What do you see in this picture?

[Answers]: an older woman, a younger woman, both.

The picture on the slide shows both a younger woman and an older woman and illustrates the importance of seeing two different perspectives.

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

CBT helps you to take a step back and look at the 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 unhelpful thinking patterns – think about yourself wearing dark sunglasses all the time, and not being able to see everything in all types of light. These unhelpful thinking patterns are automatic but are more frequent and intense when we are feeling stressed or worried.

CBT focuses on acknowledging our thoughts, considering different perspectives, and developing more accurate, balanced, and realistic thinking.

Cognitive Model



When we are feeling anxious, sad, or angry, our thinking patterns are usually not helpful



These unhelpful thoughts can make the upsetting feelings stronger



If we can recognize these unhelpful thinking patterns, and change the thinking, it can help reduce the upsetting feelings

CBTm

Let's break down the Cognitive Behaviour Therapy model into two parts: 1) the "C" part, or the part focused on cognitions, or thinking patterns, and 2) 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 individuals experiencing anxiety and/or depression.

But, for those people whose stress or worry levels are higher, they may have more frequent, intense, and unhelpful thinking in more situations, more of the time.

When you have an unhelpful 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

CBTm

Let's look at the what the theory of CBT tells us about how some specific ways of thinking can lead to depression and can keep the depression going.

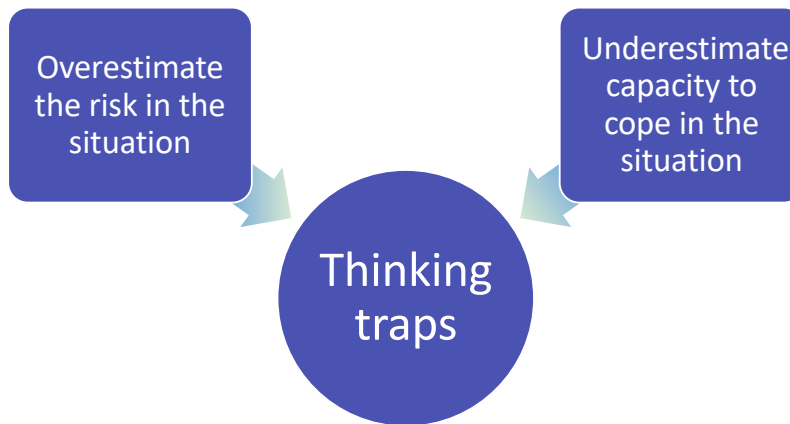
CBT says that when we have an overly negative view of ourselves, others, and the future, that we are likely to feel down or depressed. These specific ways of thinking lead to certain responses in situations. A negative view of ourselves, for example, can lead to thoughts like "There's something wrong with me" or "It's all my fault". A negative view of others can lead to thoughts like "Nobody understands me" or "People can't be trusted". A negative view of the future could lead to thoughts like "It will always be like this" or "It will never get better".

To fight back against depression, it's important to remind ourselves of the following...

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

These reminders are examples of the balanced realistic thinking.

Cognitive Theory of Anxiety



CBTm

There are also unhelpful thinking patterns that fuel each other and can result in feelings of persistent anxiety.

1. Overestimating the risk in a situation. For example: How likely is a plane 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 anticipated 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 do a presentation at work, I will become overwhelmed, I'll look silly in front of everyone, and then be unable to cope. Sometimes people worry if they have a panic attack that it will go on forever unless they do something to stop it, which isn't true.

In this class, we brought attention to the thought patterns, the "C" part of the CBT model, that often fuel thoughts and feelings of depression and anxiety. In Class 2, we will discuss behaviours that go along with these thoughts.

Beck Institute **TESTING YOUR THOUGHTS (Example)**

What is the situation? Joanne yelled at 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 **85**)

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

How strong is the feeling? a little strong medium **very strong** (or rate 1-100 **90**)

What makes me think the thought is true? She seems pretty mad.

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 doesn't 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 call back right away and apologize.

What will probably happen? She'll act cold for a few days and then I'll call her.

What will happen if I keep telling myself the same thought? I'll keep feeling upset.

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

What would I tell my friend if this happened to them? Don't worry, just wait two days 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 **20**)

How strong is my negative feeling now? a little strong **medium** very strong (or rate 0-100 **45**)

Class 1 © J.S. Beck, Ph.D., 1996

Using a Thought Record

Find these in your handouts!

Beck Institute **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)

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

How strong is the feeling? a little strong medium very strong (or rate 1-100)

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 thought? _____

What could happen if I changed my thinking? _____

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

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)

Class 1 © J.S. Beck, Ph.D., 1996

CBTm

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

**Class
Outline**

Why These Classes?

Mindfulness

What is CBT?

Realistic Thinking

Your Action Plan

CBTm

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 about 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 there may be other important information that you're not considering.

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)

CBTm

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 example 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 distressing thought in your head. This exercise is to review the situation and to pick one thought. Remember that it's human to get stuck in old inflexible and unrealistic thinking patterns, but it is possible to change your thinking to be more realistic and balanced.

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.

- How much do I believe the thought?
 - A lot (or rate from 0-100)

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)

CBTm

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 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 your feelings on a scale from 0-100.

If you have more than one feeling, you can do a separate Testing Your Thoughts exercise for each feeling.

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?

CBTm

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 to examine the evidence in support of the thought. In the example, we say “She seemed pretty mad”.

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”. In response, we say “She’s gotten mad at me before, but she seems to get over it”.

This exercise helps you train your mind to see different perspectives of the same situation. The next question is: “What’s another way to look at this?”. In response: “She’s got a real temper, but she doesn’t stay mad”.

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?

CBTm

The next couple of questions look at the best- and worst-case scenarios, 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.

For the question: "What's the worst that could happen? Would I still live through it?" We can say: "I'd lose my best friend"

The next question is: "What's the best that could happen?" And we say: "She'll call back right away and apologize"

For the question: "What will probably happen?" We can say: "She'll act kind of cold for a few days and then I'll call her"

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 our friends than we are to ourselves. In this example, I would talk to my friend "Emily" and say, "don't worry, just wait two days and then call".

Testing Your Thoughts

What should I do now?

How much do I believe the
unhelpful thought now?

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

How strong is my feeling now?

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

CBTm

What should I do now? I should “call a different friend” – getting support is 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 feeling (sadness) has gone from “very strong” to “medium”.

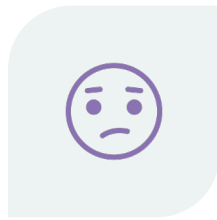
It is important to see that the emotion is still there, but it has moved from a high level to a lower level.

This is the Thought Record; it is one of the core tools used in Cognitive Behaviour Therapy.

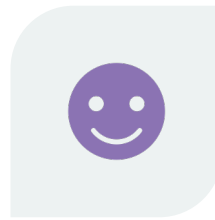
This exercise shows that it’s possible to work on changing our thoughts and feelings to help see things from another perspective and to feel better.

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

CBTm

Now we'll take a break and ask each of you to try doing a thought record on the blank Testing Your Thoughts Worksheet included 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 a minor disagreement with a friend or your spouse, or driving and being cut off in traffic 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.

[NOTE for facilitators:

- *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)]*

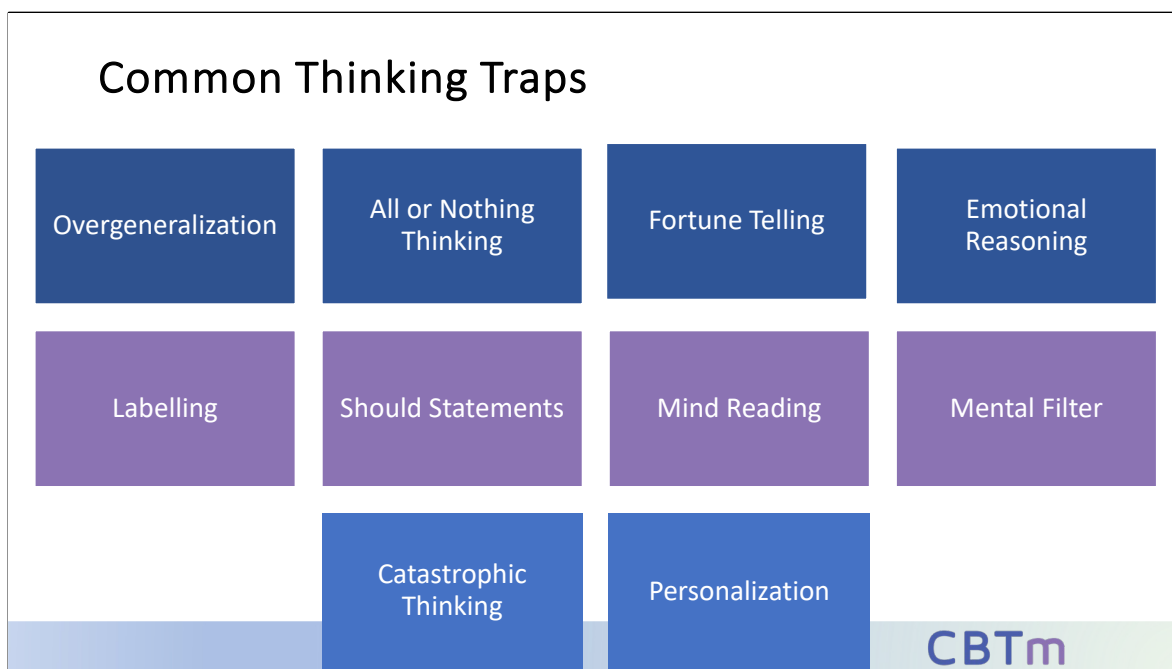
Understanding Thinking Traps

Find these in your handouts!

Thinking Traps	Examples
<p>Overgeneralizing Thinking that a difficult situation is part of a constant cycle of bad things that happen. People who overgeneralize often use words like "always" or "never".</p>	<p>I wanted to go to the beach, but now it's raining. This always happens to me! I never get to do fun things!</p>
<p>All or Nothing Thinking Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in all or nothing terms see a small mistake as a total failure.</p>	<p>I wanted to eat less sugar, but I just had a piece of cake. This plan is a total failure! I might as well eat the whole cake!</p>
<p>Fortune Telling Predicting that something bad will happen, without any evidence.</p>	<p>I've been studying hard, but I know that I'm going to fail my test tomorrow.</p>
<p>Emotional Reasoning Believing that bad feelings or emotions reflect the truth of a situation.</p>	<p>I feel anxious when I fly, so airplanes must not be safe.</p>
<p>Labeling Saying only critical things about yourself or other people.</p>	<p>I made a mistake at work. I'm a failure! My boss told me that I made a mistake. My boss is a total jerk!</p>
<p>'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.</p>	<p>I should be able to handle this without getting upset and crying!</p>
<p>Mind Reading Jumping to conclusions about what others are thinking, without any evidence.</p>	<p>My friend didn't stop to say hello. She must not like me very much.</p>
<p>Mental Filter Focusing only on the challenging parts of a situation and ignoring everything else.</p>	<p>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.</p>
<p>Catastrophic Thinking Exaggerating the importance of distressing things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn't.</p>	<p>I stumbled over my words during this presentation at work, so I'll probably lose my job, and lose my house.</p>
<p>Personalization You see yourself as the cause of some upsetting external event for which, in fact, you were not primarily responsible.</p>	<p>My spouse looks irritable today. I must have done something to upset them.</p>

CBTm

This is our next handout. Take a look at the handout called "Healthy Thinking". Please find it to follow along.



[Updated April 2024]

On page two of the handout is a list of Common Thinking Traps. We all have thinking traps! Individuals experiencing high stress, anxiety, and depression tend to have them more frequently, which can trigger and maintain these symptoms.

[You can ask participants to take a turn reading the descriptions and examples aloud.]

[Facilitators: you may need to be comfortable with the beginning silence here as participants may initially be uncomfortable with unmuting themselves. Give praise for speaking up if people engage!]

I'm going to read aloud the first one, and then [co-facilitator] is going to read the next one. We would like, if you feel comfortable, for you to unmute yourself and read one along with the example from your handout.

Overgeneralizing: Thinking that a difficult 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: Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in all or nothing terms see a small mistake as a total failure. Example: I wanted to eat less sugar, 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 upsetting feelings or emotions reflect the situation. Example: I feel anxious when I fly, so airplanes must not be safe.

Labelling: Saying only critical things about yourself or other people. Example: I made a mistake at work. I’m a failure! 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 challenging parts of a situation and ignoring everything else. 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 distressing things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn’t. Example: I stumbled over my words during my presentation at work, so I’ll probably lose my job.

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

Practice

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



CBTm

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

[Facilitator: 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 was; often there is more than one. The goal here is just to recognize that there was a thinking trap at all.

Practice

- **Overgeneralizing:** Thinking that a difficult situation is part of a constant cycle of bad things that happen. People who overgeneralize often use words like “always” or “never.”
- **All or Nothing Thinking:** Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in all or nothing terms see a small mistake as a total failure.
- **Fortune Telling:** Predicting that something bad will happen, without any evidence.
- **Emotional Reasoning:** Believing that bad feelings or emotions reflect the situation.
- **Labelling:** Saying only critical things about yourself or other people.
- **‘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.
- **Mind Reading:** Jumping to conclusions about what others are thinking, without any evidence.
- **Mental Filter:** Focusing only on the challenging parts of a situation and ignoring anything good or positive.
- **Catastrophic Thinking:** Exaggerating the importance of distressing things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn’t that bad.
- **Personalization:** You see yourself as the cause of some upsetting external event for which, in fact, you were not primarily responsible.

Beck Institute **TESTING YOUR THOUGHTS (Example)**

What is the situation? Joanne yelled at 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 **85**)

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

How strong is the feeling? a little strong medium very strong (or rate 1-100 **90**)

What makes me think the thought is true?
She seems pretty mad.

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 doesn't 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 call back right away and apologize.

What will probably happen?
She'll act cold for a few days and then I'll call her.

What will happen if I keep telling myself the same thought?
I'll keep feeling upset.

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

What would I tell my friend if this happened to them?
Don't worry, just wait two days 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 **20**)

How strong is my negative feeling now? a little strong medium very strong (or rate 0-100 **45**)

Class 1 ©J.S. Beck, Ph.D., 1996

CBTm

[Ask the group]: In the example we all wet through, what thinking trap did I fall into when Joanne yelled at me?

**Class
Outline**

Why These Classes?

Mindfulness

What is CBT?

Realistic Thinking

Your Action Plan

CBTm

The last item on the outline is discussing the action plan for the upcoming week.

Action Plan

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

CBTm

Practicing the skills in this class are an important part of being able to use them to manage your stress and build 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.

Another interesting point about an action plan is its connection to having hope. Hope is often gained through action, by *doing* an activity. Hope is a part of not only managing your mood, but it makes it easier to look towards the future.

The review and practice for upcoming week is:

- To spend 10 minutes reviewing Class 1 materials
- Practice mindfulness meditation 5 minutes twice/day
- Complete one thought record and identify thinking trap(s)
- Go online to Anxietycanada.com and/or HereToHelp.bc.ca and look at some of the resources

Here are a few tips to help get you started:

- Start with the steps that are easy and achievable for you
- Try to include it in your daily routine
- Tell someone! Telling someone that you're working on a goal helps makes it more concrete
- Remember that it's more important to get started than it is to get it perfect.

Looking at this suggested list, which of these items on the Action Plan would be the easiest for you to do this week? Please type your answer into the chat.
[pause].

Before we move on, do you have questions about the Action Plan?

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

Here is a list of resources we referred to in class today. If you are viewing the class materials on your computer, you can click on each resource to access them directly.

Resources

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

Klinic 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.reasonstolive.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>

Suicide Crisis Helpline (24/7) - call or text 9-8-8
→ Trauma-informed and culturally appropriate suicide prevention support

CBTm

Here is a list of resources in Manitoba that you can access 24/7 if you or someone you know is in crisis or needs help.

CBTm Class Evaluation



CBTm

[Your site may choose to collect feedback on what class participants think of today's content. The measure 'Evaluation of the CBTm Education Session' was developed for this purpose and can be found in the CBTm Facilitator Manual. If your site is using it, you might say ... ***"We're interested in what you think of today's session. The CBTm classes have changed over time because of previous client feedback. Please complete the class evaluation form when you receive it."***]

[Some sites also want to evaluate if attending the sessions is helping their participants feel better (reduce symptoms). Some short, cost-free questionnaires are recommended in the CBTm Facilitator Manual. If you are using some form of outcome monitoring, you might say ... ***"We are interested in how you are doing and want to know if the strategies taught here are making a difference in your well-being. Thanks for filling out the questionnaires! We understand that these are a bit repetitious, but 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!" and/or "See you in Class 2!"

CBTm

COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS
THÉRAPIE COGNITIVO-COMPORTEMENTALE DE LA PLEINE CONSCIENCE

Class 1 Handouts

Mindfulness Exercise - *Mindful Breathing*

Testing Your Thoughts

Healthy Thinking Introduction

Thinking Traps

www.cbtm.ca

MINDFUL BREATHING

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.

TESTING YOUR THOUGHTS (Example)

What is the situation? Joanne yelled at 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 85)

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

How strong is the feeling? a little strong medium very strong (or rate 1-100 90)

What makes me think the thought is true?
She seems pretty mad.

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 doesn't 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 call back right away and apologize.

What will probably happen?
She'll act cold for a few days and then I'll call her.

What will happen if I keep telling myself the same thought?
I'll keep feeling upset.

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

What would I tell my friend if this happened to them?
Don't worry, just wait two days 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 20)

How strong is my negative feeling now? a little strong medium very strong (or rate 0-100 45)

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 ____)

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

How strong is the feeling? a little strong medium very strong (or rate 1-100 ____)

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 thought?

What could happen if I changed my thinking?

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

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 ____)

WHAT IS HEALTHY THINKING?

People often see their feelings as being determined by events, situations, or other people. This belief is reflected in statements such as "You make me so angry," "Public speaking makes me nervous," or "Not being in a relationship makes me depressed". These types of statements suggest that external factors are directly and entirely responsible for how we feel. However, what we think about these situations or what they mean to us will affect whether a situation will lead to anxiety, anger, or joy.

For example, you are walking down the street and see a friend who does not wave or say hi to you. How would you feel if you thought, "How rude, she can not even take the time to acknowledge me!"? What if you thought, "She must not want to be friends anymore; I'm too boring to be part of that group."? How about if you thought, "She must be in a rush and didn't see me."? You would probably feel very different with these different views on why a friend did not acknowledge you. Our thoughts affect how we feel and how we respond to situations.

Automatic Thoughts

Thoughts can become a habit or automatic, just like biting our nails or eating while watching TV. These thoughts can occur so quickly that we may not even realize that the thought has occurred. When automatic thoughts tend to be mostly negative (e.g., I made a mistake – I'm so stupid), they can cause emotional distress.

What is Healthy Thinking?

Healthy thinking is not just positive thinking. There are often negative situations that occur. It would not be helpful to see only the good in every situation, such as losing your job or failing a test. It is normal and healthy to be upset and to have some negative thoughts when these types of situations happen. Healthy thinking is about seeing the entire situation - the good, the bad, and the neutral - and using all of this information to decide what to do. Healthy thinking is about seeing life in a balanced and complete way, rather than only focusing on the negative or positive parts.

Thinking Traps

Everyone falls into thinking traps sometimes. It's most likely to happen when you feel sad, anxious or angry. Thinking traps are also more likely to happen when you're under stress or not taking good care of yourself, e.g. not enough sleep. Individuals with anxiety and depression tend to fall into thinking traps more often, which can trigger and maintain anxiety and depression.



Thinking Traps

Examples

Overgeneralizing

Thinking that a difficult 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

Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in all or nothing terms see a small mistake as a total failure.

I wanted to eat less sugar, 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 critical things about yourself or other people.

I made a mistake at work. I'm a failure! My boss told me that I made a mistake. My boss is a total jerk!

Thinking Traps

Examples

'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 challenging parts of a situation and ignoring everything else.

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 distressing things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn't.

I stumbled over my words during this presentation at work, so I'll probably lose my job, and lose my house.

Personalization

You see yourself as the cause of some upsetting external event for which, in fact, you were not primarily responsible.

My spouse looks irritable today. I must have done something to upset them.

Getting Unstuck from a Thinking Trap

Below are some strategies to help deal with common thinking traps. It is not usually helpful to tell yourself to stop thinking that way. Often, when we push away thoughts, they are more likely to pop up again (e.g., try not to think about a pink elephant for 30 seconds). It's more helpful to carefully examine a thought to see if it is accurate, or if there is a more balanced way to think about the situation.

1. Feeling or Thought?

It can be easy to confuse thoughts and feelings. In every day conversations we often use the terms interchangeably. For example, we might say "I think I am anxious" or "I feel like everyone is laughing at me." When we are challenging our thinking traps, it's helpful to very clearly separate our thoughts and our feelings.

To do this you can ask yourself:

- What is the situation? What are the "facts" that everyone would agree on if they saw a videotape of the event?
- What are your thoughts? What are you telling yourself about the meaning of the situation?
- What are your emotions? How do you feel (typically one word)?
- What are your behaviours? How are you reacting and what are you doing to cope?

2. Find any 'Thinking Traps'

Examine your different thoughts and compare them to the list of thinking traps. It is common to fall into more than one trap. Find any that might apply to you.

3. Challenge the thinking traps

Start to examine your thoughts like a scientist or a detective looking for hard evidence. What are the facts?

- Examine the evidence: Is there evidence for or against your thought? Make sure you look at evidence on both sides.
- Double-standard: Ask yourself what you would think if someone else was in this situation.
- Survey method: Ask other people that you trust if they agree with your thoughts. For example, if you think you are a bad parent because your child is acting up, you could ask other parents if they have ever had a similar problem.
- Conduct an experiment: Test your beliefs to collect more real-world evidence that could support or refute your thought. For example, if you think your friends don't want to spend time with you, call a few friends to make plans and see if they all say no.



The logo for CBTm (Cognitive Behaviour Therapy with Mindfulness) is centered on a white background. The letters 'CBT' are in a bold, blue, sans-serif font, while the 'm' is in a purple, lowercase, sans-serif font. Below the logo, the full name is written in a smaller, blue, uppercase font. The entire logo is framed by a thin black border. Decorative elements include two overlapping, curved arcs in shades of green and blue, one in the top right and one in the bottom left.

CBTm

COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS
THÉRAPIE COGNITIVO-COMPORTEMENTALE DE LA PLEINE CONSCIENCE

Class 2

[Version date: April 2024]

Welcome to the second Cognitive Behaviour Therapy with mindfulness class.

[Facilitators and sites are welcome to add their names and contact information (if appropriate) to the title slide. Please use a text box in the lower right corner.]

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

CBTm

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, we also want to remind you that this is not the right setting to discuss personal trauma, suicidal or violent thoughts, or other information 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.

Also, we ask that you please help us to make this a safe and confidential space by not sharing any personal details or identities of anyone in this program.

Mindfulness

Class Outline

Review of Previous Action Plan

Review of Realistic Thinking

Basics of Behaviour Theory

Goal Setting

Your Action Plan

CBTm

CBTm uses a structured approach. For each class there will be an outline of the contents, a mindfulness exercise, a review of material presented in the previous class (including a review of the last session's suggested skills practice), an introduction of new material and a new suggested action plan for the upcoming week.

Mindfulness Meditation – 5 min

Observe without judgement

Helpful for stress reduction

Apps

- Mindshift
- Mindfulness Coach

Anywhere, anytime

- Observe breath, object, activity, sounds

CBTm

Within CBT, there are multiple tools. One of them is helping people find ways to increase relaxation.

Mindfulness is a type of meditation practice. It focuses on being in the present moment, noticing our thoughts, feelings, and sensations, without judging them. When we're feeling anxious, we are often thinking about the future. When we're experiencing a depressed mood, we are often stuck thinking about the past. Mindfulness helps bring us into the present. You can turn almost any daily activity into a mindfulness exercise by focusing on the present moment. If you have problems with sleep, you can also practice mindfulness before your bedtime to help improve your relaxation.

We will provide a different mindfulness exercise with each class, this way you will gain experience with a variety of different practices, but there are also other exercises that you can try on your own to find out what works best for you! Today we will be practicing the mindfulness exercise Body Scan.

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

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.

Begin by feeling your body on the chair.

Notice the points of contact where your body touches the chair.

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.

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.

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.

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.

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.

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.

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.

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.

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.

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.

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

[After exercise: check in with participants]

Now that you have done the mindfulness exercise, do you feel more relaxed than you did 5 minutes ago? Do you feel more distressed or worked up? Or do you feel no change? These are all common responses. Different exercises work for different people. Anything new usually feels uncomfortable because it's unfamiliar. Mindfulness 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 Previous Action Plan

Review of Realistic Thinking

Basics of Behaviour Theory

Goal Setting

Your Action Plan

CBTm

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

Review Your Previous Action Plan



Review
materials



Mindfulness
5 min twice/day



1 thought record



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

CBTm

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

Was anyone able to do any mindfulness this past week? [pause]

What did you learn from doing another thought record? Did you find it difficult to focus on just one thought? If so, try listing the thoughts 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 the future?

Does anyone have any comments on the connection between an action plan and the creation of hope or motivation? [pause]

If you weren't able to practice any of the suggested skills from Class 1, what steps can you take to make time for the action plan this coming week? We'll talk more about this at the end of class.

Class Outline

Mindfulness

Review of Previous Action Plan

Review of Realistic Thinking

Basics of Behaviour Theory

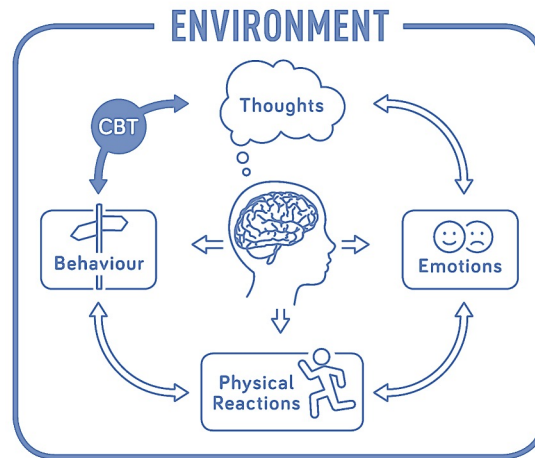
Goal Setting

Your Action Plan

CBTm

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

The CBT Model



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We'll start with a brief review of the CBT model that was presented in Class 1. Let's start at the "Emotions" rectangle and work our way around the circle.

FEELINGS

There are 2 categories 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 or my breathing to quicken.

Sometimes it's hard to decide if something is a thought or a feeling. For instance, what is "I feel like a failure?" [pause] It's a thought, because "failure" is a label or judgement. The emotion might be "confused", "uncertain" or "unconfident" leading one to judge oneself as "a failure".

BEHAVIOURS

What you do - your actions - can change what you think and how you feel. Let's continue with the example of feeling nervous. If I am nervous about speaking up in front of others, I might become even more nervous if I notice my hands start shaking, and this might cause me to decide to not speak up in a meeting, or in class.

Another example of how our behaviours can influence our thoughts and feelings is when you stay in bed all day when feeling discouraged. This might send yourself the message that you are not capable of doing things and can take away any opportunities for positive experiences that could lift your mood, if given a chance. When we go out and interact with people, there are usually some positive experiences (social rewards), and we can also send ourselves the message that we're able to be social and interactive, and that your depressed mood won't last forever.

THOUGHTS

To complete the circle, let's look at our thoughts. In any situation, you will have certain thoughts about the situation. What you think will affect how you feel, and vice versa. If I noticed my hands shaking when I had to give a presentation in class or at work, I might think "Everyone can see how nervous I am" and then I might feel even more nervous with worse shaking hands. Thoughts and feelings affect our actions, and in this example, I might decide to postpone my presentation, or drop out of the class to avoid speaking in front of others.

Cognitive Theory of Depression



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

CBTm

Let's review what the theory of CBT tells us about how some specific ways of thinking can lead to depressive symptoms and can keep the depression going.

Feeling low, and the experience of depression, seem to be supported by some specific and automatic ways of thinking. When we start to think like this, we are likely to feel worse.

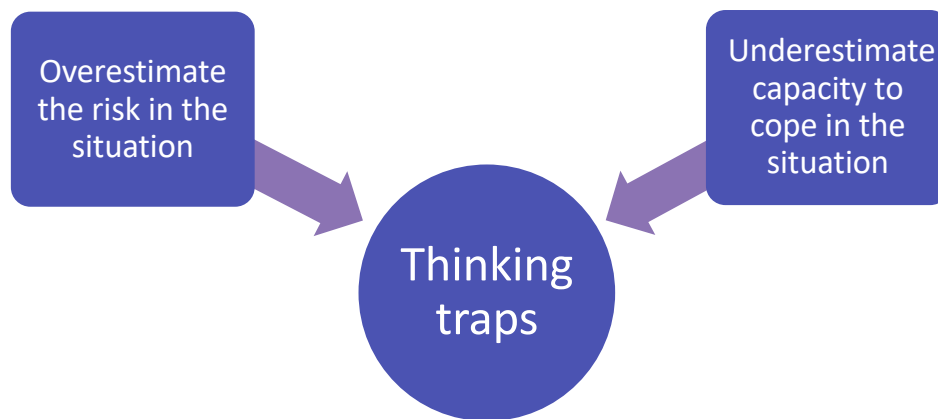
CBT says that when we have a negative view of ourselves, others, and the future, we are likely to feel more depressed. These specific ways of thinking in response to a situation, are "It's me – there's something wrong with me" an example of negative view of self ; "nobody understands" an example of a negative view of others and "It will always be like this", an example of a negative view of the future.

To fight back against depression, it's important to remind ourselves that:

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

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Cognitive Theory of Anxiety



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The idea that we develop thought habits or thinking traps was presented in Class 1.

The experience of persistent anxiety often goes along with two specific thinking traps that fuel each other. The first is overestimating the risk in a given situation, and the second is underestimating one's ability to cope in that situation.

If I'm anxious because of an upcoming test, I might have the thought "I'm going to fail". If I've done a lot of studying and preparation for the test, an overestimation of the risk in the situation would be that thought "I'm going to fail".

When we fall into the thinking trap of underestimating our capacity to cope in a situation, thoughts such as "I'm going to fall apart" or "There's nothing I can do" are some examples of this negative thinking trap.

If I'm still very anxious and thinking that I'm going to fail, despite lots of preparation, then I've likely fallen prey to the two thinking traps.

Challenging our anxiety means challenging oneself to judge a situation from the facts, rather than our sense of the risks involved, as well as acknowledging that we often have the skills needed to cope and manage the situation at hand.

Common Thinking Traps



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I'm going to pause for a minute and invite you to review these common thinking traps.

[Ask:] As you review the thinking traps, can you think of ways that paying attention to thinking traps might help with low mood or high levels of worry?
[pause]

[Possible answers: a) If you know which thinking trap you experienced, then you might be able to work on not falling into that same thinking trap next time, and this might build your resilience and improve your mood, b) Knowing the thinking traps you commonly experience might help to regulate your emotions and thoughts]

CBT Myth

Myth	Cognitive therapy is to help people think positively
------	--

Truth	Cognitive therapy is to help people think flexibly and balanced
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CBTm

As a reminder from last class, CBT is actually about thinking in a flexible, balanced, and realistic way.

Can anyone tell me why it's important to think in a flexible way, rather than to just "think positive"?

[Possible answers: "because pretending that "bad" stuff doesn't happen can feel fake", "stuffing your feelings isn't healthy", etc.]

This concludes the review of material from the first class.

Class Outline

Mindfulness

Review of Previous Action Plan

Review of Realistic Thinking

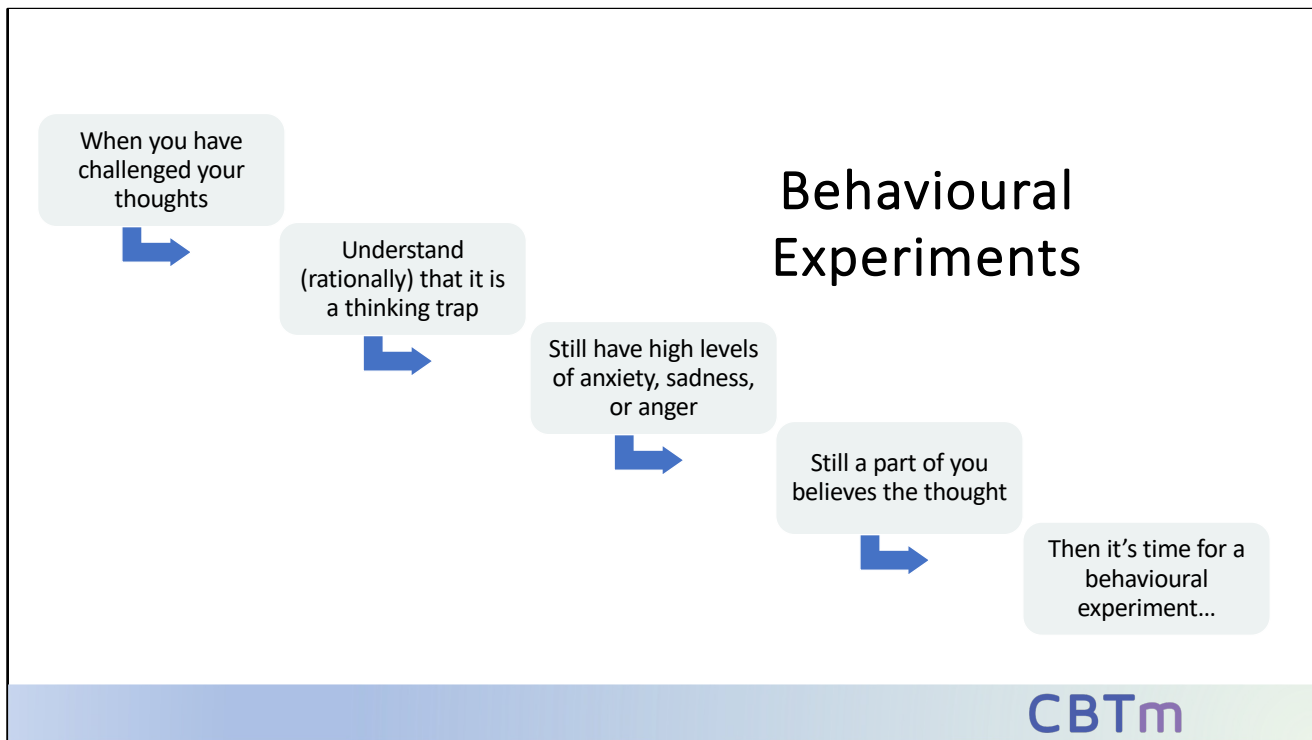
Basics of Behaviour Theory

Goal Setting

Your Action Plan

CBTm

Next, we will begin discussing the first new topic in Class 2 – the Basics of Behaviour Theory.

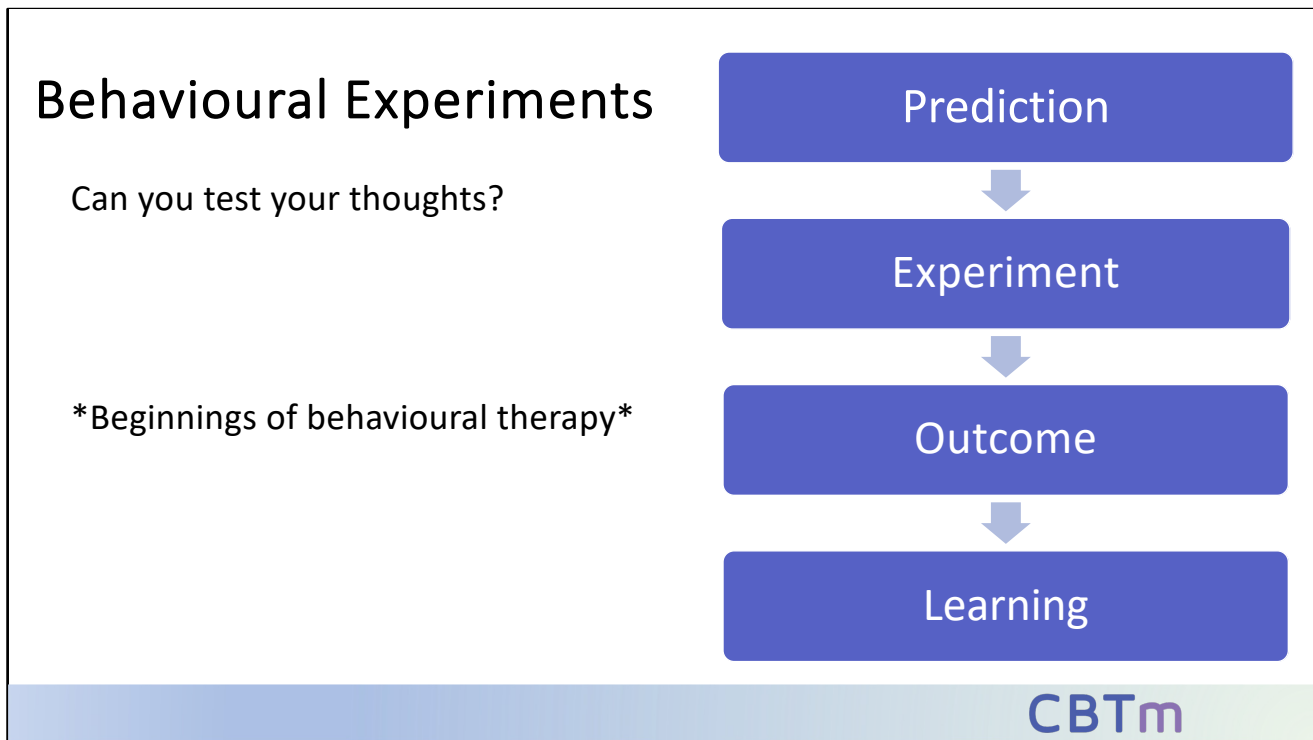


In the last class, we focused on becoming aware of our thinking patterns, noticing if there were unhelpful judgements or patterns in our thinking, and we learned a tool – the Thought Record – that can help shift to more balanced thinking. That was the “C” in CBT.

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 are feeling anxious or experiencing a low mood? Do our actions in these moments help or hinder our feelings and/or our level of stress?

Research shows us that there is a strong link between our activities and our mood. Behaviour theory focuses on making planned changes in our behaviour -our actions- in order to impact how we are feeling. A behaviour experiment is the first tool that we will look at. Our thoughts often include a prediction or a guess about what we think will happen if we choose to do something. Behaviour experiments are an opportunity to challenge yourself, in small do-able steps, so that you have a chance to grow and change your thoughts and feelings.

For example, I might think “If I go back to school now, I’m so far behind the times that I’ll look silly”. 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 I’m experiencing is Fortune Telling. Still, I might be nervous about taking this step. So, the chance is there to take this on as a behavioral experiment, to take the action and then see if my prediction is proven or disproven.



[Updated April 2024]

A behavioural experiment requires taking the prediction (the "guess") you are making in your thoughts and writing it down. Writing it down is an important part of the process because often we let these thoughts go unchecked and never call them into question. The next step involves finding an opportunity to test the prediction and then notice what really happens. We might think "If I try a new skill, I'll make a mistake, and people will laugh at me." The way to test this prediction is to find an opportunity to try a new skill and then notice if you make a mistake, and if you do make a mistake, notice what people actually do. We might learn that others don't notice our mistakes, or that they jump in to help, rather than laugh at us.

Another example of a behavioural experiment is provided on the next slide. You can also follow along in your handouts.

Find these in your handouts!

Behavioral Experiment		Behavioral Experiment	
Prediction What is your prediction? What do you expect will happen? How would you know if it came true?	Rate how strongly you believe this will happen (0-100%)	Prediction What is your prediction? What do you expect will happen? How would you know if it came true? <i>If I speak in public I will shake so much that people will notice and laugh at me</i>	Rate how strongly you believe this will happen (0-100%) 90%
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?		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? <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>	
Outcome What happened? Was your prediction accurate?		Outcome What happened? Was your prediction accurate? <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>	
Learning What did you learn? How likely is it that your predictions will happen in the future?	Rate how strongly you agree with your original prediction now (0-100%)	Learning What did you learn? How likely is it that your predictions will happen in the future? <i>Although I feel nervous when speaking it's not as obvious to other people</i>	Rate how strongly you agree with your original prediction now (0-100%) 50%

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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.

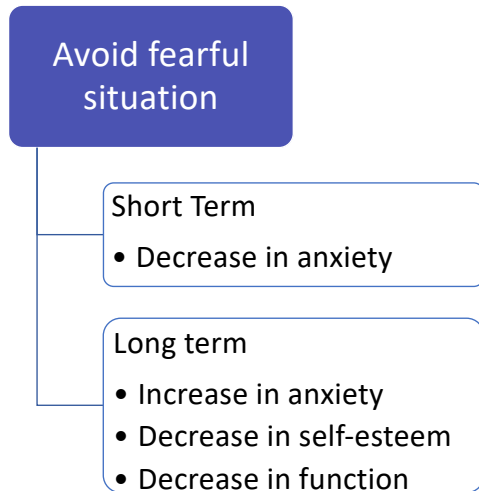
Let's take a minute to talk about how the skill of using behaviour experiments might be beneficial. Behaviour experiments are not only a way to improve challenging areas in our lives but can also be used to work on things that you want more of, such as more time spent on fun activities or spending time with people that you enjoy being with.

Now that you've been introduced to behavioural experiments, can anyone remember a behavioural experiment they've done in the past? [pause] [possible answers: re-connected with a friend, a new exercise routine, tried a new food that I thought I wouldn't like, I made small talk with someone I didn't know, I tested a belief I have about myself, etc.]

Does anyone have an idea for a simple behavioural experiment they are thinking of trying? [pause]

Let's learn more about how these experiments work, and how this can help you focus on the details of the experiment.

Behavioural Theory of Anxiety



CBTm

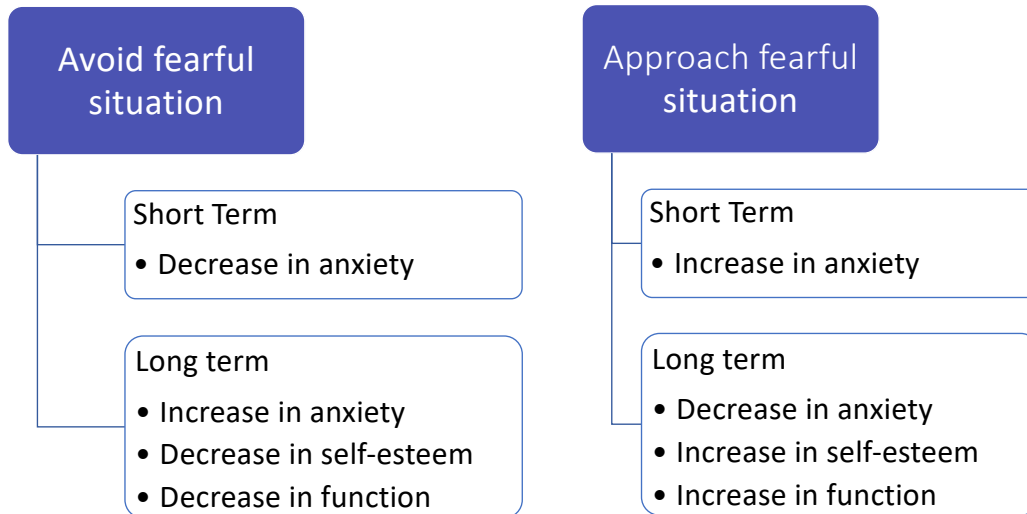
Science has quite a lot to tell us about how human beings react to the things we fear, whether it is an immediate life-threatening and dangerous situation, such as coming face to face with a bear, or if there's something about the situation that gets us to believe it's dangerous, but when in fact it's actually low risk, such as giving a speech at a friend's wedding.

The reaction we often have to a situation that causes us fear or anxiety is avoidance. In the short-term we may feel a sense of relief to have avoided the situation, but in the longer term the avoidance may have some cons or costs. The anxiety will still be there the next time we're in that situation and we may begin to think of ourselves as being less capable, and we might actually become less capable over time, if we continue to step away or avoid this situation in the future.

The Behavioural Theory of Anxiety shows us that avoiding the situation stops us from learning that a) our prediction may not be true, b) the situation may not be as dangerous as we believe, and c) that we're able to cope with whatever difficulties come along.

For example, we might think that flying is very dangerous and avoid taking planes. However, statistics show us that more people are injured from traveling by car than from flying. If we avoid flying, we remain just as frightened and anxious, 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



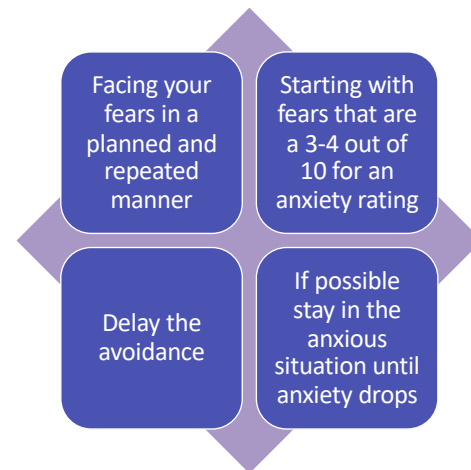
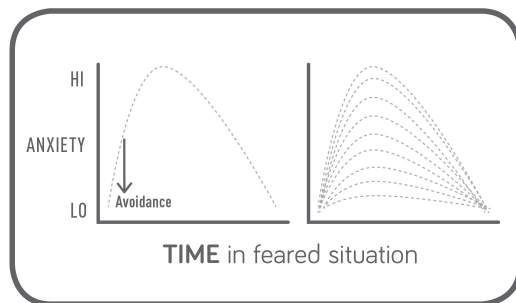
CBTm

If we choose to stay in a situation that causes us to feel anxiety (avoiding the avoidance), the benefits over time can be substantial, provided we keep the following in mind:

- It's important to know that anxiety is unpleasant but that it's not dangerous. Anxiety and fear are our system's way of signaling danger to us but are not dangerous themselves.
- Avoidance feels good in the short term! This is why avoidance patterns can be so hard to break. It's perfectly natural to want to avoid something that triggers feelings of anxiety or fear.
- However, in the long-term avoidance leads to increased anxiety, decreased self-esteem, and decreased function. Life can get smaller and more isolating when anxiety gets you to avoid situations.
- Facing the feared situation leads to anxiety in the short-term. That's why it can be difficult to do on your own, and you need strategies and support to help you.
- However, in the long-term, facing your fears can lead to decreased anxiety, an increase in your self-esteem, and an increase in overall functioning.
- 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 had thought, and you also learn that you have a greater ability to cope than you thought! You can gain confidence and improve your mental wellness by working on approaching the situation rather than avoiding it.

Exposure



CBTm

[Updated April 2024]

Exposure is one of the primary tools used in treating anxiety and is a very powerful strategy. The basic idea is to set up a way to face your fears or anxiety in a series of small, thoughtfully planned steps.

The first step is to rate your anxiety level in a specific situation on a scale of 0-10, where 0=no anxiety and 10=overwhelming panic.

Then start exposure practice with a situation (or step) that causes you to feel about a 3/10 level of anxiety, so a moderate range of anxiety. The graph on the slide shows us how a drop in our anxiety level takes place when we practice being in the situation. The first time we try something the anxiety will probably be near the highest dotted line, but each time we practice, the dotted line shows the anxiety dropping. Keep repeating the exposure steps until your anxiety drops to a 1 or 2 out of 10. At that point, it's time to pick another situation that's a little higher in anxiety, and so on, to progress towards your goal. There will be examples of how exposure practice works in the next few slides.

When practicing exposure, your instinct might be to try to “get through it” quickly by distracting yourself or holding a lucky charm of sorts. However, that’s not really what exposure wants you to do. The idea is to stay in the situation without doing anything “distracting” until your anxiety level decreases.

It’s also important to know that exposure is not meant to be used for dangerous situations or to overcome fears that are protective, for example, the fear of being on train tracks when a train is coming. Rather, exposure is meant to help us overcome fears and anxiety related to situations that cause us to feel anxiety or fear, but that are not actually dangerous.

Our bodies know how to bring us back to our regular physiological state; it’s called homeostasis. Remember that anxiety and fear are our brain’s way to signal danger, but anxiety and fear are not dangerous themselves, even if they feel uncomfortable.

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

There are two handouts for this class that provide more information: 1) What is Exposure Therapy?, and 2) Facing Your Fears: Exposure.

What Is Exposure Therapy?

Exposure therapy is the most active 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 active 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, e.g. 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. Reminders activate this 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 your mind learns to recall a good memory and you feel okay.

Example provided on the following page.



Graded exposure

Graded exposure is a gentler 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 that object, event, or situation and stay there until your fear reduces
- Don't move up the ladder until you feel comfortable at each step



Find these in
your handouts!

Class 2 PSYCHOLOGY T15

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Facing your Fears: Exposure

adapted from AnxietyCanada

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.

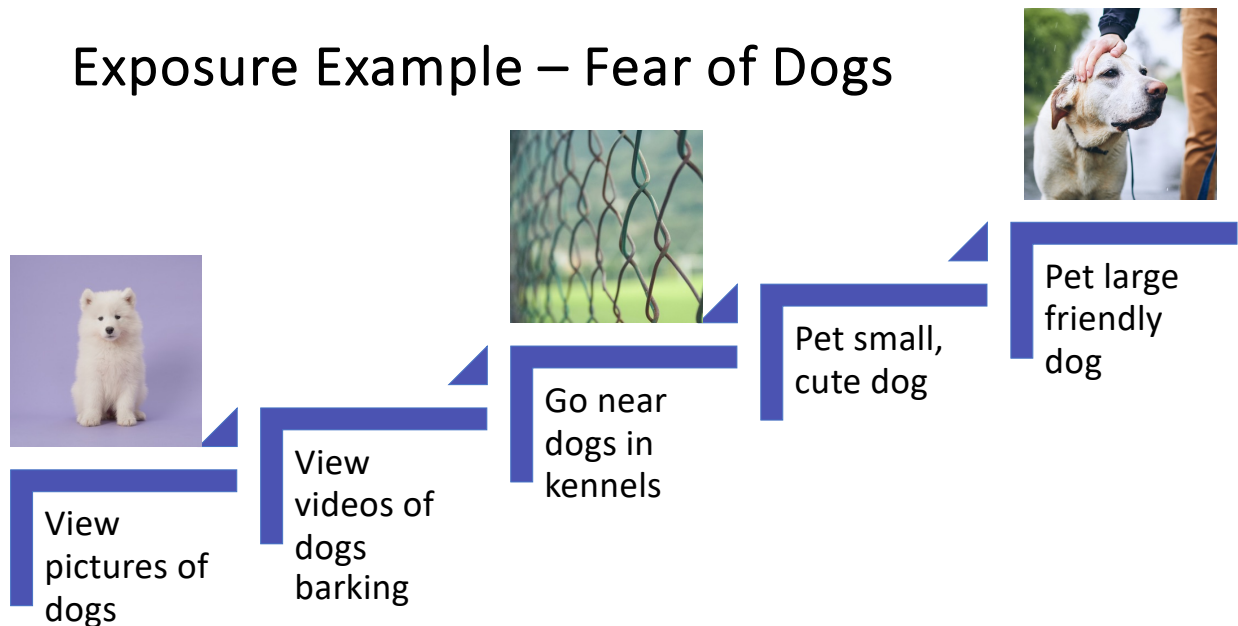


Class 2

CBTm

This is an example of what these handouts look like.

Exposure Example – Fear of Dogs



CBTm

Having a bad experience with a dog can sometimes develop into a fear of dogs. If this is a fear of yours, then other parts of your life may also be affected by this because you may not like going for walks outside or visiting the park for the fear of coming across dogs. This may even impact your friendships because you may be avoiding friends who have dogs as pets. These are good reasons to work on becoming more comfortable around dogs as a goal, using exposure.

This is an example of exposure practice that was illustrated in the graph presented on the Exposure slide. The idea is to set up a series of small steps – also called an approach ladder – that are within your control and are not actually dangerous (but may raise false alarms for you) in order to work toward meeting your goal. In this example, the specific end goal is to become more comfortable around dogs. We can see there are several smaller steps on this ladder to help us work toward the end goal, starting with viewing pictures of dogs, for example on your phone.

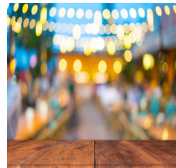
We'll go through another example of using exposure toward a situation that may cause you fear or anxiety on the next slide.

Exposure Example – Fear of Social Situations



Go to a coffee shop and get coffee to go at the counter

Have a coffee at a coffee shop with a good friend and sit near the door



Go to a movie with a friend and talk about the movie afterwards

Say yes to a social invitation from a friend for a dinner at their house



Go to a restaurant with two friends and order a meal from a server

CBTm

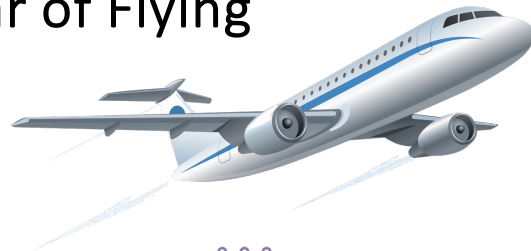
[New slide for general adult population – added April 2024]

Having an awkward or bad experience in a social setting can sometimes develop into a fear of attending social events in the future. If this becomes a fear of yours, then other parts of your life may also become affected because you may not want to do activities that require being in public, like shopping with friends, going to the movies, or going out to eat. This fear may even impact your friendships because you may be avoiding friends who like to go out to socialize or you may feel unable to socialize in a group setting. These are good reasons to work on becoming more comfortable in social situations as a goal, using exposure.

The steps on the slide provide another example of practicing exposure. Again, the idea is to set up a series of small, gradual steps – the approach ladder – that are within your control and are not actually dangerous for you to experience, although they may be felt as scary or uncomfortable to you, to reach your end goal. In this example of ‘the fear of social situations’, the specific end goal is to have a meal in a restaurant with friends and to engage in conversation. If we look backwards from this end goal, we can see there are a series of smaller steps on the ladder that work to slowly increase our exposure to social situations, to help us become more comfortable in social settings. The first step involves ordering a coffee from a take-out restaurant or the to-go counter at a café. Once the anxiety has gone down in practicing the first step, we can move onto the next step, and so on, until we reach our end goal.

The handout ‘Facing your Fears’ further describes the steps followed in exposure therapy.

Exposure Example – Fear of Flying



Imaginal exposure



Writing script of worries



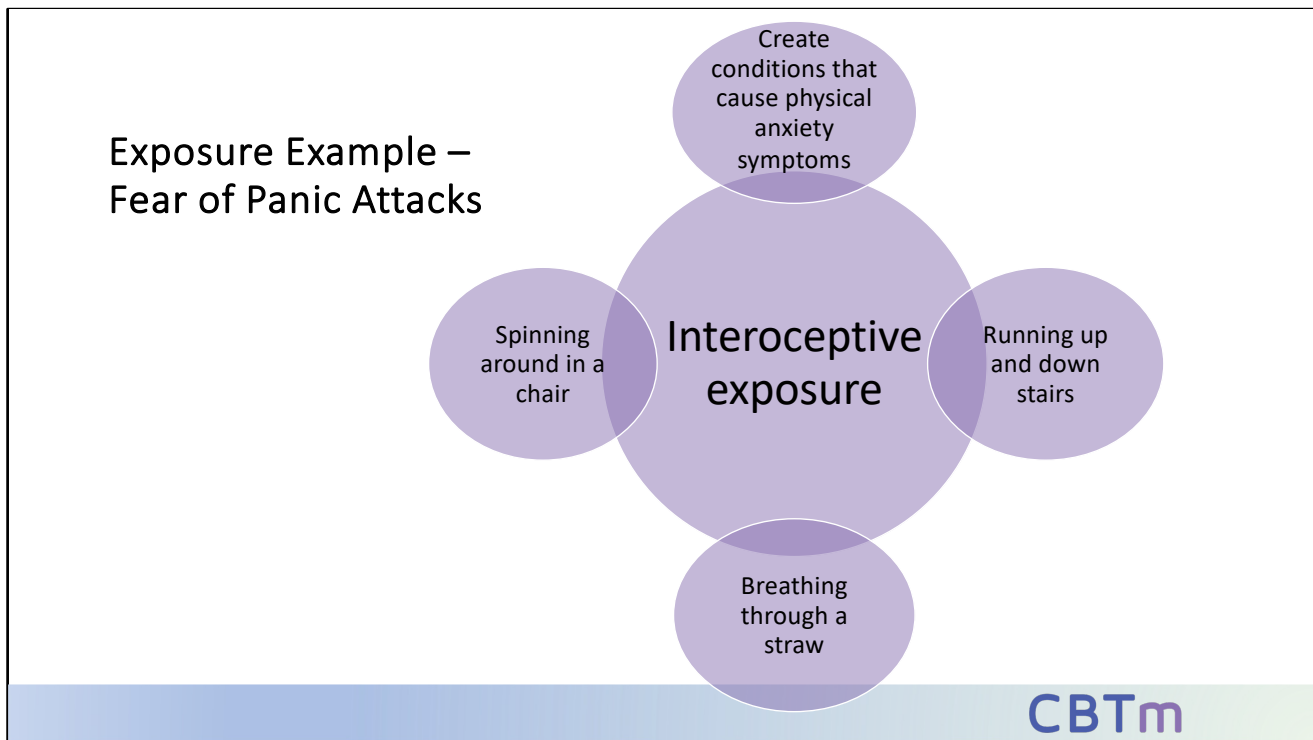
Mimicking conditions related to fear

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

CBTm

Sometimes it's not possible to work on your exposure goals using real life practice. For example, if you have a fear of flying, it's not practical or likely possible to practice by getting on a plane every day! Sometimes we have to be creative in order to work on exposure goals. For a fear of flying for example, people can practice by imagining being on a flight, or by practicing different experiences of being on a plane, such as turbulence, or sitting for an extended period of time. This is called "Imaginal Exposure" and is done in a carefully planned way with an experienced therapist.

This introduction to Imaginal Exposure is presented to give you a sense of how it works. If you are interested in learning more about this, we recommend consulting with a mental health care professional.

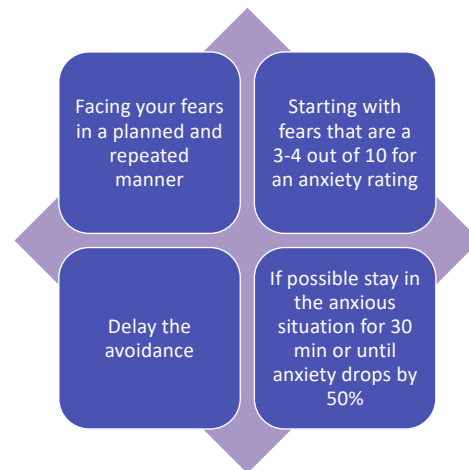
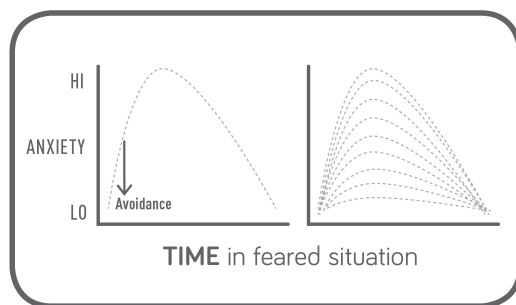


A panic attack is the fight/flight/freeze response in its extreme. We can't avoid or immediately control these physical sensations because, at times, they happen out of the blue. For those who have experienced a panic attack, some of the physical sensations such as your heart pounding faster, can trigger a thought like "I'm having a heart attack" or "I need to go to the hospital."

A special type of exposure, Interoceptive Exposure, tries to mimic the physical sensations that can increase your anxiety (such as running up and down the stairs to mimic your heart racing). This type of practice can make it possible to disprove the prediction and learn that the unpleasant sensation can be tolerated. It's important to mention that this exposure practice isn't trying to recreate the panic attack, but instead gets you to practice experiencing these sensations to teach your system to tolerate the sensations associated with panic.

Again, this information is presented to guide you with respect to next steps. This is not an exposure exercise that should be tried without guidance from a mental health professional.

Exposure



CBTm

Sometimes class participants ask if they can practice exposure steps on their own. While exposure techniques are very powerful, there are common pitfalls that you should be aware of, if you want to try this yourself.

First, it would be okay to try some small, low-level steps on your own, provided the risk is low and you feel safe, such as practicing speaking up in a class, or at work. You might also be okay to try working on a fear of heights. You are not trying to recreate a dangerous situation or cause yourself high levels of fear or anxiety. You are not trying to put yourself in a step where you are at risk of pushing your anxiety higher.

Remember that these steps are where your anxiety level is about a 3 out of 10. These are small steps where you are feeling outside of your comfort zone but are still in control. Safety behaviours (such as distracting yourself by using your phone or holding a lucky object) get in the way of our learning, so if your exposure step has you turning to a safety or distracting behaviour, or if you feel fear, then you need to stop the exposure practice. For more complicated and challenging exposure steps, it is recommended to have a mental health professional involved.

Exposure is not a technique that is advised for addictions or when you're having trouble regulating your emotions.

Before we move on, does anyone have any questions about exposure and how it works? Is anyone thinking of trying some small exposure steps on their own?
[pause]

Behavioural Theory of Depression

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

Avoidance

Feeling down

Further avoidance

CBTm

Avoidance is also a factor when we're feeling down and/or in a depressed mood. We may begin to step back from activities, cancel more plans, and find it difficult to motivate ourselves to do things. In the short run, it might feel like life is a bit simpler this way and we may feel that it's easier to cope. However, in the long term, this avoidance can cut ourselves off from sources of positive interactions and enjoyment and then we will have fewer chances to connect with others, feel good, and have a sense of accomplishment.

Behaviour 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

[Updated April 2024]

The rationale behind Behaviour Activation is to not wait until you're feeling better to do things, but to continue engaging in daily and pleasurable activities anyway – even if you don't feel like it, or if you don't enjoy it as much as you used to, or at all.

Engaging in hobbies and interacting with friends can provide feelings of satisfaction and accomplishment that can help naturally lift your mood. The behavioural experiment tool applies here too. For example, maybe the prediction is "I would feel better if I stayed home". A simple way to do a behavioural experiment is to engage in an activity, rather than stay home, and record your mood before the activity and compare it to how you feel during or after the activity. Notice what actually happens compared to what was predicted.

If you need some ideas about possible activities to try, look at the handout called Fun Activities List. There are numerous activities listed and space at the end for you to add your own fun activities.

Getting Started With Behavioural Activation

Find these in your handouts!

Fun Activities List

This is a list of activities that you may find enjoyable. Consider the activities listed below. You may find that some fit for you and some don't. Also, some activities may be things you can do right away, and others may require a bit of planning. Taking part in activities that you find fun can lead to positive experiences and lift your mood. You can test the idea of behavioural activation by recording your mood before an activity and comparing it to how you feel during or after. At the end of this list there are a few lines for you to add your own fun activities.

- Take an online class in an area of interest
- Cook or bake a new recipe
- Soak in the bathtub
- Research a topic of interest
- Do an at-home facial
- Plan a trip to the beach
- Do something nice for someone
- Redecorate your room
- Build a bird house
- Volunteer for a cause you support
- Look at pictures of beautiful scenery
- Purchase or pick a fresh plant, or flowers for your house or room
- Listen to new music
- Learn a new language
- Open the curtains and blinds to let light in
- Take a free online class
- Try a new good-smelling shampoo/conditioner/body wash
- Work on a puzzle
- Donate old clothes or items to charity
- Sing out loud
- Lay in the sun
- Flip through old pictures
- Organize your desk/workspace
- Play volleyball
- Buy new stationery
- Find a river or lake to visit
- Attend an online trivia night
- Journal beside a river
- Spend time in nature
- Enter a competition
- Spend time watching the clouds drift
- Do crossword puzzles
- Sign up for an online debate
- Cuddle a pet
- Manicure your nails
- Learn a magic trick
- Go sailing
- Listen to a podcast or radio show
- Stretch your muscles
- Take a walk with the intention to notice the architecture
- Play soccer
- Plan a visit to a local botanical garden
- Try a DIY project or other arts/crafts
- Watch live comedy online
- Sign up for a ghost tour
- Play frisbee
- Sketch, paint, doodle
- Play chess online
- Do some yardwork or gardening
- Jump on a trampoline
- Plan a future horseback riding activity
- Go fishing
- Organize your dishes
- Put fresh flowers in the place you live
- Sit outside and listen to birds sing
- Offer to walk someone's pet
- Look up future public lectures/workshops at your local bookstore, university, or community centre
- Sing karaoke online with friends
- Cook a fresh meal and freeze the leftovers
- Sign up for online meditation
- Plan a trip to a national or provincial park
- Plan a themed party for the future
- De-clutter
- Plan a camping trip
- Learn to juggle
- Play cards
- Contact an old friend
- Re-watch a favourite movie or tv show
- Make a new toy for your pet
- Create planters or decorative items at your door
- Make yourself an ice-cream cone

Class 2

Fun Activities List

- Go ice skating or rollerblading
- Schedule a day with nothing to do purposefully
- Give positive feedback about something (e.g., write a letter/email about good service you received, tell someone you appreciate them, make a kind comment on a post)
- Hang a bird feeder or leave birdseed out
- Initiate an online hangout with friends or family
- Make jams or preserves with local fruit
- Order in something new for dinner
- Buy someone a gift online and send it to their home
- Repair something around the place you live
- Wash your car or someone else's
- Watch a new TV series
- Watch motivational videos on YouTube
- Send a loved one a card or letter in the mail
- Bake something to share with others (e.g., family, neighbours, friends, work colleagues, a local retirement facility)
- Have a video call with someone who lives far away
- Organize your wardrobe
- Play a musical instrument or sign up for lessons
- Light a scented candle, oil, or incense
- Exercise in a way that feels good to you
- Put up a framed picture or artwork
- Schedule an online dinner party
- Offer to plan or host a friend's birthday
- Ride a bike
- Sew, knit, crochet, quilt
- Visit the zoo or planetarium
- Birdwatch
- Do something spontaneous
- Go on a picnic
- Order or make your favourite warm drink
- Daydream about the future in a positive way
- Watch a comedy video or show
- Play tennis or badminton
- Clear your email inbox
- Create a plan to get out of debt/pay debts if you're in debt
- Organize your camera roll
- Upcycle old items
- Buy a new clothing item
- Plan a trip to a speedway
- Listen to an audiobook
- Start a gratitude journal
- Teach a special skill to someone else (e.g., knitting, woodworking, painting, language)
- Participate in a peaceful protest that you support
- Initiate a movie date with a friend
- Talk to an older relative and ask them questions about their life
- Make your bed with freshly laundered sheets
- Whittle wood
- Learn calligraphy
- Have a daytime nap
- Re-arrange your furniture
- Go for a drive (if you have access to a car)
- Donate blood
- Star gaze
- Create a calm meditative space in your home
- Go for a jog, walk, or run
- Teach your pet a new trick
- Skip/jump rope

Other ideas:

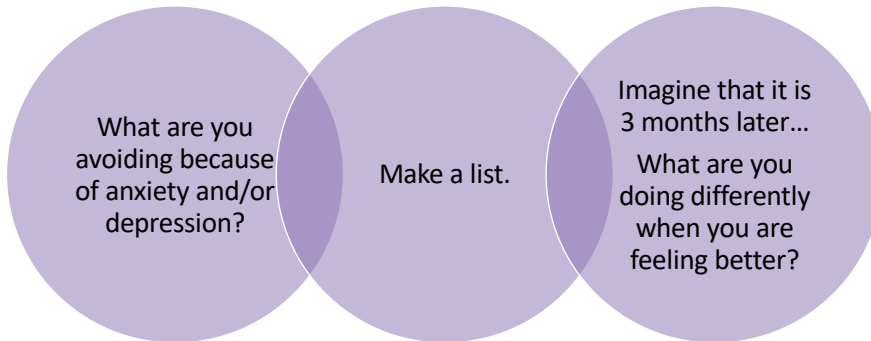
Class 2

CBTm

Let's take a minute to review some activities that you may want to try to engage in behavioural activation. Sometimes we can forget hobbies and activities that we used to care about or enjoy. Depression can take away the motivation and energy that used to be automatic and helped us to feel good. Here, Behavioural Activation says to do the activity first – don't wait for the motivation – and the positive mood that comes from doing an activity may help to lessen the depression and help bring back our motivation.

This is a big list, but you only need to pick a few things at this point, that you might like to try. I'll give you a minute to go over these or write some down.

What are you avoiding?



CBTm

Now that the basics of behavioural strategies to work on for anxiety and depression have been discussed, we suggest putting these ideas to use to help with your own stress management.

Please complete this exercise now. Write down two activities or tasks (these might be from the activities list on the previous slide) that are important to you, but you are avoiding due to worries or discouragement. Now imagine that three months have passed, and your worry and discouragement have decreased. What do you see yourself doing differently? What is the series of smaller steps along the way to that end goal? Is there a step that rates no more than 3 of 10 for anxiety that you could work on in the coming week? Is there a pleasurable activity that you could try or resume? Regular, consistent practice in small, manageable steps will help you progress to your overall goal.

The next section will help you in making manageable goals.

Class Outline

Mindfulness

Review of Previous Action Plan

Review of Realistic Thinking

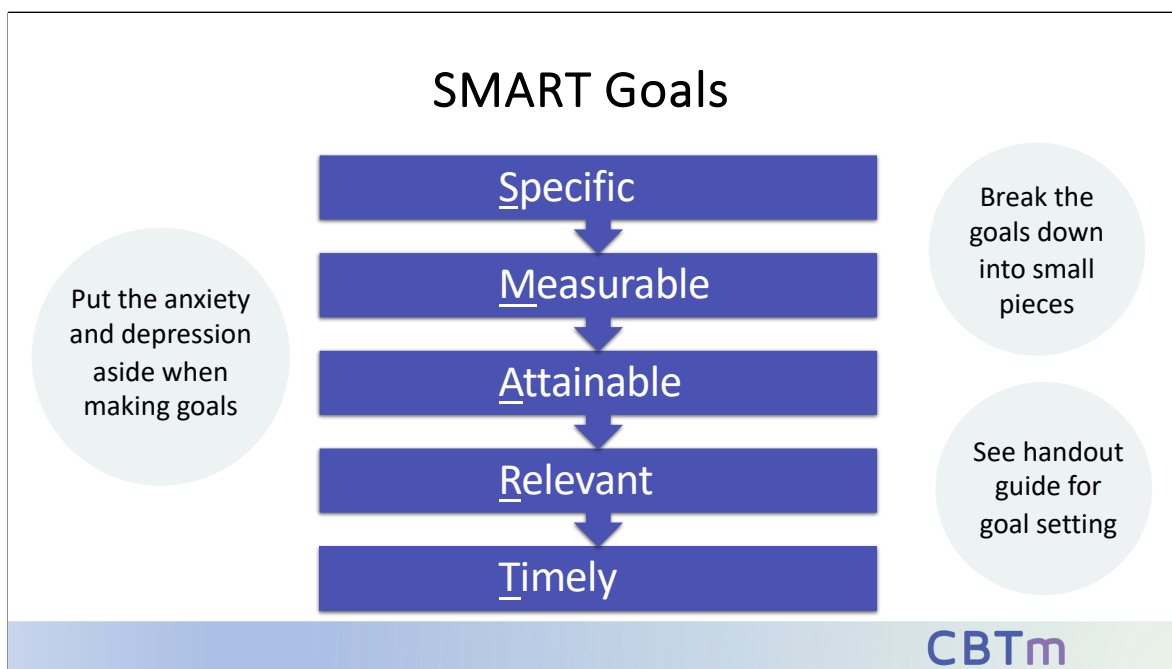
Basics of Behaviour Theory

Goal Setting

Your Action Plan

CBTm

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



Setting good goals for yourself requires a bit of thought and can be challenging to figure out what to work on first.

- 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 its source. Remember that behavioural experiments show us that waiting for the depression and anxiety to go away on their own can leave you feeling helpless and stuck. Goal setting is a way to purposefully make small do-able steps that can begin to build your motivation and change your mood.

- What have you been avoiding? Do you want to start doing any of those things in a small way? If the answer is "Yes", try turning that into a SMART goal.

SMART means...

S = **Specific**, meaning the 'what', in detail, so you know exactly what it is that

you want to work on.

M = **Measurable**, and is the where, when, and how often (and other quantifiable measures) so that you can clearly check-in on and check the goal off your list when you've accomplished it.

A = **Attainable**, making sure the goal is something you can do and that you have the resources for – meaning there is a 90% likelihood it can be done this week. For example, “Run 10k” may not be attainable but “Walk on the treadmill for 10 minutes” might be!

R = **Relevant**, this means the goal or activity matters and is important to you.

T = **Timely**, meaning you are ready, and the goal/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
Eat less sugar	Reduce the cans of pop I have by 1 can per day
Go back to school	Take a writing course at the community college in September
Meet new people	Join a walking group and have a conversation with one new person on the first walk
Save money	Put \$10 in my savings account each month
Spend more time outside	Go to the park on Saturday for 3 hours
Be less anxious	Practice relaxation exercises once a day
Practice exposure exercises	Complete exposure exercises weekdays between 7 and 9 pm



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

CBTm

Thinking of the SMART criteria, can you explain what makes the goals in the right column the better ones? Can you identify the SMART components in these 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.

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 lifetime). 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:

A) 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 20 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.

More on SMART Goals

Find these in your handouts!

B) Concrete and Specific

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 less sugar	Reduce the cans of pop I have by 1 can per day
Go back to school	Take a writing course at the community college in September
Meet new people	Join a walking group and have a conversation with one new person on the first walk
Save money	Put \$10 in my savings account each month
Spend more time outside	Go to the park on Saturday for 3 hours
Be less anxious	Practice relaxation exercises once a day
Practice exposure exercises	Complete exposure exercises weekdays between 7 and 9 pm



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

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

Your Action Plan

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

CBTm

This concludes the new material for this class.

An action plan is a commitment to yourself to practice the skills introduced in CBTm classes. 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!

Suggestions for your action plan for the upcoming week:

- Continue with completing a thought record whenever you encounter a strong feeling (worry, discouragement, frustration, sadness).
- Practice mindfulness for 5 minutes 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.

If you weren't able to do any of your action plan this past week, what got in the way? Action Plans sometimes need to be scheduled; setting reminders for yourself, as well as scheduling some time to devote to practicing, can help you

incorporate this into your week. Setting alarms and calendar reminders in your device or a day planner are one way to do this. Printing off and putting the handouts on the coffee table, your bedside table, or on the fridge are some ways to give yourself visual reminders. Another way to motivate yourself is to tell someone about your goals and ask them to help you complete them, or to ask them to check in with you later in the week. Sometimes knowing that someone is checking up on our goals helps motivate us!

Resources

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

Klinic 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.reasonstolive.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>

Suicide Crisis Helpline (24/7) - call or text 9-8-8
→ Trauma-informed and culturally appropriate suicide prevention support

CBTm

Here is a list of resources that you can access 24/7 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

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

CBTm Class Evaluation



CBTm

[Your site may choose to collect feedback on what class participants think of today's content. The measure '*Evaluation of the CBTm Education Session*' was developed for this purpose and can be found in the CBTm Facilitator Manual. If your site is using it, you might say ... ***"We're interested in what you think of today's session. The CBTm classes have changed over time because of previous client feedback. Please complete the class evaluation form when you receive it."***]

[Some sites also want to evaluate if attending the sessions is helping their participants feel better (reduce symptoms). Some short, cost-free questionnaires are recommended in the CBTm Facilitator Manual. If you are using some form of outcome monitoring, you might say ... ***"We are interested in how you are doing and want to know if the strategies taught here are making a difference in your well-being. Thanks for filling out the questionnaires! We understand that these are a bit repetitious, but 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!" and/or "See you in Class 3!"

CBTm

COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS
THÉRAPIE COGNITIVO-COMPORTEMENTALE DE LA PLEINE CONSCIENCE

Class 2 Handouts

Mindfulness Exercise - *Body Scan*

Behavioural Experiments

Exposure Therapy

Fun Activities

Goal Setting

www.cbtm.ca

BODY SCAN

1. Begin by feeling the weight of your body on the chair. 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.

Behavioural Experiment

Prediction

What is your prediction?
What do you expect will happen?
How would you know if it came true?

Rate how strongly you believe
this will happen (0-100%)

Experiment

What experiment could test this prediction? (where & when)
What safety behaviours will need to be dropped?
How would you know your prediction had come true?

Outcome

What happened?
Was your prediction accurate?

Learning

What did you learn?
How likely is it that your prediction(s) will happen in the future?

Rate how strongly you agree
with your original prediction
now (0-100%)

Behavioural Experiment (Example)

Prediction

What is your prediction?
What do you expect will happen?
How would you know if it came true?

If I speak in public I will shake so much that people will notice and laugh at me.

Rate how strongly you believe this will happen (0-100%)

90%

Experiment

What experiment could test this prediction? (where & when)
What safety behaviours will need to be dropped?
How would you know your prediction had come true?

I could speak up at the next meeting on Monday - I could present some of the data that I have been meaning to present.

I would need to gesture to the slides with my hands and not hold onto the table or keep my hands in my pockets.

I could ask my friends if they noticed me shaking when I talk.

Outcome

What happened?
Was your prediction accurate?

I was really nervous and was very aware of my hands.

My friends said I spoke well and that they could not see my hands shaking.

Learning

What did you learn?
How likely is it that your prediction(s) will happen in the future?

Although I feel nervous when speaking, it's not as obvious to other people, and I can get through it successfully.

I feel like this will be easier to do in the future.

Rate how strongly you agree with your original prediction now (0-100%)

50%

Behavioural Activation

The symptoms of depression such as tiredness, lethargy, loss of interest, loss of motivation, loss of pleasure, and indecisiveness can lead to inactivity, and this often keeps the depression going or even makes it worse. Also, because of the lack of motivation, a depressed person might begin to neglect everyday tasks and responsibilities at work or at home, and the list begins to pile up. As such, when a depressed person thinks about the things they have to do, they might feel overwhelmed by the pile of things they have put off doing. This might result in them feeling guilty or thinking that they are ineffective or even a failure. This will also worsen the depression.

Increasing your activity level.

One of the ways of overcoming depression is to increase your level of activity. There is a lot of evidence that shows that the more people do, and the more pleasant activities they get involved in, the better they feel. Becoming more active has a number of advantages:



Activity helps you to feel less tired.

Usually, when you are physically tired, you need rest. However, when you are depressed, the opposite is true. Sleeping more and sitting around doing nothing will only cause you to feel more lethargic and tired. Also, doing nothing leaves room for your mind to ruminate on depressive thoughts, which will make you feel even more depressed.

Activity helps you to feel better.

At the very least, when you start engaging in some kind of activity, it gives your mind something else to think about – a different focus. Doing things, even a little at a time, can help give you a sense that you are moving forward, taking control of your life again, and achieving something – experiencing a sense of MASTERY. You may even find PLEASURE and enjoyment in the activities you do.

Activity can help you think more clearly.

Once you get started, you may find that you take a different perspective on particular problems in your life. Also, because your mind takes a different focus as a result of the activity, your thoughts may become clearer.



Fun & Achievement

It makes good sense to do fun and pleasurable things to make yourself feel better, but these are not the only sorts of activities that will help generate positive feelings.

Being depressed isn't just about feeling sad – there are a lot of other feelings involved as well, such as hopelessness, guilt, and despair. So, it also makes sense to do things that result in other positive feelings, such as achievement and a sense of purpose.

When you are planning things to do for yourself, it is important to remember to include a mixture of activities, adding those that have the potential to give you other positive feelings.

An example of this is paying off money on your credit card, or doing the ironing. Doing these things can help you feel more in control of your life (e.g., paying off your debts) and give you satisfaction that you have started doing something (e.g., catching up on household chores).

Doing tasks that give you a sense of achievement or mastery will help you feel like you are starting to get back on top of things again. Some activities may combine the two. For example, making your bed may give you a sense of pleasure at having a neat, tidy bed, but it may also give you a sense of achievement at having done something to improve your home environment.

This sense of achievement is just as important as getting pleasure out of something, and may indeed prompt you to do more.



Start Simple

Even though there are a number of advantages in increasing your activity level, it may not be easy to get started. Often, this is because when you are depressed, you think negative thoughts such as “I won’t enjoy doing this” or “It’s too hard” or “I’ll probably fail at this, too.” These thoughts may stop you from getting started. Often the big mistake people make is trying to do too much, too soon.

When you are depressed, things that you usually don’t even have to think about doing (when you are not depressed) can seem to require a huge amount of effort. The idea is to start with small easy steps and begin with things you can do. Think of it in terms of training for a sports event. If you hadn’t been doing any running for 6 months, would you try and run a marathon without doing any training? Of course not! You would go on a training programme that slowly builds up your fitness and endurance.

Similarly, when you are depressed, it is unreasonable to expect yourself to be able to jump out of bed and clean the house before going out to meet a friend for a late lunch.

If you set your goals too high, you might end up not doing them, become disappointed in yourself, and feel worse than ever. Instead, plan to do things that are achievable at your current level of functioning.

Start with small steps and slowly build yourself up to the large tasks that seem unmanageable right now. For example, aim to get out of bed for 10 minutes, then slowly build up the amount of time you are out of bed for. Don’t try to clean the whole kitchen – just aim to do the dishes. If this is too much, just stack all the dirty dishes in a pile. Aim to get one bench top clean, or just wash 5 plates. Any task can be broken down into smaller and smaller steps until you find something achievable.

Sometimes it is easier to aim to do a task for a set period of time rather than trying to achieve a set amount. Read a book for 5 minutes rather than reading a whole chapter. Say you will spend 10 minutes weeding the garden rather than aiming to weed a certain area. In this way, it will be easier for you to achieve your goal. In the beginning, the important thing is not what you do or how much you do, but simply the fact that you are DOING.

Remember that action is the first step, not motivation, and you’ll soon find yourself feeling better!

What Is Exposure Therapy?

Exposure therapy is the most active 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*.

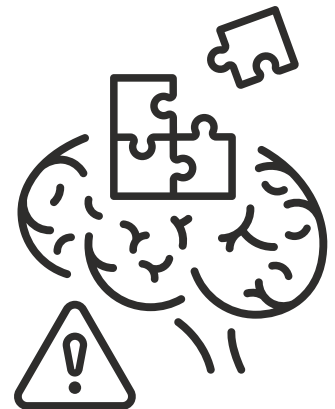
What is exposure used for?

Exposure is an active 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, e.g. 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. Reminders activate this 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 your mind learns to recall a good memory and you feel okay.



Example provided on the following page.



Graded exposure

Graded exposure is a gentler 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 that object, event, or situation and stay there until your fear reduces
- Don't move up the ladder until you feel comfortable at each step

What Is Exposure Therapy?

Example of Exposure Therapy:

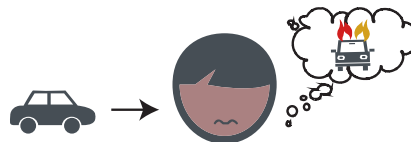
Step 1: Learning to be afraid of something

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

Reminders 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.



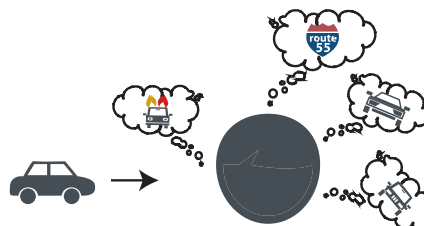
Step 3: Exposure therapy

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.



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.

Step 2. Build an Approach Ladder

Once you've made a list, arrange items from the least scary to the most scary. You can do this by rating how much fear you feel about each situation on the list, from "0" (no fear) to "10" (extreme fear). Include a whole range of situations on your list: some that you can do with only mild anxiety, some that you can do with moderate anxiety, and some that would be too overwhelming to do now. If everything on your list feels too overwhelming to do now, pick the least scary situation on the list and break it down into smaller, less overwhelming steps. Now your list has become a fear ladder.

Tips:

When making an approach ladder, identify a specific goal (such as having a meal in a restaurant), and then list the steps needed to achieve that goal, e.g.:

1. Go to a restaurant and get a coffee to go
2. Have a coffee at the restaurant and sit near the door
3. Have a snack at the restaurant and sit at a table in the middle of the room
4. Have a full meal at the restaurant and sit near the door
5. Have a full meal at the restaurant and sit at a table in the middle of the room

If you're wondering how to break things on your list into smaller steps, consider changing one of the following factors:

1. Length of time

e.g. Talk to someone for one minute instead of five minutes

2. Time of day

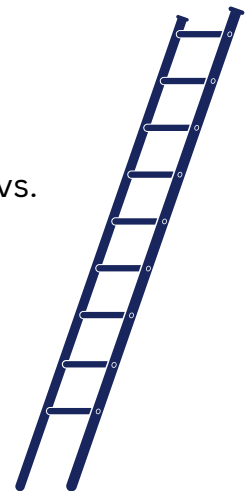
e.g. Go to the grocery store first thing in the morning on a weekday vs. on a Saturday afternoon

3. Environment

e.g. Go swimming at a local pool vs. swimming in a lake

4. Who you're with

e.g. Go to the mall with a friend vs. alone



Step 3. Facing Fears (Exposure)

Starting with the situation that causes the least anxiety, repeatedly put yourself in that situation (e.g. saying "hi" to the bus driver every day) until you start to feel less anxious doing it. If the situation is one that you can remain in for a prolonged period of time (e.g. standing on a balcony), stay in the situation long enough for your anxiety to lessen (usually 20-30 minutes).

If the situation is short in duration, try "looping" it, which means doing the same thing over and over again for a set number of times (e.g. repeatedly driving back and forth over a bridge until you start to feel less anxious).

If you stay in a situation long enough, or continue doing a specific activity enough times, your anxiety will start to lessen. The longer you face something, the more quickly you will get used to it and the less anxious you'll feel when you face it again.

- It can help to track your fear level during exposure exercises and try to remain in those situations (or continue a specific activity) until your fear and/or anxiety decrease.
- For example, if you have a fear of needles, and you rated holding a needle as a 6/10 on the fear scale, then you want to continue holding the needle until your fear level drops to 3/10.
- It's important to plan exposure exercises in advance, so you feel more in control of the situation, and you can decide how much to challenge yourself.
- Once you're able to face a specific situation on several separate occasions without having much anxiety, you can move on to the next item on your fear ladder.
- Don't rush! It can be very hard to face the things you fear. Be patient with yourself, and go at a pace that you can manage.



Step 4. Practice

- Practice on a regular basis. The more often you practice, and the longer you practice for, the faster the fear will fade.
- Don't forget to maintain the gains that you've made. Even after you become comfortable doing something, it's important to keep putting yourself in that situation from time to time to make sure your fears don't creep back. Re-rate your fear ladder every once in a while so you can see the progress you've made, and identify the things on the ladder you still need to tackle.

Step 5. Reward yourself!

- It's not easy facing your fears. Reward yourself when you do it. Rewards can be things you want for yourself (e.g., book, treat) or things you enjoy doing (e.g. going to the movies).
- Don't forget to give yourself credit for what you've done.



Tip: Don't be discouraged if your fears start creeping back. This can happen from time to time, especially during stressful periods or transitions, such as starting a new job or moving. This just means that you need to start practicing exposure again.

Fun Activities List

This is a list of activities that you may find enjoyable. Consider the activities listed below. You may find that some fit for you and some don't. Also, some activities may be things you can do right away, and others may require a bit of planning. Taking part in activities that you find fun can lead to positive experiences and lift your mood. You can test the idea of behavioural activation by recording your mood before an activity and comparing it to how you feel during or after. At the end of this list there are a few lines for you to add your own fun activities.

- Take an online class in an area of interest
- Cook or bake a new recipe
- Soak in the bathtub
- Research a topic of interest
- Do an at-home facial
- Plan a trip to the beach
- Do something nice for someone
- Redecorate your room
- Build a bird house
- Volunteer for a cause you support
- Look at pictures of beautiful scenery
- Purchase or pick a fresh plant, or flowers for your house or room
- Listen to new music
- Learn a new language
- Open the curtains and blinds to let light in
- Take a free online class
- Try a new good-smelling shampoo/conditioner/body wash
- Work on a puzzle
- Donate old clothes or items to charity
- Sing out loud
- Lay in the sun
- Flip through old pictures
- Organize your desk/workspace
- Play volleyball
- Buy new stationary
- Find a river or lake to visit
- Attend an online trivia night
- Journal beside a river
- Spend time in nature
- Enter a competition
- Spend time watching the clouds drift
- Do crossword puzzles
- Sign up for an online debate
- Cuddle a pet
- Manicure your nails
- Learn a magic trick
- Go sailing
- Listen to a podcast or radio show
- Stretch your muscles
- Take a walk with the intention to notice the architecture
- Play soccer
- Plan a visit to a local botanical garden
- Try a DIY project or other arts/crafts
- Watch live comedy online
- Sign up for a ghost tour
- Play frisbee
- Sketch, paint, doodle
- Play chess online
- Do some yardwork or gardening
- Jump on a trampoline
- Plan a future horseback riding activity
- Go fishing
- Organize your dishes
- Put fresh flowers in the place you live
- Sit outside and listen to birds sing
- Offer to walk someone's pet
- Look up future public lectures/workshops at your local bookstore, university, or community centre
- Sing karaoke online with friends
- Cook a fresh meal and freeze the leftovers
- Sign up for online meditation
- Plan a trip to a national or provincial park
- Plan a themed party for the future
- De-clutter
- Plan a camping trip
- Learn to juggle
- Play cards
- Contact an old friend
- Re-watch a favourite movie or tv show
- Make a new toy for your pet
- Create planters or decorative items at your door
- Make yourself an ice-cream cone

Fun Activities List

- Go ice skating or rollerblading
- Schedule a day with nothing to do purposefully
- Give positive feedback about something (e.g., write a letter/email about good service you received, tell someone you appreciate them, make a kind comment on a post)
- Hang a bird feeder or leave birdseed out
- Initiate an online hangout with friends or family
- Make jams or preserves with local fruit
- Order in something new for dinner
- Buy someone a gift online and send it to their home
- Repair something around the place you live
- Wash your car or someone else's
- Watch a new TV series
- Watch motivational videos on YouTube
- Send a loved one a card or letter in the mail
- Bake something to share with others (e.g., family, neighbours, friends, work colleagues, a local retirement facility)
- Have a video call with someone who lives far away
- Organize your wardrobe
- Play a musical instrument or sign up for lessons
- Light a scented candle, oil, or incense
- Exercise in a way that feels good to you
- Put up a framed picture or artwork
- Schedule an online dinner party
- Offer to plan or host a friend's birthday
- Ride a bike
- Sew, knit, crochet, quilt
- Visit the zoo or planetarium
- Birdwatch
- Do something spontaneous
- Go on a picnic
- Order or make your favourite warm drink
- Daydream about the future in a positive way
- Watch a comedy video or show
- Play tennis or badminton
- Clear your email inbox
- Create a plan to get out of debt/pay debts if you're in debt
- Organize your camera roll
- Upcycle old items
- Buy a new clothing item
- Plan a trip to a speedway
- Listen to an audiobook
- Start a gratitude journal
- Teach a special skill to someone else (e.g., knitting, woodworking, painting, language)
- Participate in a peaceful protest that you support
- Initiate a movie date with a friend
- Talk to an older relative and ask them questions about their life
- Make your bed with freshly laundered sheets
- Whittle wood
- Learn calligraphy
- Have a daytime nap
- Re-arrange your furniture
- Go for a drive (if you have access to a car)
- Donate blood
- Star gaze
- Create a calm meditative space in your home
- Go for a jog, walk, or run
- Teach your pet a new trick
- Skip/jump rope

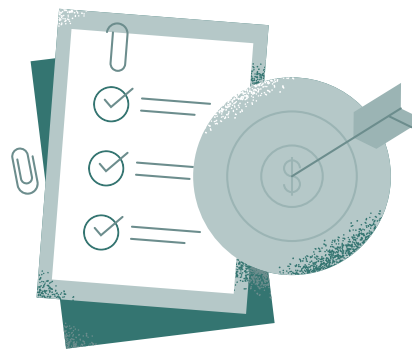
Other ideas:

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.

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 lifetime). 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:

A) 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 20 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.

B) Concrete and Specific

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 less sugar	Reduce the cans of pop I have by 1 can per day
Go back to school	Take a writing course at the community college in September
Meet new people	Join a walking group and have a conversation with one new person on the first walk
Save money	Put \$10 in my savings account each month
Spend more time outside	Go to the park on Saturday for 3 hours
Be less anxious	Practice relaxation exercises once a day
Practice exposure exercises	Complete exposure exercises weekdays between 7 and 9 pm



Key Tip: 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 be to ask 2 co-workers about their weekend plans on Friday afternoon. If your goal is to find a new job, a smaller goal may be to check the classified ads in the newspaper on Saturday.

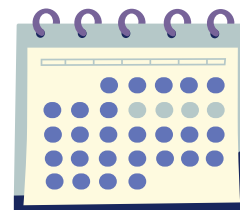


STEP 3. IDENTIFY OBSTACLES

Once you have established a realistic and concrete goal, identify any obstacles that may be standing in the way of accomplishing your goal. For example, one of the obstacles for going to the gym may be finding childcare. So, if you have set a goal of going to the gym for 30 minutes after work on Wednesday, you will have to arrange for a babysitter.

STEP 4. SCHEDULE YOUR GOALS

You are more likely to complete your goals if you are clear about what you are going to do and when you plan to do it. For example, your goal may be to practice relaxation exercises for 15 minutes on Saturday morning around 10 AM. Use a day planner or calendar to help you remember to complete your goals.



Tip: It is important to be flexible! Sometimes things can get in the way of accomplishing your goals (for example, there is a rainstorm on the day you wanted to go for a hike, or your son comes home sick from school the morning you were planning to practice driving). Be willing to come up with an alternative plan (e.g., go for a walk in an indoor mall or re-schedule your driving session for the next day).

STEP 5. CARRY OUT YOUR GOALS

Now that you have picked a goal, you need to start taking the necessary steps to follow through with it. However, it can be hard to get started. In addition to writing down your goal (e.g. work out at the gym for 30 minutes after work on Wednesday), you can write out the steps that you will need to take to complete it (for example, call babysitter on Monday to arrange for her to pick up the kids after school on Wednesday, pack gym clothes on Tuesday evening, take gym clothes to work on Wednesday morning, head straight to the gym after work on Wednesday).

You are more likely to take the steps needed to achieve your goal if you write them down first. The key to achieving your goals is to just DO IT! Don't wait for the motivation to come before you act; take action, and motivation will follow. For example, you may not feel motivated to start exercising, but once you have done it a few times you will start to feel more motivated to do it again.

STEP 6: REWARD YOURSELF

If you were able to accomplish your goal, reward yourself. It's not easy to accomplish goals, so it's important to reward yourself when you do accomplish them. It may be helpful to use specific rewards as your motivation to achieve a goal. For example, plan to purchase a special gift for yourself (book, treat) or engage in a fun activity (watch a movie, go out for lunch or dinner, plan a relaxing evening, watch your favourite show) after you reach a goal.



- Don't forget the power of positive self-talk (e.g., "I did it!").
- If you had trouble completing your goal, you may need to revise it.
- Take a step back and see what got in the way. Retrace the steps for goal setting listed above.
- Make sure your goal is *realistic*. If you set the goal too high, try to scale it back.
- Make sure your goal is *concrete and specific*. If it was too vague, it may have been difficult to tell if you completed it.
- Try to *schedule* your goal, because this will increase your chances of accomplishing it.
- Find ways to get around *obstacles*.
- *Write down* the steps that you need to take to accomplish your goal.



Tip: As you complete goals, check them off your list. This can be a helpful reminder of all that you have accomplished so far.

Helpful Hints:

- Start small. Making small changes can have a big impact on your life. Don't try to do everything all at once. Instead, pick 1 or 2 goals to work on at a time.
- Be patient. It can take time to meet goals, especially long-term goals. Hang in there and stick with it!
- Don't think in "all or nothing" terms. No one completes all of their goals all of the time. You have not failed if you don't accomplish all of your goals.
- Praise yourself for the goals you were able to meet and come up with a new plan for accomplishing the goals that you were unable to complete.



[Version date: April 2024]

Welcome to the third Cognitive Behaviour Therapy with mindfulness class!

[Facilitators and sites are welcome to add their names and contact information (if appropriate) to the title slide. Please add a text box in the lower right corner.]

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

CBTm

This is a brief review of the ground rules.

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, this is not the right setting to discuss personal trauma, suicidal or violent thoughts, or other information which may be distressing to others in the group. If you are in crisis and need to talk about any of these things, please approach one of the facilitators during a break or after class.

Also, we ask that you please help us to make this a safe and confidential space by not sharing any personal details or identities of anyone in this program.

Class Outline

Mindfulness

Review of Behaviour Theory

Review of Previous Action Plan

Healthy Living

Sleep

Your Action Plan

CBTm

Similar to the previous classes, we will begin by practicing a mindfulness exercise and reviewing the materials from Class 2, including the recommended action plan.

We will also be providing you with new material on healthy living strategies and sleep tips.

So, let's dive in!

Mindfulness Meditation – 5 min

Observe without judgement

Helpful for stress reduction

Apps

- Mindshift
- Mindfulness Coach

Anywhere, anytime

- Observe breath, object, activity, sounds

CBTm

For each of the CBTm classes, we provide a different mindfulness exercise. Today we will try the mindfulness exercise Leaves on a Stream. This practice has been incorporated into many types of therapy and can be useful for managing stress, coping with anxiety and depression, and managing chronic pain. Today's mindfulness exercise is a form of detached mindfulness and is particularly good for identifying and releasing negative thoughts and feelings. There are also other ways to practice mindfulness that you can try on your own to find out what works best for you.

Practicing mindfulness can be helpful in taking a pause to relax. We will be talking about sleep later in the class; if you have difficulties with sleep, you may want to try this exercise (or another one) again closer to bedtime.

As a reminder, mindfulness focuses on being in the present moment, and noticing our thoughts, feelings, and sensations, without judging them. When feeling anxious or depressed we are often stuck thinking about the future or the past. Mindfulness helps bring us into the present moment. Mindfulness can be practiced in hundreds of different ways. For example, you can slowly drink 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 spending time outdoors, such as raking the leaves or waiting for a bus. Notice the crunching of the leaves, their shapes, and colours. Notice the temperature of the air 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. However, your mind will naturally wander to other things. Your job is to notice your attention and gently bring it back into focus. It's easy to be frustrated when first practicing mindfulness but it's important to remember that mindfulness takes practice.

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 – Leaves on a Stream ***

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 or bushes 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.

****[After the exercise, check in with the group]****

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 minutes ago? More distressed? Or maybe no different? Any answer is a normal one. Different people will have different reactions to the same exercise. It is 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, but even once or twice a week is a good way to start!

Class Outline

Mindfulness

Review of Behaviour Theory

Review of Previous Action Plan

Healthy Living

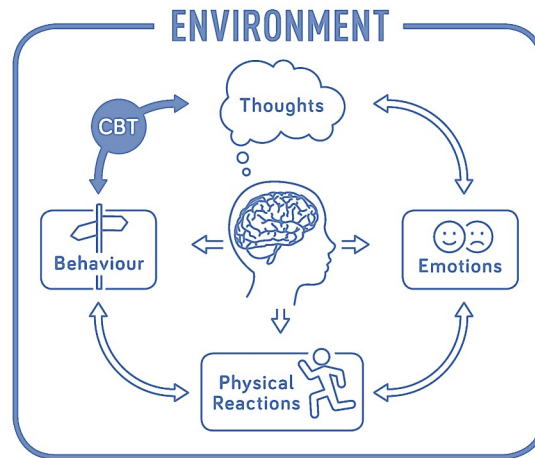
Sleep

Your Action Plan

CBTm

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

The CBT Model



CBTm

You've seen this model before, in classes 1 and 2. We are going to do a brief review of the Cognitive Behaviour Therapy Model.

The CBT model can help us to understand how our thoughts, emotions, physical reactions, and behaviours impact our wellness and our stress management.

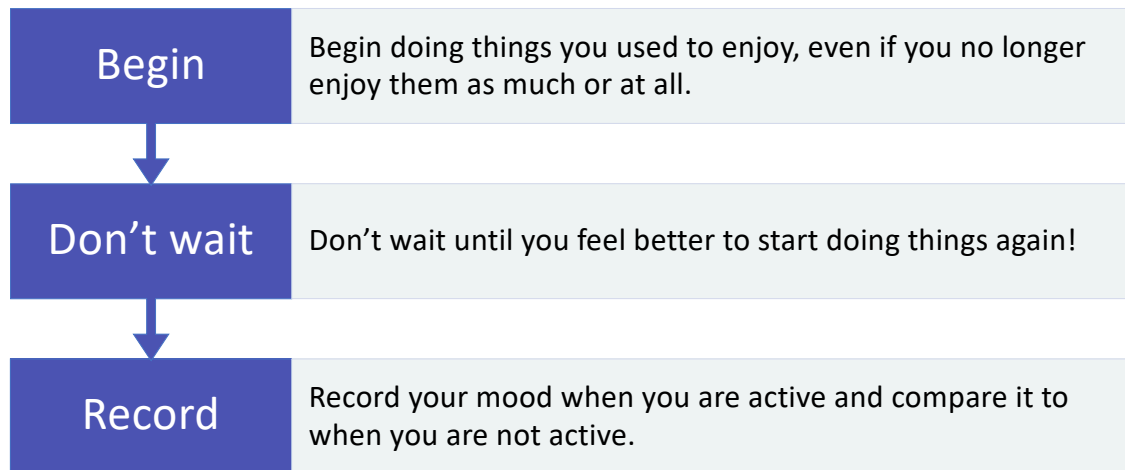
For instance, if you saw a friend across the street and they didn't say hello, you might think to yourself, "They are ignoring me. Did I do something wrong?" This thought might make you feel emotions, like worried or anxious, which might produce physical reactions like your heart beating a little faster and having sweaty palms. These feelings might then lead you to ignore your friend the next time you meet. (i.e., avoidance and withdrawal behaviours).

What if, however, you had thought, "Maybe they didn't see me?" or "Maybe they had a lot on their mind today". These thoughts might lead you to feel concern for them, or to just feel neutral. This might not affect your physical reactions and might instead lead to a behaviour of reaching out to them and asking them if everything is okay. Same situation, but different thoughts,

different feelings, and different behaviours.

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

Behavioural Theory for Depression



CBTm

Continuing with our brief review from last class, remember that there is a strong link between our behaviours and our mood.

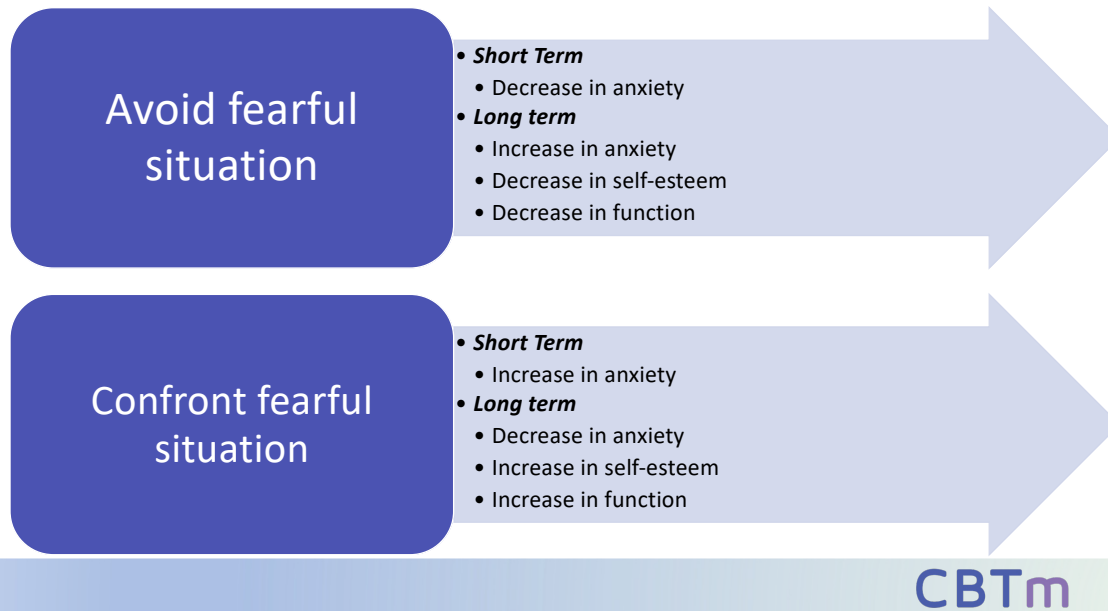
If you wait until you feel better to do things, or when your motivation is higher, a) you might not get all the way better, and b) you might find yourself in an unhelpful behaviour cycle where you are avoiding activities until you feel happier.

A tip is 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* planned activities will help lift your mood, increase your energy, and improve your motivation. Engaging in hobbies and interacting with friends or family can provide satisfaction and a sense of accomplishment that can help lift your mood.

If you've ever felt like not doing something (such as physical activity), but challenged yourself to do it anyway, and then found yourself feeling better afterwards, this is what we are referring to! This is called Behavioural Activation.

Please review the behavioural strategies handout from Class 2, if you would like more information.

Behavioural Theory for Anxiety



In class 2 we also discussed the behavioural theory for anxiety.

The behavioural reaction to a situation that causes one to feel anxious is often avoidance. In the short-term we may feel a sense of relief to have avoided the situation but in the longer term, the avoidance may cost us in our quality of life. The anxiety will still be there the next time we're in that same type of situation. The Behavioural Theory of Anxiety explains that avoiding the situation stops us from learning that the situation may not be as dangerous as we believe, and that we can may be able to cope with whatever difficulties come along.

For example, let's look at the fear of public speaking which is one of the most common fears for people. If we continue to avoid speaking up in front of others, we may feel relief in the short term. However, we may experience much more anxiety and a lack of confidence when we want to speak up at an event that's important to us, such as coaching a team, or taking the lead during a meeting or event.

If we challenge ourselves and take the opportunity to speak up, we can become more comfortable with speaking in front of others and our confidence will also increase. We can learn that it's not as dangerous as we thought it was, and that we have a greater ability to cope than we thought!

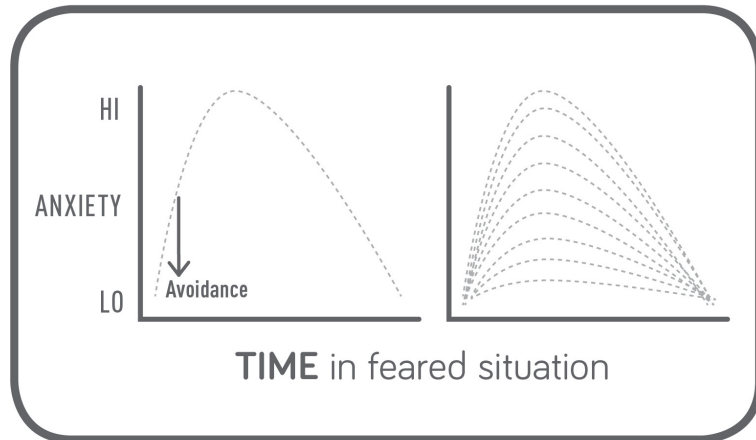
You can gain confidence and improve your mental wellness by working on avoidance

Exposure

Delay the avoidance



If possible, stay in the anxious situation until anxiety drops



*see handout

CBTm

Exposure is one of the primary tools used in the treatment of anxiety and is a very powerful strategy. The basic idea is to set up a way to face your anxiety in a series of small, thoughtfully planned steps to help you overcome or reduce your anxiety or fear.

The first step is to rate your anxiety level in a specific situation on a scale of 0-10, where 0 = no anxiety and 10 = overwhelming panic.

Next, start exposure practice with a situation (or step) that causes you to feel about a 3/10 level of anxiety – a moderate range of anxiety. The graph on the slide shows us how a drop in our anxiety level takes place when we practice exposure. The first time we try something the anxiety will probably be near the highest dotted line, but each time we practice, the dotted line shows the anxiety dropping. Keep repeating the exposure steps until your anxiety drops to 1 or 2 out of 10. At this point, it's time to pick another situation (or step) that's a little higher in anxiety, and so on, to progress towards your end goal.

A point to remember when practicing exposure is that your instinct may be to try to “get through it” quickly by distracting yourself or holding a lucky charm of

sorts. That's not really what exposure wants you to do. The idea is to stay in the situation without doing anything "distracting" until you feel the anxiety reduce.

It's also important to know that exposure therapy is intended to be practiced with situations that are feared or produce anxiety, but that are not actually dangerous situations themselves. Exposure is not meant to be used to overcome fears that are protective, for example the fear of being on train tracks when a train is coming.

Anxiety and fear are challenging. It's important to remember that these feelings are a signal of danger but are not dangerous in themselves. We are all built with the fight/flight/freeze response. Any situation that we fear will set off this response, causing our pulse to quicken and our breathing to become rapid. The reaction itself is not dangerous and will diminish in its own time, returning us to our body's natural status (homeostasis).

Please read the handout What is Exposure Therapy from Class 2, if you would like to read further on this topic.

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

Review of Previous Action Plan

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

An action plan gives you a chance to establish the new skills learned in class and find ways to use them in your daily life.

What did you learn this past week from setting goals for yourself? Were you able to use the SMART criteria for your goal?

As a reminder, SMART stands for:

Specific, meaning the 'what', in detail, so you know exactly what it is that you want to work on.

Measurable, this is the where, when, and how often - or other quantifiable information – that allows you to clearly check on the goal and know when you've accomplished it.

Attainable, means this goal is something you can do, and that you have everything you need to work on this goal.

Relevant, means this activity/goal is important to you.

Timely, means you are ready, and the activity can be incorporated into your schedule now.

Group Discussion

Review of skills practice from last week



CBTm

Were you able to do any of the suggested items from the Class 2 Action Plan?

If yes, congratulations - keep up the good work!

If not, that's okay, it can be difficult to find the time to work on these skills. Are there steps you could take for this next week to help find time to work on the skills?

Class Outline

Mindfulness

Review of Behaviour Theory

Review of Previous Action Plan

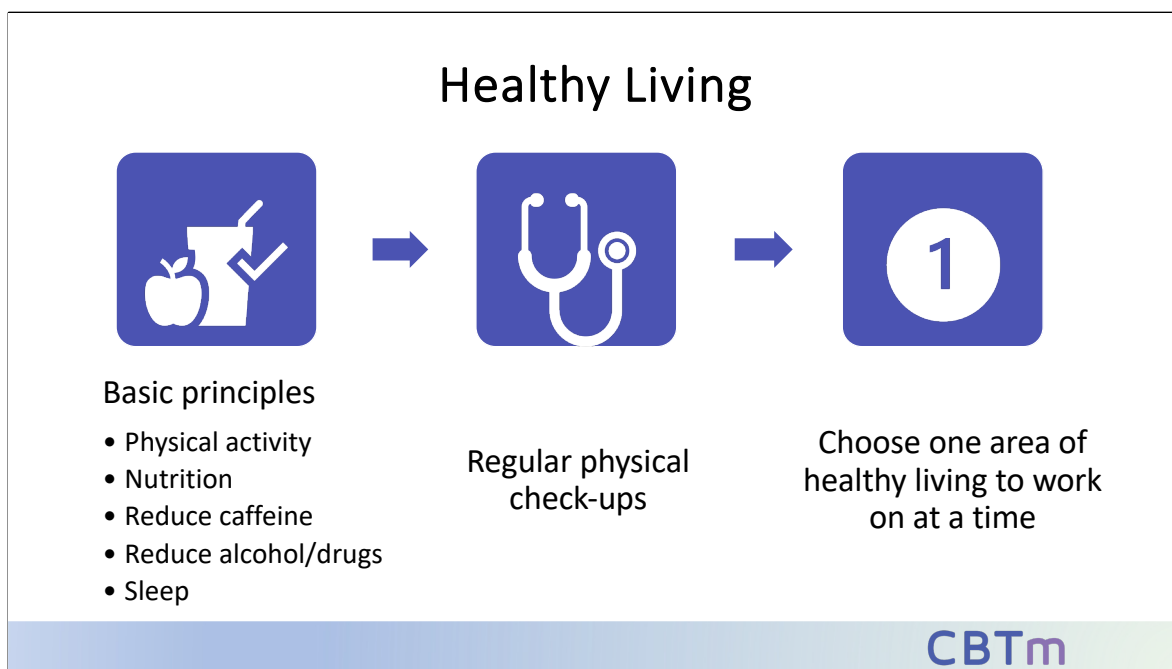
Healthy Living

Sleep

Your Action Plan

CBTm

Let's begin to talk about the new material for Class 3, Healthy Living.



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

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

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

The basic building blocks of physical and mental wellness are good self-care strategies, like sleep, physical activity, nutrition, and potentially reducing the use of things like caffeine, alcohol, and nicotine, if they are a problem for you.

In this class, we are going to introduce several areas of healthy living that you may wish to consider bringing attention to in your own life. Much of this information you may already be aware of, but some of it may be new. Remember, this information is only meant to help you consider a change in your own life, if you think there is a difficulty there to resolve. It's also important to only take on changes one at a time.

Physical Activity

Physical and mental health benefits

Mental health benefits happen faster

Exercise is the most underused antidepressant!

Rate your mood before and after exercise



CBTm

[Updated April 2024]

There are many health benefits to being physically active, and we also know that anything good for your body, is also good for your brain!

The physical health benefits of moving your body, although they can take time, have long term benefits over the lifespan. Science tells us that physical activity also has a measurable impact on our mental health, almost immediately! The mental health benefits of physical activity occur the same day and build over time – and with regular activity you will feel more substantial effects.

You don't have to take our word for it! Physical activity is a great starting point to practice behavior activation. You can rate your mood before you start a physical activity and then rate it again after you've done the activity.

Some things to keep in mind, physical activity does not have to be high intensity and it does not require a gym membership to have a positive impact on your mood! If you haven't been active for a while, start small and build either the amount of time you are moving, or the intensity. For example, walking for 15 minutes 3-4 times per week has benefits.

Even though physical activity is good for us, getting regular movement in is sometimes hard to be motivated to do. Some strategies that can be helpful in getting us started and being consistent include making a game of it, using an app, or asking a buddy to be active with you.

Nutrition

Opportunity!
Mindfulness can also be
practiced while eating

Nutrition is a part of keeping your whole system healthy, including brain health

Consider meeting with a dietitian



CBTm

[Updated April 2024]

Healthy nutrition is an important part of keeping your whole system healthy. 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! Our food choices can sometimes be driven by stress, which can mean changes to our energy levels and to our mood. Our mental health can also have an impact on how we care for ourselves and sometimes we may not make healthy nutrition choices.

For example, many of us eat too much sugar! This can be a problem for regulating our mood, because sugar causes energy spikes and then sudden drops - sometimes referred to as "sugar crashes". Also, think about the experience of being "hangry" - feeling irritable or angry when we're hungry - and the connection between when and what you've eaten, and your mood.

Our nutrition choices can also be connected to food security. Foods that are more

nutritious are often the most expensive. There can be some good alternatives, however, such as frozen vegetables and nut butters. Small consistent changes to your nutrition can have a positive impact on your mood.

You've also been introduced to the concept of mindfulness practice. It turns out you can try eating mindfully too by being fully present during your meal. For example, slow down the eating process to notice the shape, the colour, and the temperature of your food, the packaging or tableware, and the taste. Sleep and engaging in movement are also health behaviours that can impact your nutrition choices, and so focusing in these areas may also help you to eat healthy.

It can also be helpful to talk to a dietitian, and we will talk about nutrition resources on our next slide...

Nutrition Resources



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



Find a Dietitian <https://wrha.mb.ca/nutrition/dietitian/> and Dial a Dietitian 1-877-830-2892



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



Contact your primary care provider or Access Centre

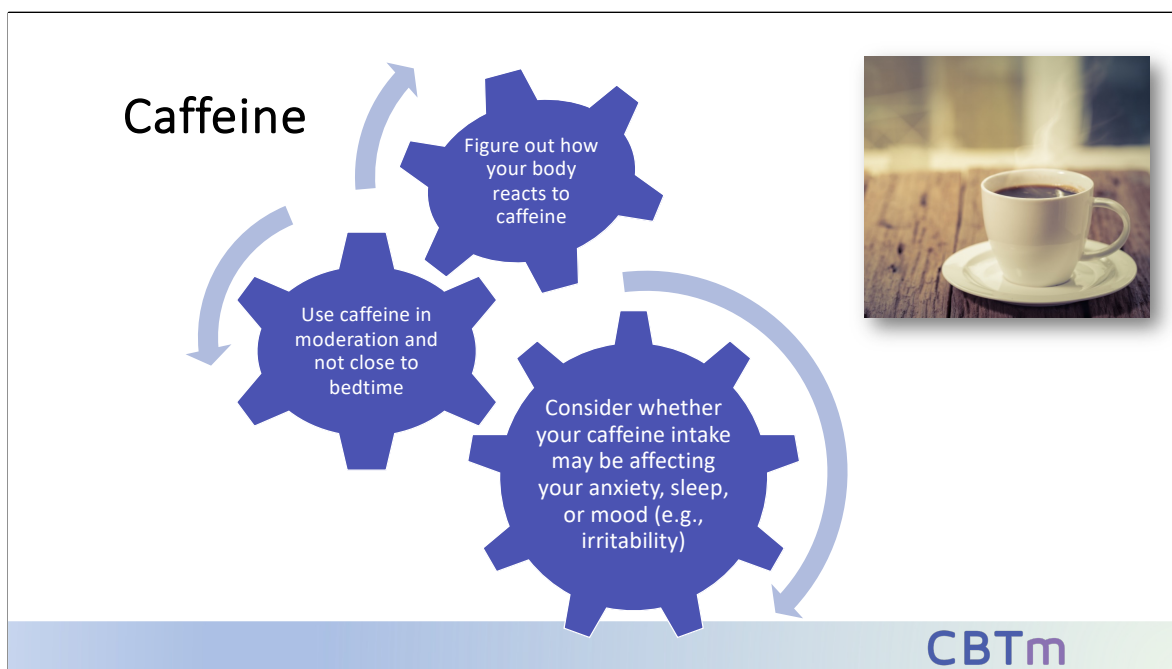


Private practice Registered Dietitians for those with extended insurance benefits
<https://www.collegeofdietitiansmb.ca/find-a-dietitian/private-practice/>

CBTm

There are several ways to access helpful nutrition information:

- There are several Health Education Groups available to you in Manitoba. Online, you can access the Health Management Group Program Guide. This resource offers a variety of groups facilitated in-person (when possible), on-line, or recorded sessions to view at home on your own schedule.
- You can visit the WRHA online website to find a Dietitian at: <https://wrha.mb.ca/nutrition/dietitian/> or by calling Dial a Dietitian at 1-877-830-2892, where callers will be connected to a registered dietitian, who can help answer nutrition questions.
- If you're in Winnipeg or Brandon, you can call your local Access Centre to self-refer for an appointment with a dietitian.
- Your primary care provider may also be able to provide tips and recommendations for your nutrition.



Let's try a "zoom burst". Please open the chat and type in the names of beverages and foods that you consume that contain caffeine. Don't hit send yet! I'll give you a minute to do that. [pause] I'll count to 3 and say go, then you can hit send. 1-2-3-go!

As you can see from the chat responses, many people consume caffeine as a part of their daily routine, and in many different forms!

Any substance you ingest will have an impact on your body, both your physical and mental functioning. However, everyone is different, and how your mind and body react to a substance will be different than how someone else reacts to that same substance. If your caffeine intake isn't a problem for you and it's not interfering with your sleep, there may be no need to change it.

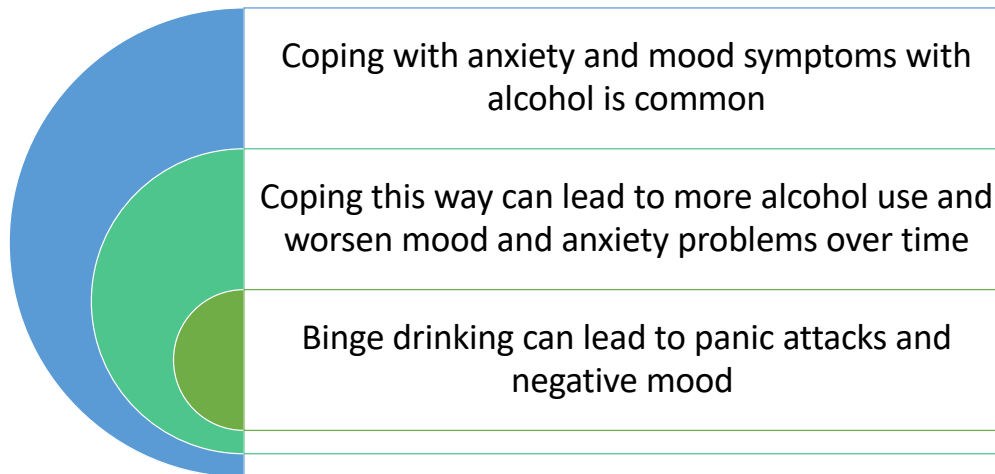
However, caffeine is a stimulant, and can cause certain effects:

- It can act like epinephrine, which is a chemical released in our body during the fight, flight, freeze response.
- Caffeine can lead to increased alertness and physiological arousal.
- It can also mimic the physiological effects of anxiety and can induce or

heighten panic attacks.

Caffeine can also affect our sleep. There is a possible vicious cycle to be aware of, where feeling tired leads to increased caffeine use in the morning (e.g., coffee or tea), which may lead to feeling jittery and overstimulated, which could lead to trouble sleeping later. If we're having difficulty sleeping this may lead to using sleeping medications, which could then leave you feeling more tired in the morning (e.g., groggy from medications and/or poor sleep), which brings you back to feeling tired and needing caffeine in the morning, and the cycle keeps repeating. The impact caffeine can have on your sleep is something to be aware of, especially if caffeine intake occurs closer to bedtime.

Alcohol Use & Mental Health



CBTm

The next few slides have some information that may be considered controversial, and that's because our beliefs about alcohol use are informed by our family's relationship to alcohol, our occupational group, and our cultural and spiritual beliefs. These slides present information on alcohol use, simply to bring awareness to you that alcohol can impact your mental wellness. Alcohol use is very common, and for many, it does not cause a problem. Again, this is an opportunity for you to hear about the latest in evidence-based science and to then use that knowledge to examine your own relationship to alcohol, and how it may impact your mental wellness.

Although drinking alcohol is a very common social activity, sometimes when people are faced with high stress, they might drink alcohol to cope with the stress, or to dull strong emotions or challenging thoughts. Using alcohol to help change your mood can be problematic because it can lead to increased use over time to numb feelings, and this problem can continue and escalate over time.

Alcohol is a depressant, and so it can negatively affect our mood. The impact on your mood is not always obvious, however; there is a time lag between

when we drink and when we experience low mood, due to the way alcohol is metabolised in our body. For example, the drink(s) you have on a Friday evening may cause your mood to be down the following Tuesday.

If alcohol is consumed in excess, it can chemically mimic depression. So, if you're dealing with low mood or depression already, drinking alcohol may make your mood worse. Something to keep in mind is to make sure you follow the directions from your healthcare provider on the interaction of alcohol and medication. For example, there is a dangerous interaction between alcohol and benzodiazepines (the "pams") – lorazepam, diazepam, clonazepam, etc. - and other depressants.

And for individuals with anxiety, alcohol use can become a type of avoidance, where alcohol use may reduce the feelings of anxiety in the short-term but increase them in the long-term. Alcohol can also interfere with our learning.

Drinking less is better
We now know that even a small amount of alcohol can be damaging to health.

Science is evolving, and the recommendations about alcohol use need to change. Research shows that no amount or kind of alcohol is good for your health. It doesn't matter what kind of alcohol it is—wine, beer, cider or spirits. Drinking alcohol, even a small amount, is damaging to everyone, regardless of age, sex, gender, ethnicity, tolerance for alcohol or lifestyle. **That's why if you drink, it's better to drink less.**

Alcohol consumption per week
 Drinking alcohol has negative consequences. The more alcohol you drink per week, the more the consequences add up.

0 drinks per week Not drinking has benefits, such as better health, and better sleep.	No risk	0
1 to 2 standard drinks per week You will likely avoid alcohol-related consequences for yourself and others.	Low risk	1, 2
3 to 6 standard drinks per week Your risk of developing several different types of cancer, including breast and colon cancer, increases.	Moderate risk	3, 4, 5, 6
7 or more standard drinks per week Your risk of heart disease or stroke increases. Each additional standard drink radically increases the risk of these alcohol-related consequences.	Increasingly high risk	7, 8, ++

During pregnancy, zero is the only safe option.

A standard drink means:

- Beer: 341 ml (12 oz) of beer, 5% alcohol
- Cider, or ready-to-drink: 341 ml (12 oz) of drinks, 5% alcohol
- Wine: 142 ml (5 oz) of wine, 12% alcohol
- Spirits (whisky, vodka, gin, etc): 43 ml (1.5 oz) of spirits, 40% alcohol

Find this in your handouts!

More about low-risk guidelines for alcohol use

CBTm

Science is always evolving. A 2022 report from the Canadian Centre on Substance Use and Addictions completed a comprehensive analysis of alcohol-related research, which led to updated recommendations regarding guidelines for low-risk alcohol use. So, let's examine what these limits mean:

- If you do drink alcohol, the recommendation is to try to consume less alcohol overall, this means fewer drinks per week, and fewer drinks in one sitting.

You will be able to find more information about these guidelines in your handouts.

Drug Use & Mental Health

Same issues as 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 primary care provider for more information

CBTm

Again, as a reminder, we're not here to judge anyone's alcohol and drug use. This information is provided to present you with some evidence-based science to help you make decisions about whether your use affects your mental wellness.

Using drugs to avoid dealing with difficult emotions and unhelpful thoughts is common. However, this can be problematic, because it can lead to increased use over time.

Drugs such as cocaine and ecstasy can cause panic attacks, increased worry, and negative mood. These, and other drugs, can also impact prescribed medications that you take for your mood, which can result in your medications not being able to function as they were intended to, or produce increased health risks and dangerous after-effects.

If you are concerned about medications you're currently taking and how they may interact with other drugs, please talk to your primary care provider for more information.

Cannabis Use & Mental Health

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)

CBTm

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. As with the other elements of healthy living, this discussion is intended as food for thought as you consider your health and wellness.

Cannabis is a substance that we still don't have much long-term research on. More research is underway across Canada and the U.S., but for now, the literature suggests that there is no clear long-term benefit of cannabis 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. Synthetic cannabinoids tend to have a lot more risks than regular cannabis, like increased risk of panic attacks, agitation, and hallucinations.

A study published in 2021 showed that cannabis users developed psychosis

more often than non-users. Those who are genetically predisposed to schizophrenia were at much higher risk for psychotic experiences if they also had a history of cannabis use.

Source: Wainberg, M., Jacobs, G.R., di Forti, M. *et al.* Cannabis, schizophrenia genetic risk, and psychotic experiences: a cross-sectional study of 109,308 participants from the UK Biobank. *Transl Psychiatry* **11**, 211 (2021). <https://doi.org/10.1038/s41398-021-01330-w>

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 primary care provider or pharmacist to get more information.

Cannabis & Your Health

10 WAYS to Reduce Risks When Using

Cannabis use is now legal for adults, but it does have health risks. If you use non-medically, you can make informed choices for safer use.

Delay using cannabis as late as possible in life, ideally not before adulthood.



Avoid using if you're pregnant, or if you or family members have a history of psychosis or substance use problems.

Choose low-potency products – those with low THC and/or high CBD content.



Use cannabis in ways that don't involve smoking – choose less risky methods of using like vaping or ingesting.

Stay away from synthetic cannabis products, such as K2 or Spice.

If you do smoke, avoid deep inhalation or breath-holding.

Occasional use, such as one day per week or less, is better than regular use.



Your actions add up. The more risks you take, the more likely you are to harm your health.

Don't operate a vehicle or machinery while impaired by cannabis. Wait at least 6 hours after using. Remember that combining alcohol and cannabis makes you more impaired.

Not using cannabis at all is still the best way to protect your health (unless you use with a medical recommendation).

When using cannabis, be considerate of the health and safety concerns of those around you. Don't hesitate to seek support from a health professional if you need help controlling your cannabis use, if you have withdrawal symptoms or if your use is affecting your life.



Public Health Agency of Canada

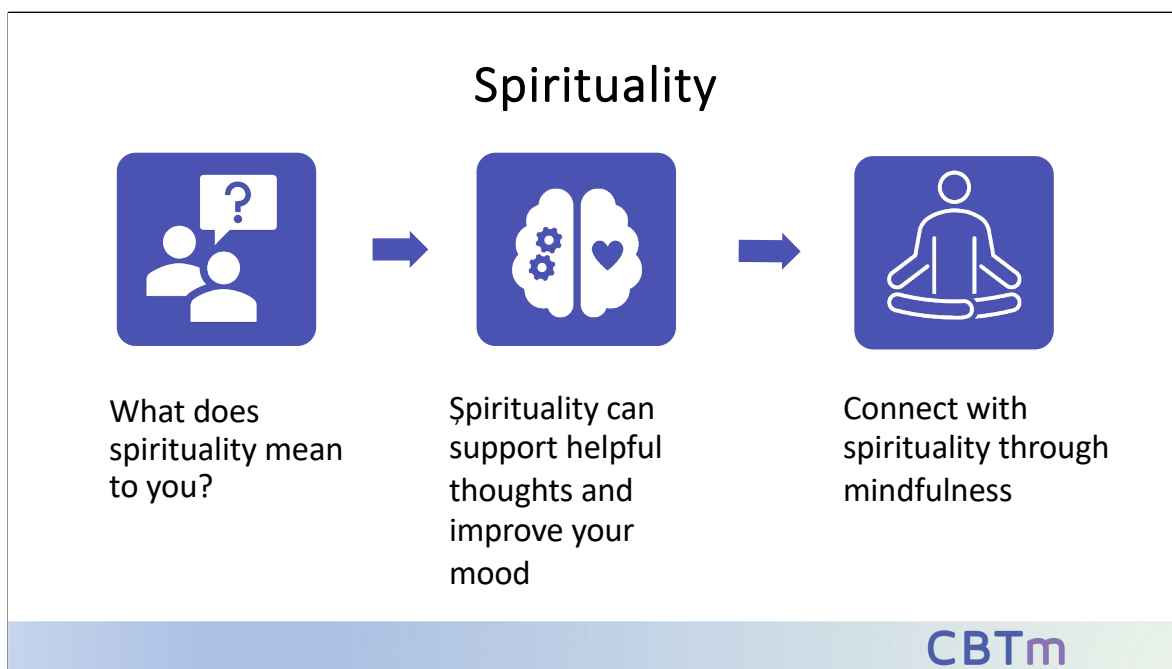
Centre for Addiction and Mental Health



Lower-Risk Guidelines for Cannabis Use

CBTm

You can find the following guideline from The Centre of Additions and Mental Health (CAMH) in your handouts.



[Updated slide: April 2024]

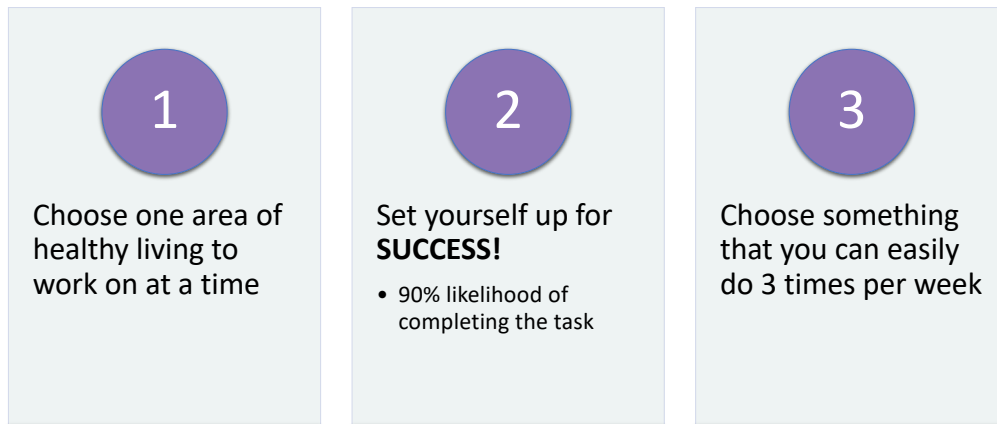
Spirituality may be another component of self-care and mental wellness to be considered. Spirituality exists along a spectrum. For some, it means having an organized faith or religion, or may be about connecting with nature or having a connection to something outside of themselves. And still for others, spirituality may not be relevant at all to their lives. For many, spirituality is rooted in cultural traditions and feeling connected to the people and the world around and beyond us.

[Ask:] When you hear the word “spirituality” what does it mean to you? [pause]

[Possible answers might be lighting candles, smudging, practicing gratitude, walking your dog, sitting with your parents in the park, participating in ceremonies, praying, singing, acts of service, etc.]

One way to increase your connection to spirituality is through mindfulness, as it can be used as an opportunity to listen and reflect.

Healthy Living Goals



CBTm

To sum up: if you're going to choose an area of healthy living to work on, try using the SMART criteria to help set some achievable goals.




It's a good idea to choose one area of healthy living to work on at a time. Once you've reached a healthy living goal, you can then choose a new one to work on, if you have one. Remember that goals based in actions are powerful ways that can help improve our motivation and hope.


Also, if you think it might be time to work on some healthy living strategies, consider including mindfulness into your routine. Mindfulness is a skill that can positively influence your thoughts and emotions. In the area of healthy living, mindfulness can be incorporated into any activity, such as walking or eating. For example, when walking we can notice the temperature of the air, the smells of the season, and the sounds around us, which can help us to be more present in the activity we're participating in.

Tips for Healthy Living adapted from AnxietyCanada






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.

- 
• 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.



Tips for Healthy Living adapted from AnxietyCanada

- 
• 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.
- 
• 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 talking 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.



You can find a brief review of the presentation on healthy living and some additional ideas in these handouts.

Class Outline

Mindfulness

Review of Behaviour Theory

Review of Previous Action Plan

Healthy Living

Sleep

Your Action Plan

CBTm

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,

"Quiet Your Mind & Get to Sleep: Solutions to insomnia for those with depression, anxiety, or chronic pain" (2009) Colleen E. Carney, PhD. & Rachel Manber, PhD.



CBTm

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 you don’t get enough good quality sleep, here are some tips to help you work on sleep difficulties. It is important to know that there is help, especially for sleep!

Sleep is an important part of not only managing mental health issues like depression and anxiety but is also important for emotional regulation and mental clarity.

If you're struggling with sleep and it isn't improving, more intensive help may be needed. For example, CBT-I is a specific kind of Cognitive Behavioral Therapy geared towards insomnia.

There are also self-help resources available that you might want to try, like the CBT-I Coach app on your phone, or a sleep diary or workbook. You can also discuss your sleep difficulties with your primary care provider to find out what other options may be available to you.

Sleep tips



CBTm

Have you ever heard the phrase “sleep like a baby”? We often think children have very good sleep habits. If this was your experience, then you may have the intention to get back to having that kind of sleep in your life. Kids sometimes have good sleep because their caregivers help them to maintain bedtime routines that provide structure. As a child, you may have gotten into your pajamas, had a snack, brushed your teeth, and then read a book before going to sleep. This kind of routine is good for adults too.

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, lighting).

The strategies on the slide reflect the following tips:

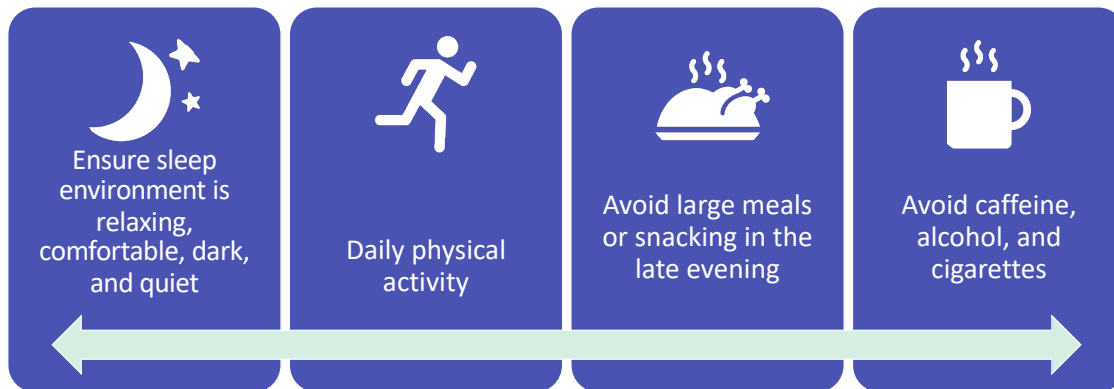
- Associate your bed with only sleep and sex, not other activities.
- Establish a regular, relaxing bedtime routine, to cue your mind and body that it's nearing time to sleep.
- Try relaxation strategies, like a mindfulness exercise or some stretching, to help reduce any tension.

Do any of you watch tv or stream a program before bed? [pause] This is very common, and if you aren't experiencing sleep problems, there may be no need to change this. However, if your sleep is disrupted, this may be an area to think about changing.

- Avoid exposure to bright lights close to bedtime, this way your brain doesn't get confused thinking it's still daytime, and therefore, time to be awake. A big part of treating sleep difficulties is by 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 fall asleep. By training your body into good sleep habits, we can take away some of the pressure we put on ourselves to sleep - when and how we want to - or “should” be sleeping.

Sleep tips



CBTm

Ensure that your sleep environment is the most effective that it can be for good sleep – that the space is relaxing, comfortable, dark, and quiet.

We covered the important stress reducing effects of exercise, and how physical activity can be an important energy boost. However, it may be important to consider the timing of your physical activity, and to try not to stimulate yourself close to bedtime by engaging in vigorous activity.

Eating large meals in the late evening will keep your digestive system working hard into the night, which can impact your sleep. Setting a realistic time to stop eating before bed can help you avoid late night snacks. This can also apply to caffeine and cigarettes. These substances 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.

In sum, it can be helpful to avoid engaging in certain activities or ingesting food, drinks, or other substance as we are nearing our bedtime. Being aware of these potential triggers and setting realistic limits can help improve our sleep quality.

Sleep tips



CBTm

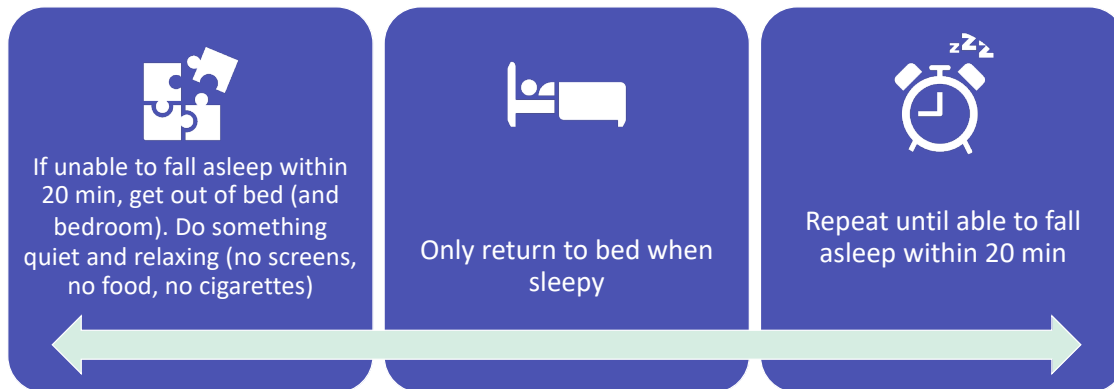
There is a myth about sleep that it is the time you go to bed that matters most, and many of us believe that getting a better sleep starts with going to bed early.

In fact, 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 time each night as well.

Although this is not a popular tip, the recommendation is to maintain the same wake-up time throughout 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" be going to sleep, but before our bodies and minds are ready, we will find ourselves awake 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. Naps can be a restorative way to feel refreshed if you haven't slept well the night before. The key to napping is to remember that you're not trying to "catch up" on all 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 and still go to bed on your same schedule.

Sleep tips



CBTm

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 then 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 then 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, or practice some mindfulness. It's best to refrain from looking at a TV, your phone or tablet, 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 minutes.

Sleep tips for shift work

Daytime sleep

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

Sleep environment modifications

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

Nutrition suggestions

- Try a light meal with low fat and sugar like eggs, nuts, and cheese, or toast with peanut butter

CBTm

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

If you're working shifts, the best kind of sleep is to try for one longer daytime sleep that will mimic a "night" sleep. Try to avoid splitting your sleep into two equal parts. If you have a second sleep during the day it should be shorter, more like a nap. This helps your body understand that it's had a longer sleep similar to that at 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 noises and other sounds around you. It's difficult to turn our phones off, but it's important to allow yourself undisturbed time for sleeping, so try utilizing your 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, and can also be helpful 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 when you're going to go to sleep, for example at 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 your 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 shift work

Commuter and/or end of shift changes

Using CBTm skills to wind down

Family- and self-support scheduling

Maintain a sleep diary

CBTm

Here are some additional tip for those who are shift workers that focus on scheduling and navigating the end of a shift, for example when the sun may be out, and your system may want to wake up instead of go to sleep.

If you are leaving work when it is still dark out, such as during the winter months, you may notice that you have an easier time transitioning into your sleep routine and are able to get a good sleep in during the day.

If you leave work later in the morning after a night shift, or the day is longer, such as in the summer months, then wearing sunglasses and a hat to shield the sun from your eyes can be helpful to keep your body from “waking up” from the light of the day. Keeping your visor down and your sunroof closed if you’re driving are also ideas that you may want to try.

Daytime sleep needs a bedtime routine, just like a nighttime sleep. Using your CBTm skills to wind down, such as practicing mindfulness, may help you transition into sleep.

It can also be important to include your family, friends, and other people you live with in discussions about your work and sleep schedule, this way they can be aware of, and respect your need to get some rest.

A sleep diary may be another helpful tool to see where patterns are, and where you may need to try some strategies, to sleep better during the day.

Sleep tips for nightmares

1

Talk to yourself rationally about the nightmare.

Resist catastrophic thinking.

2

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

3

Create a plan for calming your mind and your body.

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

4

Follow the plan.

Include your partner in the plan.

CBTm

[Updated April 2024]

Some of you may 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 faster.

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 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 the other noise.
- 3) Try preparing a plan in advance for calming and relaxing things you can do after a nightmare, then when you wake up you will know exactly what to do.
 - Try to make the plan predictable and repetitive, this will help with the plan becoming more 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 might be helpful to include them in the plan so that they can support you and help remind you what you need to do and where you are.

There's a specific therapy intervention that can help with nightmares, called nightmare rescripting, that is best attempted with the assistance of a trained therapist. If nightmares are a problem for you, consider starting the discussion with a talk with your primary care provider.

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

To end of the sleep section, 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 encourage you to consider completing a sleep diary to better understand what's getting in the way of good sleep for you.

When using a sleep diary, it's important to fill it out every morning within about 30 minutes of waking up. We're not very accurate record keepers when it comes to our sleep, so keeping the sleep diary beside the bed, along with a pen, increases our chances of using the diary daily, and will be a more accurate tool to notice any patterns or places where our sleep can be improved.

Find these in your handouts!

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: _____



Enter the Weekday (Mon., Tues., Wed., etc.)	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
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?							
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							

Class 3

10 Rules for Improved Sleep Hygiene

If you have problems sleeping, it is important that you practice good sleep hygiene. This means doing things which are known to improve sleep, and avoiding 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, 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.

Class 3

Source Adaptation: Kevin Morgan, Beverly David, Claire Gascoigne (2007). Clinical Sleep Research Unit Loughborough University UK. Loughborough University

CBTm

Here are the handouts on improving sleep.

If you aren't sure why you are having a problem with your sleep, a sleep diary can provide important information.

Your Action Plan

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

CBTm

As in previous classes, we have some recommended skills practice items for the upcoming week to help you incorporate these strategies into your day-to-day lives.

This is also a good time to remind you of the connection between hope and goal setting. Hope and looking toward the future are sometimes thought of as things that we wait patiently for, that hope is bestowed upon us. However, research shows us that hope comes from having a plan and working towards it, which means that goals should be planned and deliberate, setting aside time to work on them. The action plan is a great place to start!

The Class 3 suggested Action Plan is:

- a) Continue practicing mindfulness, try some form of mindfulness for 5 minutes twice/day, if possible.
- b) Write down two goals that you can work on this week, including at least one healthy living goal.

Resources

CBT-I Coach (app)

- <https://apps.apple.com/us/app/cbt-i-coach/id655918660>
- https://play.google.com/store/apps/details?id=gov.va.mobilehealth.ncptsd.cbt&hl=en_CA&gl=US&pli=1

WRHA Nutrition & Food Resources

- Health Management Group Program Guide: <https://wrha.mb.ca/groups/>
- Dial a Dietitian: 1-877-830-2892

The Insomnia Workbook, S. Silberman: "Quiet Your Mind & Get to Sleep: Solutions to insomnia for those with depression, anxiety, or chronic pain" (2009) Colleen E. Carney, PhD. & Rachel Manber, PhD.

"Healthy Canadians" on social media

- <https://www.facebook.com/HealthyCdns>

CBTm

Here is a list of resources we talked about in class today.

Resources

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

Klinic 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.reasonstolive.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>

Suicide Crisis Helpline (24/7) - call or text 9-8-8
→ Trauma-informed and culturally appropriate suicide prevention support

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If you ever feel the need for help, the following resources are available to you 24/7 in Manitoba.

CBTm Class Evaluation



CBTm

[Your site may choose to collect feedback on what class participants think of today's content. The measure '*Evaluation of the CBTm Education Session*' was developed for this purpose and can be found in the CBTm Facilitator Manual. If your site is using it, you might say ... ***"We're interested in what you think of today's session. The CBTm classes have changed over time because of previous client feedback. Please complete the class evaluation form when you receive it."***]

[Some sites also want to evaluate if attending the sessions is helping their participants feel better (reduce symptoms). Some short, cost-free questionnaires are recommended in the CBTm Facilitator Manual. If you are using some form of outcome monitoring, you might say ... ***"We are interested in how you are doing and want to know if the strategies taught here are making a difference in your well-being. Thanks for filling out the questionnaires! We understand that these are a bit repetitious, but 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!" and/or "See you in Class 4!"

CBTm

COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS
THÉRAPIE COGNITIVO-COMPORTEMENTALE DE LA PLEINE CONSCIENCE

Class 3 Handouts

Mindfulness Exercise - *Leaves on a Stream*

Daily Sleep Diary

10 Rules for Improved Sleep Hygiene

Tips for Healthy Living From AnxietyBC

Alcohol and Cannabis Guidelines for Use

www.cbtm.ca



LEAVES ON A STREAM

OR CLOUDS IN THE SKY

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 is any grass or any trees 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 gently 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, or judgement, and then 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.

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 _____



	Enter the Weekday (Mon., Tues., Wed., etc.)	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
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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.

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Avoid nicotine (including nicotine patches, chewing gum, etc.) an hour before bedtime and when waking at night. Nicotine is also a stimulant.

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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.

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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.

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.

- **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.

- **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.

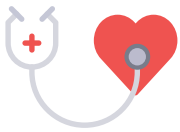
Nicotine is also a strong stimulant. In addition to the health benefits, quitting smoking may also leave you less prone to anxiety.



- **Avoid alcohol and drugs**

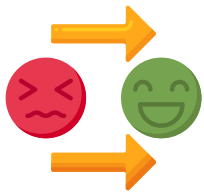
It is never a good idea to use alcohol or drugs to help you cope with anxiety - this just leads to more problems. If you have problems with anxiety, try to avoid using drugs and alcohol as a way to cope with negative feelings.

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 favourite 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!

HELPFUL HINTS:

- **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.
- **Set Goals.** Identify some things you want to work on and set some realistic goals. For more information, see **Guide for Goal Setting**.
- **Be Patient:** These strategies can take time to have a positive effect. Hang in there and stick with it!

Cannabis & Your Health

10 WAYS to Reduce Risks When Using

Cannabis use is now legal for adults, but it does have health risks. If you use non-medically, you can make informed choices for safer use.

Delay using cannabis as late as possible in life, ideally not before adulthood.



Avoid using if you're pregnant, or if you or family members have a history of psychosis or substance use problems.

Choose low-potency products – those with low THC and/or high CBD content.



Use cannabis in ways that don't involve smoking – choose less risky methods of using like vaping or ingesting.

Stay away from synthetic cannabis products, such as K2 or Spice.

If you do smoke, avoid deep inhalation or breath-holding.

Occasional use, such as one day per week or less, is better than regular use.



Your actions add up. The more risks you take, the more likely you are to harm your health.

Don't operate a vehicle or machinery while impaired by cannabis. Wait at least 6 hours after using. Remember that combining alcohol and cannabis makes you more impaired.

Not using cannabis at all is still the best way to protect your health (unless you use with a medical recommendation).

When using cannabis, be considerate of the health and safety concerns of those around you. Don't hesitate to seek support from a health professional if you need help controlling your cannabis use, if you have withdrawal symptoms or if your use is affecting your life.



Public Health
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camh




CANADIAN RESEARCH INITIATIVE
IN SUBSTANCE MISUSE


Canada's Guidance on Alcohol and Health

Guidance to support people in Canada to make informed decisions about alcohol and consider reducing their alcohol use


A standard drink means:

 **Beer**
 341 ml (12 oz) of beer 5% alcohol


or

 **Cooler, cider, ready-to-drink**
 341 ml (12 oz) of drinks 5% alcohol

or











 **Wine**
 142 ml (5 oz) of wine 12% alcohol

or

 **Spirits**
 (whisky, vodka, gin, etc.)
 43 ml (1.5 oz) of spirits 40% alcohol

To reduce the risk of harm from alcohol, it is recommended that people living in Canada consider reducing their alcohol use.

Alcohol Consumption Per Week

<p>0 drinks per week Not drinking has benefits, such as better health and better sleep.</p>	No risk	0 
<p>1 to 2 standard drinks per week You will likely avoid alcohol-related consequences for yourself and others.</p>	Low risk	1  2 
<p>3 to 6 standard drinks per week Your risk of developing several different types of cancer, including breast and colon cancer, increases.</p>	Moderate risk	3  4  5  6 
<p>7 or more standard drinks per week Your risk of heart disease or stroke increases.</p> <p>Each additional standard drink Radically increases the risk of these alcohol-related consequences.</p>	Increasingly high risk	7  8  +  ++



Alcohol Consumption Per Day

If you are going to drink, don't exceed 2 drinks on any day.

Drinking less benefits you and others. It reduces your risk of injury and violence, and many health problems that can shorten life.



Pregnant, Trying to Get Pregnant or Breastfeeding

During pregnancy or when trying to get pregnant, there is no known safe amount of alcohol use.

When breastfeeding, not drinking alcohol is the safest.



Sex and Gender

Health risks increase more quickly at 7 or more standard drinks per week for females.

Overall, far more injuries, violence and deaths result from men's drinking.





[Version date: April 2024]

Welcome to the fourth 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 use a 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

CBTm

As a reminder, 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, this is not the right setting to discuss personal trauma, suicidal or violent thoughts, or other information which may be distressing to others in the group. If you are in crisis and need to talk about any of these things, please approach one of the facilitators during a break or after the class.

Also, we ask that you please help us to make this a safe and confidential space by not sharing any personal details or identities of anyone in this program.

Class Outline

Mindfulness

Review of Previous Action Plan

Anger, Assertiveness, Self-Compassion

Problem-Solving

Your Action Plan

CBTm

In Class 4, we will practice a mindfulness exercise, review the skills practice and materials from class 3, provide new materials on anger, assertiveness, and self-compassion, as well as problem-solving skills, and end with a new recommended action plan.

Mindfulness Meditation – 5 min

Observe without judgement

Helpful for stress reduction

Apps

- Mindshift
- Mindfulness Coach

Anywhere, anytime

- Observe breath, object, activity, sounds

CBTm

As you have already learned, mindfulness is a type of meditation practice that involves awareness of the present moment without judgement. This is the practice of noticing your full experience without labeling the experience as good or bad, without holding onto the moment, or trying to push it away. Mindfulness can be practiced in a formal way, such as a breathing practice, body scan, or another guided exercise. It can also be practiced during any moment or activity by bringing your attention just to that moment, just to that activity. By now you have already practiced several different exercises during the previous classes. A new mindfulness practice that is well suited to our topics for this class is a loving kindness exercise.

These exercises help to build compassion for yourself and for others. Self-compassion practices help us to shift the self-critical thoughts we have that can be present with anxiety and depression. These practices can also help us to build resilience. We will be discussing self-compassion in more detail later in this session. For now, we encourage you to participate in the Loving Kindness mindfulness exercise. [see instructions below]

You are welcome to turn your screen off for the exercise, if that feels

more comfortable.

Start by being comfortable in your chair, with your back gently supported, in a relaxed posture. Let your eyes close, fully or partially. Take a few easy, slow breaths, and bring your awareness to your body and into the present moment. (Pause)

Bring to mind a person or another living being who naturally makes you smile. This could be a child, a grandparent, a pet – whoever naturally brings happiness to your heart and a smile to your face. If you can't think of a living being, think back to a memory of a place where you felt happy and at ease. Allow the feelings of what it is like to be in the company of that being to come into the present moment. Allow yourself to enjoy their company. (Pause)

Now, recognize how vulnerable this loved one is. Just like you, vulnerable to life events, and bad things happening like sickness, aging, or other difficult events. And just like you and every other living being, your loved one wishes to be happy and healthy and free from suffering. Keeping the warm, kind, loving feelings you have for your loved one close to your heart, repeat to yourself, silently, slowly, softly, and gently, feeling the importance of your words:

*May you be safe and free from harm
May you be healthy and free from suffering
May you have contentment and peace of mind
May you care for yourself with ease and well-being*

When you notice that your mind has wandered, return to the words and to the image of the loved one you have in mind. Return to the feelings of warmth, kindness, love, and compassion. Now add yourself to your circle of warmth and good will. If it feels comfortable, place your hand over your heart, feel the warmth and comfort of your hand, and say, repeating to yourself silently, slowly, and gently:

*May you and I be safe and free from harm
May you and I be healthy and free from suffering
May you and I have contentment and peace of mind
May you and I care for ourselves with ease and well-being*

Visualize your whole body in your mind's eye, noticing any tension, discomfort, stress, or uneasiness that may be lingering within you, and

offer warmth, comfort, and kindness to yourself.

May I be safe and free from harm

May I be healthy and free from suffering

May I have contentment and peace of mind

May I care for myself with ease and well-being

Now bring your attention to your breath, take a few easy comfortable breaths and just rest quietly in your own body, savoring the good will and compassion that flows naturally from your own heart. (Pause) If you are ever swept up in emotion, you can always return to your breathing. Then, when you're comfortable again, returning to the phrases.

[You can repeat phrases again]

May I be safe and free from harm

May I be healthy and free from suffering

May I have contentment and peace of mind

May I care for myself with ease and well-being

When you're ready, take a few breaths, begin to wiggle your fingers and toes to bring energy back to your body, and bring yourself back to the room. Then gently open your eyes. If you turned your screen off at the start of the exercise, please turn it back on.

[Check in after the exercise]

You've now had a chance to try four different mindfulness exercises. How did this one compare to the others? (pause)

What was it like turning compassion towards yourself? (pause)

All these experiences are normal. Becoming aware of how these practices affect you is the first step in building mindfulness and acceptance of your experiences.

Class Outline

Mindfulness

Review of Previous Action Plan

Anger, Assertiveness, Self-Compassion

Problem-Solving

Your Action Plan

CBTm

Let's move onto reviewing the action plan from Class 3.

Review of last week's Action Plan

Mindfulness 5 min twice a day

2 goals for this week

90% likelihood of completing the goals

Include at least one Healthy Living goal

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

CBTm

How did skills practice go this past week? Have you found a mindfulness strategy that works best for you? How did the activities in your action plan fit into your day?

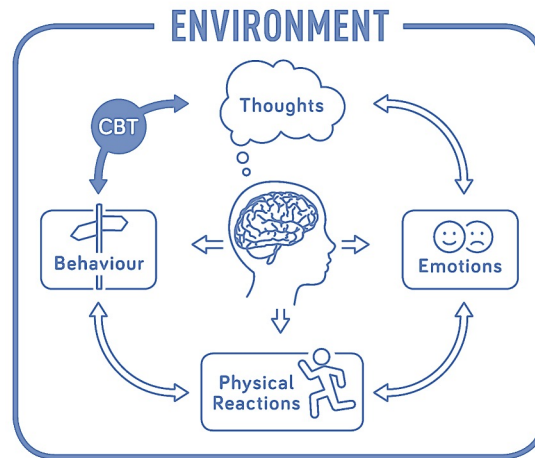
Were you able to meet your goals? If not, what did you learn? Is anyone willing to share a bit about how this went for them?

[Facilitators: if no one answers, then try the following

- *you may want to remind the group that skills practice is a list of suggested activities to do between classes.*
- *Or you may want to engage the participants in a discussion about how to fit new activities into their week.]*

Cognitive Behavior Therapy believes that to make the skills work for you, some practice is needed. This provides us with a chance to experiment with the skills and tweak them to our own use.

The CBT Model



CBTm

You have seen this model four times by now, so we will not go into great detail again, but instead we will go through an example using a situation where anger may occur and various angry, assertive, and passive behaviours.

The situation (environment) is that you have been working hard at your job – arriving on time, taking appropriate breaks, meeting deadlines. A coworker of yours has been showing up late, taking extra long breaks, and not getting their work done. Your boss tells the coworker that if they do not get all their files up to date in 1 week they will be fired. The coworker approaches you and asks for help to meet the deadline. In order for you to help them you would have to give up breaks or work longer hours than usual.

If you feel anger in response to this, you may be having thoughts like – “You are lazy and disrespectful” or “You’re a jerk“. Physical reactions might include an increased heart rate and increased temperature. A behaviour might be to “tell off” your coworker (an act of aggression), which would serve to reinforce your thoughts and feelings.

It could also be that you respond to that same situation by saying - an example

of passive behaviour – “Yes, of course I can help you” which results in you spending your evenings doing your coworker's extra work. The thought that may be reinforced by this behaviour might be that I think my time is not as valuable as theirs, and physical reactions may include reduced energy and interest in hobbies; emotions may include feeling deflated, unappreciated, or invisible.

Another option to the situation is choosing to act assertively. This can be tough when you're feeling angry and can feel your heart beating fast. But you might say “I can't do my work and yours too, I need to keep a balance for my own stress management. However, I can help you out a bit.”. That's standing up for yourself, but also being respectful and compassionate of your co-worker.

Class Outline

Mindfulness

Review of Previous Action Plan

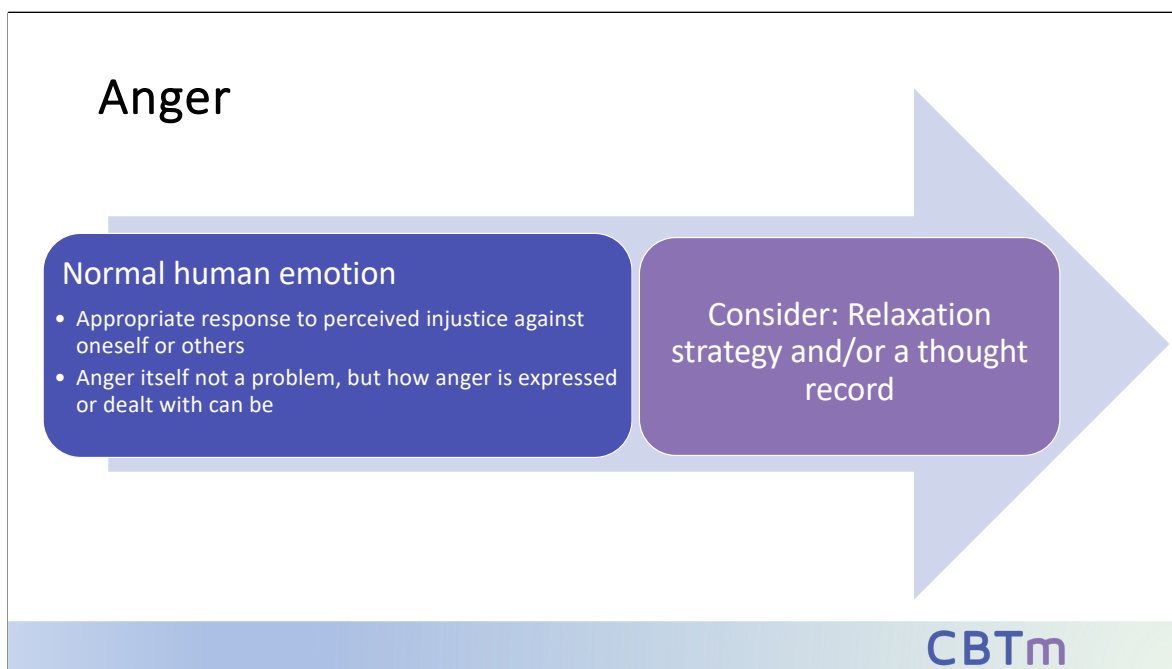
Anger, Assertiveness, Self-Compassion

Problem-Solving

Your Action Plan

CBTm

Let's move into the new content for class: anger, assertiveness, and self-compassion.



Anger has a bad reputation, but it's a normal human emotion, just like sadness, worry, or fear. This section isn't just for people whose anger might be big and aggressive. Anger can also show up in the forms of frustration and irritation, for example, and may occur when you're feeling overwhelmed.

Just as sadness can be a normal response to loss and anxiety, anger can be a normal response to the fear of a potential danger. Anger can also be a normal response to perceived injustices against yourself as an individual, or someone else, or a group of people. Anger can be one of the most motivating emotions for action. Without anger, there would be no social justice movements, no protection of those who are in a more vulnerable, displaced, or overlooked position.

However, anger can also create some other emotions, such as embarrassment and shame. That's because anger itself isn't a problem, but the way a person deals with their anger can be a problem. This can particularly be the case if the level of the anger does not fit well with the facts of the situation, such as if you feel anger toward someone who did not actually do anything hurtful or harmful to you. Anger can also be a problem for individuals

when their anger is displayed in a way that doesn't fit the situation, or with the person's values. So, the goal here is to find a way to communicate your anger or frustration in a way that matches your values and morals, this way the anger is at the same intensity/level of the situation.

Due to the intensity of emotion that can go along with anger, it can sometimes be difficult to test your thoughts in the moment. Often a first step for deciding how to deal with the anger is to practice a relaxation strategy, such as mindfulness. Once you are able to examine the evidence for and against your thought or belief, you can then complete a thought record to help you decide whether to use other strategies to change the emotion, or to decide if the situation itself is actually the problem, if this is the case then you may want to move on to using problem-solving skills, which we'll discuss later in the class.

TESTING YOUR THOUGHTS
Anger Example

Beck Institute

What is the situation? John does not take out the garbage when it's his turn.

What am I thinking or imagining? He never pulls his weight around the house

How much do I believe it? a little medium a lot (or rate 0-100 80)

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

How strong is the feeling? a little strong medium very strong (or rate 1-100 85)

What makes me think the thought is true?
He often puts off his chores and I end up doing them

What makes me think the thought is not true or not completely true?
He does do the dishes often

What's another way to look at this? John sometimes doesn't do chores as quickly as I would like, but there are other ways that he contributes.

What's the worst that could happen? Would I still live through it?
John doesn't take out the garbage until the whole house starts to smell.

What's the best that could happen?
He takes the garbage out immediately, all on his own.

What will probably happen?
I will remind him to take out the garbage and he will take it out sometime today.

What will happen if I keep telling myself the same thought?
I will snap at John and cause us to get into a fight.

What could happen if I changed my thinking?
I could appreciate the things he does do and talk to him about the garbage calmly.

What would I tell my friend if this happened to them? I would tell my friend that although that's frustrating to deal with, it's not worth ruining your relationship over.

What should I do now?
Find a way to calm down, then talk to John calmly about the garbage situation.

How much do I believe the negative thought now? a little medium a lot
(or rate 0-100 35)

How strong is my negative feeling now? a little strong medium very strong
(or rate 0-100 60)

Find this in your handouts!

Use a thought record when feeling angry

CBTm

It can be helpful to pay attention to the thoughts we have when we're angry. For example, some thoughts like "I can't stand this" or "I'm being disrespected" can wind us up to the point that we lose our ability to communicate effectively. Finding a way to understand and challenge these thoughts can help decrease the anger that we feel in the moment. This can also help to ease our physical feelings and allow us to make helpful choices about what to do – our behaviour.

Let's go through this Thought Record, where the thoughts and feelings are based in anger.



This diagram offers a basic framework to help you think about how you might deal with situations where you could experience anger. Think about your own anger responses and use this framework to help you find the correct response for a situation, according to your own personal values.

As we go through this framework, you might also consider keeping in mind the self-compassion mindfulness exercise we did earlier, as compassion for self and others might help us to reframe the situation(s).

Across the top of the framework, you can see the darker bar that says, “Respect for self”, with a plus sign on top of the left column of boxes, and a minus sign above the right column of boxes. The columns indicate whether you are respecting your own needs (the left side/+) or ignoring your own needs (right side/ -). Along the left side of the framework is the lighter box that says, “Respect for others”, with a plus sign indicated for the top row of boxes and a minus sign for the lower row of boxes. These rows are showing whether you are respecting (the top row) or ignoring (the bottom row) other people’s needs.

We're going to discuss the bottom left square first. This box represents a situation where a person thinks only about their own needs when they feel angry – Respect for Self is high – but they ignore the needs of others - Respect for Others is low. This box indicates **Aggression**, where a person overvalues their own needs and ignores the needs of others.

Remember the example we used with the CBT Model earlier? The situation was where you're doing well at work, but your co-worker is behind. The initial reaction we discussed was to be aggressive with the coworker, for example you could get angry, maybe yell at the person in an aggressive way, which might reinforce how frustrated you are with the situation, and not help your relationships with your boss or anyone else at work. After your outburst, you may be embarrassed by how you reacted. This type of reaction might be a signal that the way you reacted didn't fit with your values.

Another consideration with aggression is that an aggressive response in a situation today might be the result of being too passive in a different situation earlier. The frustration felt through being passive may turn into an overreaction with someone else, or in a different situation.

[ASK:] There are some situations where this kind of response is appropriate. What kinds of situations can you think of where acting out your anger in an aggressive way may be appropriate?

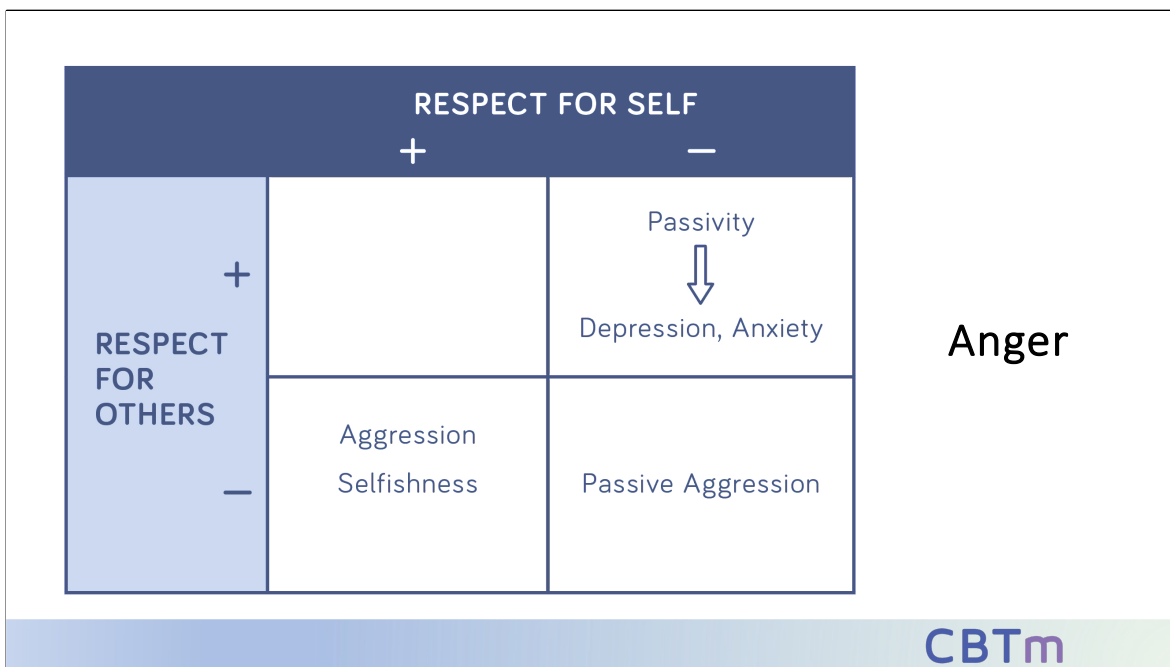


The upper right square represents a situation where a person thinks only about the needs of others – Respect for Others is high – and ignores their own needs – Respect for Self is low. This box represents **Passivity**, when a person overvalues the needs of others and ignores and puts aside their own needs. Too much passivity puts a person at increased risk for depression and anxiety because they are constantly sending themselves the message (through their own behaviour) that their needs are not as important as the needs of others.

Looking back at our CBT model example, there was a passive response suggested, telling your coworker “Yes, of course I can help you”. This passive response resulted in you spending your evenings helping with your coworker’s extra work. This response and situation may create some internal conflict for you, because you believe your time isn’t as valuable as theirs. The extra work might also leave you tired and irritable and without enough time to keep up with your own work.

[ASK:] Again, being passive when you're angry can be an appropriate response. What are some situations where a passive response would be appropriate?

[Facilitators: you may get answers such as: when talking with my boss, when talking to a child, a grandparent, or someone with an illness that you're caring for.]



The bottom right square represents a situation where a person does not pay attention to their own needs – Respect for Self is low – or the needs of others – Respect for Others is low. This box is called **Passive-Aggression**, when a person doesn't express their own needs and then gets angry with or resents others for not meeting their needs.

A passive-aggressive response at work might be that you say you'll help your coworker and agree to do lots of the work, but inside the anger builds and you become irritable with other people in the office or your family, and your mood becomes worsened.



The upper left square represents the healthiest way to deal with anger: **Assertiveness**. Being assertive means balancing your own needs – Respect for Self is high – and the needs of others – Respect for Others is high - in a way that is consistent with your own personal values.

In the CBT model example, we described a possible way to navigate the work situation in an assertive way. While this can feel tough, calmly telling your coworker that you can help them with their work for an hour or so, but then letting them know you will then have to focus on your own tasks, is a way to stand up for yourself while also being respectful and compassionate toward your coworker’s needs. We’ll talk more about assertiveness in a few slides.

To sum up this framework, many of us will recognize that we fall into each of these four squares in different situations, at different times in our lives, and with different people. However, if you believe that not enough of your responses fall into the assertiveness square, for example, you feel that you have too many aggressive, passive, or passive-aggressive responses, consider making it a goal to build your assertiveness skills.

Anger

Aggression

- Overvalue own needs and ignore the needs of others

Passivity

- Overvalue the needs of others and ignore your own needs

Passive-Aggression

- Not express own needs and then get angry with/resent others for not meeting your needs

Assertiveness

- Balance own needs with the needs of others in a way that is consistent with your personal values

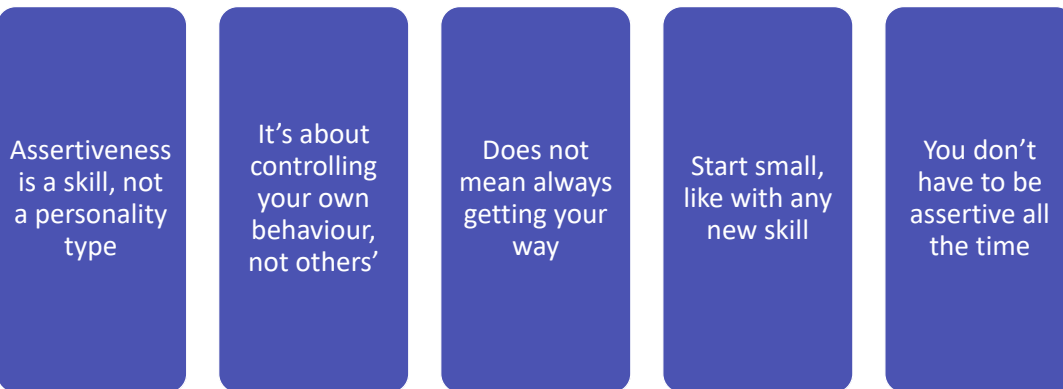
CBTm

These four responses represent the behaviours in the CBT model for anger. Assertiveness can be a powerful tool for shifting our feelings of anger, anxiety, and depression, as well as our perceptions of ourselves and others.

The key is to recognize that all of these responses may be appropriate for you, if you're reacting in a way that is appropriate to the situation, and in accordance with your own personal beliefs and values. If you notice that your anger ends up as one of these responses more than the others, then this might be an opportunity to work on your anger and assertiveness skills.

Compassion is a powerful force helpful for reducing the negative effects that anger can have on our emotions and our behaviours. Individuals who are low in self-compassion would likely fit in the passive category, and those who are low in compassion for others in the aggressive category. By recognizing the needs of all involved, it is more likely that you can take an assertive stance.

Assertiveness – Basic Skills



CBTm

If you think that building assertiveness skills would be helpful for you, here are a few tips for getting started.

- It is important to know that assertiveness is a skill – not a personality type or characteristic – anyone can learn to be more assertive with practice. We'll review some basic assertiveness skills as part of this class, but there is more information in the handouts linked to the end of this section.
- Importantly, assertiveness is about controlling your own responses and behaviours, not about controlling or changing others.
- Although being assertive often leads to better outcomes and healthier relationships, it does not mean that you will always get your way.
- Assertiveness is an important communication skill to practice as you navigate your own mental wellness. Even the closest of relationships can have some ups and downs and anger can develop, so like every skill that we present in these classes, we encourage you to start small when building assertiveness skills by doing things that are challenging, but manageable.
- You do not have to be assertive in every situation, or with every person. Perhaps it is starting with returning an item to a store. Or asking a salesperson a question. Maybe it is saying no to a safe person without apologizing

Assertiveness – Basic Skills



CBTm

When starting to build assertiveness there are several things to be mindful of:

- Assertive communication is about both what you say, as well as how you say it. Our tone of voice can send a very different message than the words we are speaking. [Use an example here of saying the same statement in two different ways, for example, "I love this weather" using a happy tone and again using a sarcastic tone]
- Body language can also communicate as much as your words and can influence what you're saying. It's important to consider both your posture and your eye contact when having a conversation and how this can influence the message that you are sending to the other person. [Demonstrate this with eye contact or different body language, for example, avoiding eye contact and having your arms crossed while asking someone how they're feeling, then ask again but this time with eye contact and your arms in a more neutral position]
- Assertiveness is often related to asking for something that you need or want, or to saying no to someone. You may want to test your thoughts or get more information before responding automatically to a request, this way you can decide how assertive you want to be.
- You can also "buy time" and say that you need to think about a request

before answering. This can allow you to use relaxation strategies, such as mindfulness, or thought records if necessary, and to decide what response you are comfortable with.

- When communicating assertively, it is important to express your needs and wants clearly – don't assume that others can read your mind! The same goes for others, listen to what the other person is saying, their needs are important too.

Assertiveness – Basic Skills

Brace yourself for resistance from others

Don't set limits you won't keep

Start with one relationship, not your most conflicted one

Don't overcompensate with aggression

Try not to make it about who wins

CBTm

When making a change in how you interact with others, it is common to be surprised when someone questions your ideas, solutions, or boundaries when you're being assertive.

As with any change, it is consistency that will lead to changes in your overall relationships and in how you feel. Keeping this in mind, think carefully about when, where, how, and who you want to start practicing being assertive with. It is helpful to start with one relationship, one that is not your most difficult relationship.

When you begin setting limits, be careful to only set limits that you are committed to keeping and that you feel can actually be kept. [Facilitators, use an example here]

Be mindful not to shift too far from passive to aggressive, and to remain focused on the process and your own behaviour – not about the outcome or who wins.

ASSERTIVENESS

adapted from AnxietyCanada

Assertive communication is the honest expression of one's own needs, wants and feelings, while respecting those of the other person. When you communicate assertively, your manner is non-threatening and non-judgemental, and you take responsibility for your own actions.

If you have anxiety or depression, you may have some difficulty expressing your thoughts and feelings openly. Assertiveness skills can be difficult to learn, especially since being assertive can mean holding yourself back from the way you would normally do things. For example, you may be afraid of conflict, always go along with the crowd, and avoid offering your opinions.



As a result, you may have developed a **passive** communication style. Alternatively, you may aim to control and dominate others and have developed an **aggressive** communication style.

However, an assertive communication style brings many benefits. For example, it can help you to relate to others more genuinely, with less anxiety and resentment. It also gives you more control over your life, and reduces feelings of helplessness. Furthermore, it allows OTHER people the right to live their lives.

Remember: Assertiveness is a learned skill, not a personality trait you are born with. It is what you *do*, not who you are.

Step 1: Identifying your trouble spots

To start, ask yourself the following questions to identify what area(s) to work on:

- Do I struggle to ask for what I want?
- Is it hard to state my opinion?
- Do I have trouble saying no?



Find this in your handouts!

More on assertiveness

Class 4

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Page 1 of 4

CBTm

Self-Compassion

Self-kindness vs.
Self-judgement

Common
humanity vs.
Isolation

Mindfulness vs.
Over-
identification

<https://vimeo.com/65859796>

For more information on Dr. Kristin Neff's
work on self-compassion, see her website:
<http://self-compassion.org/>

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Self-compassion is a topic that is well-suited to discuss alongside anger. Compassion for self and others can support assertive communication, and help reduce unhelpful anger, anxiety, and depression cycles.

These are the three main components of self-compassion:

- 1) **Self kindness** is about *how* you relate to yourself, with warmth and understanding rather than ignoring, criticizing, or judging.
You can build self-kindness by recognizing the painful experience and being gentle with that experience. For example, you do this by treating yourself kindly when you're experiencing a bad day, and at times when your instinct is to be self-critical. Instead of ignoring the difficult experience you've been through and telling yourself to "Get through it and move on", you can comfort and care for yourself, the way you would a friend. Judging and criticizing have the opposite effect we hope they will have; it is a myth that we need to be self-critical to motivate ourselves.
- 2) We often experience frustration when things don't go as planned, and this feeling can be accompanied by a sense of isolation, as if we are the only

person who makes mistakes or suffers. However, **suffering is a part of the shared human experience** – something we all go through – recognizing this common aspect of humanity can help to reduce the sense of isolation we feel.

- 3) The final component of self-compassion is **using mindfulness skills to avoid the tendency to over-identify with our experience of suffering**. Dr. Kristin Neff, a psychologist specializing in self-compassion, says that we sometimes don't even recognize that we're suffering. We can sometimes over-identify with our self-criticism, perfectionism, and judgement when things don't go as planned or when we fail to meet the expectations that we set for ourselves. Practicing mindfulness can help us observe our thoughts and emotions, as they are, without suppressing or exaggerating them. You can do this by practicing using a nonjudgemental and receptive mindset through mindfulness, to observe what is, without being carried away by the experience.

Research shows us that self-compassion is strongly related to good mental wellness, less anxiety, less perfectionism, less stress, and is equally strongly related to positive components like higher life satisfaction, greater motivation, healthier lifestyle choices, and better interpersonal relationships. The more compassion we have for ourselves, the more energy and compassion we have available for others.

The links on this slide are for a video describing some ways to practice self-compassion and for a website devoted to the topic.

Class Outline

Mindfulness

Review of Previous Action Plan

Anger, Assertiveness, Self-Compassion

Problem-Solving

Your Action Plan

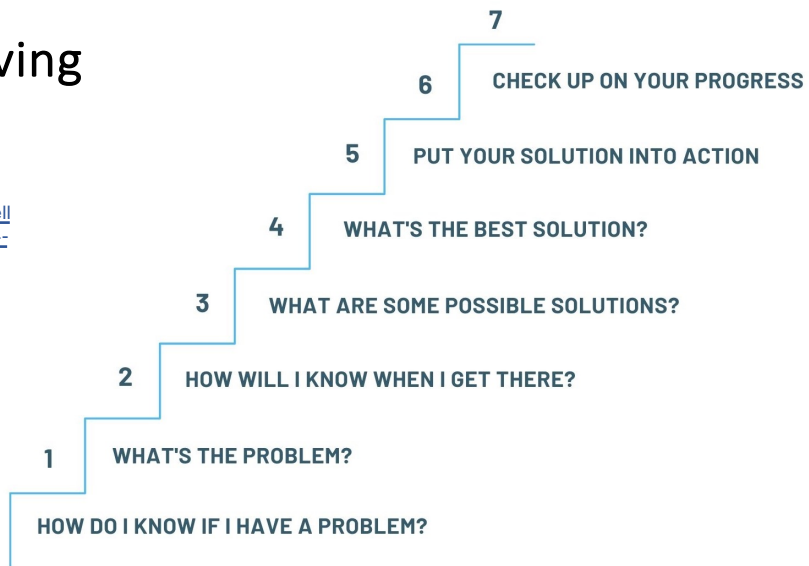
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Next on the agenda is problem-solving.

Problem Solving

To read more visit:

<https://www.heretohelp.bc.ca/wellness-module/wellness-module-4-problem-solving>



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Are you facing a tricky or complicated problem in your life? Do you need help finding solutions?

We deal with problems almost every day in our lives and many of us may already be pretty good problem solvers. Often, we can solve most of our problems by thinking up a solution on the spot or by using a strategy that has worked for us in the past.

So, if this is the case, why is problem-solving an important skill for mental health? Problems that are “stuck” and don’t go away can take their toll on our well-being. Left unsolved, a small problem can quickly become a much bigger problem. We can find ourselves ruminating or worrying about the issue, and then we end up feeling frustrated, stressed, or maybe even depressed and hopeless. Until we’ve come up with a solution that actually works, the problem never really goes away, and it can continue to create stress in our lives.

Understanding and improving your problem-solving skills can help you deal more effectively with the stressors in your life, and it can increase your confidence, making you feel more able to solve problems in the future.

Effective problem-solving can also have several additional benefits including better functioning at work or school, more satisfying relationships with friends, family and co-workers, higher self-esteem, and higher overall life satisfaction.

If you wish to review the material further after class, you can visit the heretohelp.bc.ca website and view the problem-solving module.

Step 1: How do I know if I have a problem?



Pay attention to your feelings

e.g., Are you frustrated? Anxious? Depressed?



What is happening to make you feel this way?



Try not to focus on negatives, instead look for opportunities



Try making a list of problems that come up again and again for you

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Step 1 is about identifying if we have a problem. Sometimes the problem isn't easy to identify or define. Here are some tips to help you.

Start by paying attention to your feelings. This is a good opportunity to accept and be non-judgemental about the emotions you're experiencing. For example, if you're frustrated about something, that's a valid feeling. When we don't think our feelings are valid, we may choose to deal with the problem differently compared to when we choose to accept and take into consideration how we're feeling.

Emotions can act like signals. Painful or distressing emotions might signal to us that we're facing a problem, and when you pay attention to these feelings, you often recognize the problem sooner. For example, feeling angry whenever you talk to your boss may be a sign that there is a problem at work.

Look for opportunities. Try not to focus on the negative parts of the situation but instead look for opportunities or ways to challenge the negative parts of the situation. If a problem seems less scary or overwhelming, you're more likely to try to solve it. For example, you might look at the problem with your boss and see it as an opportunity to improve your working environment.

Try and make a list of a couple of problems that seem to come up again and again for you. Or if you have a specific problem that comes to mind already, write that one down.

Step 2: What's the problem?

Tips:

- Be as specific as possible
- Stick to the facts
- Don't be too narrow

In order to identify the problem, ask yourself these 3 questions:

1. What is the situation right now? What's making me feel upset?

2. What would I like the situation to be?

3. What are the obstacles standing between what I would like the situation to be and what the situation is right now?

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You can't solve a problem until you know exactly what the problem is. In order to do that, you can ask yourself the following questions:

1. What is the situation right now? What's making me feel upset?
2. What would I like the situation to be?
3. What are the obstacles standing between what I would like the situation to be and what the situation is right now?

Tips for outlining the problem:

- Be as specific as possible. If your definition of the problem is vague, it can be difficult to know where your solution should start. For example, it might be hard to start problem-solving if you say, "I hate my home!" A more precise definition might be, "My commute is too long, and I always come home stressed out and exhausted."
- Stick to the facts. Try not to put opinions in your definition, only facts. If you're frustrated because your neighbours have loud parties every weekend, it isn't helpful to say, "My neighbours are jerks!", even if that's true, it doesn't help solve the problem – you can't just turn them into nicer people!
- Don't be too narrow. When you define the problems too narrowly, it's harder

to come up with solutions. For example, let's say you would like to travel this summer, but you don't have a car. A narrow definition might be, "How can I get enough money to buy a car in a month?". A better definition might be, "How can I travel this summer within my budget?". When you define your problem like this, buying a car is only one of many solutions, other solutions could include getting a deal on a plane ticket, taking the bus, or catching a ride with friends.

Step 3: How will I know when I get there?

Choose a goal for your problem.

The **SMART** principle may help you set goals. Goals should be:

Specific

Measurable 

Attainable

Realistic

Time-limited

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The third step helps us to figure out what we would like the situation to be by defining a goal.

Choose a goal for your problem. The **SMART** principles can help you set achievable goals:

S = specific

M = measurable

A = attainable

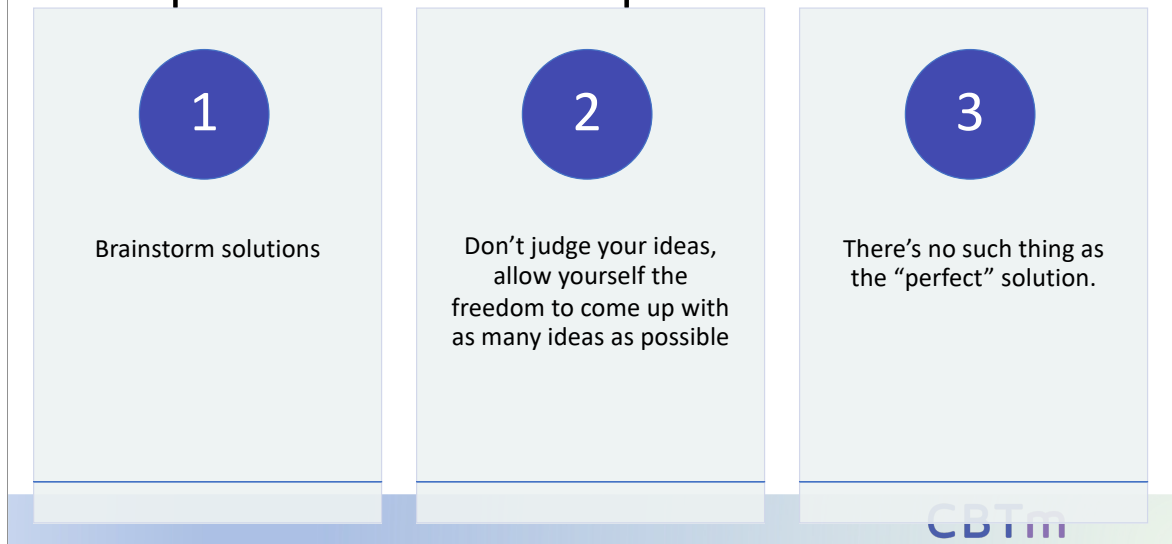
R = realistic, and

T = timely or time-limited

For example, "I will go to the gym every day" may not be an achievable goal if you don't currently exercise regularly. A more helpful goal might be, "Starting next week, I will try going to the gym on Mondays, Wednesdays, and Fridays from 4:30pm to 5:30pm".

Try creating a SMART goal for your problem, following along with each of the principles, this will help us in the next step where we will work on coming up with different solutions.

Step 4: What are some possible solutions?

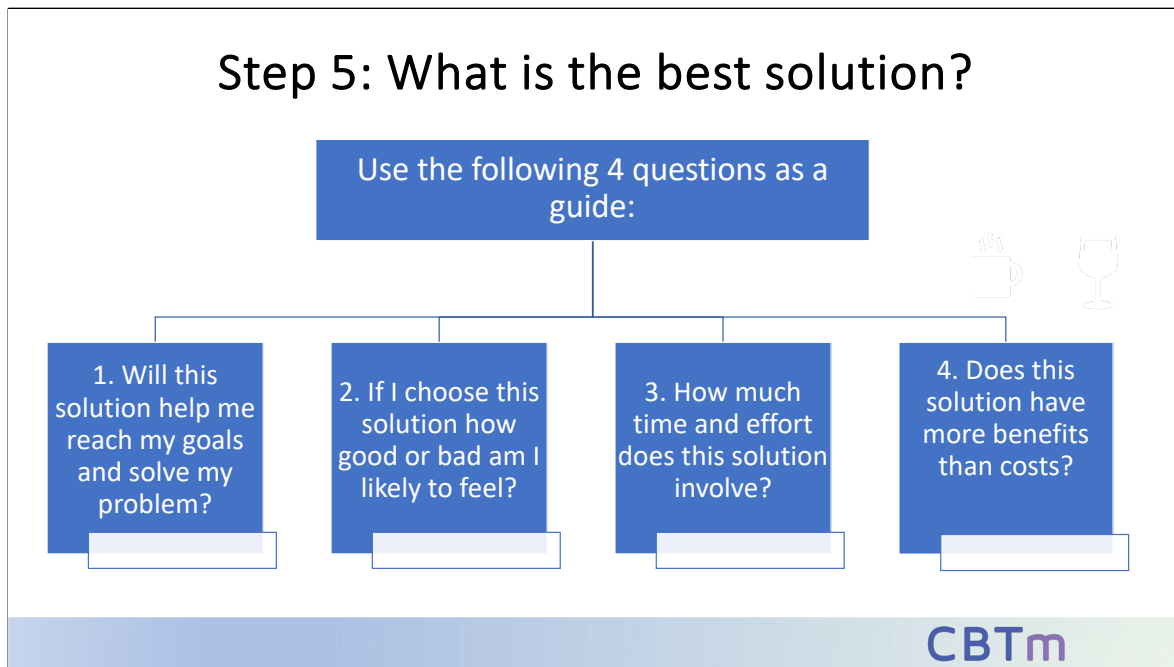


When it comes to difficult problems, it can be hard to come up with new and helpful solutions. This is often because we tend to “re-use” solutions that have previously worked elsewhere in our lives, and we may not work at finding new ideas for solutions to the problem.

Here are some tips to think differently about finding solutions to the problem:

- Try brainstorming. It's easier to find a good solution to try when you have a lot of solutions to choose from. Try to come up with as many different solutions as possible. For example, if you're frustrated by a long commute between your home and your workplace, you might come up with a list of neighbourhoods that you could move to. However, all of those solutions involve the same thing: moving. You may also want to consider different solutions, like working from home a few days a week, changing your work hours so you don't have to commute during rush hour, or exploring transportation options like public transit or car-pooling with coworkers.
- Don't judge! While it can be second nature to immediately judge the solutions, try to allow yourself the freedom to come up with solutions without judging if they're right or wrong, give yourself time to consider them.
- Try not to get caught up with coming up with the 'perfect' solution as your brainstorming. This is not the time to decide whether your solutions are good or bad, right or wrong. You are more likely to think of new solutions if you also include some “wild ones”.

Step 5: What is the best solution?



Once you have a list of possible solutions, the next step is to go through your ideas and pick the best solution for you in this situation – remember, the perfect solution rarely exists!

The key is to pick the solution that has the most benefits and the least costs. There will probably be some negatives to any solution. Use the following questions as a guide to help pick the best solution to try.

1. Will this solution help me reach my goals and solve my problem? If a solution doesn't actually solve the problem, it's probably not the best choice.

2. If I choose this solution how good or bad am I likely to feel? You may come up with solutions that could solve the problem very well, however, if you think that the solution will make you feel bad, it may not be the best choice at this time.

3. How much time and effort does this solution involve? Solutions that take up too much time and energy may not be the best choice, especially if you can't realistically carry them out.

4. Does this solution have more benefits than costs? When you look at the costs and benefits, it's a good idea to think about how a solution will affect you and others, both now and in the future. If the solution will create other problems or stresses for you or others, it likely isn't the best solution.

More tips for finding possible solutions include:

- Ask others for help! Get new ideas from friends, family members, or professionals. This is an important aspect of social support that can help reduce our stress. For more information on social support, see Wellness Module 3: Social Support at www.heretohelp.bc.ca.
- Combine solutions. Some solutions that seem silly can work when combined with other ideas. For example, if you want to improve your relationship with your child by spending quality time with them. This can sometimes be a task that begins with coming up with an activity. By combining “find an activity we both will like” with “connect more with my child” one solution might be to read a book out loud together or take a woodworking class or go skating.

These steps can also help to problem solve issues that have become “stuck”. By writing the steps out and coming up with answers to these question, this process can sometimes “loosen up” some ideas or solutions that you may not have thought of before or include solutions that you previously dismissed.

Example: Step 5

The problem is "I'm too isolated and I want to be around people more."

Solution	Pros	Cons
Example - "I could take a class at the community centre"	Example - "it'd be great to learn something new."	Example - "it could become just another thing on my to-do list."
	Example - "I might meet some nice new people."	Example - "I might not be able to afford it."
	Example - "the community centre's really close to my house so it's convenient."	

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Here is an example of breaking down a solution to decide if the benefits outweigh the costs. In this example, the problem is related to spending too much time alone and feeling isolated and wanting to be more social. One of the possible solutions is "I could take a class at the local community centre". This solution was then broken down by pros and cons. The pros are that it could be a great way to learn something new, you might meet some nice new people, and the community centre is close to home, so it's convenient. The cons are that this may become just another item on a growing to-do list, and that the class might not be affordable.

[Another problem to try using this solution framework is: My partner and I want to improve our relationship by spending more time together.

Possible solutions: a) Find an activity to do together where we learn something new, such as taking a class at the community centre.

b) Find an activity to do together where we can have fun, such as a free swim or skating.

Pros: It would be great to learn something new together or be active together.

We wouldn't be spending time in front of a screen and not

interacting with one another.

The class might be low cost or free.

The class or activity is something we could both enjoy.

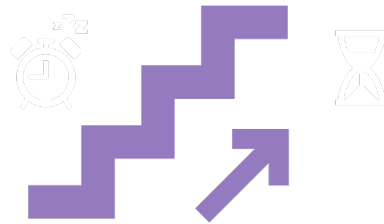
Cons: It's hard to find the time.

The cost might be too high.]

Step 6: Put your solution into action

Step-by-step approach

Tasks are more easily managed when they are broken up into smaller steps



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After you've picked a solution, you need to make a plan of action, this is step 6!

If you write down the specific steps involved in carrying out your solution, you're more likely to follow through and accomplish your goal. Once you've laid out a step-by-step plan, taking action on the problem(s) is no longer a large daunting task but instead becomes a number of smaller and more manageable tasks.

The next slide will show you an example of what this can look like.

Example: Step 6

In this example, Mandy wants to become more confident about saying “no”

Solution Step	Action
1	Mandy borrows a book on confidence from the library
2	Mandy reads the book
3	Mandy starts practicing saying “no” in the mirror every day
4	Mandy decided to say “no” for the first time when her sister asked her to pick up an order for her
5	Mandy rewards herself for saying no by treating herself to a coffee from her favourite cafe

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For example, Mandy has decided to work on being more confident about using boundaries with friends. You can see examples of what she plans to do in this action plan, where she’s broken down her solution into 5 smaller and more manageable steps:

1st Mandy borrows a book on confidence from the library,

2nd Mandy reads the book,

3rd Mandy starts practicing saying “no” in the mirror every day,

4th Mandy decides to say “no” for the first time when her sister asked her to pick up an order for her,

5th Mandy rewards herself for saying no by treating herself to a coffee from her favourite café.

Remember that being assertive in complex situations begins with small steps, in low level situations

Step 7: Check up on your progress

If your solution isn't working, be kind to yourself!

Remember, even the best plans don't always work as expected

You may need go through these steps more than once until you reach a satisfactory solution



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Finally, it's a good idea to track how well your solution is actually working. If your problem is resolving itself, reflect on what you learned from the situation. You never know if you'll face a similar problem in the future. It's also important to reward yourself for a job well done.

However, if your solution isn't working, it's important to be kind to yourself. Remember, even the best laid plans don't always work as we expected! Instead of being judgemental, we can take this time to re-evaluate the solution and see where we can make changes to the plan.

If you feel stuck, ask yourself the following questions: Did I define my problem correctly? Were my goals realistic? Was there a better solution? Did I carry out the plan of action properly? Has the situation changed?

You may need to go through these steps more than once until you find a satisfactory solution. This is normal, especially for more difficult problems. And remember, that there might not be a "perfect" solution to this problem, especially if the problem has been in your life for a while and you've already tried other solutions.

Keep using the techniques from the Problem-Solving Step Guide. Remember that the problems you work on using these techniques don't have to be big or life-changing, they can be simple day-to-day issues or even decisions that you need to make as part of your work or studies. The more you practice at these steps, the easier problem-solving will be!

Find these in your handouts!

Problem-Solving

What is Problem-Solving?

Problem-solving is an important skill for our mental health. Problems that don't go away can take a big toll on our overall well-being. If left unsolved, a small problem can become a much larger problem. This can leave us feeling frustrated, stressed, hopeless and even depressed. When we choose to solve our problems, it allows us to deal more effectively with the stressors in our lives and we are able to continue moving forward.

Problem-Solving has other benefits, including:

- Increased functioning at school and/or work
- More positive relationships with friends, family members and co-workers
- Builds our self-esteem
- Increases life satisfaction

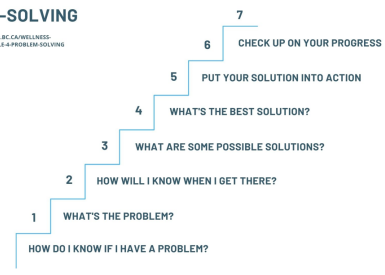


Some problems are bigger than others and are not as easily solved. These problems can create stress and impact our well-being. The initial response may be to cope with these problems the way we would with other problems we've faced in the past. However, until we come up with the correct solution, the problem won't go away and will continue to impact our lives.

For difficult problems, there are steps we can follow in order to try to best solve them. In the following pages, you will come to learn the 7 steps involved in effective problem-solving. If you want to learn more, visit www.heretohelp.bc.ca and look at their problem-solving module.

PROBLEM-SOLVING

HTTPS://WWW.HERETOHELP.BC.CA/WEBSITE/ MODULE/WEBSITE/MODULE-4-PROBLEM-SOLVING



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All the problem-solving steps that were described in class are covered in the class handout.

Your Action Plan

Mindfulness 5 min twice a day

One thought records in the week
(Testing Your Thoughts worksheet)

Visit problem-solving website for 15 min

Fill out problem-solving sheet

Work on 1 SMART goals

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For this week's action plan, we're asking you to try the following:

- Practice mindfulness for 5 minutes twice/day
- Complete one thought record during the week (Testing Your Thoughts worksheet)
- Go over the Problem-Solving handouts or visit the module on the website for 15 minutes
- Fill out a problem-solving sheet
- Work on 1 **SMART** goal

As a reminder, an Action Plan isn't just about practicing the skills that you learn in class. Having a plan and actively working on a goal is also connected to improving your motivation and your sense of hope - it can be the start of look forward to the future.

Resources

Self-compassion.org [<https://self-compassion.org/>]

Self-Compassion video [<https://vimeo.com/65859796>]

Problem Solving Module [www.heretohelp.bc.ca/wellness-module/wellness-module-4-problem-solving]

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Here is a list of some of the resources we talked about in class today.

Resources

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

Klinic 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.reasonstolive.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>

Suicide Crisis Helpline (24/7) - call or text 9-8-8
→ Trauma-informed and culturally appropriate suicide prevention support

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

CBTm Class Evaluation



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[Your site may choose to collect feedback on what class participants think of today's content. The measure '*Evaluation of the CBTm Education Session*' was developed for this purpose and can be found in the CBTm Facilitator Manual. If your site is using it, you might say ... ***"We're interested in what you think of today's session. The CBTm classes have changed over time because of previous client feedback. Please complete the class evaluation form when you receive it."***]

[Some sites also want to evaluate if attending the sessions is helping their participants feel better (reduce symptoms). Some short, cost-free questionnaires are recommended in the CBTm Facilitator Manual. If you are using some form of outcome monitoring, you might say ... ***"We are interested in how you are doing and want to know if the strategies taught here are making a difference in your well-being. Thanks for filling out the questionnaires! We understand that these are a bit repetitious, but 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!" and/or "See you in Class 5!"]

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COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS
THÉRAPIE COGNITIVO-COMPORTEMENTALE DE LA PLEINE CONSCIENCE

Class 4 Handouts

Mindfulness Exercise - *Loving Kindness*

Anger and Coping Strategies for Anger

Assertiveness

Problem Solving

Testing Your Thoughts

www.cbtm.ca

LOVING KINDNESS

Start by being comfortable in your chair, with your back gently supported, in a relaxed posture. Let your eyes close, fully or partially. Take a few easy, slow breaths, bring your awareness to your body and into the present moment. (Pause)

Bring to mind a person or another living being who naturally makes you smile. This could be a child, a grandparent, a pet – whoever naturally brings happiness to your heart and a smile to your face. If you can't think of a living being, think back to a memory of a place where you felt happy and at ease. Allow the feelings of what it is like to be in the company of that being to come into the present moment. Allow yourself to enjoy their company. (Pause)

Now, recognize how vulnerable this loved one is. Just like you, vulnerable to life events, bad things happening: sickness, aging, difficult events. And just like you and every other living being, your loved one wishes to be happy and healthy and free from suffering. Keeping the warm, kind, loving feelings you have for your loved one close to your heart, repeat to yourself, silently, slowly, softly and gently, feeling the importance of your words:

May you be safe and free from harm
May you be healthy and free from suffering
May you have contentment and peace of mind
May you care for yourself with ease and well-being

When you notice that your mind has wandered, return to the words and the image of the loved one you have in mind. Return to the feelings of warmth, kindness, love and compassion. Now add yourself to your circle of warmth and good will. If it feels comfortable, place your hand over your heart, feel the warmth and comfort of your hand, and say, repeat to yourself silently, slowly and gently:

May you and I be safe and free from harm
May you and I be healthy and free from suffering
May you and I have contentment and peace of mind
May you and I care for ourselves with ease and well-being

(continued on next page)

LOVING KINDNESS

(CONTINUED)

Visualize your whole body in your mind's eye, noticing any tension, discomfort, stress or uneasiness that may be lingering within you, and offer warmth, comfort, and kindness to yourself.

May I be safe and free from harm
May I be healthy and free from suffering
May I have contentment and peace of mind
May I care for myself with ease and well-being

Now bring your attention to your breath, take a few easy comfortable breaths and just rest quietly in your own body, savoring the good will and compassion that flows naturally from your own heart. (Pause)

If you are ever swept up in emotion, you can always return to your breathing. Then, when you're comfortable again, returning to the phrases.

[If you want to repeat them again]
May I be safe and free from harm
May I be healthy and free from suffering
May I have contentment and peace of mind
May I care for myself with ease and well-being

When you're ready, take a few breaths, begin to wiggle your fingers and toes to bring energy back to your body, and bring yourself back to the room. Then gently open your eyes. If you turned your screen off at the start of the exercise, please turn it back on.

WHAT IS ANGER?

Normal Anger

Anger is a normal human emotion. Everyone feels annoyed, frustrated, irritated, or even very angry from time to time. Anger can be expressed by shouting, yelling, or swearing, but in extreme cases it can escalate into physical aggression towards objects (e.g., smashing things) or people (self or others). In some cases, anger might look much more subtle, more of a brooding, silent anger, or withdrawal.



In a controlled manner, some anger can be helpful, motivating us to make positive changes or take constructive action about something we feel is important. But when anger is very intense, or very frequent, then it can be harmful in many ways.

What Causes Anger?

Anger is often connected to some type of frustration – either things didn't turn out the way you planned, you didn't get something you wanted, or other people don't act the way you would like. Often poor communication and misunderstandings can trigger angry situations.

Anger usually goes hand-in-hand with other feelings too, such as sadness, shame, hurt, guilt, or fear. Many times people find it hard to express these feelings, so just the anger comes out.

Perhaps the anger is triggered by a particular situation, such as being caught in a traffic jam, or being treated rudely by someone else, or banging your thumb with a hammer while trying to hang a picture-hook.

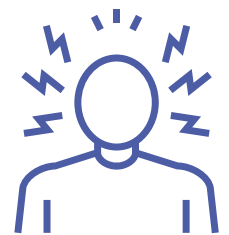
Other times there is no obvious trigger – some people are more prone to anger than others. Sometimes men and women handle anger differently, but not always.

Problems Associated With Anger

Uncontrolled anger can cause problems in a wide range of areas of your life. It may cause conflicts with family, friends, or colleagues, and in extreme situations it can lead to problems with the law.

But some of the other problem effects of anger may be harder to spot. Often people who have a problem with anger feel guilty or disappointed with their behaviour, or suffer from low self-esteem, anxiety, or depression.

There are also physical side-effects of extreme or frequent anger, such as high blood pressure and heart disease. Some studies suggest that angry people tend to drink more alcohol, which is associated with a wide range of health problems.



WHAT IS ANGER?

Do I Have a Problem with Anger?

Perhaps you have already identified that anger is a problem for you, or someone else has mentioned it to you. But if you are not sure whether anger is a problem for you, consider the following questions:

- Do you feel angry, irritated, or tense a lot of the time?
- Do you seem to get angry more easily or more often than others around you?
- Do you use alcohol or drugs to manage your anger?
- Do you sometimes become so angry that you break things, damage property, or become violent?
- Does it sometimes feel like your anger gets out of proportion to the situation that set you off?
- Is your anger leading to problems with relationships, such as with family, friends, or at work?
- Have you noticed that others close to you sometimes feel intimidated or frightened by you?
- Have others (family, friends, colleagues, health professionals) mentioned that anger might be a problem for you?
- Do you find that it takes you a long time to 'cool off' after you have become angry or irritated?
- Have you ended up in trouble with the law as a result of your anger, for example, getting into fights?
- Do you find yourself worrying a lot about your anger, perhaps feeling anxious or depressed about it at times?
- Do you tend to take your frustration out on loved ones or people less powerful than you, rather than dealing with the situation that triggered your anger?

If you answered 'yes' to any of these questions, it may be that anger is a problem for you. It may be that addressing your anger can allow you to live a much more positive and rewarding life.



WHAT IS ANGER?

How Can I Manage Anger Better?

You may have heard about ‘anger management’ and wondered what it involves. Anger management can be addressed in groups or through individual therapy, and there are also a lot of self-help resources available.

Anger management is not just about counting to ten before you respond (although that is often a good idea). It is about helping you to better understand why you get angry, what sets it off and what are the early warning signs, and about learning a variety of strategies for managing those feelings more constructively.

You may wish to read through our ‘Anger Coping Strategies’ handout for more information about this.



ANGER COPING STRATEGIES

Anger and Problem Anger

Anger is a normal human emotion, and can range from mild irritation to an intense rage or fury. The previous handout 'What Is Anger?' provides more detail about the difference between normal anger and problem anger, and some questions to help you identify whether anger may be a problem for you.

This handout includes a number of tips which you may use to help you to cope better with your anger. You may wish to practice some of these on your own, or you may wish to combine them with individual or group therapy for extra support.

Triggers and Early Warning Signs

One of the first steps in managing your anger is to identify what types of situations usually trigger your anger. Make a list of the things which usually set you off, for example:

- being cut off in traffic
- running late for an appointment
- other people running late
- your son/daughter leaving their schoolbag in the hall
- your partner not putting away the dishes
- a colleague falling behind on a project



Some of these situations you may be able to avoid, such as planning ahead to avoid running late. Other situations are less in your control, such as being cut off in traffic, but what you *can* control is your response.

Once you have finished listing your common trigger situations, make a separate list of the warning signs for your anger. What is it that usually happens in your body when you get angry? Becoming aware of your body's alarm bells helps you to spot anger early on, which gives you a better chance of putting other coping strategies into practice. Some common warnings are:

- tightness in chest
- feeling hot or flushed; sweating
- grinding teeth
- tense muscles or clenched fists
- pounding or racing heart
- biting your nails



Why Am I Angry?

When you notice these warning signs, stop and ask yourself what it is that is making you angry. Often there will be something going on that is quite reasonable to feel angry about, so allow yourself to acknowledge this. But it is also important to be clear about the cause of our anger so that we don't respond in a way that is out of proportion (e.g., staying angry all day about someone else using up the last of the milk) or take out the anger on the wrong person (e.g., getting angry at family members when it is your boss you are angry with).

ANGER COPING STRATEGIES

Taking Out The Heat

When you notice yourself becoming angry, there are a number of techniques which you can use to ‘take the heat out’ of your anger. These include:

- **Time Out:** This simply means removing yourself from the situation for a period of time, to give yourself a chance to ‘cool down’ and think things through before you act. For example, when you notice yourself becoming angry during an argument with your partner, say “I need to take time out, let’s talk about this calmly when I get back” and then go for a walk.
- **Distraction:** If you cannot change the situation, it can help to distract yourself from whatever is making you angry by counting to ten, listening to music, calling a friend to chat about something else, or doing housework. For example, if you are stuck in traffic and getting angry, put on the radio and try to find a song you like, or count the number of times the chorus is sung.
- **Silly Humour:** While it is not always possible to ‘laugh your problems away’, you can often use humour to help you take a step back from your anger. For example, if you are angry with a colleague and refer to them as ‘a stupid clown’, think about what this means literally. Imagine or draw them dressed in a clown suit, with big shoes and a red nose. If you picture this image every time they do something which bothers you, it will be much easier to keep things in perspective.
- **Relaxation:** Just as our bodies are strongly affected by our emotions, we can also influence our emotional state with our physical state. Relaxation techniques, such as taking slow deep breaths or progressively tensing and relaxing each of your muscle groups, can help to reduce anger.



Self-Talk and Helpful Thinking

How you are thinking affects how you are feeling, so focusing on negative thoughts such as “this is so unfair” will maintain the angry feeling. Make a list of more balanced statements you can say to yourself before, during and after difficult situations.



For example:

Before: *I know I can handle this; I have strategies to keep my anger under control and can take time out if I need to.*

During: *Remember to keep breathing and stay relaxed. There is no need to take this personally. I can manage this.*

After: *I handled that well. Even though I felt angry, I didn’t raise my voice too much and I think I got a better result.*

Assertiveness and Practice

Another key strategy in managing anger is to learn to be assertive. Assertiveness means expressing your point of view in a clear way, without becoming aggressive. You may wish to read other handouts about this topic. Finally, because anger is often an automatic response, all of these techniques require a lot of practice.

Assertive communication is the honest expression of one's own needs, wants and feelings, while respecting those of the other person. When you communicate assertively, your manner is non-threatening and non-judgemental, and you take responsibility for your own actions.

If you have anxiety or depression, you may have some difficulty expressing your thoughts and feelings openly. Assertiveness skills can be difficult to learn, especially since being assertive can mean holding yourself back from the way you would normally do things. For example, you maybe afraid of conflict, always go along with the crowd, and avoid offering your opinions.



As a result, you may have developed a **passive** communication style. Alternatively, you may aim to control and dominate others and have developed an **aggressive** communication style.

However, an assertive communication style brings many benefits. For example, It can help you to relate to others more genuinely, with less anxiety and resentment. It also gives you more control over your life, and reduces feelings of helplessness. Furthermore, it allows OTHER people the right to live their lives.

Remember: Assertiveness is a learned skill, not a personality trait you are born with. It is what you *do*, not who you are.

Step 1: Identifying your trouble spots

To start, ask yourself the following questions to identify what area(s) to work on:

- Do I struggle to ask for what I want?
- Is it hard to state my opinion?
- Do I have trouble saying no?



Tips for Communicating Assertively:

Many people find it hard to ask for what they want, feeling that they don't have the right to ask, or fearing the consequences of the request. For example, you may think, "What if he says no?" or "She would think I am rude for asking".

When making a request, it can be helpful to start by saying something that shows you understand the other person's situation. For example, "I know you probably have had a lot on your mind lately."



Next, describe the situation and how you feel about it. For example, "This presentation is due next Friday and I am feeling pretty overwhelmed, and worried that I won't be able to get it done in time." It is important to talk about your feelings, not to make accusations to others. For example, it is better to say, "I feel resentful when you show up late to meet me," than it is to say, "You are always late! You don't care about me!"

Then, describe what you would like to see happen. Be as brief and positive as possible. For example, "I'd really like to figure out how we can share more of the work responsibilities."

Last, tell the person what would happen if your request was honoured. How would you feel? Sometimes, you may want to add what you will do in return. For example, "I would make sure to help create the slides for your presentation next week."



Many people have trouble expressing their views openly. Perhaps you wait for others to give their opinion first, and will share yours only if you happen to agree. Being assertive means being willing to state your opinion, even if others haven't done so or if your opinion is different.



Being assertive also means that you "own" your opinion; that is, you take responsibility for your view. For example: "My personal view is that it was unfair for her to ask that of you."

Being assertive also means being willing to consider new information, and even changing your mind. However, it does not mean changing your mind just because others think differently.

Tips for Saying “No”

Saying “No” can be difficult if you are usually more passive. However, if you are not able to say no to others, you might not feel in charge of your own life.



When saying “No”, remember to use assertive body language (e.g., standing straight, eye contact, speaking loudly enough that the other person can hear).

Before you speak, decide what your position is. For example, think about how you will say “No” to a request, such as, “I would like to help you out but I already have quite a bit of work to get done this week.”

Make sure to actually wait for the question, and don’t say “Yes” before the other person even makes the request.



Take care not to apologise, defend yourself, or make excuses for saying “No” when it is not necessary.

If saying “No” right away is too difficult, practice telling someone, “I need to think about it” as a first step. This will help break the cycle of always saying yes, and will give you a chance to think about what you really want to do.

Remember: Everyone has the right to say “No!”

Step 2: Practice your new assertiveness skill

First, think of a couple past scenarios when you avoided giving your opinion or preference, saying “No”, or asking for what you wanted. How could you have handled the situation differently? What would be an assertive way to communicate in those situations?

Practice saying your assertive statement out loud to yourself, to get used to it. For example, “Actually, I thought the movie dragged on a bit”, “Unfortunately, I can’t help you out next weekend”, or “I’d like the dishes done before 9 o’clock”.

Next, think of a situation that is coming up in the next week in which you could use your assertiveness skills. Begin with a scenario that is easier, for example, giving your opinion or saying “No” to more familiar people, and then try it in more difficult situations.

Try it out - how did it go? Notice how the other person reacted. Would you do something differently next time? Remember: assertiveness is like any new skill, and requires time and practice. Don’t be too hard on yourself if you are feeling nervous, or not getting it quite right. Reward yourself when you do speak up!

Note: Sometimes people who are not used to us being assertive may need some time to adjust. Just because people may not initially respond in a positive way, doesn’t mean that being assertive is wrong - they just need to adjust to the change!

Barriers to Behaving Assertively - Myths about Assertiveness

Myth #1: Assertiveness means getting your own way all the time

This is not true. Being assertive means expressing your point of view and communicating honestly with others. Often, you may not get “your own way” when you are assertively giving your opinion. But telling others how you feel and trying to work out a compromise shows respect for both yourself and others.

Myth #2: Being assertive means being selfish

This is false. Just because you express your opinions and your preferences does not mean that other people are forced to go along with you. If you express yourself assertively (not aggressively) then you make room for others. You can also be assertive on behalf of someone else (e.g., I would like Susan to choose the restaurant this week).

Myth #3: Passivity is the way to be loved

This is false. Being passive means always agreeing with others, always allowing them to get their own way, giving into their wishes, and making no demands or requests of your own. Behaving this way is no guarantee that others will like or admire you. In fact, they may perceive you as dull and feel frustrated that they can't really get to know you.

Myth #4: It's impolite to disagree

This is not true. Although there are some situations where we don't give our honest opinion (e.g., most people say how beautiful a friend looks in her wedding dress, or we only say positive things on the first day of a new job). Much of the time, however, other people will be interested in what you think. Think about how you would feel if everyone always agreed with you.

Myth #5: I have to do everything I am asked to do

False. A central part of being assertive is setting and keeping personal boundaries. This is difficult for many people. With our friends, we may worry that they will think we are selfish and uncaring if we don't do everything they ask. At work, we may worry that others will think we are lazy or inefficient if we don't do everything we are asked. But other people cannot possibly know how busy you are, how much you dislike a particular task, or what other plans you have already made unless you tell them. Most people would feel badly to learn that you had done something for them that you really didn't have the time for (e.g., writing a report that requires you to work all weekend) or that you really dislike doing (e.g., helping a friend move).

Final Tip:

Although it's important to test skills out and use the trial and error process, we can learn a lot from observing others. Ask yourself who you feel comfortable interacting with - what do they do (smile, etc.). Try to identify some of the things that other people do that make you feel good interacting with them and then try doing those things yourself.

What is Problem-Solving?

Problem-solving is an important skill for our mental health. Problems that don't go away can take a big toll on our overall well-being. If left unsolved, a small problem can become a much larger problem. This can leave us feeling frustrated, stressed, hopeless and even depressed. When we choose to solve our problems, it allows us to deal more effectively with the stressors in our lives and we are able to continue moving forward.

Problem-Solving has other benefits, including:

- Increased functioning at school and/or work
- More positive relationships with friends, family members and co-workers
- Builds our self-esteem
- Increases life satisfaction

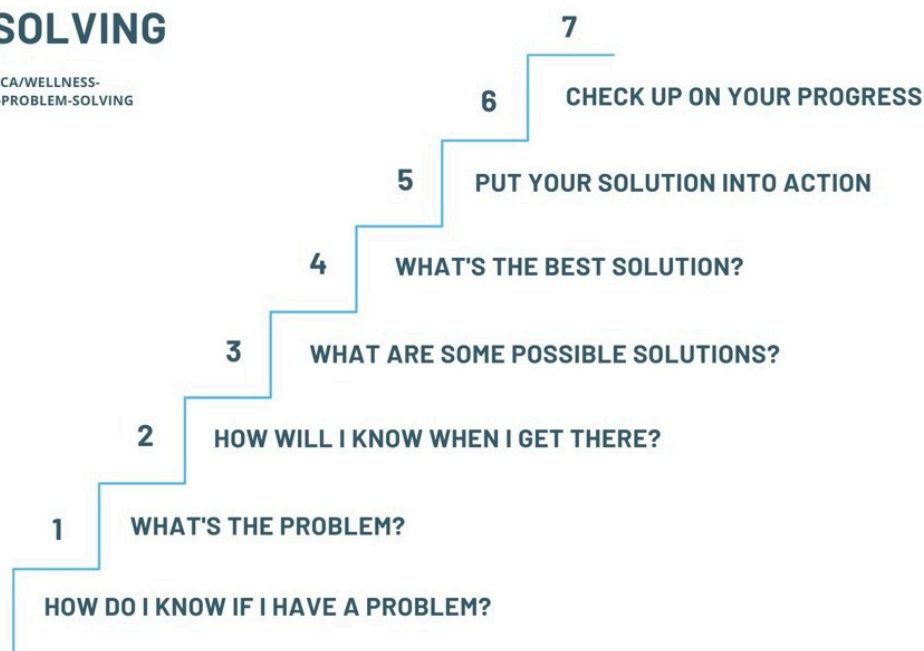


Some problems are bigger than others and are not as easily solved. These problems can create stress and impact our well-being. The initial response may be to cope with these problems the way we would with other problems we've faced in the past. However, until we come up with the correct solution, the problem won't go away and will continue to impact our lives.

For difficult problems, there are steps we can follow in order to try to best solve them. In the following pages, you will come to learn the 7 steps involved in effective problem-solving. If you want to learn more, visit www.heretohelp.bc.ca and look at their problem-solving module.

PROBLEM-SOLVING

[HTTPS://WWW.HERETOHELP.BC.CA/WELLNESS-MODULE/WELLNESS-MODULE-4-PROBLEM-SOLVING](https://www.heretohelp.bc.ca/wellness-module/wellness-module-4-problem-solving)



Problem Solving Worksheet

We all deal with problems almost every day of our lives. Fortunately, we can solve most of our daily problems by thinking up a solution on the spot or using a strategy that worked for us in the past.

Step 1: How do I know I have a problem?

Using your feelings

What emotions am I having? (Frustrated? Anxious? Depressed?)



What is happening that is making me feel bad?

What is happening that is making me feel this way?

Make a List

Write out a list of problems that come up again and again.

Look for Opportunities

What are the positive aspects of the problems listed above?

Step 2. What's the problem?



What is going on right now? What is making me feel upset?

For example: I have too much work to do in a day

What would I like the situation to be?

For example: I would like to have less work to do in a day

What is the obstacle standing between what I would like the situation to be and what the situation is right now?

For example: The boss wants me to do all the work

Describe the problem as a question.

For example: How can I get the boss to assign me less work?

Step 3: How will I know when I get there?

What Would I Like To Happen?

For example: My goal is to have less paperwork to do in a day. This goal is realistic and specific. An example of an unrealistic and vague goal might be: "My goal is to be happy at work."



List your SMART goals:

S - Specific

M - Measurable

A - Attainable

R - Realistic

T - Timely

Step 4: What are some possible solutions?



Brainstorm as many different ideas as you can without judging them (be sure to include some wild and silly examples).

Step 5: What's the best solution?



Use the questions from the problem-solving module to help you decide which solution is the best for you. You can give each solution a score from 0 to 5 for each question. The solution with the highest score is probably the BEST solution for your problem.

Possible solution #1

Will this solution help me reach my goals and solve my problem?
(0=not likely; 5=most likely)

If I choose this solution how good or bad am I likely to feel?
(0=the worst; 5=the best)

How much time and effort will this solution require?
(0=the most; 5=the least)

Does this solution have more benefits than costs if I choose it?
(0=mostly costs; 5=mostly benefits)

Possible solution #2

Will this solution help me reach my goals and solve my problem?
(0=not likely; 5=most likely)

If I choose this solution how good or bad am I likely to feel?
(0=the worst; 5=the best)

How much time and effort will this solution require?
(0=the most; 5=the least)

Does this solution have more benefits than costs if I choose it?
(0=mostly costs; 5=mostly benefits)

Possible solution #3

Will this solution help me reach my goals and solve my problem?
(0=not likely; 5=most likely)

If I choose this solution how good or bad am I likely to feel?
(0=the worst; 5=the best)

How much time and effort will this solution require?
(0=the most; 5=the least)

Does this solution have more benefits than costs if I choose it?
(0=mostly costs; 5=mostly benefits)

Possible solution #4

Will this solution help me reach my goals and solve my problem?
(0=not likely; 5=most likely)

If I choose this solution how good or bad am I likely to feel?
(0=the worst; 5=the best)

How much time and effort will this solution require?
(0=the most; 5=the least)

Does this solution have more benefits than costs if I choose it?
(0=mostly costs; 5=mostly benefits)

Step 6: Put your solution into action



Plan of action

Laying out a step-by-step plan can be helpful by breaking up a task into smaller, more manageable tasks. Use the boxes below to write out your action plan in steps.

Step 1:

Step 2:

Step 3:

Step 4:

Step 5:

Step 7: Check up on your progress

Did I solve my problem?

If not, what went wrong?

If the problem isn't better at all, try the following:

- Ask yourself if anything is different; has anything changed?
- Maybe try another one of your solutions.
- Check if you followed the steps in the problem-solving approach correctly.

Remember to be proud of yourself for taking these steps and for any progress you've made, no matter how small! If you keep using this approach it will get easier.

keep
going

TESTING YOUR THOUGHTS

Anger Example

What is the situation? John does not take out the garbage when it's his turn.

What am I thinking or imagining? He never pulls his weight around the house

How much do I believe it? a little medium a lot (or rate 0-100 80)

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

How strong is the feeling? a little strong medium very strong (or rate 1-100 85)

What makes me think the thought is true?

He often puts off his chores and I end up doing them

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

He does do the dishes often

What's another way to look at this? John sometimes doesn't do chores as quickly as I would like, but there are other ways that he contributes.

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

John doesn't take out the garbage until the whole house starts to smell.

What's the best that could happen?

He takes the garbage out immediately, all on his own.

What will probably happen?

I will remind him to take out the garbage and he will take it out sometime today.

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

I will snap at John and cause us to get into a fight.

What could happen if I changed my thinking?

I could appreciate the things he does do and talk to him about the garbage calmly.

What would I tell my friend if this happened to them? I would tell my friend that although that's frustrating to deal with, it's not worth ruining your relationship over.

What should I do now?

Find a way to calm down, then talk to John calmly about the garbage situation.

How much do I believe the negative thought now? a little medium a lot
(or rate 0-100 35)

How strong is my negative feeling now? a little strong medium very strong
(or rate 0-100 60)

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 ____)

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

How strong is the feeling? a little strong medium very strong (or rate 1-100 ____)

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 thought?

What could happen if I changed my thinking?

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

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 ____)



[Version date: Apr 2024]

Welcome to the fifth 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 use a 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

CBTm

Remember, this is a class, so we encourage you to ask questions and to 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 group setting, this not the right place to discuss personal trauma, suicidal or violent thoughts, or other distressing information which may be upsetting to others in the group.

If you are in crisis and need to talk to someone, please approach one of the facilitators during a break or after the class.

And as always, we ask that you please help us to make this a safe and confidential space by not sharing any personal details or identities of anyone in this program.

Class Outline

Mindfulness

Review of Previous Action Plan

What is Stress?

Coping with Stressful Experiences

Wellness Plan

Your Action Plan

CBTm

Today we've chosen a grounding exercise as our mindfulness strategy to practice.

Grounding Exercise



Grounding exercises are strategies that can help bring you back to the present moment.

Other grounding strategies:

- Name as many animals as you can
- Count backwards from 100
- Name cities that start with an “S”
- Point to 15 objects in the room
- Focus your gaze on one spot in the room

But is grounding avoidance?

CBTm

Sometimes when we experience stressful experiences or life-changing events, our mind goes back to those times and thinks about them more than we would like. Grounding strategies are one type of mindfulness exercise that can help you to become more present in the current moment. You might find your mind wandering back to some of these difficult memories during the mindfulness exercise, which is natural. This is not a sign that mindfulness is not working or that it cannot work for you. Keep trying and accept that it will not always be easy but that it can still be a helpful tool. The idea of grounding exercises is to engage your mind in a task that captures your attention enough that the difficult memories are less likely to intrude into your mind. You can turn off your screen for the mindfulness exercise if you wish.

The exercise we’ll practice today is called ‘**Engaging Your Senses**’.

[Begin exercise following instructions below]

To start, sit in a comfortable upright position with your feet planted flat on the ground. Rest your hands in your lap. Your eyes can be open or closed. Begin to notice your breath. We will now engage each of our 5 senses, one at a time.

Hearing

Begin to relax by noticing all of the sounds around you. Give yourself permission to suspend your judgement of the sounds. They are not good or bad, they just are. [pause]

Are you now hearing more than you were before you started? Subtle sounds may have previously gone unnoticed. Can you hear them now? [pause]

Smell

Now shift your concentration to noticing the smells of your environment. Is food being prepared? Can you detect the electronic smell of your computer or fresh air coming in through your window? [pause]

Try closing your eyes so you can focus on the subtlest of scents. [pause]

Sight

If you closed your eyes a moment ago, open them to notice the colours, shapes and textures of your surroundings. [pause]

If you really look, just about everything has colour variation and texture that may have previously gone unnoticed. How many shades of blue or red can you see? [pause] Are any colours missing? [pause]

Taste

You can do this one regardless of whether or not you have food to put in your mouth. Just notice your tongue in your mouth, your saliva, and your breath as you exhale. Most of us always have some type of taste in our mouth. Run your tongue over your teeth and cheeks- what do you notice? [pause]

Touch

Where did you place your hands when you first started this exercise? Notice the sensation of where your hands meet something more solid, like the fabric of your clothes or the surface of your desk. Notice the pressure between your feet and the floor. [pause]

Try feeling the textures that you noticed by sight a moment ago. To fully ground yourself in the room and bring the exercise to a close, feel several objects on your desk and perhaps even stand up from your chair to bring energy and sensation to all parts of your body. [pause]

[After the exercise: check in with participants]

What was this grounding exercise like for you? [pause]

Throughout the set of CBTm classes, we've been talking about the impact of avoidance, especially as avoidance can make anxiety and depression worse in the long run. The question at the bottom of the slide is meant to get you thinking about avoidance and some of the things we do to distract ourselves in times of high stress. Any guesses as to whether grounding is just a type of avoidance of difficult memories or reactions that might come up? [Wait for the group to discuss].

While technically, grounding may be a short-term distraction, it is meant to be just that, temporary - when emotions or reactions in the moment are feeling too overwhelming and intense. The idea is to take a brief break from these reactions. Then, you are encouraged to return to them when you feel ready.

You can practice mindfulness as a grounding exercise in different ways. For example, the Body Scan exercise from class 2 is also a grounding exercise, as was Mindful Breathing from class 1. Some other forms of grounding are presented on the slide.

Can you think of any other strategies?

Class Outline

Mindfulness

Review of Previous Action Plan

What is Stress?

Coping with Stressful Experiences

Wellness Plan

Your Action Plan

CBTm

Next, we'll review the recommended action plan from Class 4.

Review of Previous Action Plan

Mindfulness 5 min twice a day

One thought record in the week (Testing Your Thoughts worksheet)

Visit problem-solving website for 15 min

Fill out problem-solving sheet

Work on your **SMART** goals

CBTm

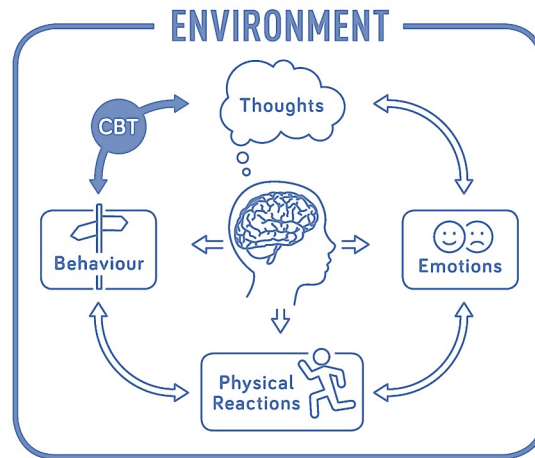
Was anyone able to work on practicing mindfulness this week? Was there a time when you were in the present moment during an activity like walking or folding the laundry? [pause]

Did anyone work on a Testing Your Thoughts worksheet, either by writing it out, or by reading it out and answering the questions silently? [pause]

Were you able to practice the problem-solving steps for any problems in your life? [pause]

What are your thoughts on the action plan. Has this section on suggestions for an action plan been a useful part of the class content for you? [pause]

The CBT Model



CBTm

This is the diagram you've seen throughout the set of CBTm classes, the CBT model. We present this each class as it's an important way of understanding how Cognitive Behaviour Therapy works. The CBT model demonstrates how our thoughts, feelings – emotions and physical reactions – and our behaviours are all connected. CBT address these connected areas by making changes in our thought and/or behaviour patterns.

Today, let's go through the CBT model using an example of a stressful situation.

[Review the diagram with the group; consider giving a stressful example, you may choose one of the options below or come up with your own.]

1. A boss who is demanding and yells
 - [possible thoughts: I'm walking on eggshells; I can't do anything right]
 - [possible emotions: anxiety, fear]
 - [possible physical reactions: tightness in my chest, jumpy, tired, can't concentrate, crying]
 - [possible behaviours: drinking more, not sleeping, venting, angry at my

friends and family]

2. Driving again after a car accident

- [possible thoughts: I'll never drive again, this road is dangerous, drivers in this city are all bad]
- [possible emotions: fear, anxiety]
- [possible physical reactions: gripping the steering wheel very tightly, tightness in my chest, racing thoughts]
- [possible behaviours: stop driving, refuse to be driven through the same intersection]

3. Break up of a relationship

[possible thoughts: I'm not good enough etc.]

[possible emotions: sadness, feeling lost, grief etc]

[possible physical reactions: pain in my chest, headaches etc.]

[possible behaviours: avoid places we went together, stay in bed, not exercise, avoid friends]

Which skills have you learned about in CBTm class that might be useful when dealing with stress? [pause]

[possible answers: exposure, thought records, behavioural experiments, mindfulness, grounding, etc.]

Class Outline

Mindfulness

Review of Previous Action Plan

What is Stress?

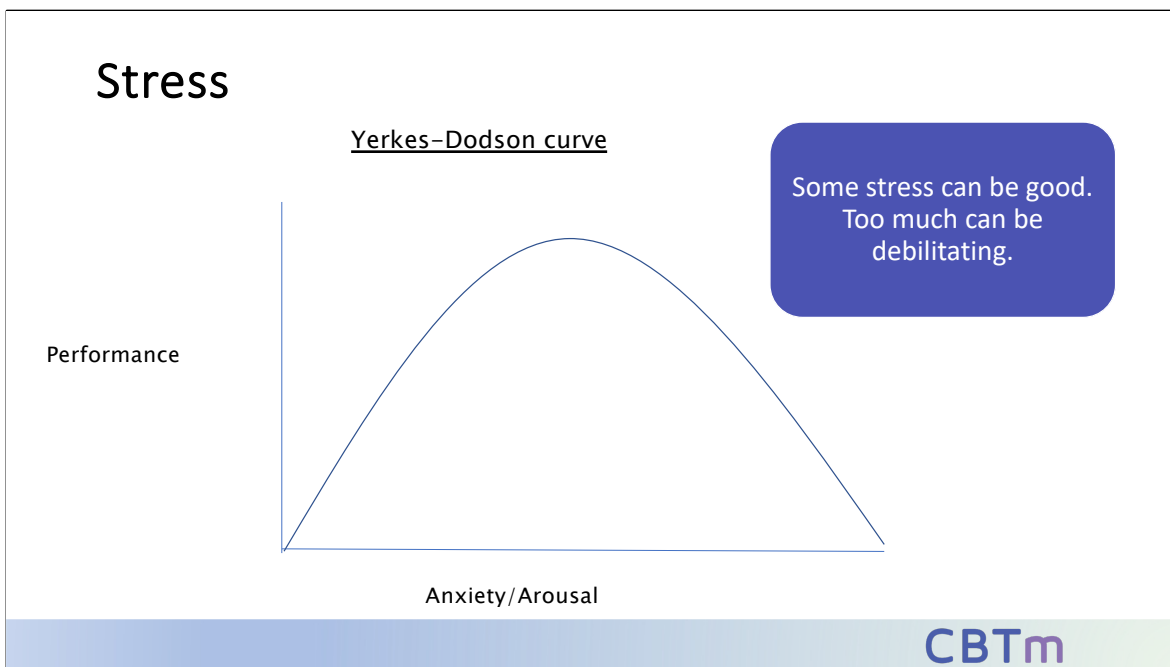
Coping with Stressful Experiences

Wellness Plan

Your Action Plan

CBTm

Now we'll talk about stress – what it actually is and what happens when we're stressed.



Some stress can be a good thing, even though that may be hard to believe. Going back to high school, for example, remember for a moment the experience of preparing for a test.

What would happen if you had too much stress about the test? [pause]
[Possible answers: Feel overwhelmed, do other things instead, not sure where to start, have thoughts about failing the test or doing poorly (catastrophic thinking; fortune telling), on the day of the test you might have trouble concentrating or remembering information, etc.]

What would happen if you had no stress at all about the test?
[Possible answers: You might procrastinate, watch an extra hour of shows, stay up late, leave studying to the last minute, not study much or not study at all.]

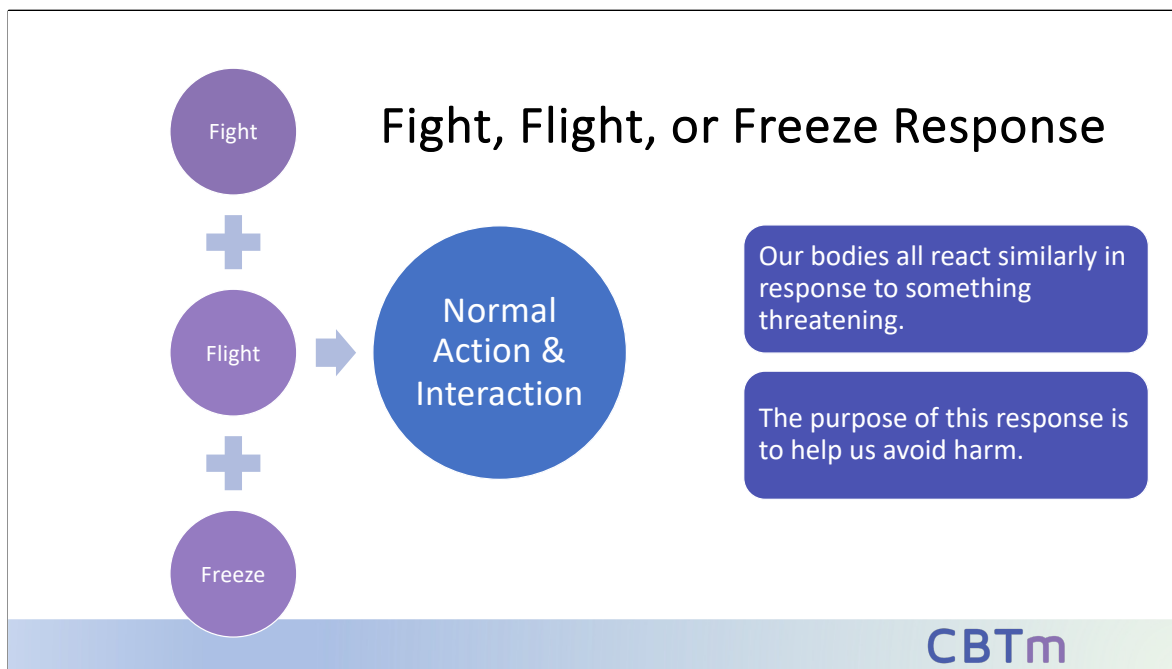
Our performance, and likely our grade on the test, are not being helped by either too much or too little stress.

So, what would happen if you had just the right amount of stress about the

test?

[Possible answers: Plan a study schedule, make notecards, ask someone to quiz you, make a study group, etc.]

This graph represents exactly what we're talking about. The top of the curve on this graph is the "sweet spot", the best level of stress to get the optimal level of functioning and performance. Too much or too little stress will impair your functioning or performance, because stress can motivate us, or it can overwhelm us. The key to managing stress is to develop a growth mindset, this way you can learn to see stress as helpful and useful for motivating you. We'll discuss the idea of a growth mindset more near the end of this class.



Over the course of human history, the stress response developed in humans and in other species as an “automatic” way of helping protect us from danger. No Thinking Necessary!

The stress response was (and still is) very useful when we were facing immediate, true life-threatening danger to our physical safety, such as encountering a predator (e.g., a saber-toothed tiger running toward you).

The stress response has also been called the flight, fight, or freeze response, because when our body perceives a threat, it automatically prepares itself to do one of three things: 1) stay and fight the threat, 2) get away from the threat (i.e., run), or 3) either brace ourselves to minimize impact or go limp to minimize impact (like a mouse going limp and playing dead when grabbed by an owl, it might still get away, if given the chance).

It is important to remember that we don't choose to have a fight, flight, or freeze response, or which action to take. The brain chooses the response, and we are still likely to need this if we are facing physical danger. It takes training and experience to have a strategic response alongside the stress response.

Fight, Flight or Freeze Response

Sometimes, we experience “false alarms”.

If we experience these frequently and severely, they can get in the way of our functioning and quality of life.



CBTm

Many of the threats we face in life in modern times are often more like psychological fears, rather than physically harmful life-threatening dangers. Examples of psychological fears might include the loss of a job, the breakup of a relationship, or being bullied by others.

The stress response isn't great at helping us deal with psychological types of threats. In fact, sometimes that rush of adrenaline makes it harder to think and problem-solve in the moment. But it's what we've got.

Sometimes, the stress response gets triggered in situations where there is no life-threatening danger present, but something about that situation reminds us of a previous situation where there was a threat. We can think of these like a “false alarm”, like having a smoke detector go off when there's no fire. If this happens too often or too severely, it can start to get in the way of your life and develop into more severe forms of anxiety.

Fight, Flight or Freeze Response

- After very stressful experiences, all sorts of memories, places, people, and things can bring up reminders that set off false alarms
- Although the experience itself might have been dangerous and scary, the reminders are unpleasant but safe



Blue shirt example



Exercise: Do you have any false alarms going off?

CBTm

Let's take an example of where there's been a burglar in someone's home. As the burglar is getting away, the homeowner catches a glimpse of the robber's blue shirt. Now, it might be months, even years later, but every time that homeowner sees someone wearing a blue shirt their hearts might start beating a little bit faster and their anxiety levels might rise. There is nothing inherently dangerous about the blue shirt, but it has become paired with the memory of the robbery.

Another example of a false alarm might be after being bitten by a dog, now when you hear a dog barking you "jump" and start to panic.

Can you think of other examples of false alarms? [pause]

Class Outline

Mindfulness

Review of Previous Action Plan

What is Stress?

Coping with Stressful Experiences

Wellness Plan

Your Action Plan

CBTm

Now that we've discussed what stress is, let's move onto identifying different ways that might help us cope effectively with stressful experiences.

Coping with Stressful Experiences



- 1** Remember the stress response
- 2** Common Thinking Traps
- 3** Common Behavioural Responses
- 4** Self-Compassion

CBTm

When faced with stressful experiences, there are some important things to remember.

First, remember the stress response (fight-flight-freeze), this way you understand what's happening in your body in situations that cause you anxiety or fear. For example, if you're in a stressful situation and you notice that your heart is beating faster and you feel sweaty or flushed, you can identify this is because of the stress response. You remind yourself that your body does this automatically and that these physical changes are not dangerous to you.

Second on the list are the Common Thinking Traps. Going back to what we covered in Class 1, we all have some shortcuts or "traps" in our thinking that can lead us to see situations as overly negative or threatening.

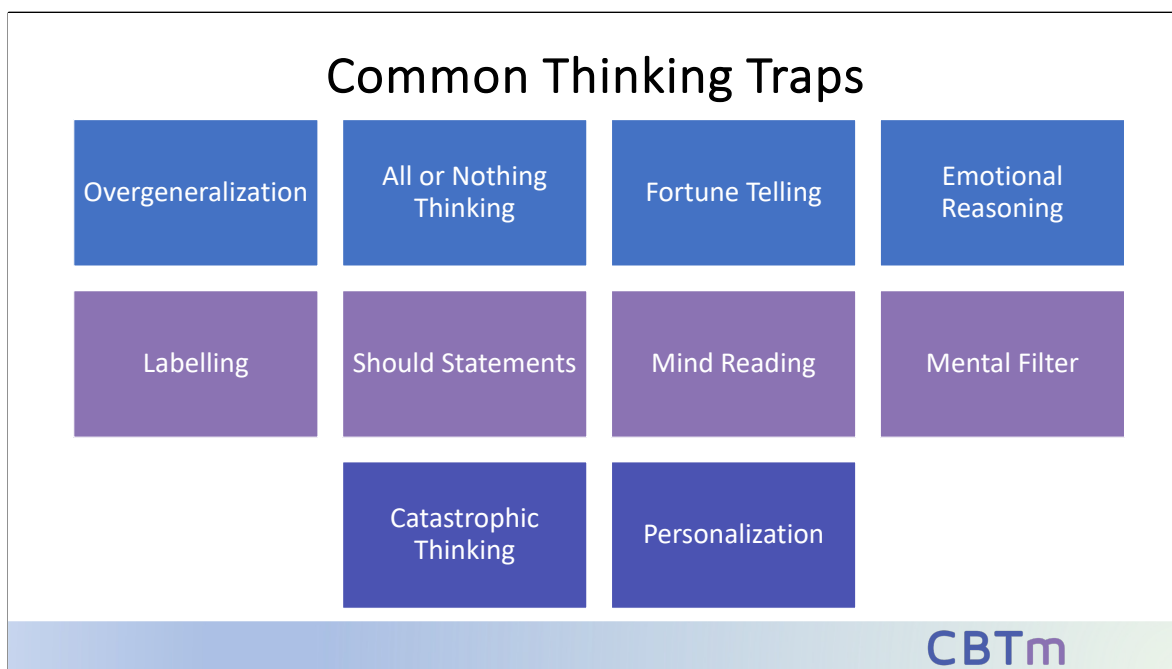
After we discuss the thinking traps, we'll go over the common behavioural responses to stressful experiences and then we'll end with reviewing self-compassion and how this is important to consider when we're facing stress.

Thinking Traps	Stressful Experience Examples		Thinking Traps	Stressful Experience Examples
<p>Overgeneralizing</p> <p>Thinking that a difficult situation is part of a constant cycle of bad things that happen. People who overgeneralize often use words like "always" or "never".</p>	<p>Last time I drove downtown I made stupid errors. This always happens to me! I never manage this stuff well.</p>	<p>Find this in your handouts!</p> <p>Thinking traps about stressful experiences</p>	<p>'Should' Statements</p> <p>Telling yourself how you "should" or "must" act. "Should" statements about ourselves lead to guilt. "Should" statements about others lead to anger and resentment.</p>	<p>I should be able to handle this without getting upset/sad/angry/scared! I shouldn't let this affect me!</p>
<p>All or Nothing Thinking</p> <p>Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in all or nothing terms see a small mistake as a total failure.</p>	<p>I can never let my guard down. People are bad. Nobody can be trusted.</p>		<p>Mind Reading</p> <p>Jumping to conclusions about what others are thinking, without any evidence.</p>	<p>If I take a few days off to deal with this, my coworkers will think I'm weak.</p>
<p>Fortune Telling</p> <p>Predicting that something bad will happen, without any evidence.</p>	<p>If I'm not in full control, people will get hurt.</p>		<p>Mental Filter</p> <p>Focusing only on the challenging parts of a situation and ignoring everything else.</p>	<p>I've driven for 20 years but had one serious accident. I am a horrible driver.</p>
<p>Emotional Reasoning</p> <p>Believing that bad feelings or emotions reflect the truth of a situation.</p>	<p>I feel guilty about what happened, so it must have been my fault/ I must be to blame.</p>		<p>Catastrophic Thinking</p> <p>Exaggerating the importance of distressing things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn't.</p>	<p>Because I feel stressed/overwhelmed now, I won't ever be able to drive again.</p>
<p>Labeling</p> <p>Saying only critical things about yourself or other people.</p>	<p>My organization does not support me! My supervisor is a jerk! I made a mistake therefore I'm incompetent!</p>		<p>Personalization</p> <p>You see yourself as the cause of some upsetting external event for which, in fact, you were not primarily responsible.</p>	<p>The family looks grief-stricken. They must blame me for what happened.</p>

CBTm

We are going to review the thinking traps that were first presented in Class 1, as these might show up related to stressful experiences.

This version, with examples related to stress, is included in your handouts. Please find this and follow along.



[Updated April 2024]

[Review list of thinking traps from Class 1. Remind participants that we all have thinking traps. When under increased stress, we tend to have them more frequently, which can make our stress worsen.]

[Invite participants to suggest examples of how these thinking traps could show up related to stressful experiences. If participants can't think of an example, facilitator suggests one. See Handout.]

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: The last time I tried to stand up for myself the other person was rude and insulted me. This always happens to me! I never manage this stuff well. I never see it coming.

All or Nothing Thinking: Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in all or nothing terms see a small mistake as a total failure. Example: I can never let my guard down. People are bad.

Nobody can be trusted.

Fortune Telling: Predicting that something bad will happen, without any evidence. Example: If I'm not in full control, I'll get hurt/someone else will get hurt.

Emotional Reasoning: Believing that unhelpful feelings or emotions reflect the situation. Example: I feel guilty about what happened, so it must have been my fault/I must be to blame.

Labelling: Saying only negative or critical things about yourself or other people. Example: My supervisor is a jerk! I made a mistake on that project. I'm incompetent!

'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/sad/angry/scared! I shouldn't let this affect me.

Mind Reading: Jumping to conclusions about what others are thinking, without any evidence. Example: If I take a few days off to deal with this, my coworkers will think I'm weak.

Mental Filter: Focusing only on the unhelpful parts of a situation and ignoring anything good or positive. Example: I did well on three important parts of the project/ assignment/goal, but I made a mistake on the fourth part and that's all that really mattered.

Catastrophic Thinking: Exaggerating the importance of negative things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn't. Example: Because I feel stressed and overwhelmed now, I won't be able to do this job/course.

Personalization: You see yourself as the cause of some challenging external event for which, in fact, you were not primarily responsible. Example: My friend is unhappy. It must be my fault. I'm not a good enough friend to them.

TESTING YOUR THOUGHTS
Stressful Experience Example

Beck Institute

What is the situation? I was involved in a car accident where a woman was taken to hospital.

What am I thinking or imagining? It's my fault that she's hurt.

How much do I believe it? a little medium a lot (or rate 0-100 85)

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

How strong is the feeling? a little strong medium very strong (or rate 1-100 90)

What makes me think the thought is true?
I tried to do first aid, but I don't think it helped.

What makes me think the thought is not true or not completely true?
I did not cause the accident. I did everything I could think of to do.

What's another way to look at this?
I tried my best to help her, but she was hurt.

What's the worst that could happen? Would I still live through it? The family may blame me.
It'd be difficult, but I'd live through it. I know they're trying to make sense of things too.

What's the best that could happen?
The family could tell me that I did all I could and thank me for helping.

What will probably happen?
The family will not focus on me, but on their own worry.

What will happen if I keep telling myself the same thought?
I will not be able to continue driving.

What could happen if I changed my thinking?
I might be able to cope better and put this into perspective.

What would I tell my friend if this happened to them?
That they did the right thing by trying to help the woman and did everything they could.

What should I do now?
Talk to my friend/partner, go for a walk, listen to music, etc.

How much do I believe the negative thought now? a little medium a lot
(or rate 0-100 50)

How strong is my negative feeling now? a little strong medium very strong
(or rate 0-100 45)

Class 5 ©J.S. Beck, Ph.D., 1996

Find this in your handouts!

Thought record about a stressful experience

CBTm

Next, we are going to review how to use the thought record when dealing with a stressful life experience.

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)

CBTm

Let's review one of the core tools of CBT that we first learned in Class 1 - the Thought Record (or the Testing Your Thoughts worksheet), which is an exercise in balanced thinking. This exercise helps you to train your mind to see different perspectives of the same situation.

As a group, we'll go through an example of a Thought Record related to a stressful experience. [Go through the example Testing Your Thoughts worksheet provided in handouts with the class]

- What is the situation? *I was involved in a car accident where a woman was taken to hospital*
- What am I thinking or imagining? *It's my fault that she's hurt.*
- How much do I believe it? *A lot or 85/100*

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)

CBTm

Next, we'll go over the feelings related to the thought/situation.

- How does that thought make me feel: *Sad, guilty*
- How strong is the feeling? *Very strong or 90/100*

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?

CBTm

Now we'll go over the thought, looking for evidence for and against the thought "It's my fault she's hurt".

- What makes me think the thought is true? *I tried to do first aid, but I don't think it helped.*
- What makes me think the thought is not true or not completely true? *I did not cause the accident. I did everything I could think of to do.*
- What's another way to look at this? *I tried my best to help her, but she was hurt.*

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?

CBTm

- What's the worst that could happen? *The family might blame me.*
- Would I still live through it? *It would be difficult, but I would live through it – I know they're trying to make sense of things too.*
- What's the best that could happen? *The family could tell me that I did all I could and thank me for helping.*
- What will probably happen? *The family will not focus on me, but on their own worries.*

Testing Your Thoughts

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?

CBTm

- What will happen if I keep telling myself the same thought? *I will not be able to continue driving.*
- What could happen if I changed my thinking? *I might be able to cope better and put this into perspective.*
- What would I tell my friend if this happened to him/her? *What I would tell my friend Pat if this happened to them is that they did the right thing by trying to help and by doing everything they could.*

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)

CBTm

- What should I do now? *Talk to my partner or a friend, go for a walk, listen to music, etc.*
- How much do I believe the negative thought now? *Medium or 50/100*
- How strong is my negative feeling now? *Medium or 45/100*

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

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

Coping with Stressful Experiences



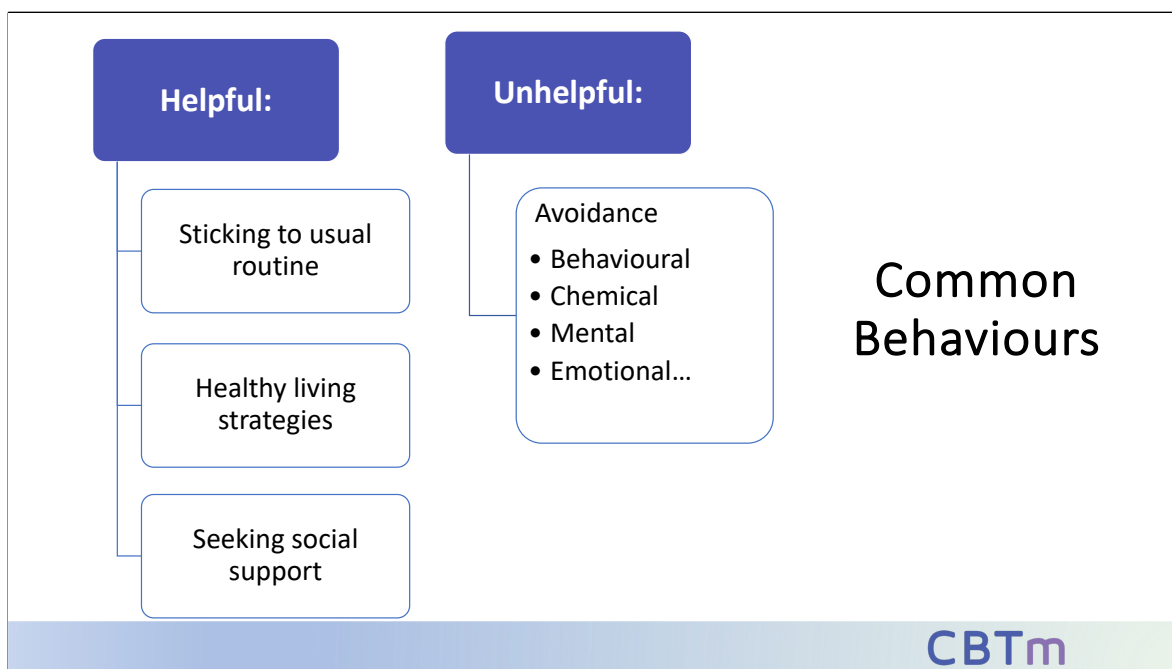
- 1** Remember the stress response
- 2** Common Thinking Traps
- 3** Common Behavioural Responses
- 4** Self-Compassion

CBTm

We're going to continue our discussion of important things to consider when faced with a stressful experience.

As a reminder, the first thing to remember was the stress response, and the second was the common thinking traps we can experience.

Third on the list is knowing the common behaviours associated with stressful experiences. Let's talk more about that now.



When faced with a stressful experience, there are many different types of behavioural responses we can engage in. Some tend to be more helpful and some less helpful.

On the left is a list of **helpful behaviours** we can engage in when coping with stressful experiences. Most of these we've talked about before during the classes and they summarize the things that are in our control and that we're able to do when faced with stress.

[Ask participants to suggest examples of helpful responses]

[Possible answers: sticking to your bedtime routine, eating healthy meals, trying some physical activity, getting support from friends and family, etc.]

The list on the right are **unhelpful behaviours** that can keep the avoidance in place and worsen our stress and mood.

Behavioural – avoiding certain places, people, or things because of fear and anxiety.

What are some examples of behavioural avoidance? [Possible answers:

avoiding a certain street because you had a difficult encounter happen there. Working too much so you don't have to do other things in your life or have time to think about them]

Chemical – drinking alcohol or using drugs to reduce the intensity of our difficult emotions (i.e., anger, sadness, fear), or to numb our feelings.

Mental – Mentally checking out or zoning out. You still go to places and do things, but you're not really there.

What are some examples of this? [Possible answers: Binge-watching TV for days at a time so you don't have to think about stressful things; going to a family get together, but not participating in conversations, etc.]

Emotional – Distancing yourself from friends and loved ones so you don't have to feel anything at all.

What are some examples of this kind of avoidance? [Possible answers: Avoiding conversations that might lead to feeling emotions, not attending family events, canceling plans with friends, etc.]

Avoidance

Avoid fearful situation

Short Term

- Decrease in anxiety

Long term

- Increase in anxiety
- Decrease in self-esteem
- Decrease in function

CBTm

In Class 2 we talked about how it's natural to want to avoid situations that trigger the fear response, and how avoidance brings a short-term sense of relief.

However, if you avoid situations too much it can increase your anxiety over time and limit your ability to do the things you want.

Avoid Avoidance!

Avoid fearful situation

Short Term

- Decrease in anxiety

Long term

- Increase in anxiety
- Decrease in self-esteem
- Decrease in function

Face fearful situation

Short Term

- Increase in anxiety

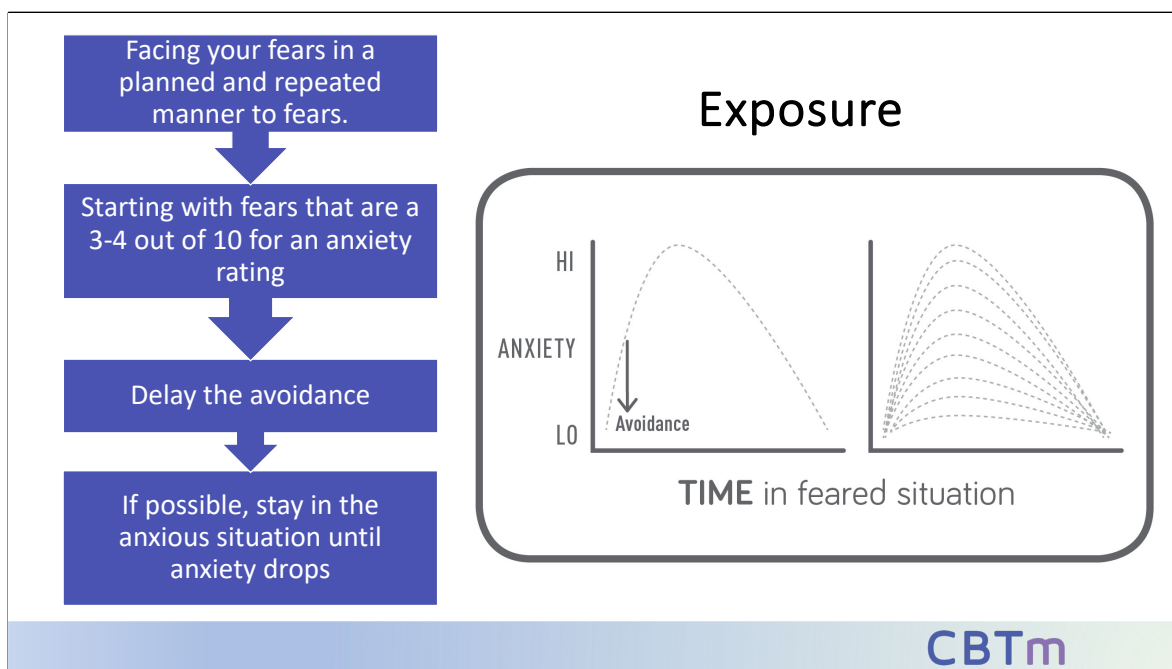
Long term

- Decrease in anxiety
- Increase in self-esteem
- Increase in function

CBTm

We also discussed in Class 2 that facing situations that may feel dangerous or uncomfortable to us, but that aren't actually life threatening, can help us to cope with the situation and reduce our anxiety in the long run.

Facing situations that trigger our stress response in small, gradual steps will help to reduce our anxiety and stress over time.



The stress response is one of our body's automatic responses and is not dangerous, even though it probably feels uncomfortable at times.

If you face the experiences that cause false alarms in your life, over time they have less and less impact on you, you learn that you're able to cope and that the anxiety and fear are manageable.

Exposure



In a planned and gradual way, put yourself in situations that set off a false alarm, over and over again, until it doesn't bother you as much anymore.



Example: How would you teach someone to be less afraid of the water?



How could you apply the same logic to some of the situations in which you feel anxiety?

CBTm

If you avoid the experiences or situations, you don't have a chance to learn that the false alarm is actually false. Avoidance reinforces the idea that the only reason something bad didn't happen is because you left the situation.

Does anyone remember how exposure steps looked for a fear of dogs? Can someone name some of the steps we covered?

[answer: look at pictures, look at videos, go near dogs in kennels, pet a small friendly dog, pet a large friendly dog.]

What kind of exposure is practiced with a fear of flying?

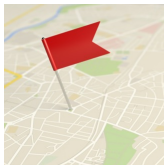
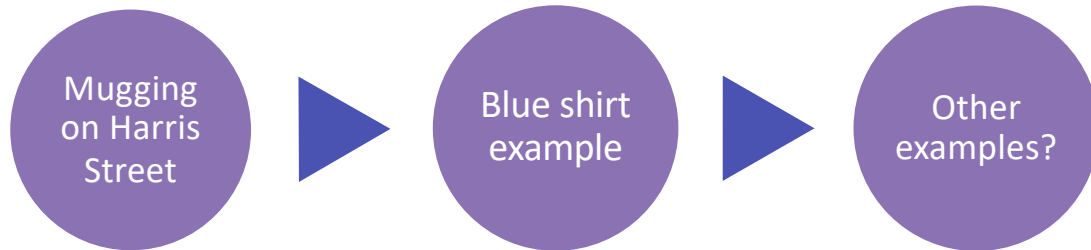
[answer: imaginal exposure]

How might you teach someone to be less afraid of the water using exposure?

[possible answers: dip your toes in, walk along the beach or pool deck but not go in the water, look at pictures of a pool or lake etc].

The last question on the slide is an opportunity for reflection. How can you apply this information on exposure to some situations where you feel anxious? You are welcome to write down your answers now if you wish. [pause]

Building an Approach Ladder



CBTm

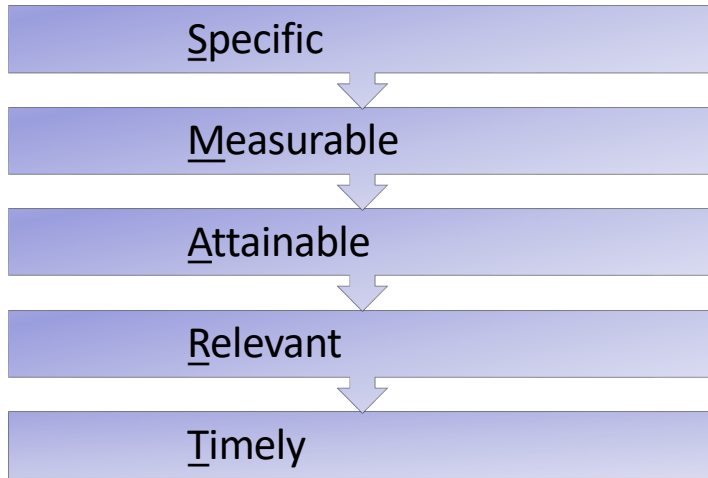
The same concept of using exposure applies to facing reminders of a past stressful experience. For example, let's consider a person who had their laptop and backpack stolen on a certain street, for example, Harris Street, and as a result, they've not gone back to Harris street since then.

A way to gradually face this fear response might include:

1. View the building and surrounding area on Google maps – keep viewing repeatedly for set amounts of time, until minimal stress is triggered by looking at the building
2. Go to the neighbourhood, but not the actual street, and sit in your car until the anxiety starts to come down. Repeat until anxiety is minimal.
3. Go to Harris Street and look at the building while sitting in your car.
4. Go to Harris Street with a friend and walk around.
5. Go to Harris Street alone and walk around

Remember, we don't take this on because we "should" or because someone tells us to (and we want to please them). We take this on because this could make life a bit easier if we had more comfort being in certain places, doing certain activities, or interacting with certain people.

SMART Goals



CBTm

Consider how you would create a SMART goal for each step of an Approach Ladder for a stressful experience.



A SMART goal related to the stressful experience on Harris Street might involve gradually spending time on or near Harris Street again, to get used to being there and to become increasingly comfortable with that location over time.

It is specific, in that it will involve exposure activities related to Harris Street.

It is measurable in that I have a specific time length I will spend working on this each day.

It is attainable because I have set up the approach ladder to involve very gradual increases in difficulty.

It is relevant because I need to be able to visit a friend who lives in that neighbourhood.

It is timely as I have decided when to start working on this: today.

If you know that you are avoiding or reactive to situations that remind you of a past stressful experience, it may be helpful to spend some time working on building an Approach Ladder to deal with these reminders when you need to. We also recommend consulting with a mental health care professional to help guide you through using exposure.

Self-Compassion

Self-kindness vs.
Self-judgment

Common
humanity vs.
Isolation

Mindfulness vs.
Over-
identification

<https://vimeo.com/65859796>

For more information on Dr. Kristin Neff's
work on self-compassion, see her website:
<http://self-compassion.org/>

CBTm

This is the final point to discuss on the list of important things to remember when “Coping with Stressful Experiences”. To recap:

- 1) Remember your stress response: your body is responding the way it was designed to
- 2) Remember the thinking traps and how we can get caught in them in stressful situations
- 3) There are behaviours, both healthy and unhealthy, that are commonly experienced when we're trying to manage our stress

Self-compassion is the 4th point to remember when faced with stress. This is a reminder of the importance of compassion for yourself and the goals you have set for yourself.

Self-compassion is a helpful component of dealing with stressful experiences.

As a quick re-cap, there are three main components of self-compassion:

- 1) The first component is self-kindness versus self-judgement. Self kindness is about *how* you relate to yourself – with warmth and understanding rather than ignoring, criticizing, or judging.

You can build this by recognizing the painful experience and being gentle with that experience. For example, treating yourself kindly when you're experiencing stress, and at times when your instinct is to be self-critical. Instead of ignoring the stressful experience you've been through, or are still experiencing, and telling yourself to "get through it and move on", you comfort and care for yourself, the way you would a friend.

- 1) The second component of self-compassion is focused on recognizing common humanity versus isolation. We can experience frustration when we're faced with stress, and this can be accompanied by a sense of isolation, as if we are the only person who makes mistakes or suffers. But suffering is a part of the shared human experience – something we all go through – recognizing this common aspect of humanity can help to reduce the sense of isolation and suffering.
- 2) The final component of self-compassion is using mindfulness skills to avoid the tendency to over-identify with our experiences of suffering. Dr. Kristin Neff, says that we sometimes don't recognize that we're suffering. The same can be said for experiencing stress. We can sometimes over-identify with our self-criticism, perfectionism, and judgement when things don't go as planned or when we fail to meet the expectations we set for ourselves. Practicing mindfulness helps us to observe our thoughts and emotions as they are, without suppressing or exaggerating them. This involves cultivating a nonjudgemental and receptive mindset.

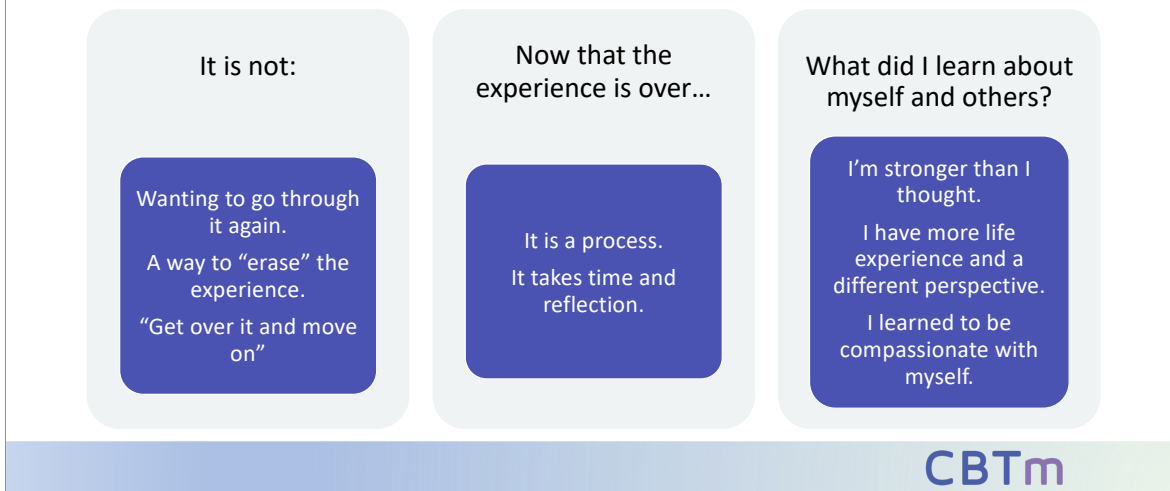
A reminder that research shows that self-compassion is very strongly related to good mental wellness, less anxiety, less perfectionism, less stress, and is strongly related to positive factors like strong life satisfaction, greater motivation, healthier lifestyle choices and better interpersonal relationships.

The more compassion we have for ourselves, the more energy and compassion we have available for others.

[You may decide to show the video in class if you have time.]
[<https://vimeo.com/65859796>] as per the slide.

[If you don't show the slide:] The links on this slide were also provided in Class 4 and are for a video describing some ways to practice more self-compassion and for a website devoted to the topic.

Growth After a Stressful Life Event



[Newer slide]

You may be wondering if it’s possible to grow and change after a stressful or difficult life event. **‘Post-Traumatic Growth’** is a term that means that the stressful event is in the past and is no longer something you’re actively in crisis with. You are now able to cope and recover. It signals a positive change and involves developing healthy responses in the areas of deeper relationships, opening up to new possibilities, personal strength, spirituality, or an overall greater appreciation for life.

Post-traumatic growth is a process, not an outcome, and it needs time, reflection, and sometimes involves further therapy. Through the process of post-traumatic growth, you may ask yourself:

- Now that it’s over, did I learn something about myself by going through that stressful experience?
- Am I stronger than I first believed?
- Did I manage better than I thought I would?
- Do I have more life experience and a different perspective on life than I did before?

- Have I developed compassion for myself and/or others?

Sometimes people may refer to this learning process from a stressful experience as the “silver lining” because even though the experience was difficult, they may have gained some new insight or knowledge by going through it.

For post-traumatic growth to occur, good self-care strategies are important, including managing your emotions, focusing on what you have control over, talking about the challenges you’ve faced, and being open about your struggles.

Post-traumatic growth does not mean we would wish to go through the stressful event again, as these events can often be difficult and painful for us. Post-traumatic growth also does not mean trying to “erase” the experience, or that you must pretend that it did not happen, or that you should just “get over it and move on”.

It’s important to remember that post-traumatic growth is an individual journey – people experience it differently, at different paces, and they learn different things.

Class Outline

Mindfulness

Review of Previous Action Plan

What is Stress?

Coping with Stressful Experiences

Wellness Plan

Your Action Plan

CBTm

Next, we'll focus wellness planning – what this means and how to make your own wellness plan.

Find this in your handouts!

Mental Health Continuum Model

Mental Health Continuum Model

HEALTHY REACTING INJURED ILL

It offers a good way to evaluate your own or others' stress levels

What changes do you need to make if you're in the "yellow" or "orange"?

CBTm

[Updated slide: April 2024]

This is the Mental Health Continuum Model – a self-reflection and screening tool that is helpful to use to check on your mental wellness, including your stress level, and it can also be used to check in on those around you. The graphic is divided into 4 zones: green, yellow, orange, red. The arrow underneath the different zones shows us that we can move into a more stressful zone, but with some effort, we can also move towards the green zone too, and work to lessen the impact of the stressful event on ourselves and others.

In your handouts, we've provided a more detailed version of this graphic that includes mental health indicators for each zone, as well as recommendations to promote mental wellness for each zone or colour.

Let's talk about the zones in more detail:

In the **green "healthy" zone**, you're experiencing typical fluctuations in your mood, you're feeling your best, your energy is good, you're budgeting your

time well, and you are balancing home, work, and social time well. You may dip into the yellow zone, but you are able to get yourself back on track with healthy stress management techniques.

In the **yellow “reacting” zone**, you may be feeling more stress, more often. Perhaps your energy levels have decreased, and you’ve started eating less healthy food, or you’re skipping meals altogether. You may be more irritable and not sleeping as well sometimes. However, your stress levels are still manageable, and with some attention and effort, you can move yourself back into the green zone.

In the **orange “injured” zone**, you are likely feeling down or worried most of the time. Your friends and family may comment on your mood. You may isolate yourself more and engage in more avoidance behaviours. You may feel overwhelmed and not sure what to do to change things.

Being in the orange zone is a sign that you need to find some resources in order to make helpful changes in your life. You will want to seek help, either from your family doctor, an EAP, a health care professional, or other resources that can help you find ways to manage better. Being in the orange zone may point to the need for a short-term change or reduction in stress or responsibilities in some areas of your life in order to manage and feel better.

In the **red “ill” zone**, a person may be experiencing excessive anxiety and/or depressed mood, they may be unable to concentrate or make decisions, and may have serious sleep difficulties or insomnia. In this zone, individuals are unable to manage their situation without assistance from mental health services or other professional supports.

Although we would rather remain in the green zone every day, all day, that's not realistic. Taking a realistic estimation of your stress level can help you manage it better. Remember that taking this class and continuing to work on managing your thoughts, behaviours, and stress can be some of the things that might help move you a bit more to the left – toward the green “healthy” zone. Take a moment to think about some of the things that might be helpful today to help you cope and manage your wellbeing.

Find this in your handouts!

Making a Wellness Plan

WELLNESS PLAN

STEP 1: Warning signs (thoughts, images, moods, behaviours) that indicate I'm feeling overwhelmed by stress

1. _____
2. _____
3. _____

STEP 2: Three coping strategies - things I can do myself to take my mind off my problems

1. _____
2. _____
3. _____

STEP 3: Three people I can call (just to hang out or talk to) or social settings where I can go for distraction

1.Name	_____	Phone	_____
2.Name	_____	Phone	_____
3.Name	_____	Phone	_____

CBTm

Let's discuss the Wellness Plan. You have a blank copy of a Wellness Plan in your handouts, we'll go over this next.

The Wellness Plan

<p>Warning signs (thoughts, images, moods, behaviours) that indicate I'm feeling overwhelmed</p> <p>1) _____ 2) _____ 3) _____</p>	<p>3 coping strategies:</p> <p>1) _____ 2) _____ 3) _____</p>	<p>3 people I can call (to just hang out or to talk to):</p> <p>1) _____ 2) _____ 3) _____</p>
--	---	--

CBTm

During times of high stress, such as when you're in the yellow, orange, or red zones of the mental health continuum model, it can be hard to problem-solve and use healthy coping strategies to manage our anxiety, mood, or stress levels. To get through these times more effectively, it can be helpful to develop a Wellness Plan when we are feeling relaxed and in control. A Wellness Plan takes us through gradual steps that we can use to help manage our stress and mental wellbeing, moving from strategies that we can try on our own, to reaching out and using community mental health resources, if the symptoms do not subside or we are feeling overwhelmed and need additional help. The plus side of creating a Wellness Plan when we are relaxed and feeling good is that we do the thinking and problem-solving in advance, and therefore we don't have to be stuck trying to think and problem-solve during times when it can be difficult to consider what to do next.

[Ask the class to go take out their handout, or to get a pen and piece of paper]

Let's take a few minutes to go through this plan together and come up with some answers for each step in the Wellness Plan.

[Read steps 1-3 and pause for class participants to write down answers]

Wellness Plan

Three people I can ask for help:

1) _____

2) _____

3) _____

Professionals I can contact if I need more help:

1) _____

2) _____

3) _____

CBTm

Here we have the final two questions on the Wellness Plan.


[Read out the questions (4 + 5) and pause for participants to write down answers]

[Reminder: If class participants struggle to name someone to call or ask for help (steps 3 & 4) or people to contact: they can list their pet, or a librarian/server/bus driver etc. that they encounter regularly in their life. They can also list potential people that they want to begin to have conversations with. The important part of these steps is naming real people we can or could reach out to.]

How did it go creating your own Wellness Plan?

Was it easy or difficult to come up with answers for some or all of the questions?

Wellness Plan Support Resources

	Crisis Response Centre	817 Bannatyne Ave.
	Mobile Crisis Unit	204-940-1781
	Klinik Crisis Line	204-786-8686
	Suicide Crisis Helpline	Call or text 9-8-8

CBTm

We encourage you to take your Wellness Plan home and keep working on it. When it's finished, take a picture of it with your phone, this way you'll always have a copy of it with you wherever you go.

We also want to point to some additional resources. If you ever find yourself in crisis or serious distress, there are a number of crisis resources that can be helpful. A few of these are listed on this slide and more will be shown at the end of today's class.

Class 5 Action Plan

Pay attention to any false alarms.

Practice mindfulness for 5 minutes every day.

The next time you feel stressed or overwhelmed, try one of the following:

- Use a mindfulness exercise or grounding strategy
- Do a Testing Your Thoughts worksheet
- Make a SMART goal focused on your wellbeing
- Refer to your Wellness Plan

Work on your Wellness Plan and keep it handy. When you've finished it, take a picture of it with your phone so you have a copy with you wherever you go!

CBTm

The Action Plan listed for Class 5 are some suggestions on how you can take the information you learned in class and make it useful in your life to help you cope with stress and build your resilience.

- Pay attention to any false alarms that you may have.
- Try to practice mindfulness for 5 minutes daily.
- The next time you feel stressed or overwhelmed, try one of the following:
 - Practice a mindfulness exercise or grounding strategy
 - Complete a testing your thoughts worksheet
 - Make a SMART goal focused on your wellbeing
 - Use the Mental Health Continuum Model to do a self-check
 - Refer to your Wellness Plan
- Keep working on your Wellness Plan and keep it handy. Once you've finished it, take a picture of it with your phone, so you have a copy with you wherever you go!

Your Action Plan Going Forward

Now that CBTm Classes are done, what's next?

Check in with the professional that referred you

You have choices:

- Acknowledge your hard work, and take a break from mental health programs
- Group or individual therapy
- Take CBTm classes again

Remember what motivated you to take CBTm classes!

CBTm

Now that you've finished the final CBTm class, you might be thinking "I want to keep working on my mental wellbeing, but I don't know what to do next."

Here are some additional suggestions for an Action Plan going forward:

- Review the class material again and continue developing and practicing your CBTm skills.
 - You might decide to start over from the beginning or you might go to the material or skill that you found the most helpful or the most challenging.
- You may need to schedule time for skills practice to help keep up the momentum, or to make sure that important time for self-care doesn't get crowded out in your busy schedule.
- You may want to discuss your self-care plan or additional steps in treatment with the professional that made the referral to CBTm, your primary care provider, or a mental health clinician.
 - Or if you self-referred yourself, you may want to take this time to check-in with your primary care provider or a mental health professional to discuss other resources available to you.
- If you are interested in additional mental health services, whether it be a group or individual therapy, check with your mental health professional or primary care provider – they can help you find the best fit!
- It can be helpful to remember the reason that you decided to do the CBTm classes in the first place. Reconnecting with the reason that motivated you to take these classes will help you to acknowledge the work you've done and may give you some ideas for setting new goals!

Resources

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

Klinic 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.reasonstolive.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>

Suicide Crisis Helpline (24/7) - call or text 9-8-8
→ Trauma-informed and culturally appropriate suicide prevention support

CBTm

Here is a list of resources, if you feel that you need help.

[Facilitators can add additional self-help resources that may be useful for their population]

CBTm Class Evaluation



CBTm

This concludes the set of CBTm classes. Thanks for being here today and for participating in this program!

You may have found the Class 5 material to be a bit more stressful, as we talked about some difficult examples. We recommend using the Mental Health Continuum Model (MHCM) to do a self-check and determine if you should engage in some helpful coping mechanisms or stress management practice.

[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 CBTm Facilitator manual. If your site is using the Evaluation measure, you might say ... ***"We're interested to hear what you thought of today's session. The CBTm 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 classes is helping their participants make desired changes. Some short, cost-free questionnaires are recommended in the CBTm Facilitator manual. If your site is using some form

of outcome monitoring, you might also say ... ***“We are interested in how you are doing and if the strategies taught are making a difference. Thanks for filling out the wellbeing questionnaires. We understand these can feel a bit repetitious, but we need to compare how you are doing over time to know if the strategies are helping.”***]

CBTm

COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS
THÉRAPIE COGNITIVO-COMPORTEMENTALE DE LA PLEINE CONSCIENCE

Class 5 Handouts

Mindfulness Exercise - *Engaging Your Senses*

Thinking Traps about Stressful Experiences

Testing Your Thoughts

Mental Health Continuum Model

Wellness Planning

www.cbtm.ca

ENGAGING YOUR SENSES

Sit in a comfortable upright position with your feet planted flat on the ground. Rest your hands on your thighs. Begin to notice your breath. It's time to engage each of your 5 senses, one at a time, for at least one minute each.

Hearing: Begin to relax by just noticing all of the sounds around you. Give yourself permission to suspend your judgment of the sounds. They are not good or bad, they just are. Are you now hearing more than you were before you started? Subtle sounds may have previously gone unnoticed. Can you hear them now?

Smell: Now shift your concentration to noticing the smells of your environment. Is somebody cooking lunch in your building? Can you detect the electronics smell of your computer or fresh air coming in through your window? Try closing your eyes so you can focus on the subtlest of scents.

Sight: If you closed your eyes a moment ago, open them to notice the colours, shapes and textures of your surroundings. If you really look, just about everything has colour variation and texture that may have gone unnoticed. How many shades of blue or red? Any colour missing?

Taste: You can do this one regardless of whether or not you have food to put in your mouth. Just notice your tongue in your mouth, your saliva, and your breath as you exhale. Most of us have tastes in our mouth at all times. Run your tongue over your teeth and cheeks - what do you notice?

Touch: Where did you place your hands when you first started this exercise? Notice the sensation of where your hands meet something solid like the fabric of your clothes or the surface of your desk. Notice the pressure between your feet and the floor. Try feeling the textures that you noticed by sight a moment ago. To fully ground yourself in the room and bring the exercise to a close, feel several objects on your desk and perhaps even stand up from your chair to bring energy and sensation to all parts of your body.

Thinking Traps

Stressful Experience Examples

Overgeneralizing

Thinking that a difficult situation is part of a constant cycle of bad things that happen. People who overgeneralize often use words like "always" or "never".

Last time I drove downtown I made stupid errors. This always happens to me! I never manage this stuff well.

All or Nothing Thinking

Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in all or nothing terms see a small mistake as a total failure.

I can never let my guard down. People are bad. Nobody can be trusted.

Fortune Telling

Predicting that something bad will happen, without any evidence.

If I'm not in full control, people will get hurt.

Emotional Reasoning

Believing that bad feelings or emotions reflect the truth of a situation.

I feel guilty about what happened, so it must have been my fault/I must be to blame.

Labeling

Saying only critical things about yourself or other people.

My organization does not support me! My supervisor is a jerk! I made a mistake therefore I'm incompetent!

Thinking Traps

Stressful Experience Examples

'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/sad/angry/scared! I shouldn't let this affect me!

Mind Reading

Jumping to conclusions about what others are thinking, without any evidence.

If I take a few days off to deal with this, my coworkers will think I'm weak.

Mental Filter

Focusing only on the challenging parts of a situation and ignoring everything else.

I've driven for 20 years but had one serious accident. I am a horrible driver.

Catastrophic Thinking

Exaggerating the importance of distressing things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn't.

Because I feel stressed/overwhelmed now, I won't ever be able to drive again.

Personalization

You see yourself as the cause of some upsetting external event for which, in fact, you were not primarily responsible.

The family looks grief-stricken. They must blame me for what happened.

TESTING YOUR THOUGHTS

Beck Institute

Stressful Experience Example

What is the situation? I was involved in a car accident where a woman was taken to hospital.

What am I thinking or imagining? It's my fault that she's hurt.

How much do I believe it? a little medium a lot (or rate 0-100 85)

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

How strong is the feeling? a little strong medium very strong (or rate 1-100 90)

What makes me think the thought is true?

I tried to do first aid, but I don't think it helped.

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

I did not cause the accident. I did everything I could think of to do.

What's another way to look at this?

I tried my best to help her, but she was hurt.

What's the worst that could happen? Would I still live through it? The family may blame me.

It'd be difficult, but I'd live through it. I know they're trying to make sense of things too.

What's the best that could happen?

The family could tell me that I did all I could and thank me for helping.

What will probably happen?

The family will not focus on me, but on their own worry.

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

I will not be able to continue driving.

What could happen if I changed my thinking?

I might be able to cope better and put this into perspective.

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

That they did the right thing by trying to help the woman and did everything they could.

What should I do now?

Talk to my friend/partner, go for a walk, listen to music, etc.

How much do I believe the negative thought now? a little medium a lot
(or rate 0-100 50)

How strong is my negative feeling now? a little strong medium very strong
(or rate 0-100 45)

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 ____)

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

How strong is the feeling? a little strong medium very strong (or rate 1-100 ____)

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 thought?

What could happen if I changed my thinking?

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

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 ____)

Mental Health Continuum Model



Healthy	Reacting	Injured	Ill
<ul style="list-style-type: none"> • Normal mood fluctuations • Calm & takes things in stride 	<ul style="list-style-type: none"> • Irritable/Impatient • Nervous • Sadness/ Overwhelmed 	<ul style="list-style-type: none"> • Anger • Anxiety • Pervasively sad/ Hopeless 	<ul style="list-style-type: none"> • Angry outbursts/ aggression • Excessive anxiety/ panic attacks • Depressed/ Suicidal thoughts/Numb
<ul style="list-style-type: none"> • Good sense of humour • Performing well • In control mentally 	<ul style="list-style-type: none"> • Displaced sarcasm • Procrastination • Forgetfulness 	<ul style="list-style-type: none"> • Negative attitude • Poor performance/ Workaholic • Poor concentration • Poor decision-making 	<ul style="list-style-type: none"> • Cannot concentrate • Can't perform duties, control behaviour or make decisions
<ul style="list-style-type: none"> • Normal sleep patterns • Few sleep difficulties 	<ul style="list-style-type: none"> • Trouble sleeping • Intrusive thoughts • Nightmares 	<ul style="list-style-type: none"> • Restless disturbed sleep • Recurrent images/ nightmares 	<ul style="list-style-type: none"> • Can't fall asleep or stay asleep • Sleeping too much or too little
<ul style="list-style-type: none"> • Physically well • Good energy level 	<ul style="list-style-type: none"> • Muscle tension • Headaches • Low energy 	<ul style="list-style-type: none"> • Increased aches and pains • Increased fatigue 	<ul style="list-style-type: none"> • Physical illnesses • Constant fatigue
<ul style="list-style-type: none"> • Physically and socially active 	<ul style="list-style-type: none"> • Decreased activity/ socializing 	<ul style="list-style-type: none"> • Avoidance • Withdrawal 	<ul style="list-style-type: none"> • Not going out or answering phone
<ul style="list-style-type: none"> • No/ limited alcohol or drug use/ gambling 	<ul style="list-style-type: none"> • Regular but controlled alcohol or drug use/ gambling 	<ul style="list-style-type: none"> • Increased alcohol or drug use/ gambling - hard to control 	<ul style="list-style-type: none"> • Frequent alcohol or drug use/ gambling - inability to control with severe consequences
<ul style="list-style-type: none"> • Use support systems • Rely on skills 	<ul style="list-style-type: none"> • Recognise limits/ take breaks/ identify problems early/ seek support 	<ul style="list-style-type: none"> • Tune into signs of distress, make self-care a priority • Seek support 	<ul style="list-style-type: none"> • Seek professional help • Follow recommendations

WELLNESS PLAN

STEP 1: Warning signs (thoughts, images, moods, behaviours) that indicate I'm feeling overwhelmed by stress

1. _____
2. _____
3. _____

STEP 2: Three coping strategies - things I can do myself to take my mind off my problems

1. _____
2. _____
3. _____

STEP 3: Three people I can call (just to hang out or talk to) or social settings where I can go for distraction

- | | |
|---------------|-------------|
| 1. Name _____ | Phone _____ |
| 2. Name _____ | Phone _____ |
| 3. Name _____ | Phone _____ |

STEP 4: Three people I can ask for help

- | | |
|---------------|-------------|
| 1. Name _____ | Phone _____ |
| 2. Name _____ | Phone _____ |
| 3. Name _____ | Phone _____ |

STEP 5: Professionals I can contact if I need more help

1. Name _____ Phone _____
2. Mobile Crisis Unit - (204) 940-1781
3. Crisis Response Centre - 817 Bannatyne Avenue (24/7 walk-in crisis support)
4. Work resources: _____

MINDFULNESS

COGNITIVE BEHAVIOUR THERAPY
WITH MINDFULNESS:
A BOOKLET OF MINDFULNESS
EXERCISES

LIST OF MINDFULNESS EXERCISES

1 Mindful Breathing

Audio available on:

- MindShift (3 min)
- Stop, Breathe & Think (3-10 min)
- Mindfulness Coach (9 min)

2 Body Scan

Audio available on:

- MindShift (9 min)
- Stop, Breathe & Think (8 min)
- Mindfulness Coach (9 min)

3 Leaves on a Stream/Clouds in the Sky

Audio available on:

- Mindfulness Coach (7 min)

4 Engaging your Senses

Audio available on:

- Stop, Breathe & Think (5 min)

5 Observing an Object

6 Loving Kindness Meditation

Audio available on:

- Stop, Breathe & Think (6 min)

MINDFUL BREATHING

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.

BODY SCAN

1. Begin by feeling the weight of your body on the chair. 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.



LEAVES ON A STREAM

OR CLOUDS IN THE SKY

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.

ENGAGING YOUR SENSES

Sit in a comfortable upright position with your feet planted flat on the ground. Rest your hands on your thighs. Begin to notice your breath. It's time to engage each of your 5 senses, one at a time, for at least one minute each.

Hearing: Begin to relax by just noticing all of the sounds around you. Give yourself permission to suspend your judgment of the sounds. They are not good or bad, they just are. Are you now hearing more than you were before you started? Subtle sounds may have previously gone unnoticed. Can you hear them now?

Smell: Now shift your concentration to noticing the smells of your environment. Is somebody cooking lunch in your building? Can you detect the electronics smell of your computer or fresh air coming in through your window? Try closing your eyes so you can focus on the subtlest of scents.

Sight: If you closed your eyes a moment ago, open them to notice the colours, shapes and textures of your surroundings. If you really look, just about everything has colour variation and texture that may have gone unnoticed. How many shades of blue or red? Any colour missing?

Taste: You can do this one regardless of whether or not you have food to put in your mouth. Just notice your tongue in your mouth, your saliva, and your breath as you exhale. Most of us have tastes in our mouth at all times. Run your tongue over your teeth and cheeks - what do you notice?

Touch: Where did you place your hands when you first started this exercise? Notice the sensation of where your hands meet something solid like the fabric of your clothes or the surface of your desk. Notice the pressure between your feet and the floor. Try feeling the textures that you noticed by sight a moment ago. To fully ground yourself in the room and bring the exercise to a close, feel several objects on your desk and perhaps even stand up from your chair to bring energy and sensation to all parts of your body.

OBSERVING AN OBJECT

Pick up an object that you have around you. Any everyday object will do...a coffee cup or a pen for example. Hold it in your hands and allow your attention to be fully absorbed by the object. Observe it. Don't assess it or think about it, or study it intellectually. Just observe it for what it is. When your mind wanders, just bring your attention back to the object. Notice what it looks like, how it feels in your hands. Notice the colours, textures, shapes. Explore the object as if you had never seen it before. Slowly begin to broaden your attention to the room, to the touch of your body on the chair, to the sounds and sights around you.



LOVING KINDNESS

Start by being comfortable in your chair, with your back gently supported, in a relaxed posture. Let your eyes close, fully or partially. Take a few easy, slow breaths, bring your awareness to your body and into the present moment. (Pause)

Bring to mind a person or another living being who naturally makes you smile. This could be a child, a grandparent, a pet – whoever naturally brings happiness to your heart and a smile to your face. If you can't think of a living being, think back to a memory of a place where you felt happy and at ease. Allow the feelings of what it is like to be in the company of that being to come into the present moment. Allow yourself to enjoy their company. (Pause)

Now, recognize how vulnerable this loved one is. Just like you, vulnerable to life events, bad things happening: sickness, aging, difficult events. And just like you and every other living being, your loved one wishes to be happy and healthy and free from suffering. Keeping the warm, kind, loving feelings you have for your loved one close to your heart, repeat to yourself, silently, slowly, softly and gently, feeling the importance of your words:

May you be safe and free from harm
May you be healthy and free from suffering
May you have contentment and peace of mind
May you care for yourself with ease and well-being

When you notice that your mind has wandered, return to the words and the image of the loved one you have in mind. Return to the feelings of warmth, kindness, love and compassion. Now add yourself to your circle of warmth and good will. If it feels comfortable, place your hand over your heart, feel the warmth and comfort of your hand, and say, repeat to yourself silently, slowly and gently:

May you and I be safe and free from harm
May you and I be healthy and free from suffering
May you and I have contentment and peace of mind
May you and I care for ourselves with ease and well-being

(continued on next page)



LOVING KINDNESS

CONTINUED

Visualize your whole body in your mind's eye, noticing any tension, discomfort, stress or uneasiness that may be lingering within you, and offer warmth, comfort, and kindness to yourself.

May I be safe and free from harm
May I be healthy and free from suffering
May I have contentment and peace of mind
May I care for myself with ease and well-being

Now bring your attention to your breath, take a few easy comfortable breaths and just rest quietly in your own body, savoring the good will and compassion that flows naturally from your own heart. (Pause)

If you are ever swept up in emotion, you can always return to your breathing. Then, when you're comfortable again, returning to the phrases.

When you're ready, take a few breaths, begin to wiggle your fingers and toes to bring energy back to your body, and bring yourself back to the room. Then gently open your eyes. If you turned your screen off at the start of the exercise, please turn it back on.



NEXT STEPS

STEP 1: REGISTER AS A CBTM FACILITATOR

- Registration on our website
 - www.cbtm.ca
- 'Create a Facilitator Account'
- Gain immediate access to the materials

The screenshot shows a registration form titled "Create a Facilitator Account". On the left, there is instructional text: "Please complete the following fields to create a facilitator account in order to access facilitator materials." It explains that users will have access to PowerPoint materials and PDF files, and that the program is regularly updated. On the right, the form fields are: "Choose a Username" (with a red asterisk), "Password" (with a red asterisk and a list of requirements: 8 characters minimum, one lowercase letter, one uppercase letter, one number, one special character), "First Name" (with a red asterisk), "Last Name" (with a red asterisk), "Organization", "Role", "Phone Number", and "Email Address" (with a red asterisk). At the bottom, there is a question "Have you attended the CBTm Facilitator Training" with radio buttons for "No" and "Yes", and a blue "Create Account" button.

STEP 2: ACCESS CLASS MATERIALS

- Facilitator materials
 - PowerPoint slides to be used when facilitating classes
 - One file per class
 - Your name and site can be added on
 - Material can be tailored for YOUR population
 - Keep in mind fidelity to the model
 - Participant materials: All content that can be given to clients attending classes
 - PowerPoint note pages and handouts for each class
- Version for general adult population, one with material tailored for working with veterans and families
- Additional materials: administrative documents that our team uses
 - Infographic
 - Brochures
 - Participant certificate
 - Newsletters
 - Letter of referral back to source

MENTORSHIP:

Optimizing your CBTm training

PHASE 1: OBSERVE CLASSES

- Join virtual classes to audit CBTm classes being led by experienced facilitators
- Stay back after class to ask questions and discuss with facilitator
- You may observe as many classes as you wish!!
- Observe one session of each class prior to moving on to Phase 2

PHASE 2: CO-FACILITATION, MENTORSHIP AND FIDELITY

- CBTm Team member will attend a series of CBTm classes hosted at your site (Class 1-5) OR co-facilitate classes that are running with an experienced facilitator at their site
- At the end of each class, our team will provide feedback / coaching and can answer any questions
- Fidelity to the CBTm model will be discussed
- Receive mentoring on a full 5 class training workshop before moving on to Phase 3

PHASE 3: FACILITATING ON YOUR OWN

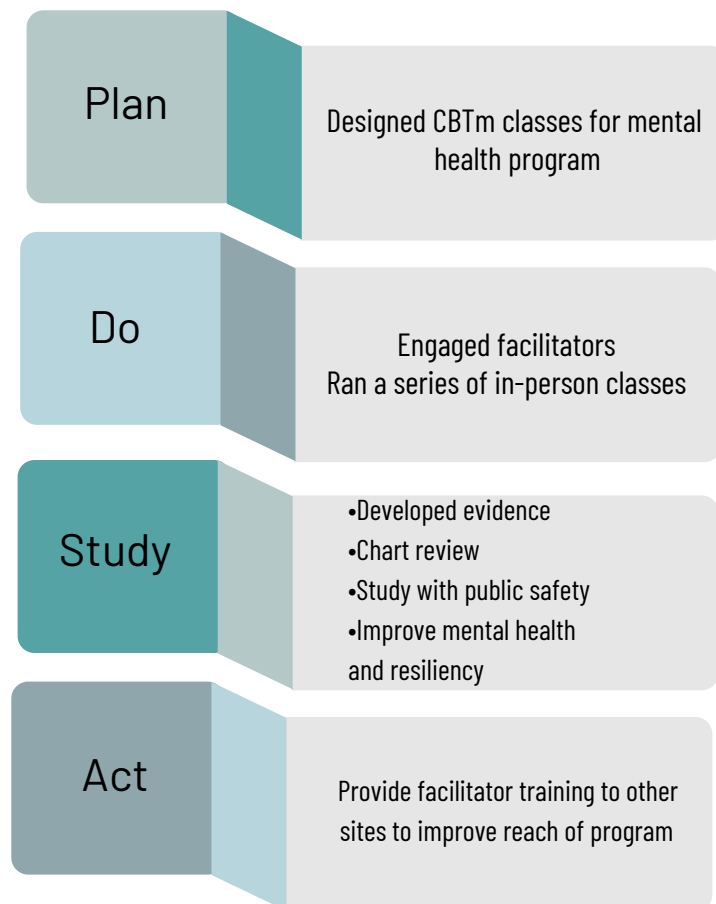
- Facilitate independently at your site
- Facilitate often - become more comfortable with material over time
- Ability to adapt materials to your population
- Continual evaluation - fidelity
- Access updates to training materials regularly - cbtm.ca
 - Changes to slides or speakers notes
 - Translations or adaptations for specific populations
- Keep in touch with CBTm Team
 - Community of practice meetings, CBTm Hub newsletters, update us on how things are going

To schedule Phase 1 and/or 2, connect with our team cbtm@umanitoba.ca

THE IMPORTANCE OF EVALUATION

How evaluation can guide our work

- Aim: Need to reduce waitlists and provide quicker access to care and CBT
- Quality Improvement model



Why should I collect evaluation data?

- To improve patient experience
 - Helps motivate them to know how their symptoms are changing
- Get feedback on CBTm class experience
- Inform clinical care and follow up programs
- Provide evidence for usefulness of your program
- Gain funding to continue CBTm program

Key Outcomes

The content taught in each of the five CBTm classes has been chosen because there is a substantial research base confirming these strategies have been effective to reduce symptoms of anxiety and depression. Since 2015, there has been ongoing research to confirm that the CBTm classes are of benefit to participants as intended. There has been great interest in modifying class content to fit the needs of specific populations. Some of these modified programs are up and running, some are in development. In addition to getting feedback from participants about perceived usefulness of the strategies and satisfaction with the experience, we have been very interested to confirm that the programs have helped participants make desired changes.

The core of our outcome monitoring efforts have been with no-cost, public domain questionnaires. Again, this is not a requirement when providing CBTm classes at your site, but may be of interest and a worthwhile investment of time. The measures are helpful tools that can help to see if the participants are improving (or not) and can point to what someone might engage in after CBTm classes. Sometimes participants can make substantial gains in their mood and the measures are helpful to note back to the referral source. These measures are straight forward to use, don't require specialized training to administer and are straight forward to score.

The CBTm Hub team is pursuing ways to make outcome monitoring more accessible but, for now, the following "paper and pencil" questionnaires are suggested. You can find copies of each measure below on the following pages.

- Changes in depressive symptoms:
 - Patient Health Questionnaire 9-item (PHQ-9)
- Changes in anxiety symptoms:
 - Generalized Anxiety Disorder 7 Item Scale (GAD-7)
- Changes in PTSD symptoms
 - PTSD Checklist (PCL-5)

Patient Health Questionnaire (PHQ-9)

Name: _____

Date: _____

Over the last 2 weeks, how often have you been bothered by any of the following problems?	Not at all	Several days	More than half the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
3. Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself – or that you are a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed? Or the opposite – being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3

For office coding: Total Score _____ = _____ + _____ + _____

Total Score _____

If you checked off any problems, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?

Not difficult at all
 Somewhat difficult
 Very difficult
 Extremely difficult

Source: Kroenke K, Spitzer RL, Williams JB. The PHQ-9: Validity of a brief depression severity measure. J Gen Intern Med. 2001;16(9):606-613.

GAD-7 Anxiety

Over the <u>last two weeks</u> , how often have you been bothered by the following problems?	Not at all	Several days	More than half the days	Nearly every day
1. Feeling nervous, anxious, or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Trouble relaxing	0	1	2	3
5. Being so restless that it is hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid, as if something awful might happen	0	1	2	3

Column totals _____ + _____ + _____ + _____ =

Total score _____

If you checked any problems, how difficult have they made it for you to do your work, take care of things at home, or get along with other people?

Not difficult at all

Somewhat difficult

Very difficult

Extremely difficult

Source: Spitzer RL, Kroenke K, Williams JBW, Lowe B. A brief measure for assessing generalized anxiety disorder. Arch Intern Med. 2006;166:1092-1097.

PCL-5

Instructions: Below is a list of problems that people sometimes have in response to a very stressful experience. Keeping your worst event in mind, please read each problem carefully and then select one of the numbers to the right to indicate how much you have been bothered by that problem in the past month.

Your worst event: _____

In the past month, how much were you bothered by:	Not at all	A little bit	Moderately	Quite a bit	Extremely
1. Repeated, disturbing, and unwanted memories of the stressful experience?	0	1	2	3	4
2. Repeated, disturbing dreams of the stressful experience?	0	1	2	3	4
3. Suddenly feeling or acting as if the stressful experience were actually happening again (as if you were actually back there reliving it)?	0	1	2	3	4
4. Feeling very upset when something reminded you of the stressful experience?	0	1	2	3	4
5. Having strong physical reactions when something reminded you of the stressful experience (for example, heart pounding, trouble breathing, sweating)?	0	1	2	3	4
6. Avoiding memories, thoughts, or feelings related to the stressful experience?	0	1	2	3	4
7. Avoiding external reminders of the stressful experience (for example, people, places, conversations, activities, objects, or situations)?	0	1	2	3	4
8. Trouble remembering important parts of the stressful experience?	0	1	2	3	4
9. Having strong negative beliefs about yourself, other people, or the world (for example, having thoughts such as: I am bad, there is something seriously wrong with me, no one can be trusted, the world is completely dangerous)?	0	1	2	3	4
10. Blaming yourself or someone else for the stressful experience or what happened after it?	0	1	2	3	4
11. Having strong negative feelings such as fear, horror, anger, guilt, or shame?	0	1	2	3	4
12. Loss of interest in activities that you used to enjoy?	0	1	2	3	4
13. Feeling distant or cut off from other people?	0	1	2	3	4
14. Trouble experiencing positive feelings (for example, being unable to feel happiness or have loving feelings for people close to you)?	0	1	2	3	4
15. Irritable behavior, angry outbursts, or acting aggressively?	0	1	2	3	4
16. Taking too many risks or doing things that could cause you harm?	0	1	2	3	4
17. Being "superalert" or watchful or on guard?	0	1	2	3	4
18. Feeling jumpy or easily startled?	0	1	2	3	4
19. Having difficulty concentrating?	0	1	2	3	4
20. Trouble falling or staying asleep?	0	1	2	3	4

Feedback on class content and delivery

Many sites have a process for obtaining participant satisfaction feedback for programs and services. Although this isn't a required part of the CBTm classes, participant feedback has been very helpful over the years. This feedback has been used to refine or add needed content and also to improve how the information has been presented and to refine how clinicians deliver the material in a way that personalizes the content for your setting.

If it is helpful in your setting, you are welcome to use the feedback form that has been part of this program.

The CBTm Education Session Evaluation can be found on the next page. The form has been developed so that there is a straightforward usefulness rating (score of 1 to 5) and satisfaction rating (would attend another session? Yes or No). Also, participants are asked to describe what they learned, what they liked and what they thought could be improved. The CBTm Education Session Evaluation is meant to be delivered at the end of classes 1 through 5.

CBT Education Session Evaluation

Did you enjoy the session?

- 1 Did not like it at all
 - 2
 - 3
 - 4
 - 5 Liked it a lot
-

How useful was this session for you?

- 1 Not at all useful
 - 2
 - 3
 - 4
 - 5 Very useful
-

How did you like the format?

- 1 Did not like it at all
 - 2
 - 3
 - 4
 - 5 Liked it a lot
-

Did you feel you were able to fully participate in the class using this format?

- 1 Had a lot of difficulty participating
 - 2
 - 3
 - 4
 - 5 Was able to participate as much as I wanted
-

Did you experience any problems/issues with the format?

- Yes
 - No
-

Please describe the difficulties you had:

What did you like most about the session?

How could we improve the session?

Would you attend another session like this one?

- Yes
 - No
-

Other comments?

Handling Common Issues in Class

Encouraging engagement with the material

There is a lot of information presented in the five classes. Even the most interested participant may “tune out” at times if not encouraged to engage with the presentation. The speaker’s notes include suggestions for times to ask questions to encourage discussion and there are tasks in every class to help relate the information to personal experience. You may have additional ideas about how to do this that can make the class experience better. We have found that it helps to have a welcoming attitude when participants ask questions or volunteer information. Finding something of merit in participant input goes a long way towards increasing engagement.

Containing Inappropriate Disclosure

There is a slide near the beginning of each class with the instruction that these classes are not a good place to disclose serious risks or traumatic experiences. There are two reasons for this. Most importantly, these concerns cannot get the full attention they deserve within the class format but, also, these disclosures can cause other participants worry, distress and pre-emptive closure with respect to their own problems because someone else has it worse. Should a participant begin to talk about current suicidality, at-risk behaviour or past trauma it is best to intercede respectfully, acknowledge the importance of dealing with these concerns and request to speak further with the participant at a break or after class. When speaking further with the participant, check that they have appropriate mental health resources in place or are aware of how to engage crisis resources. Information about crisis resources is included on the additional resources slide in every class. If this is an issue that continues to come up, you may consider running classes with more facilitators, so that a facilitator can step out to speak to the person without disrupting class.

Handling Common Issues in Class Continued

Initial Difficulties with the Thought Record

Guiding participants to the application of cognitive restructuring skills isn't simple. The first problem is that you may be introducing a new way of looking at the world. People say "I don't think like that." Then it's easy to get into a power struggle of the "yes you do/no I don't" type. The suggested strategy is to be very open-minded and see the merit in everything that people are willing to put forth until they offer up their own connection with the material. That's why when Class 1 is offered in-person, we often ask the participants to take turns reading aloud the descriptions of the thinking traps. We're waiting for someone to say "Hey I do that" at which point we say "what about others in the class? Do you see yourself in any of this?" Then people convince themselves that there is some wisdom in this approach because they can relate to it. Participants often have a lot of difficulty when first using the thought record. It is because we don't think in singular thoughts, we think in clumps. And because the brain is a neural network, a series of associated thoughts will get activated together. Consideration went into the choice of a thought record to use in these classes and the "Testing Your Thoughts" format was selected because it helped guide participants through identification of associated thoughts and ways to challenge these thoughts.

Even then, people often find it hard to pick only one thought to use on the form, and to pick the kind of thought (a judgemental one) that responds to challenge. For example, a participant in class might focus on a time she was frustrated and begin to identify the content of her thoughts.... She might think "my computer password doesn't work" and "my husband doesn't understand me" and "they were rude to me at the grocery store" (all of these associated by that feeling of frustration) so which one should she choose for the TYT form? Well, the class guidance is to go with something easier so she stays away from thoughts about her marriage and chooses "my computer password doesn't work". Unfortunately, that thought is a statement of fact, so the guidance would have to help her get at underlying judgements, probably by proposing some. She might be asked "Could you also be thinking something like I'm disorganized or I'm no good with computers?" This takes some additional input and there is a Downward Arrow technique that helps in this situation. Alternately, she might choose "they were rude to me at the grocery store" which might also be the truth and she won't get anywhere with the technique until the underlying thoughts are revealed. These might be "I'm being disrespected?" or "Nobody cares?". It can help to review your CBT training material on common difficulties encountered with cognitive restructuring as preparation for leading classes.

CBTm Fidelity Checklist

Most evidence-based treatments have developed a method to evaluate whether treatment is being provided in a manner consistent with its purpose. As the class facilitator, it is very easy to drift from the intended content in response to participant questions or perceived needs. It takes organization, flexibility and creativity to deliver the information as intended while being sensitive to participant input. Core content has been identified for CBTm to help ensure that programming is reasonably consistent across sites.

Rating Key:

0: not done or not done as intended

1: presented as intended

2: presented with exceptional skill

Note. An item (a bullet point) rating of 1, and Class rating of 4 needed for adequate fidelity.

Item	Rating (0-2)
Class 1	
• Participants engaged in mindfulness exercise	
• Cognitive model of emotional distress presented	
• Participant had an opportunity to work through a thought record	
• Participant had an opportunity to identify a thinking trap	
• Facilitators addressed questions from clients respectfully using a CBT approach	
Total Class 1 Rating:	
Class 2	
• Participants engaged in mindfulness exercise	
• Skills practice from Class 1 was reviewed	
• Behavioural model of emotional distress presented (role of avoidance)	
• Concept of behavioural activation presented	
• Concept of hierarchical exposure presented	
• Participants had opportunity to begin BA or exposure plan using SMART goal format	
• Facilitators addressed questions from clients respectfully using a CBT approach	
Total Class 2 Rating:	

CBTm Fidelity Checklist

Class 3	Rating (0-2)
• Participants engaged in mindfulness exercise	
• Skills practice from Class 2 was reviewed	
• Principles of healthy living presented, including physical exercise, nutrition, alcohol/drug use, caffeine	
• Participants had opportunity to set healthy living goal	
• Principles of sleep hygiene presented	
• Participants had opportunity to set sleep hygiene goal	
• Facilitators addressed questions from clients respectfully using CBT approach	
Total Class 3 Rating:	
Class 4	
• Participants engaged in mindfulness exercise	
• Skills practice from Class 3 was reviewed	
• Model of anger and assertiveness presented	
• Participants had opportunity to work through a thought record on theme of anger	
• Problem-solving method presented	
• Participants had opportunity to apply problem-solving method on personal concerns	
• Facilitators addressed questions from clients respectfully using a CBT approach	
Total Class 4 Rating:	
Class 5	
• Participants engaged in mindfulness exercise	
• Skills practice from Class 4 was reviewed	
• Adaptive advantages of fight/flight/freeze response were explained along with possible ongoing reactivity from having encountered highly stressful situations	
• Participants were encouraged to consider how thinking traps and avoidance can make it harder to cope with stress	
• Participants had the opportunity to work through a thought record, an approach ladder and a SMART goal related to their own experience of a traumatic or very stressful event	
• Self-compassion was presented	
• Participants had the opportunity to construct a Wellness Plan	
• Facilitators addressed questions from participants respectfully using a CBT approach	
Total Class 5 Rating:	



WHEN PARTICIPANTS ASK “WHAT NEXT?”

There is a slide at the end of Class 5 that will list some additional resources. However, you may need to edit this slide so that the options reflect services available at your site, within your area, or of particular interest to your participants. In response to the question “what next?” you can provide any of the following suggestions: Review the class material again and continue with skills practice. You might decide to start over from the beginning or you might go to the practice that you found most helpful (or most challenging).

We have found that when the wait list for services after CBTm classes is long, participants will choose to attend CBTm classes for a second time. This can provide someone with some structure in their life, and a chance to hear to material again and absorb it better.

You may want to suggest that they schedule time for skills practice to keep up the momentum. It is also important to remind them to make time for important self-care, not letting it get crowded out in a busy schedule. This is a good time for them to go over their self-care plan, providing an opportunity to go over potential additional steps in treatment with their physician or a mental health clinician.

