

FACILITATOR BINDER

# CBTm

COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

# ACKNOWLEDGEMENTS

## Acknowledgements

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**1. Mindful Breathing**

- Audio available on:
  - MindShift (3 min)
  - Stop, Breathe & Think (3-10 min)
  - Mindfulness Coach (9 min)
- Script attached

**2. Body Scan**

- Audio available on:
  - MindShift (9 min)
  - Stop, Breathe & Think (8 min)
  - Mindfulness Coach (9 min)
- Script attached

**3. Leaves on a Stream/Clouds in the Sky**

- Audio available on:
  - Mindfulness Coach (7 min)
- Script attached

**4. Engaging your Senses**

- Audio available on:
  - Stop, Breathe & Think (5 min)
- Script attached

**5. Observing an Object**

- Script attached

**6. Loving Kindness Meditation**

- Audio available on:
  - i. Stop, Breathe, & Think (6 min)
- Script attached



### **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

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 with Self-Compassion

Please find a comfortable position, sitting or lying down. Letting your eyes close, fully or partially. Taking a few deep breaths to settle into your body and into the present moment. You might like to put your hand over your heart, or wherever it is comforting and soothing, as a reminder to bring not only awareness, but *loving* awareness, to your experience and to yourself.

Locating your breathing where you can feel it most easily. Feeling your breath move through your body, and when your attention wanders, feeling the gentle movement of your breath once again.

After a few minutes, starting to notice any *physical sensations* of stress that you may be holding in your body, perhaps in your neck, jaw, belly, or forehead.

Also noticing if you're holding some *difficult emotions*, such as worrying about the future or uneasiness about the past. Understand that every human body bears stress and worry throughout the day.

See if you can *incline* toward the stress in your body as you might incline toward a child or a beloved pet, with curiosity and tenderness.

Now inclining toward *yourself*, offering yourself goodwill simply *because* of the stress that you're holding in your body right now, as everyone holds stress in their bodies. Offering words of kindness and compassion to yourself, slowly and affectionately. For example:

*May I be safe*

*May I be peaceful*

*May I be kind to myself*

*May I accept myself as I am*

(pause)

Whenever you notice that your mind has wandered, returning to the sensations in your body and to the loving-kindness phrases.

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.

Finally, taking a few breaths and just resting quietly in your own body, knowing that you can return to the phrases anytime you wish.



[Version date: January 2022]

\*introduce class facilitator and welcome participants\*

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

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

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

## GROUND RULES

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- Please respect everyone's confidentiality
- Please do not share with the class personal stories of trauma or suicidal or violent thoughts
- If you are distressed, please talk to staff members individually

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



## SESSION OUTLINE

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1. Why These Classes?
2. Mindfulness
3. What is CBT?
4. Realistic Thinking
5. Skills Practice

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

## WHY CBT CLASSES?

- CBT Works!
- Rapid access to Brief CBT
- Introduce Principles of CBT
- Practice basic skills of CBT
- Introduce self-help resources

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

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

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

## LOTS OF SELF-HELP WEBSITES

- **Anxietycanada.com**
  - Good quality site
  - Interactive
  - Great resources
  - Good videos of patient stories
  - MindShift – good mobile application
- **Heretohelp.bc.ca**

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

## OUTLINE FOR TODAY

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1. Why These Classes?
2. **Mindfulness**
3. What is CBT?
4. Realistic Thinking
5. Skills Practice

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

## MINDFULNESS MEDITATIONS – 5 MIN

- Observe without judgment
- Helpful for stress reduction
- Apps
  - Mindshift
  - Stop, Breathe, Think
  - Mindfulness Coach
- Anywhere, anytime
  - Observe breath, object, activity, sounds

**CBTm** COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

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

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

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

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

You can also try doing every day activities mindfully, such as mindful walking, or mindfully doing the dishes, mindful eating, or mindfully folding towels, to give you a

few examples. To do any of these activities mindfully, you pay attention to the present moment. You can wash the dishes mindfully, being aware of the bubbles, temperature of the water, motions, and sounds.

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

Audio from Mindshift app, Chill Zone, Mindful Breathing can also be used or the following instructions. Insert Script for 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.*

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.

## OUTLINE FOR TODAY

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1. Why These Classes?
2. Mindfulness
3. **What is CBT?**
4. Realistic Thinking
5. Skills Practice

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

## OUTLINE FOR TODAY

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- Structured
- Focus on here and now
- Testing beliefs and assumptions
- Problem solving skills
- Changing behaviours

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

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

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

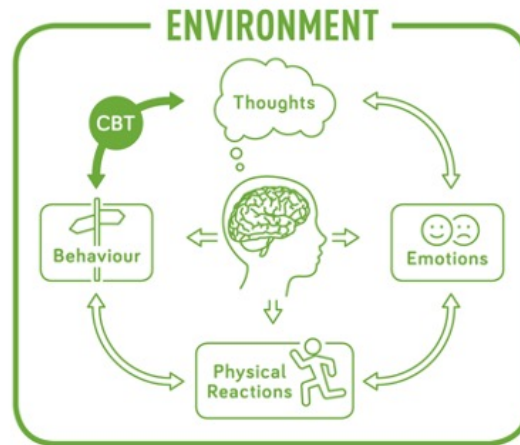
One of the core ideas in CBT is testing one's beliefs and assumptions. When we have negative feelings, we tend to have negative and inflexible thinking. In CBT, you learn to step back and think about the situation more broadly. CBT is not about just thinking positively, it is teaching you how to think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

CBT also has problem solving skills. These are important if you are struggling with



relationship problems, sleep problems, assertiveness. Learning these skills helps bolster your resilience.

## THE CBT MODEL



CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

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

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

The most common behaviours associated with anxiety and/or depression are avoidance and withdrawal. Avoidance is the main source of disability in anxiety disorders, which can be thought of as "The disorders of missed opportunities". Avoidance and withdrawal often lead to a sense of relief in the short term, but a sense of sadness and increased anxiety in the long term. We'll talk more about that in Class 2.

- In any situation, you have certain thoughts about the situation. What you feel

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

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

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

**COGNITIVE MYTH**

- Myth
  - “Cognitive Therapy is to help people think positively”
- Truth
  - “Cognitive Therapy is to help people think flexibly and balanced”

**CBTm** COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

### **Change “Cognitive Myth” to “CBT myth”?**

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

## WHAT DO YOU SEE?



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

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

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

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

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

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

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

## COGNITIVE MODEL

- When we are feeling anxious, sad, or angry, we are usually thinking negatively
- These negative thoughts can make the negative feelings stronger
- If we can recognize this negative thinking, and change the thinking, it can help reduce the negative feelings

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

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

## COGNITIVE THEORY OF DEPRESSION

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

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

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

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

## COGNITIVE THEORY OF ANXIETY

- Two key thinking traps:
  - Overestimate the risk in the situation
  - Underestimate capacity to cope in the situation

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

1. Overestimating the risk in a situation. For example: How likely a plane is to crash?. How likely you are to embarrass yourself when you speak in front of others? Statistics tell us that travelling in a plane is safer than travelling in a car and yet, the fear of a plane crashing is very common. Public speaking is another common situation where fear and anxiety tend to influence a person's self confidence and the risk or danger of failing.

2. The second thinking trap that anxiety gets you to believe is underestimating your ability to cope in the situation. For example: If I have to make a presentation at work, I will become overwhelmed and fall apart and then be unable to cope. Sometimes people worry if they have a panic attack it will go on forever unless they do something to stop it, which isn't true.



# USING A THOUGHT RECORD

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## TESTING YOUR THOUGHTS (Example)

This worksheet is a version of a Dysfunctional Thought Record.

What is the situation?

What am I thinking or imagining?

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

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

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

What makes me think the thought is true?

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

What's another way to look at this?

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

What's the best that could happen?

What will 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 him/her?

What should I do now?

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

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

Beck Institute

## TESTING YOUR THOUGHTS (Example)

This worksheet is a version of a Dysfunctional Thought Record.

What is the situation? \_\_\_\_\_ Quince 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) \_\_\_\_\_

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

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

What makes me think the thought is true? \_\_\_\_\_ She's acted this way before.

What makes me think the thought is not true or not completely true? \_\_\_\_\_ She's acted this way before but she seems to get over it.

What's another way to look at this? \_\_\_\_\_ She's got a hot 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 kind of 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 increasingly upset.

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

What would I tell my friend \_\_\_\_\_ Emily if this happened to him/her? \_\_\_\_\_ Don't worry, just ask her to stay and eat.

What should I do now? \_\_\_\_\_ Call a different friend.

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

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

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

## OUTLINE FOR TODAY

---

1. Why These Classes?
2. Mindfulness
3. What is CBT?
4. **Realistic Thinking**
5. Skills Practice

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

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

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

## TESTING YOUR THOUGHTS

- What is the situation?
- What am I thinking or imagining?
- How much do I believe it?
  - a little, medium, a lot (or rate 0-100\_\_\_\_\_)

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

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

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

## TESTING YOUR THOUGHTS

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- How does that thought make me feel
  - angry, sad, nervous, other \_\_\_\_\_
- How strong is the feeling?
  - a little, strong, medium, very strong (or rate 0-100\_\_\_\_)

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

## TESTING YOUR THOUGHTS

---

- What makes me think the thought is true?
- What makes me think the thought is not true or not completely true?
- What's another way to look at this?

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

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

## TESTING YOUR THOUGHTS

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- What's the worst that could happen?
- Would I still live through it?
- What's the best that could happen?
- What will probably happen?

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

## 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 him/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 friends than we are to ourselves. I would talk to my friend “Charlene” and tell her “don’t worry, just wait two days and call”.

## TESTING YOUR THOUGHTS

- What should I do now?
- How much do I believe the negative thought now?
  - a little, medium, a lot (or rate 0-100\_\_\_\_)
- How strong is my negative feeling now?
  - a little, strong, medium, very strong (or rate 0-100\_\_\_\_)

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

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

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

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

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

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



## PRACTICE

- If you are anxious, sad, or angry now, do a thought record on the current thoughts
- If not anxious, sad or angry, do a thought record on a recent situation when you felt that way

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

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

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

You might also cover examples of what doesn't work in this format:  
Multiple thoughts (have to pick just one; write down a bunch then pick one)  
Statements that are true like "work is hard" (may need to use the "downward arrow" technique to get at the worst thought)

# UNDERSTANDING THINKING TRAPS

Thinking Traps	Examples
<b>Overgeneralizing</b> Thinking that a negative situation is part of a constant cycle of bad things that happen. People who overgeneralize often use words like "always" or "never".	I wanted to go to the beach, but now it's raining. This always happens to me! I never get to do fun things!
<b>All or Nothing Thinking (Black and White thinking)</b> Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in black and white terms see a small mistake as a total failure.	I wanted to eat healthier, but I just had a piece of cake. This plan is a total failure! I might as well eat the whole cake!
<b>Fortune Telling</b> 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.
<b>Emotional Reasoning</b> Believing that bad feelings or emotions reflect the truth of a situation.	I feel anxious when I fly, so airplanes must not be safe.
<b>Labeling</b> Saying only negative things about yourself or other people.	I made a mistake at work. I'm stupid! My boss told me that I made a mistake. My boss is a total jerk!
<b>'Should' Statements</b> 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!
<b>Mind Reading</b> 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.
<b>Mental Filter</b> Focusing only on the negative parts of a situation and ignoring anything good or positive.	I met a lot of great people at the party, but one guy didn't talk to me. There must be something wrong with me.
<b>Catastrophic Thinking</b> Exaggerating the importance of negative things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn't that bad.	I stumbled over my words during the presentation at work, so I'll probably lose my job.
<b>Personalization</b> You see yourself as the cause of some negative external event for which, in fact, you were not primarily responsible.	My husband looks irritable today. I must have done something to upset him.

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

## COMMON THINKING TRAPS

- Overgeneralization
- All or Nothing Thinking
- Fortune Telling
- Emotional Reasoning
- Labelling
- Should Statements
- Mind Reading
- Mental Filter
- Catastrophic Thinking
- Personalization

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

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

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

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

**Fortune Telling:** Predicting that something bad will happen, without any evidence. Example: I’ve been studying hard, but I know that I’m going to fail my test tomorrow.

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

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

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

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

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

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

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

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

## PRACTICE

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

Looking back on the Thought Record you completed, can you name the thinking trap that you were caught in? If leading the class remotely, ask participants to let you know via the chat.

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

## SKILLS PRACTICE

- Review materials
- Mindfulness 5 min twice a day
- One thought record & identify thinking trap(s)
- Spend 15 min on [anxietycanada.com](http://anxietycanada.com) or [heretohelp.bc.ca](http://heretohelp.bc.ca)

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

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

## RESOURCES

**Anxiety Canada** [[www.anxietycanada.com](http://www.anxietycanada.com)]

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

**Here to Help** [[www.heretohelp.bc.ca](http://www.heretohelp.bc.ca)]

**Mindshift app**

**Mindfulness Coach**

**Stop. Breath. Think.** (Now *MyLife Mediation*) app

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

## ADDITIONAL RESOURCES:

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

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

**Crisis Response Centre** - (204-940-1781)

→ Community Intake - (204-788-8330)

**Manitoba Suicide Prevention & Support Line (24/7)** - (1-877-435-7170)

→ <https://www.reasontolive.ca>

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

**First Nations and Inuit Hope for Wellness Help Line** - (1-855-242-3310)

→ An online chat feature is also available on their website: <https://www.hopeforwellness.ca>

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





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

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

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

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

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

change this slide to just say:]

THANKS!

### TESTING YOUR THOUGHTS (Example)

This worksheet is a version of a Dysfunctional Thought Record.

What is the situation?

What am I thinking or imagining?

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

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

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

What makes me think the thought is true?

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

What's another way to look at this?

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

What's the best that could happen?

What will 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 him/her?

What should I do now?

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

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

### TESTING YOUR THOUGHTS (Example)

This worksheet is a version of a Dysfunctional Thought Record.

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\_\_\_\_)

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

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

What makes me think the thought is true? She seemed 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 kind of 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 really upset.

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

What would I tell my friend Emily if this happened to him/her? 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\_\_\_\_)

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

## **WHAT IS HEALTHY THINKING?**

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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.

<b>Thinking Traps</b>	<b>Examples</b>
<p><b>Overgeneralizing</b> 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”.</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><b>All or Nothing Thinking</b> (Black and White thinking) Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in black and white terms see a small mistake as a total failure.</p>	<p>I wanted to eat healthier, but I just had a piece of cake. This plan is a total failure! I might as well eat the whole cake!</p>
<p><b>Fortune Telling</b> 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><b>Emotional Reasoning</b> 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><b>Labeling</b> Saying only negative things about yourself or other people.</p>	<p>I made a mistake at work. I’m stupid! My boss told me that I made a mistake. My boss is a total jerk!</p>
<p><b>‘Should’ Statements</b> 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><b>Mind Reading</b> 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><b>Mental Filter</b> Focusing only on the negative parts of a situation and ignoring anything good or positive.</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><b>Catastrophic Thinking</b> Exaggerating the importance of negative things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn’t that bad.</p>	<p>I stumbled over my words during the presentation at work, so I’ll probably lose my job.</p>
<p><b>Personalization</b> You see yourself as the cause of some negative external event for which, in fact, you were not primarily responsible.</p>	<p>My husband looks irritable today. I must have done something to upset him.</p>

## 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?

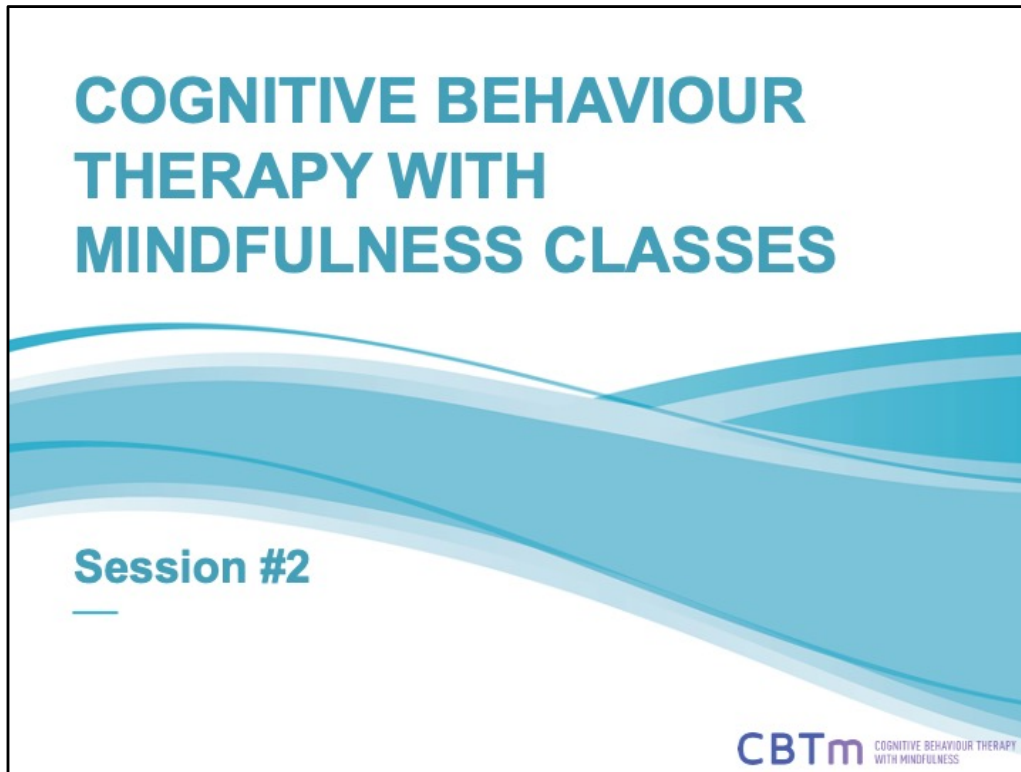
### 2. Find any 'thinking traps'

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.



[Version date, January 2022.]

Welcome to the second Cognitive Behaviour Therapy with mindfulness class.

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



## GROUND RULES

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- Please respect everyone's confidentiality
- Please do not share with the class personal stories of trauma or suicidal or violent thoughts
- If you are distressed, please talk to staff members individually

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

## OUTLINE FOR TODAY

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1. Mindfulness
2. Review of Skills Practice
3. Review Realistic Thinking
4. Basics of Behaviour Therapy
5. Goal Setting
6. Skills Practice

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

# MINDFULNESS

- Observe without judgment
- Helpful for stress reduction
- Apps
  - Mindshift
  - Stop, Breathe, Think
  - Mindfulness Coach
- Anywhere, anytime
  - Observe breath, object, activity, sounds

CBT<sub>m</sub> COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

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

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

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

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

Insert script for Body Scan.

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

**2. Become aware of the sensations of your breath.**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**11. Focus on your neck.**

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

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

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

## OUTLINE FOR TODAY

---

1. Mindfulness
2. Review of Skills Practice
3. Review Realistic Thinking
4. Basics of Behaviour Therapy
5. Goal Setting
6. Skills Practice

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

## REVIEW OF SKILLS PRACTICE

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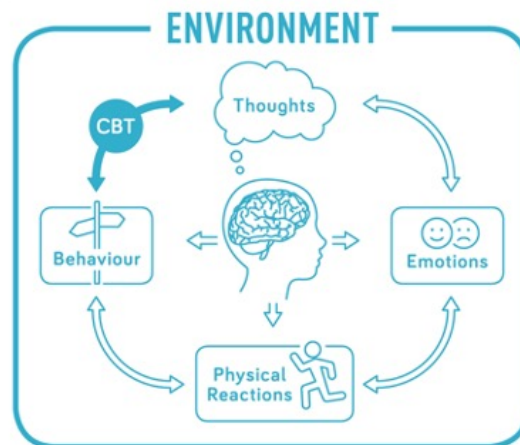
- Review materials
- Mindfulness – 5 min twice/day
- One Thought Record
- Spend 15 min on [anxietycanada.com](http://anxietycanada.com) or [heretohelp.bc.ca](http://heretohelp.bc.ca)

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

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

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

## THE CBT MODEL



CBTm COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

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

### THOUGHTS

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

### FEELINGS

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

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



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

## COGNITIVE THEORY OF DEPRESSION

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

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

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

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

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

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

## COGNITIVE THEORY OF ANXIETY

- Two key thinking traps:
  - Overestimate the risk in the situation
  - Underestimate capacity to cope in the situation

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

## COMMON THINKING TRAPS

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- Overgeneralization
- All or Nothing Thinking
- Fortune Telling
- Emotional Reasoning
- Labelling
- Should Statements
- Mind Reading
- Mental Filter
- Catastrophic Thinking
- Personalization

You may pause and review these thinking traps.

## OUTLINE FOR TODAY

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1. Mindfulness
2. Review of Skills Practice
3. Review Realistic Thinking
4. Basics of Behaviour Therapy
5. Goal Setting
6. Skills Practice

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

## COMMON MYTH ABOUT CBT

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- Myth
  - “Cognitive Therapy is to help people think positively”
- Truth
  - Cognitive Therapy is to help people think in a flexible and balanced way
  - Step back from the situation and look at it from different angles

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

This concludes the review of material from the first class.

## OUTLINE FOR TODAY

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

## BEHAVIOURAL EXPERIMENTS

- When you have challenged your thoughts
- Understand (rationally) that it is a thinking trap
- Still have high levels of anxiety, sadness, or anger
- Still a part of you believes the thought

Then it's time for a behavioural experiment...

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

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

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



## BEHAVIOURAL EXPERIMENTS

- Can you test your thoughts?
- Prediction
- Experiment
- Outcome
- Learning
- Beginnings of behavioural therapy

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

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

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

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

## BEHAVIOURAL THEORY OF ANXIETY

- Avoid fearful situation
  - Short Term
    - Decrease in anxiety
  - Long term
    - Increase in anxiety
    - Decrease in self-esteem
    - Decrease in function

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

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

## BEHAVIOURAL THEORY OF ANXIETY

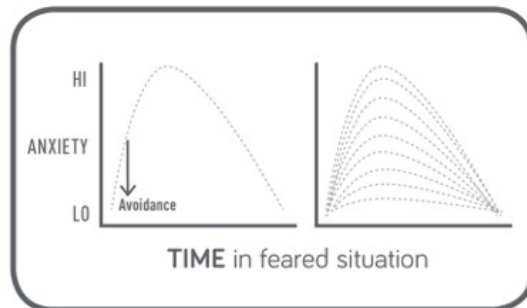
- Avoid fearful situation
  - Short Term
    - Decrease in anxiety
  - Long term
    - Increase in anxiety
    - Decrease in self-esteem
    - Decrease in function
- Confront fearful situation
  - Short Term
    - Increase in anxiety
  - Long term
    - Decrease in anxiety
    - Increase in self-esteem
    - Increase in function

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

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

# EXPOSURE

- Facing your fears in a planned and repeated manner to fears.
- Starting with fears that are a 3-4 out of 10 for an anxiety rating
- Delay the avoidance
- If possible stay in the anxious situation for 30 min or until anxiety drops by 50%
- See handout



CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

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

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

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

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

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

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

We are all built with the fight/flight/freeze reaction. Any situation that we fear will

set off this reaction, causing our heart to pound and our breathing to quicken. The reaction is not dangerous and will diminish in its own time, returning us to homeostasis.

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

What is Exposure Therapy? - 1 page

Facing Your Fears: Exposure - 3 pages

### What is Exposure Therapy?

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

#### What is exposure used for?

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

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

#### How exposure works

One helpful way to think about how exposure works is to consider memories. A scary event creates a fear memory linking the object, event, or a situation with a feeling of fear. Memories 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 overshadow 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 OK.

Let's consider an example:

**Step 1: Learning to be afraid of something**  
Bob is involved in a car crash. He feels very frightened at the time. A memory is created in Bob's mind which links cars with feeling afraid.



**Step 2: The problem of fear**  
Reminders of the crash activate Bob's fear memory and make him feel afraid. His fear means that he won't travel by car or on the road. This avoidance means that he doesn't get to learn how safe traveling 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 in a car again. 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' – whichever a reminder comes along Bob can be reminded of either the old fear memory or the new safe memory. The more exposure therapy he has done the more positive memories he will have to rely on and the more capable he will feel.



#### Graded exposure

Graded exposure is a 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 list of fears or things that frighten you
- Starting with the easiest, confront the object, event, or situation and stay there until your fear reduces
- Don't move up the ladder until you feel comfortable at each step

### Facing your Fears: Exposure

adapted from AnxietyBC

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

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

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

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

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

**Step 1. Make a list**  
Make a list of situations, places or objects that you fear. If we go back to the example of dogs, the list might include: looking at pictures of dogs, watching videos of dogs, standing across the park from a dog on a leash, standing in the same room as a dog on a leash, standing a few feet from a dog, or petting a puppy. If you're afraid of social situations, the list might include: saying 'hi' to a co-worker, making small talk with a cashier, going for coffee with co-workers, 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.

PSYCHOLOGYTIPS

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# CBTm

COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

This is what it will look like in your handouts.

## EXPOSURE EXAMPLES

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- Fear of dogs
  - View pictures of dogs
  - View videos of dogs barking
  - Go near dogs in kennels
  - Pet small, cute dog
  - Pet large friendly dog

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



## EXPOSURE EXAMPLES

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- Fear of flying
  - Imaginal exposure
    - Writing script of worries
- Mimicking conditions related to fear
  - E.g., crowded spaces, hard to escape, turbulence

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

## EXPOSURE EXAMPLES

- Fear of panic attacks
  - Interoceptive exposure
    - Create conditions that cause physical anxiety symptoms
    - Running up and down stairs
    - Breathing through a straw
    - Spinning around in a chair

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

## BEHAVIOURAL THEORY OF DEPRESSION

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- The individual is not getting enough positive feedback from his or her environment.
- Cycle of avoidance, feeling down, and further avoidance.

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

## BEHAVIOURAL ACTIVATION

- Begin doing things you used to enjoy, even if you no longer enjoy them as much or at all.
- Don't wait until you feel better to start doing things again!
- Record your mood when you are not active and compare it to when you are active.

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

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

# GETTING STARTED WITH BEHAVIOURAL ACTIVATION

## Fun Activities Catalogue

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

- |  |  |  |  |
|--|--|--|--|
| 1. Soaking in the bathtub                            | 57. Going to church, praying (practising religion)   | 31. Practising karate, judo, jogs                    | 87. Buying clothes                             |
| 2. Planning my career                                | 58. Losing weight                                    | 32. Thinking about retirement                        | 88. Working                                    |
| 3. Collecting things (coins, shells, etc.)           | 59. Going to the beach                               | 33. Repairing things around the house                | 89. Going out to dinner                        |
| 4. Going for a holiday                               | 60. Thinking I'm an OK person                        | 34. Working on my car (bicycle)                      | 90. Discussing books                           |
| 5. Recycling old items                               | 61. A day with nothing to do                         | 35. Remembering the words and deeds of loving people | 91. Sightseeing                                |
| 6. Relaxing  | 62. Having class reunions                            | 36. Wearing sexy clothes                             | 92. Gardening                                  |
| 7. Going on a date                                   | 63. Going ice skating, roller skating/blading        | 37. Having quiet evenings                            | 93. Going to the beauty salon                  |
| 8. Going to a movie                                  | 64. Going sailing                                    | 38. Taking care of my plants                         | 94. Early morning coffee and newspaper         |
| 9. Jogging, walking                                  | 65. Traveling abroad, interstate or within the state | 39. Buying, selling stocks and shares                | 95. Playing tennis                             |
| 10. Listening to music                               | 66. Sketching, painting                              | 40. Going swimming                                   | 96. Kissing                                    |
| 11. Thinking I have done a full day's work           | 67. Doing something spontaneously                    | 41. Doodling   | 97. Watching my children (play)                |
| 12. Recalling past parties                           | 68. Doing embroidery, cross stitching                | 42. Exercising                                       | 98. Going to plays and concerts                |
| 13. Buying household gadgets                         | 69. Sleeping   | 43. Collecting old things                            | 99. Daydreaming                                |
| 14. Lying in the sun                                 | 70. Driving  | 44. Going to a party                                 | 100. Planning to go to school                  |
| 15. Planning a career change                         | 71. Embroidering                                     | 45. Thinking about buying things                     | 101. Thinking about sex                        |
| 16. Laughing   | 72. Going to clubs (garden, sewing, etc.)            | 46. Playing golf                                     | 102. Going for a drive                         |
| 17. Thinking about my past trips                     | 73. Thinking about getting married                   | 47. Playing soccer                                   | 103. Listening to a stereo                     |
| 18. Listening to others                              | 74. Going birdwatching                               | 48. Flying kites                                     | 104. Refurbishing furniture                    |
| 19. Reading magazines or newspapers                  | 75. Singing with groups                              | 49. Having discussions with friends                  | 105. Watching TV, videos                       |
| 20. Hobbies (stamp collecting, model building, etc.) | 76. Flirting   | 50. Having family get-togethers                      | 106. Making lists of tasks                     |
| 21. Spending an evening with good friends            | 77. Playing musical instruments                      | 51. Riding a motorbike                               | 107. Going bike riding                         |
| 22. Planning a day's activities                      | 78. Doing arts and crafts                            | 52. Sex  | 108. Walks on the riverfront/foreshore         |
| 23. Meeting new people                               | 79. Making a gift for someone                        | 53. Playing squash                                   | 109. Buying gifts                              |
| 24. Remembering beautiful scenery                    | 80. Buying CDs, tapes, records                       | 54. Going camping                                    | 110. Travelling to national parks              |
| 25. Saving money                                     | 81. Watching boxing, wrestling                       | 55. Singing around the house                         | 111. Completing a task                         |
| 26. Card and board games                             | 82. Flavouring panics                                | 56. Arranging flowers                                | 112. Thinking about my achievements            |
| 27. Going to the gym, doing aerobics                 | 83. Cooking, baking                                  |  | 113. Going to a footy game (or rugby, soccer). |
| 28. Eating   | 84. Going hiking, bush walking                       |  |  |
| 29. Thinking how it will be when I finish school     | 85. Writing books (poems, articles)                  |  |  |
| 30. Getting out of debt/paying debts                 | 86. Sewing   |  |  |

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

## WHAT ARE YOU AVOIDING?

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- What are you avoiding because of anxiety and/or depression?
- Make a list.
- Imagine that it is 3 months later: what are you doing differently when you are feeling better?

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

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

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

## OUTLINE FOR TODAY

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1. Mindfulness
2. Review of Skills Practice
3. Review Realistic Thinking
4. Basics of Behaviour Therapy
5. Goal Setting
6. Skills Practice

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

## SMART GOALS

- Specific
- Measurable
- Attainable
- Relevant
- Timely
- Put the anxiety and depression aside when making goals
- Break the goals down into small pieces
- See handout **Guide for Goal Setting**

**CBTm** COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

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

- See <Guide for Goal Setting> from AnxietyCanada for a good description of how to begin when you're not sure where to start.

- Try to choose goals that are related to your feelings of stress, anxiety or discouragement. That way, you are working on the problem at it's source.

- What have you been avoiding? Do you want to start doing any of those things in a small way?

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

Specific means what,

Measureable is where, when, how often and other quantifiables

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

Relevant means this activity contributes to achieving your overall goal.

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



## EXAMPLES

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

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

# MORE ON SMART GOALS

## Guide for Goal Setting

from AnxietyBC

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

### How To Do It

#### STEP 1. IDENTIFY YOUR GOALS

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

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

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

#### Goals should be:

##### 1. Realistic

Make sure that your goals are realistic and attainable. If you set your goals too high, it will be too difficult to accomplish them and your motivation will suffer. For example, if you have never swam and, exceeding yourself, try 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.

##### 2. Concrete and Specific

## Guide for Goal Setting

from AnxietyBC

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

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

**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

Page 2 of 4

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

## SKILLS PRACTICE

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- Make one specific goal
  - write it down
- Check against **SMART** goals
- Thought records
- Mindfulness
  - 5 min twice/day

- **S**pecific
- **M**easurable
- **A**ttainable
- **R**elevant
- **T**imely

**CBTm** COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

This concludes the new material for this session.

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

- Practice for upcoming week:
  - 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.
  - Continue with completing a thought record, whenever you encounter a strong feeling (worry, discouragement, frustration, sadness).
  - Mindfulness practice 5 minutes x twice/day

## RESOURCES

**Anxiety Canada** [[www.anxietycanada.com](http://www.anxietycanada.com)]

**Here to Help** [[www.heretohelp.bc.ca](http://www.heretohelp.bc.ca)]

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

**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 also available on their website: <https://www.hopeforwellness.ca>

**CBTm** COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

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



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

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

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

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

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

THANKS!

# 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%)

## 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?

## Outcome

What happened?  
Was your prediction accurate?

## 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%)

# Behavioral Experiment

## 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 behaviors will need to be dropped?  
How would you know your prediction had come true?

*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*

## 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 me shake*

## Learning

What did you learn?  
How likely is it that your predictions will happen in the future?

*Although I feel nervous when speaking it's not as obvious to other people*

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

*50%*

# behavioural activation fun & achievement

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

### What is exposure used for?

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

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

Let's consider an example:

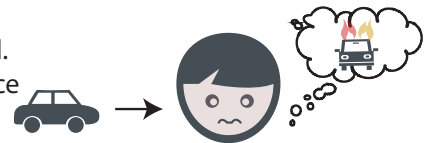
#### Step 1: Learning to be afraid of something

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



#### Step 2: The problem of fear

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.



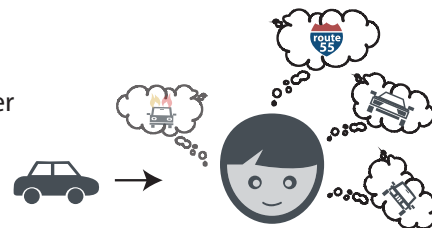
#### Step 3: Exposure therapy

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.



### 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



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 a Fear 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 a fear 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.

**Tips:**

- 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 level drops by about 50%. 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, DVD) 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.

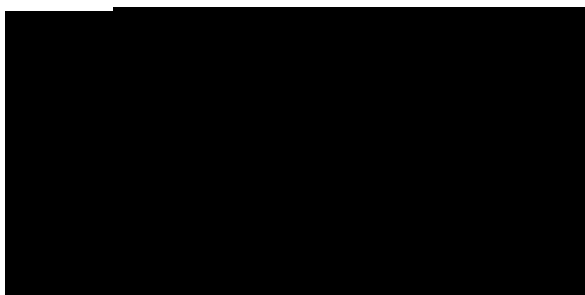
# Fun Activities Catalogue

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

1. Soaking in the bathtub
2. Planning my career
3. Collecting things (coins, shells, etc.)
4. Going for a holiday
5. Recycling old items
6. Relaxing
7. Going on a date
8. Going to a movie
9. Jogging, walking
10. Listening to music
11. Thinking I have done a full day's work
12. Recalling past parties
13. Buying household gadgets
14. Lying in the sun
15. Planning a career change
16. Laughing
17. Thinking about my past trips
18. Listening to others
19. Reading magazines or newspapers
20. Hobbies (stamp collecting, model building, etc.)
21. Spending an evening with good friends
22. Planning a day's activities
23. Meeting new people
24. Remembering beautiful scenery
25. Saving money
26. Card and board games
27. Going to the gym, doing aerobics
28. Eating
29. Thinking how it will be when I finish school
30. Getting out of debt/paying debts
31. Practising karate, judo, yoga
32. Thinking about retirement
33. Repairing things around the house
34. Working on my car (bicycle)
35. Remembering the words and deeds of loving people
36. Wearing sexy clothes
37. Having quiet evenings
38. Taking care of my plants
39. Buying, selling stocks and shares
40. Going swimming
41. Doodling
42. Exercising
43. Collecting old things
44. Going to a party
45. Thinking about buying things
46. Playing golf
47. Playing soccer
48. Flying kites
49. Having discussions with friends
50. Having family get-togethers
51. Riding a motorbike
52. Sex
53. Playing squash
54. Going camping
55. Singing around the house
56. Arranging flowers
57. Going to church, praying (practising religion)
58. Losing weight
59. Going to the beach
60. Thinking I'm an OK person
61. A day with nothing to do
62. Having class reunions
63. Going ice skating, roller skating/blading
64. Going sailing
65. Travelling abroad, interstate or within the state
66. Sketching, painting
67. Doing something spontaneously
68. Doing embroidery, cross stitching
69. Sleeping
70. Driving
71. Entertaining
72. Going to clubs (garden, sewing, etc.)
73. Thinking about getting married
74. Going birdwatching
75. Singing with groups
76. Flirting
77. Playing musical instruments
78. Doing arts and crafts
79. Making a gift for someone
80. Buying CDs, tapes, records
81. Watching boxing, wrestling
82. Planning parties
83. Cooking, baking
84. Going hiking, bush walking
85. Writing books (poems, articles)
86. Sewing
87. Buying clothes
88. Working
89. Going out to dinner
90. Discussing books
91. Sightseeing
92. Gardening
93. Going to the beauty salon
94. Early morning coffee and newspaper
95. Playing tennis
96. Kissing
97. Watching my children (play)
98. Going to plays and concerts
99. Daydreaming
100. Planning to go to school
101. Thinking about sex
102. Going for a drive
103. Listening to a stereo
104. Refurbishing furniture
105. Watching TV, videos
106. Making lists of tasks
107. Going bike riding
108. Walks on the riverfront/foreshore
109. Buying gifts
110. Travelling to national parks
111. Completing a task
112. Thinking about my achievements
113. Going to a footy game (or rugby, soccer,

- basketball, etc.)
114. Eating gooey, fattening foods
  115. Exchanging emails, chatting on the internet
  116. Photography
  117. Going fishing
  118. Thinking about pleasant events
  119. Staying on a diet
  120. Star gazing
  121. Flying a plane
  122. Reading fiction
  123. Acting
  124. Being alone
  125. Writing diary/journal entries or letters
  126. Cleaning
  127. Reading non-fiction
  128. Taking children places
  129. Dancing
  130. Going on a picnic
  131. Thinking "I did that pretty well" after doing something
  132. Meditating
  133. Playing volleyball
  134. Having lunch with a friend
  135. Going to the hills
  136. Thinking about having a family
  137. Thoughts about happy moments in my childhood
  138. Splurging
  139. Playing cards
  140. Solving riddles mentally
  141. Having a political discussion
  142. Playing cricket
  143. Seeing and/or showing photos or slides
  144. Knitting/crocheting/quilting
  145. Doing crossword puzzles
  146. Shooting pool/Playing billiards
  147. Dressing up and looking nice
  148. Reflecting on how I've improved
  149. Buying things for myself
  150. Talking on the phone
  151. Going to museums, art galleries
  152. Thinking religious thoughts
  153. Surfing the internet
  154. Lighting candles
  155. Listening to the radio
  156. Going crabbing
  157. Having coffee at a cafe
  158. Listening to the radio
  159. Getting/giving a massage
  160. Saying "I love you"
  161. Thinking about my good qualities
  162. Buying books
  163. Taking a sauna or a steam bath
  164. Going skiing
  165. Going canoeing or white-water rafting
  166. Going bowling
  167. Doing woodworking
  168. Fantasising about the future
  169. Doing ballet, jazz/tap dancing
  170. Debating
  171. Playing computer games
  172. Having an aquarium
  173. Erotica (sex books, movies)
  174. Going horseback riding
  175. Going rock climbing
  176. Thinking about becoming active in the community
  177. Doing something new
  178. Making jigsaw puzzles
  179. Thinking I'm a person who can cope
  180. Playing with my pets
  181. Having a barbecue
  182. Rearranging the furniture in my house
  183. Buying new furniture
  184. Going window shopping
  185. Thinking I have a lot more going for me than most people

Others:



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

## How To Do It

### STEP 1. IDENTIFY YOUR GOALS

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

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

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

#### Goals should be:

##### 1. Realistic

Make sure that your goals are *realistic* and *attainable*. If you set your goals too high, it will be too difficult to accomplish them and your motivation will suffer. For example, if you have never worked out, expecting yourself to go to the gym for 1 hour 4 times a week is **unrealistic**. A more realistic goal would be to go to the gym once a week for 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.

##### 2. 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
<ul style="list-style-type: none"> <li>• Eat better</li> </ul>	<ul style="list-style-type: none"> <li>• Eat at least one piece of fruit each day</li> </ul>
<ul style="list-style-type: none"> <li>• Go back to school</li> </ul>	<ul style="list-style-type: none"> <li>• Take a writing course at the community college in September</li> </ul>
<ul style="list-style-type: none"> <li>• Meet new people</li> </ul>	<ul style="list-style-type: none"> <li>• Sign up for a hiking course and have a conversation with a new person on every hike</li> </ul>
<ul style="list-style-type: none"> <li>• Save money</li> </ul>	<ul style="list-style-type: none"> <li>• Put \$100 in my savings account each month</li> </ul>
<ul style="list-style-type: none"> <li>• Travel</li> </ul>	<ul style="list-style-type: none"> <li>• Go on a trip to Paris for my 40<sup>th</sup> birthday</li> </ul>
<ul style="list-style-type: none"> <li>• Be less anxious</li> </ul>	<ul style="list-style-type: none"> <li>• Practice relaxation exercises once a day</li> </ul>
<ul style="list-style-type: none"> <li>• Practice exposure exercises</li> </ul>	<ul style="list-style-type: none"> <li>• Complete exposure exercises weekdays between 7 and 9 pm</li> </ul>

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

**STEP 2. BREAK GOALS INTO SMALLER STEPS**

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



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 a.m. 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 rain storm 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 (DVD, CD, book, treat) or engage in a fun activity (rent a movie, go to

the movies, go out for lunch or dinner, plan a relaxing evening, watch your favorite television program) 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 January 2022]

Welcome to the third Cognitive Behaviour Therapy with mindfulness class.

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

## GROUND RULES

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- Please respect everyone's confidentiality.
- Please do not share with the class personal stories of trauma or suicidal or violent thoughts.
- If you are distressed, please talk to staff members individually.

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

## OUTLINE FOR TODAY

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1. Mindfulness
2. Review Behaviour Therapy
3. Review of Skills Practice
4. Healthy Living
5. Sleep
6. Skills Practice

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

## MINDFULNESS MEDITATION – 5 MIN

- Observe without judgment
- Helpful for stress reduction
- Apps
  - Mindshift
  - Stop, Breathe, Think
  - Mindfulness Coach
- Anywhere, anytime
  - Observe breath, object, activity, sounds

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

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

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

We'll try one mindfulness exercise today, but there are also other choices that you can try on your own and find what works for you. To begin, sit or lie in a comfortable

position. Uncross your arms and legs. If sitting, rest your feet flat on the floor. Your eyes may be open or closed.

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

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

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

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

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

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

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

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

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

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

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

As a practice opportunity, can you pick one relaxation exercise and practice it twice a day for 5 minutes? We encourage you to try this

This practice has been incorporated into many types of treatment and can be useful

for managing stress, coping with anxiety and depression, and managing chronic pain.

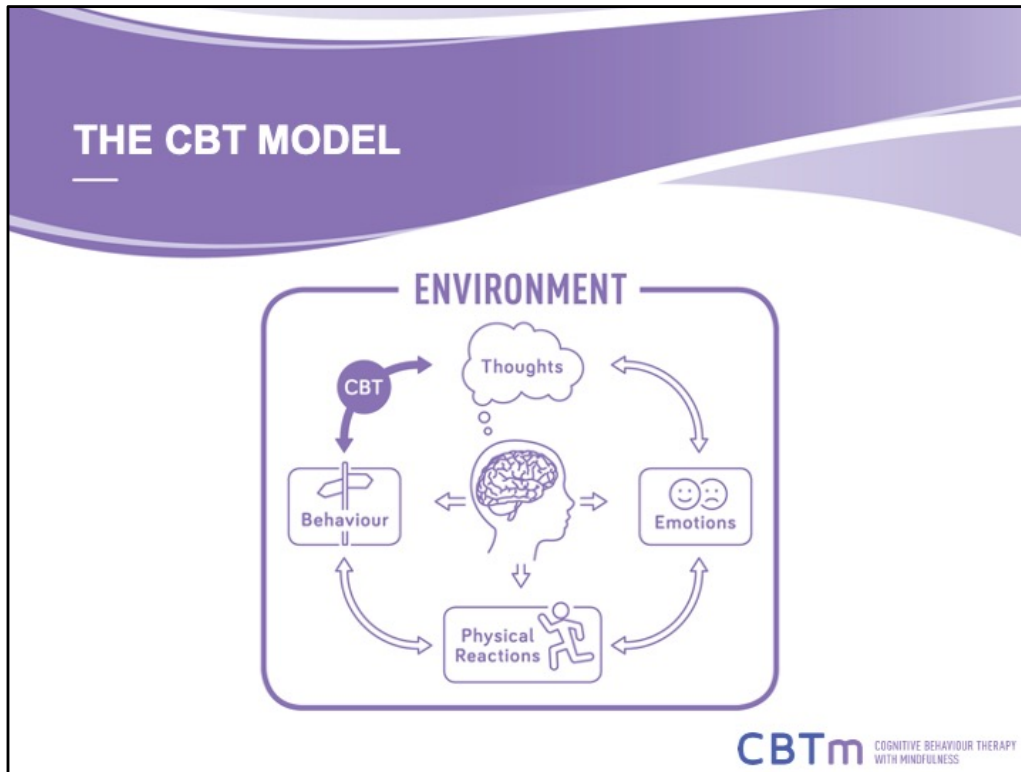


## OUTLINE FOR TODAY

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1. Mindfulness
2. Review Behaviour Therapy
3. Review of Skills Practice
4. Healthy Living
5. Sleep
6. Skills Practice

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



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

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

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

## BEHAVIOURAL THERAPY FOR DEPRESSION

- Begin doing things you used to enjoy, even if you no longer enjoy them as much or at all.
- Don't wait until you feel better to start doing things again!
- Record your mood when you are active and compare it to when you are not active.


As a brief review from last class:

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

## BEHAVIOURAL THERAPY FOR ANXIETY

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<ul style="list-style-type: none"> <li>• Avoid fearful situation             <ul style="list-style-type: none"> <li>• Short Term                 <ul style="list-style-type: none"> <li>- <b>Decrease</b> in anxiety</li> </ul> </li> <li>• Long term                 <ul style="list-style-type: none"> <li>- Increase in anxiety</li> <li>- Decrease in self-esteem</li> <li>- Decrease in function</li> </ul> </li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Face fearful situation             <ul style="list-style-type: none"> <li>• Short Term                 <ul style="list-style-type: none"> <li>- <b>Increase</b> in anxiety</li> </ul> </li> <li>• Long term                 <ul style="list-style-type: none"> <li>- Decrease in anxiety</li> <li>- Increase in self-esteem</li> <li>- Increase in function</li> </ul> </li> </ul> </li> </ul>
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COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

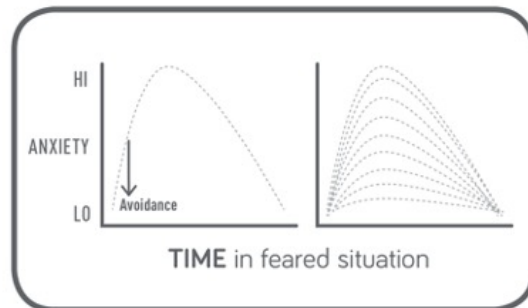
Here, we're continuing our review and this slide summarizes about the behavioural theory of anxiety.

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

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

## EXPOSURE

- Delay the avoidance
- If possible stay in the anxious situation for 30 min or until anxiety drops by 50%
- See handout



CBTm COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

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

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

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

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

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

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

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

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

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

## REVIEW OF SKILLS PRACTICE

- Make one specific goal
  - write it down
- Check against **SMART** goals
- Thought records
- Mindfulness – 5 min twice/day
- **S**pecific
- **M**easurable
- **A**ttainable
- **R**elevant
- **T**imely

**CBTm** COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

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

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

As a reminder, SMART stands for:

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

Measurable is the where, when and how often

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

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

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

## GROUP DISCUSSION

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- Review of skills practice from last week

Were you able to do any of the skills practice from last class? Congratulations! Keep up the good work.



## HEALTHY LIVING

- Basic principles
  - Exercise
  - Nutrition
  - Reduce caffeine
  - Reduce alcohol/drugs
  - Sleep
- Regular physical check-ups
- Choose one area of healthy living to work on at a time

CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

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

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

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

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

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

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

## EXERCISE

- Physical and mental health benefits
- Mental health benefits happen faster
- Exercise is the most underused antidepressant!
- Rate your mood before and after exercise

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

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

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

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

## NUTRITION

- Basic principles
  - Fruits, vegetables, protein, healthy fats
  - Minimize processed foods, especially sugars
  - Consider meeting with a dietitian
- Weight can be a major problem for people with anxiety and mood symptoms
  - Impact of illness, inactivity, medications...

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

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

- Most of us eat far too much sugar! This is a problem for mood regulation, as sugar causes energy spikes and drops, and can be a contributor to weight management issues.

- Try to minimize processed foods.

- Buying fresh fruit and vegetables can be expensive, but frozen is just as good and sometimes better.

- Getting enough protein does not have to mean eating meat, if you don't want to or can't afford it – nuts, nut butters, cheese, Greek yogurt, beans/legumes and eggs are all healthy sources of protein.

- Healthy fats come from fish, nuts, avocado

- When you eat well you feel better.

## NUTRITION

- Ways to access a Registered Dietitian
  - Find a Dietitian <https://wrha.mb.ca/nutrition/dietitian/>
  - Dial a Dietitian 1-877-830-2892
  - Call your local Access Centre to self-refer for an appointment
  - Contact your primary care provider
  - Private practice Registered Dietitians for those with extended insurance benefits <https://www.collegeofdietitiansmb.ca/find-a-dietitian/private-practice/>

There are several ways to access a Registered Dietitian:

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

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

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

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

Lastly, for those with extended insurance benefits there is a website listed here where you can find private practice Registered Dietitians <https://www.collegeofdietitiansmb.ca/find-a-dietitian/private-practice/>

## NUTRITION

- Health Education Groups
  - Health Management Group Program Guide <https://wrha.mb.ca/groups/>
    - Offers a variety of groups facilitated in-person (when possible), online or recorded sessions to view on your own schedule
  - Nutrition for Busy People - addresses basic nutrition principles with lots of practical tips
  - Craving Change is a registered program, learn more about your relationship with food
  - Women's Health clinic offers a weight-neutral approach to a healthy relationship with food 204-947-2422 ext 537 or email: [whcdietitian@womenshealthclinic.org](mailto:whcdietitian@womenshealthclinic.org)

CBTm COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

There are a number of Health Education Groups available to you. Online you can access the Health Management Group

- Program Guide <https://wrha.mb.ca/groups/> They Offer a variety of groups facilitated in-person (when possible), on-line or recorded sessions to view on your own schedule
- Another great resource is Nutrition for Busy People. It's a great group to address basic nutrition principles with lots of practical tips

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

Women's Health clinic offers Eat your Heart out a weight neutral approach to a healthy relationship with food, 204-947-2422 ext 537 or email [whcdietitian@womenshealthclinic.org](mailto:whcdietitian@womenshealthclinic.org).

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

## CAFFEINE

- Consider whether your caffeine intake may be affecting your anxiety, sleep, or mood (e.g. Irritability)
- Use caffeine in moderation and not close to bedtime
- Figure out how your body reacts to caffeine

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

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



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

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

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

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

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



## IMPORTANT THINGS TO KNOW ABOUT ALCOHOL

- Self-medication of anxiety and mood symptoms with alcohol is common
- Be careful with self-medication because this behaviour can lead to more alcohol use and increase mood and anxiety problems over time
- Binge drinking can lead to panic attacks and negative mood

**CBTm** COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

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

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

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

# MORE ABOUT LOW-RISK GUIDELINES FOR ALCOHOL USE

## For these guidelines, "a drink" means:

<b>Beer</b> 341 mL (12 oz) 5% alcohol content	<b>Cider/ Cooler</b> 473 mL (16 oz) 5% alcohol content	<b>Wine</b> 149 mL (5 oz) 12% alcohol strength	<b>Distilled Alcohol</b> 44 mL (1.5 oz) 40% alcohol strength
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**▶ YOUR LIMITS**  
Reduce your long-term health risks by drinking no more than:

- 10 drinks a week for women, with no more than 2 drinks a day most days
- 15 drinks a week for men, with no more than 3 drinks a day most days

Plan non-drinking days every week to avoid developing a habit.

**▶ SPECIAL OCCASIONS**  
Reduce your risk of injury and harm by drinking no more than 3 drinks for women or 4 drinks for men on any single occasion. Plan to drink in a safe environment. Stay within the weekly limits outlined above in these limits.

**▶ WHEN ZERO'S THE LIMIT**  
Do not drink when you are:

- taking medicine or using machinery and tools
- taking medicine or other drugs that interact with alcohol
- doing any kind of dangerous physical activity
- living with mental or physical health problems
- living with alcohol dependence
- pregnant or planning to be pregnant
- responsible for the safety of others
- making important decisions

**▶ PREGNANT? ZERO IS SAFEST**  
If you are pregnant or planning to become pregnant, or about to become, the safest choice is to drink no alcohol at all.

**▶ DELAY YOUR DRINKING**  
Research can help the way the body gets brain-healthy. Teens should speak with their parents about drinking. If they choose to drink, they should do so under parental guidance, never more than 1-2 drinks at a time, and never more than 1-2 times per week. They should plan ahead, follow local alcohol laws and consider the **safer drinking tip** listed in this brochure.

Youth in their late teens to age 24 years should never exceed the daily and weekly limits outlined in these limits.

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

**Low-risk drinking supports healthy lifestyles.**

## SAFER DRINKING TIPS

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

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

Visit our website to find out more!  
[www.ccsa.ca](http://www.ccsa.ca)

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

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

**Low-risk drinking supports healthy lifestyles.**

**CBTm** COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

Canadian Centre for Substance Use and Addiction

1-877-493-6222

www.ccsa.ca

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

## IMPORTANT THINGS TO KNOW ABOUT DRUGS

- Same issues with self-medication 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 treating physician or family doctor for more information

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

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

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

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

## IMPORTANT THINGS TO KNOW ABOUT CANNABIS

- Despite legalization, regular use of cannabis can lead to adverse health outcomes, including depression and anxiety (Canadian Centre on Substance Use and Addiction, 2020)
  - Evidence shows harmful effects of cannabis on mental health symptoms (Black, et al. 2019; Lowe, et al. 2019)
  - Lack of evidence showing that cannabis can improve mood or anxiety symptoms (Lowe, et al. 2019)
- Lack of research regarding risks of long-term use

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

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

The current evidence suggests that the regular use of cannabis for treatment of mental health symptoms, including anxiety and depression, can actually have more harmful effects rather than therapeutic. These harmful or negative effects can include heightened feelings of anxiety and increased symptoms of depression (Lowe et al, 2019).

Using non-medical cannabis is a personal choice that can have both short- and long-term effects on your health. If this topic is a concern for you or you have further questions, please consult with your treating physician and/or family doctor to get more information. We have also included recommended tips regarding Cannabis from CAMH in your handouts if you're interested.

# LOWER-RISK GUIDELINES FOR CANNABIS USE

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

### Recommendations

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

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

Reference: *American Journal of Public Health*, 2017

The LRCUG have been endorsed by the following organizations:



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Find the following guideline in your handouts.

## HEALTHY LIVING GOALS

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- Choose one area of healthy living to work on at a time
- Set yourself up for **SUCCESS!**
  - 90% likelihood of completing the task
- Choose something that you can easily do 3 times per week

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

# A REVIEW: TIPS FOR HEALTHY LIVING

## Tips for Healthy Living

from AnxietyBC

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.

## Tips for Healthy Living

from AnxietyBC

- **Learn to relax**  
Using relaxation strategies can help lower your overall tension and stress levels. However, relaxation is more than just sitting on the couch watching television. What makes a difference is "deep" relaxation, which is the opposite of what your body experiences when it is under stress. Mindfulness exercises are tools to help your mind and body relax.
  - **Manage your time**  
Learning to manage your time more effectively can reduce stress. Use a day planner to schedule your activities. This will help you see if you're taking on too much, and help you make time for the things you need to do. Remember to schedule some time for relaxation and fun activities each day.
  - **Reduce stimulants**  
Excessive caffeine can lead to sleep problems and heightened anxiety. Try to reduce your caffeine intake, which includes coffee, some teas, soda, and chocolate. If you drink a lot of caffeinated beverages, it's better to gradually reduce the amount of caffeine that you have every day. Nicotine is also a strong stimulant. In addition to the health benefits, quitting smoking may also leave you less prone to anxiety.
  - **Avoid alcohol and drugs**  
It is never a good idea to use alcohol or drugs to help you cope with anxiety – this just leads to more problems. If you have problems with anxiety, try to avoid using drugs and alcohol as a way to cope with negative feelings. If you think that you may have a problem with drugs or alcohol, talk to your doctor.
  - **Get a check-up**  
Make sure you are taking care of your body. See a doctor for regular check-ups.
  - **Reduce stress**  
Sometimes life's demands become too much. Stress can have a negative impact on your health. Look for ways to reduce stress. Deal with problems, lean on supports, and take time for self-care. For instance, plan some time for yourself each day to read a book, go for a walk, watch a favorite TV program, or relax. You can also reduce stress by giving yourself a little extra time to get to places so that you're not rushing. Try giving yourself an extra 5 minutes – it can make a big difference!
- 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. See [Guide for Goal Setting](#) handout.
  - **Be Patient:** These strategies can take time to have a positive effect. Hang in there and stick with it!

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

## SLEEP

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- 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

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

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



## SLEEP TIPS

- Associate bed only with sleep & sex
- Establish a regular relaxing bedtime routine
- Relaxation strategies - reduce body tension before attempting to fall asleep
- Avoid exposure to bright light close to bedtime (especially screens)

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

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

## SLEEP TIPS

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- Ensure sleep environment is relaxing, comfortable, dark, quiet
- Daily exercise
- Avoid large meals in the late evening
- Avoid caffeine, alcohol, and cigarettes

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

## SLEEP TIPS

- **Get up at the same time each morning (even if only a few hours of sleep)**
- **Maintain the same wake time on weekdays and weekends**
- Only go to bed when you feel tired enough to fall asleep
- Avoid naps or limit to 1 nap a day, no longer than 30 min

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

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

Finally, if you experience difficulties with sleep, we encourage you to avoid taking naps during the day, or to limit your naps to one short nap per day. Doing this will help to consolidate all of your sleep to one period time (usually nighttime for most people) instead of spreading your sleep throughout the day.

## SLEEP TIPS

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- If unable to fall asleep within 20 min, get out of bed (and the bedroom). Do something quiet and relaxing (no screens, no food, no cigarettes)
- Only return to bed when sleepy
- Repeat until able to fall asleep within 20 min

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

## SLEEP TIPS FOR SHIFT WORK

- Alternate sleep times and napping
  - 1 longer daytime sleep and smaller (20 min.) nap(s)
- Sleep environment modifications
  - e.g., black out curtains, white noise machines or fan
- Nutritional suggestions
  - if you're hungry before going to sleep, try having a light meal with healthy fats and low sugar, like eggs, nuts, and cheese, or toast with peanut butter

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

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

Your sleep environment should be cool, dark and quiet. It can be helpful to have a white-noise machine, especially during the day when there can be more

street noise around you. It's difficult to turn our phones off, but it's important to allow yourself undisturbed time for sleeping, so try utilizing voicemail and setting alarms, but keeping your phone on silent while sleeping, if possible. As for light disturbances, getting black-out curtains or using eye masks can help block out excess light. New pillows that support your body for chronic pain issues might also be a consideration.

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

## SLEEP TIPS FOR NIGHTMARES

- Talk to yourself rationally about the nightmare.  
Resist catastrophic thinking
- Have a plan for calming your mind and your body.  
Follow the plan. Make it predictable and repetitive so you do not have to problem-solve
- Include your partner in the plan
- Use “white noise” to mask sounds that could be activating

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

## IF SLEEP IS A PROBLEM FOR YOU...

- Review sleep tips
- Consider making one sleep goal
- Does the goal meet SMART criteria?
- Consider doing a sleep diary this week (handout),  
<http://sleepfoundation.org/sleep-diary/SleepDiaryv6.pdf>

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



# IMPROVING SLEEP

## Daily Sleep Diary

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

Your Name \_\_\_\_\_ The date of Day 1 \_\_\_\_\_

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

## 10 Rules for Improved Sleep Hygiene

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

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

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

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

## SKILLS PRACTICE

- Mindfulness – 5 min twice/day
- 2 goals for this week
- Include at least one Healthy Living goal
  - Exercise
  - Nutrition
  - Reduce caffeine
  - Reduce alcohol/drugs
  - Sleep

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

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

## RESOURCES

- **CBT-I Coach (app)**
- **WRHA Nutrition & Food Resources**
  - Health Management Group Program Guide: <https://wrha.mb.ca/groups/>
  - Dial a Dietitian: 1-877-830-2892
  - Nutrition for Busy People - <https://wrha.mb.ca/groups/nutrition-for-busy-people/>
- **Private practice Registered Dietitians** for those with extended insurance benefits <https://www.collegeofdietitiansmb.ca/find-a-dietitian/private-practice/>
- **Craving Change:** <https://www.cravingchange.ca>
- **Women's Health Clinic** – Call 204-947-2422 ext. 537 or email: [whcdietitian@womenshealthclinic.org](mailto:whcdietitian@womenshealthclinic.org)

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

## ADDITIONAL RESOURCES

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**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 also available on their  
website: <https://www.hopeforwellness.ca>

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



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

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

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

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

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

THANKS!

# Daily Sleep Diary

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

Your Name \_\_\_\_\_

The date of Day 1 \_\_\_\_\_

		Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
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<b>4</b>	After falling asleep, for how long were you awake during the night <u>in total</u> ?							
<b>5</b>	At what time did you finally wake up?							
<b>6</b>	At what time did you get up?							
<b>7</b>	How long did you spend in bed last night (from first getting in, to finally getting up)							
<b>8</b>	How would you rate the <u>quality</u> of your sleep last night? 1      2      3      4      5 V. Poor                      V. Good							



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

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<b>3</b>	Avoid alcohol around bedtime because although it can promote sleep at first, it can disrupt sleep later in the night.
<b>4</b>	Avoid eating a large meal immediately before bedtime, although a light snack may be beneficial.
<b>5</b>	Try to do regular (even mild) physical exercise if you are able, but avoid doing this in the 2 hours before bedtime.
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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 dietician, 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.



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Learning to manage your time more effectively can reduce stress. Use a day planner to schedule your activities. This will help you see if you’re taking on too much, and help you make time for the things you need to do. Remember to schedule some time for relaxation and fun activities each day.
- **Reduce stimulants**  
Excessive caffeine can lead to sleep problems and heightened anxiety. Try to reduce your caffeine intake, which includes coffee, some teas, soda, and chocolate. If you drink a lot of caffeinated beverages, it’s better to gradually reduce the amount of caffeine that you have every day. Nicotine is also a strong stimulant. In addition to the health benefits, quitting smoking may also leave you less prone to anxiety.
- **Avoid alcohol and drugs**  
It is never a good idea to use alcohol or drugs to help you cope with anxiety – this just leads to more problems. If you have problems with anxiety, try to avoid using drugs and alcohol as a way to cope with negative feelings. If you think that you may have a problem with drugs or alcohol, talk to your doctor.
- **Get a check-up**  
Make sure you are taking care of your body. See a doctor for regular check-ups.
- **Reduce stress**  
Sometimes life’s demands become too much. Stress can have a negative impact on your health. Look for ways to reduce stress. Deal with problems, lean on supports, and take time for self-care. For instance, plan some time for yourself each day to read a book, go for a walk, watch a favorite TV program, or relax. You can also reduce stress by giving yourself a little extra time to get to places so that you’re not rushing. Try giving yourself an extra 5 minutes – it can make a big difference!

**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. See **Guide for Goal Setting** handout.
- **Be Patient:** These strategies can take time to have a positive effect. Hang in there and stick with it!

# For these guidelines, “a drink” means:



**Beer**  
341 ml (12 oz.)  
5% alcohol content



**Cider/  
Cooler**  
341 ml (12 oz.)  
5% alcohol content



**Wine**  
142 ml (5 oz.)  
12% alcohol content



**Distilled Alcohol**  
(rye, gin, rum, etc.)  
43 ml (1.5 oz.)  
40% alcohol content

## ▶ YOUR LIMITS

Reduce your long-term health risks by drinking no more than:

- 10 drinks a week for women, with no more than 2 drinks a day most days
- 15 drinks a week for men, with no more than 3 drinks a day most days

Plan non-drinking days every week to avoid developing a habit.

## ▶ SPECIAL OCCASIONS

Reduce your risk of injury and harm by drinking no more than 3 drinks (for women) or 4 drinks (for men) on any single occasion.

Plan to drink in a safe environment. Stay within the weekly limits outlined above in **Your limits**.

## ▶ WHEN ZERO'S THE LIMIT

Do not drink when you are:

- driving a vehicle or using machinery and tools
- Taking medicine or other drugs that interact with alcohol
- Doing any kind of dangerous physical activity
- Living with mental or physical health problems
- Living with alcohol dependence
- Pregnant or planning to be pregnant
- Responsible for the safety of others
- Making important decisions

## ▶ PREGNANT? ZERO IS SAFEST

If you are pregnant or planning to become pregnant, or about to breastfeed, the safest choice is to drink no alcohol at all.

## ▶ DELAY YOUR DRINKING

Alcohol can harm the way the body and brain develop. Teens should speak with their parents about drinking. If they choose to drink, they should do so under parental guidance; never more than 1–2 drinks at a time, and never more than 1–2 times per week. They should plan ahead, follow local alcohol laws and consider the **Safer drinking tips** listed in this brochure.

Youth in their late teens to age 24 years should never exceed the daily and weekly limits outlined in **Your limits**.

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

Low-risk drinking supports healthy lifestyles.



# SAFER DRINKING TIPS

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

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



Low-risk drinking supports healthy lifestyles.

Session 3

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

Visit our website to find out more!

[www.ccsa.ca](http://www.ccsa.ca)



**Reference:**

Butt, P., Beirness, D., Gliksmann, L., Paradis, C., & Stockwell, T. (2011). *Alcohol and health in Canada: A summary of evidence and guidelines for low-risk drinking*. Ottawa, Ont.: Canadian Centre on Substance Abuse.

The Canadian Centre on Substance Abuse changes lives by bringing people and knowledge together to reduce the harm of alcohol and other drugs on society. We partner with public, private and non-governmental organizations to improve the health and safety of Canadians.



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Cette publication est également disponible en français.

# Canada's LOW-RISK ALCOHOL DRINKING GUIDELINES

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



Evidence. Engagement. Impact.

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



## Recommendations

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

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



CANADIAN RESEARCH  
INITIATIVE IN  
SUBSTANCE MISUSE

INITIATIVE CANADIENNE  
DE RECHERCHE  
EN ABUS DE SUBSTANCE

Session 3

Reference: *American Journal of Public Health*, 2017

The LRCUG have been endorsed by the following organizations:

ASSOCIATION  
MÉDICALE  
CANADIENNE



CANADIAN  
MEDICAL  
ASSOCIATION



CPHA + ACSP

CANADIAN CENTRE ON SUBSTANCE USE  
AND ADDICTION



Canadian Society of Addiction Medicine  
La Société Médicale Canadienne sur l'Addiction

camh  
Centre for Addiction and Mental Health  
Centre de toxicomanie et de santé mentale



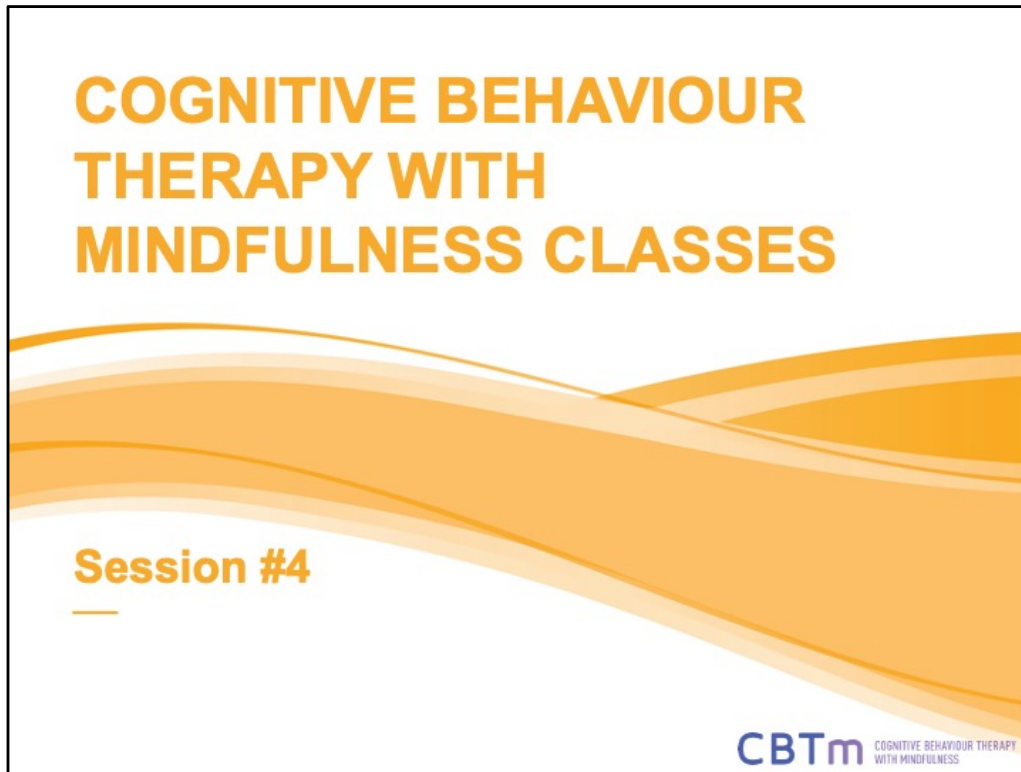
Canadian Centre  
on Substance Use  
and Addiction

Existence. Engagement. Impact.

Centre canadien sur  
les dépendances et  
l'usage de substances

152 ans. Engagement. Résultats.

Council of Chief Medical Officers of Health (in principle)



[Version date January 2022.]

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 see the empty textbox below the session number on the slide.]

## GROUND RULES

---

- Please respect everyone's confidentiality
- Please do not share with the class personal stories of trauma or suicidal or violent thoughts
- If you are distressed, please talk to staff members individually

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

## OUTLINE FOR TODAY

---

1. **Mindfulness**
2. Review of Skills Practice
3. Anger, Assertiveness, Self-Compassion
4. Problem-Solving
5. Skills Practice

In this session we will be practicing a mindfulness exercise, reviewing the skills practice from last session, and providing new materials on anger, assertiveness, and self compassion, as well as problem solving skills. Finally we will offer new recommendations for skills practice.

## MINDFULNESS MEDITATION – 5 MIN

- Observe without judgment
- Helpful for stress reduction
- Apps
  - Mindshift
  - Stop, Breathe, Think
  - Mindfulness Coach
- Anywhere, anytime
  - Observe breath, object, activity, sounds

As you have already learned, mindfulness is a type of meditation practice that involves awareness of the present moment without judgment. This is the practice of noticing your full experience without labeling the experience as good or bad, without holding on to 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 in any moment or activity by bringing your attention just to that moment, just to that activity. By now you have already practiced a number of different exercises. One type of mindfulness practice that is well suited to our topics for this session is a loving kindness exercise.

These exercises help to build compassion for yourself and others. Self compassion practices help to shift the negative judgments of oneself that often accompany anxiety and depression to change the cycle of thoughts, behaviours, and feelings. These practices can also help to build resilience. We will be discussing compassion in more detail later in this session. For now we encourage you to practice a loving kindness mindfulness exercise <see below>.

Please find a comfortable position, sitting or lying down. Letting your eyes close, fully or partially. Taking a few deep breaths to settle into your body and into the present moment. You might like to put your hand over your heart, or wherever it is comforting and soothing, as a reminder to bring not only awareness, but *loving* awareness, to your experience and to yourself.



Locating your breathing where you can feel it most easily. Feeling your breath move through your body, and when your attention wanders, feeling the gentle movement of your breath once again.

After a few minutes, starting to notice any *physical sensations* of stress that you may be holding in your body, perhaps in your neck, jaw, belly, or forehead.

Also noticing if you're holding some *difficult emotions*, such as worrying about the future or uneasiness about the past. Understand that every human body bears stress and worry throughout the day.

See if you can *incline* toward the stress in your body as you might incline toward a child or a beloved pet, with curiosity and tenderness.

Now inclining toward *yourself*, offering yourself goodwill simply *because* of the stress that you're holding in your body right now, as everyone holds stress in their bodies. Offering words of kindness and compassion to yourself, slowly and affectionately. For example:

*May I be safe*

*May I be peaceful*

*May I be kind to myself*

*May I accept myself as I am*

(pause)

Whenever you notice that your mind has wandered, returning to the sensations in your body and to the loving-kindness phrases.

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.

Finally, taking a few breaths and just resting quietly in your own body, knowing that you can return to the phrases anytime you wish.

After the practice – Do you feel <soothed> <distressed> <neutral>

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

## OUTLINE FOR TODAY

---

1. Mindfulness
2. Review of Skills Practice
3. Anger, Assertiveness, Self-Compassion
4. Problem-Solving
5. Skills Practice

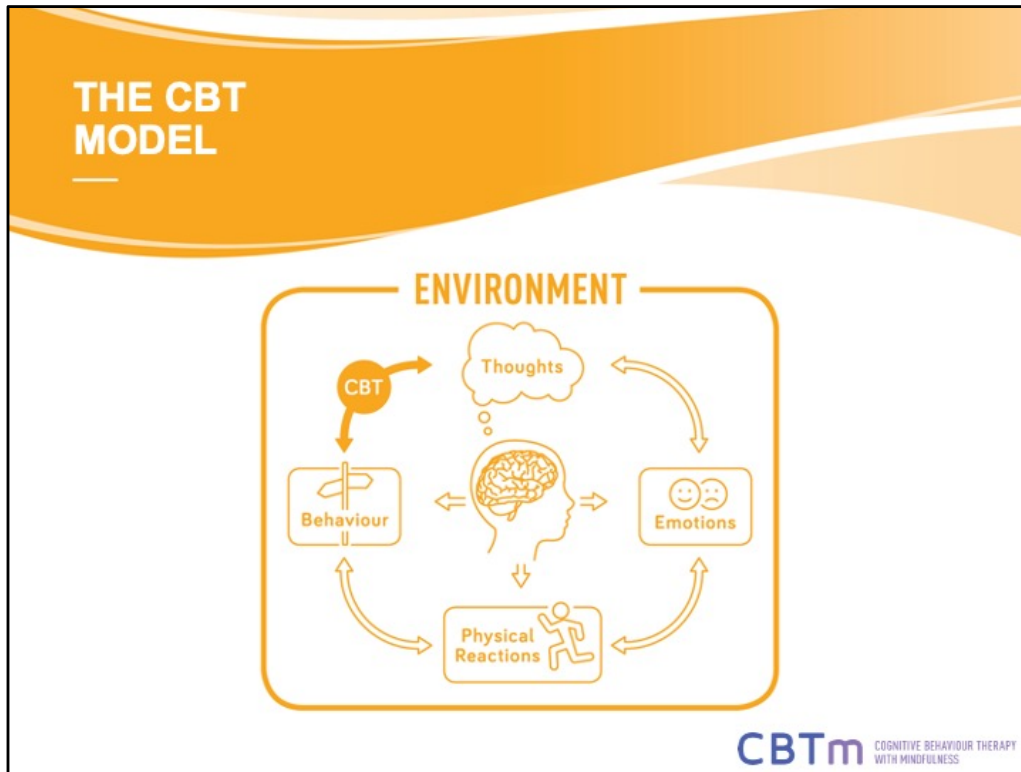
Let's reviewing the skills practice from last session

## REVIEW OF SKILLS PRACTICE

- Mindfulness - 5 min twice/day
- 2 goals
- 90% likelihood of completing the goals
- Include at least one healthy living goal:
  - Exercise
  - Nutrition
  - Reduce caffeine
  - Reduce alcohol/drugs
  - Sleep

How did skills practice go this past week? Have you found a mindfulness strategy that works for you? That fits 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?



You have seen this model four times by now, so we will not go into great detail again, but instead will go through an example with a situation where anger may occur and various angry/assertive/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 has been showing up late, taking extra long breaks, and not getting their work done. The 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 to help you would have to give up breaks, or work longer than usual.

If you feel anger, you may be having thoughts like – you are lazy, disrespectful, a jerk  
 Physical reactions might include increased heart rate, increased temperature  
 And a behaviour might be to “tell off” your coworker (aggression), which would serve to reinforce your thoughts and feelings.

It could also be that you respond to the same situation by saying (passive behaviour) – yes of course I can help you, and spending your evenings doing your coworkers extra work. The thought that may be reinforced could be – my time is not as valuable as theirs, physical reactions may include reduced energy and interest in hobbies, and emotions may include – deflated, unappreciated, or deflated.

Another option is choosing to act assertively in the situation. This can be tough when you're angry and can feel your heart beating. You might say "I can't do my work and yours too, I need to keep a balance for my own stress management." That's standing up for yourself but also respectful of your co-worker.

## OUTLINE FOR TODAY

---

1. Mindfulness
2. Review of Skills Practice
3. **Anger, Assertiveness, Self-Compassion**
4. Problem-Solving
5. Skills Practice

Let's reviewing move in to the new content for class: anger, assertiveness and self-compassion

## ANGER

- Normal human emotion
- Appropriate response to perceived injustice against oneself or others
- Anger itself not a problem, but how anger is expressed or dealt with can be
- **Consider: Relaxation strategy and/or a thought record**

Anger has a bad reputation, but it's a normal human emotion, just like sadness and anxiety.

Just as sadness is a normal response to loss and anxiety is a normal response to potential danger, anger is a normal response to perceived injustice against ourselves or someone else. It can be one of the most motivating emotions for action. Without anger, there would be no social justice movements, no protection of the vulnerable. Anger itself isn't a problem, but the way a person deals with anger can be a problem. Particularly if the degree of the anger does not fit well with the facts of the situation such as if you feel anger at someone who did not actually do anything hurtful to you.

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. Once you are able to examine evidence for and against a belief, then you can complete a thought record to help you decide whether to use other strategies to change the emotion, or if the situation is actually the problem then maybe you want to move on to the problem solving skills.

Review example thought record.

# USE A THOUGHT RECORD WHEN FEELING ANGRY

Beck Institute

**TESTING YOUR THOUGHTS (Example)**  
 This worksheet is a version of a Dysfunctional Thought Record.

What is the situation?

What am I thinking or imagining?

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

How does that thought make me feel? angry  sad  nervous  other (or rate 0-100 \_\_\_)

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

What makes me think the thought is true?

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

What's another way to look at this?

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

What's the best that could happen?

What will 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 him/her?

What should I do now?

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

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

**CBTm** COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

It can be very helpful to pay attention to the thoughts we have when we're angry. 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 well. Finding a way to moderate these thoughts can decrease the anger we feel in the moment. Our physical feelings can ease. And that can help us to make good choices about what to do (behaviour).



# ANGER

		RESPECT FOR SELF	
		+	-
RESPECT FOR OTHERS	+		
	-	Aggression Selfishness Narcissism	

CBTm COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

This diagram offers a basic framework to help you think about how you deal with situations where you could experience anger.

Across the top, the columns are representing whether you are respecting your own needs (left) or ignoring your own needs (right). Along the left side, the rows are showing whether you are respecting (top) or ignoring (bottom) other people's needs.

**The bottom left square** represents a situation where a person thinks only about their own needs when they feel angry (Respect for Self +), and ignores the needs of others (Respect for Others -). This indicates **Aggression**, when a person overvalues his/her own needs and ignores the needs of others.

# ANGER

		RESPECT FOR SELF	
		+	-
RESPECT FOR OTHERS	+		Passivity ↓ Depression, Anxiety
	-	Aggression Selfishness Narcissism	

CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

**The upper right square** represents a situation where a person thinks only about the needs of others (Respect for Others +) and ignores their own needs (Respect for Self -). This represents **Passivity**, when a person overvalues the needs of others and ignores 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 other peoples'.

# ANGER

		RESPECT FOR SELF	
		+	-
RESPECT FOR OTHERS	+	Assertiveness	Passivity ↓ Depression, Anxiety
	-	Aggression Selfishness Narcissism	

CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

**The upper left square** represents the healthiest way to deal with anger, **Assertiveness**, which means balancing your own needs with the needs of others in a way that is consistent with your personal values.

# ANGER

		RESPECT FOR SELF	
		+	-
RESPECT FOR OTHERS	+	Assertiveness	Passivity ↓ Depression, Anxiety
	-	Aggression Selfishness Narcissism	Passive Aggression

CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

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

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 in the assertiveness square (e.g., too many aggressive, passive, or passive-aggressive responses), consider making it a goal to build 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

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

How important we perceive our own and others' needs to be will influence how compassionate we feel towards our selves and others.

Compassion is a powerful force for reducing the negative effects that anger can have on our emotions and our behaviour. 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

- Assertiveness is a skill, not a personality type
- It's about controlling **your own** behaviour, not others'
- Does not mean always getting your way
- Start small, like with any new skill
- You don't have to be assertive all the time

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

It is important to know that assertiveness is a skill – anyone can learn to be more assertive with practice, even though it may come easier to some than others. 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 relationships, it does not mean that you will always get your way.

Like every skill that we present in this course, we encourage you to start small when building assertiveness 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 salesperson without apologizing.

## ASSERTIVENESS - BASIC SKILLS

- Body language/non-verbal behaviours
- Express your wishes clearly
- Get more information
- Try to hear others' wishes
- Check your own distortions/thinking traps
- It's okay to "buy time"
- "I" statements

When starting to build assertiveness there are a number of things to be mindful of. Assertive communication is about both what you say as well as how you say it. Tone of voice can say a very different message than the words you are speaking <use an example here of same statement in two different ways>. Body language will also communicate as much as your words. It is important to be aware of your posture and eye contact as you are having a conversation and the message that you are sending. <demonstrate>

Assertiveness often is related to asking for something you need/want or saying no. You may want to test your thoughts or get more information before responding automatically to a request so 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 or thought records if necessary, and decide what response you are comfortable with.

When communicating assertively, it is important to express your needs/wants clearly – don't assume they can read your mind! And 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

When making a change in how you interact with others it is common to experience some surprise and/or resistance from others in your life. As with any change – it is consistency that will lead to changes in your overall relationships and how you feel. Keeping this in mind, think carefully about when, where, how, and who you want to start practicing with. It is helpful to start with one relationship, 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 actually can be kept. <use an example here >

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



# MORE ON ASSERTIVENESS

## assertive communication

Assertiveness means expressing your point of view in a way that is clear and direct, while still respecting others. Communicating in an assertive manner can help you to manage conflict, to control anger, to have your needs better met, and to have more positive relationships with friends, family and others.

Assertiveness is a style of communication which many people struggle to put into practice, often because of confusion around exactly what it means. Sometimes it helps to start by exploring what assertiveness is not.

### Aggressive Communication

Disrespects others and/or overcomes with aggression, because it involves sticking up for yourself. But the two are actually quite different:

Aggression	Assertiveness
Force your needs or opinions onto others.	Express your needs clearly but respectfully.
Often involves bullying or pushing others around.	Others are treated with respect.
Only your needs matter.	Considers the needs of others as well as yours.
No compromise.	Often compromise.
Damage relationships.	Stronger relationships.
May lead to shouting or physical aggression.	Using clear language to get point across.
Damage self-esteem.	Builds self-esteem.

For example, imagine you are standing in line at the bank and someone who pushes in front of you. An aggressive response could be to grab them by the shoulder and tap loudly.

Hey! What makes you so important that you don't have to wait to be served here?

This might make you feel better in the short term, but you will probably also spend the rest of the hour feeling annoyed about the incident. Or perhaps the other person will shout back at you and the situation will get even worse, really leaving you in a bad mood.

A more assertive response could be to gently tap the person on the shoulder and say in a clear but respectful voice:

Excuse me, this is actually a line here. It would be better if you could wait your turn like the rest of us.

Chances are you will get a more positive response to this - perhaps the other person will apologise and move to the back of the line, or they may explain their reason for wanting to push in and you may feel happy to do them the favour. This may still respond badly - your assertiveness does not guarantee others will not be aggressive - but at least you will feel good knowing that you did your best and used assertive communication.

### Passive Communication

Another thing that assertiveness is not is passive communication. Passive communication is:

- Not speaking up for yourself, either because you think your views don't matter or for reasons like trying to please everyone or keep the peace.
  - Putting your needs last to the needs of others.
  - Allowing yourself to be bullied or ignored.
  - Often involves speaking quietly or with a hesitant voice, or with body language like looking at the floor or shrugging the shoulders.
  - You may understand your opinions well yourself, but you often don't really share them with other people.
- Passive communication can be damaging to your self-esteem, and also to relationships. If you use a passive communication style, others are more likely to ignore your needs, which may leave you feeling hurt or even angry with them for not treating you better.

### So Assertiveness is...

Think of assertiveness as the halfway point between passive and aggressive - just the right balance!

### Here are some tips for practicing being assertive:

- State your point of view or request clearly.
- Tell the other person how you feel as honestly as you can, and remember to listen to what they say as well.
- Tone and volume of voice that you use is as important as what you say. Speak in a normal conversational volume, rather than a shout or whisper, and make sure that you sound firm but not aggressive.
- Make sure your body language matches. Your stance will get mixed messages if you are speaking firmly while looking at the floor. Try to look the other person in the eye, stand tall, and relax your face.
- Try to avoid exaggerating with words like always and never. For example: You are 20 minutes late and it is the third time this week, rather than: You are always late!
- Try to speak with facts rather than judgments. For example: This report has important information missing, rather than: You have done a bad job again.
- Use "I" statements as much as possible, so tell the other person how you feel rather than how they are feeling. For example: When you move your chair on the table, I feel frustrated because I don't like the noise but don't want to come in and sit for you, rather than: You're such a pig!
- Practice often - assertiveness is a skill which requires you to practice in many different situations. And don't forget to praise yourself for your good efforts!



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Assertiveness skills are reviewed in this handout.

## SELF COMPASSION

1. Self-kindness vs. Self-judgment
2. Common humanity vs. Isolation
3. Mindfulness vs. Over-identification

<https://vimeo.com/65859796>

<http://self-compassion.org/>

CBTm COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

Compassion for self and others can support assertive communication, and reduce unhelpful anger, anxiety, and depression cycles.

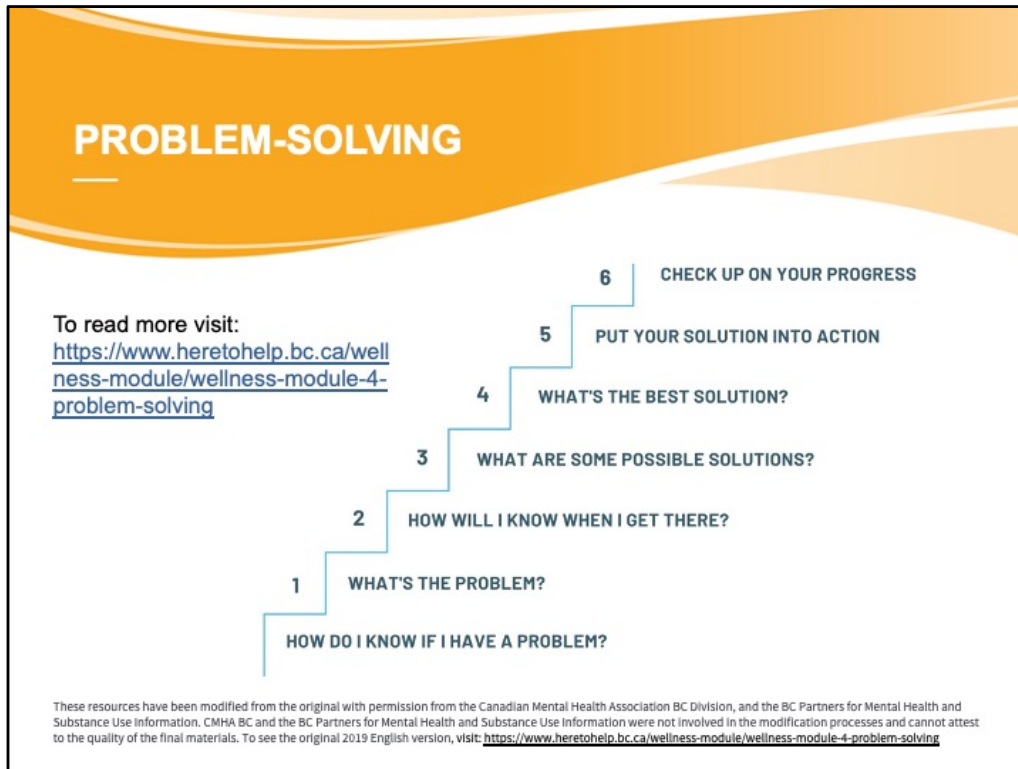
These are the three main components of self-compassion

- 1) Self kindness is about *how* you relate to yourself – with warmth and understanding rather than ignoring, criticizing, or judging.  
You can build this by recognize the painful experience and being gentle with that experience
- 2) 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.
- 3) The final component is using your mindfulness skills that you have been developing to counter the tendency to over-identify with our experience or suffering. This component is about experiencing our thoughts and emotions as they are, without suppressing or exaggerating the experience

You do this by using a non-judgmental, receptive mind state to observe what is, without being carried away by those experiences.

The links on this slide are for a video describing some ways to practice more self-

compassion and for a website devoted to the topic. You will see these again as Additional Resources at the end of this class.



Are you facing a tricky problem in your life? Do you need help finding solutions? We deal with problems almost every day in our lives. Fortunately, 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.

Why is problem-solving an important skill for mental health? Problems that don't go away can take their toll on our well-being. Left unsolved, a small problem can quickly become a bigger problem. We end up feeling frustrated, stressed or maybe even depressed and hopeless. Understanding and improving your problem-solving skills can help you deal more effectively with stressors in your life and increases confidence, making you feel more able to solve problems in the future.

Problem-solving may also have a number of additional benefits, these include: better functioning at work or school, more satisfying relationships with friends, family and co-workers, higher self-esteem, and higher overall life satisfaction.

What about problems that are not so easily fixed? These kinds of problems can create stress and impact on our health. We often cope by doing what we've done in the past. However, until we've come up with a solution that actually works, the problem never really goes away and can continue to create stress in our lives.

If you wish to review the material further please visit the [heretohelp.bc.ca](https://www.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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Pay attention to your feelings. This is a great time 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 how we're feeling.

Negative feelings often point to problems. When you pay attention to these feelings, you often recognize the problems 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. Look for any opportunities or challenges instead. If a problem seems less scary or challenging, 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, write that one down.

## STEP 2: WHAT'S THE PROBLEM?

In order to identify the problem, ask yourself these 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:**

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

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

#### Be as specific as possible

If your definition of the problem is vague, it's hard to know where your solution should start. For example, it might be hard to even 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, 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. Your solutions could also 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:

**S**pecific

**M**easurable

**A**ttainable

**R**ealistic

**T**ime-limited

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Choose a goal for your problem. The **SMART** principle may help you set goals:  
Goals should be

S pecific

M easurable

A ttainable

R ealistic and

T ime-limited

For example, "I will go to the gym every day" may not be realistic goal if you don't current exercise regularly. A more helpful statement might be, "I will go to the gym on Mondays, Wednesdays, and Fridays from 4:30pm to 5:30pm."

Create a SMART goal for your problem, following all of the principles, this will help us in the next step, where we come up with different solutions.

## STEP 4: WHAT ARE SOME POSSIBLE SOLUTIONS?

- Brainstorm solutions
- Don't judge your ideas, allow yourself the freedom to come up with as many ideas as possible
- There's no such thing as the "perfect" solution
- Try to think of as many solutions as possible

When it comes to difficult problems, it can be hard to come up with new and helpful solutions.

### Try Brainstorming

It's easier to find a good solution when you have a lot of solutions to choose from. Try to come up with as many different solutions as possible. 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!

Try not to get caught up with coming up with the 'right' solution as you brainstorm. This is not the time to decide whether your solutions are good or not. You are more likely to think of new solutions if you also include some wild ones.

Try to brainstorm as many different solutions to your problem as you can without judging them.

## STEP 5: WHAT IS THE BEST SOLUTION?

Use the following questions as a guide:

1. Will this solution help me reach my goals and solve my problem?
2. If I choose this solution how good or bad am I likely to feel?
3. How much time and effort does this solution involve?
4. Does this solution have more benefits than costs?

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Once you have a list of possible solutions, go through your ideas and pick the best solution for you—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 picking the best solution.

### **1. Will this solution help me reach my goals and solve my problem?**

If a solution doesn't 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 terrible, 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 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 it will create other

problems or stress for you or others, it likely isn't the best solution.

More tips for finding possible solutions:

Ask others for help!

Get new ideas from friends, family or professionals. This is an important aspect of social support that can help reduce stress. For more on social support, see Wellness Module 3: Social Support at [www.heretohelp.bc.ca](http://www.heretohelp.bc.ca).

Combine solutions

Some solutions that seem silly can work when combined with other ideas. For example, parents often need to problem-solve what to do with their kids all summer. By combining "send them to the moon" with "get someone else to take care of them," one solution might be, "enroll the kids in summer camp for two weeks."

## STEP 5: EXAMPLE

The problem is "I don't spend enough time on myself"

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."	

Here is an example of breaking down a solution in order to decide if the benefits outweigh the costs. In order to decide how. Here the problem is "I don't spend enough time on myself" and one of the possible solutions is "I could take a class at the 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.

## STEP 6: PUT YOUR SOLUTION INTO ACTION

- Step-by-step approach
- Tasks are more easily managed when they are broken up into smaller steps

After you've picked a solution, you need to make a plan of action! . If you write down the specific steps involved in carrying out your solution, you will be more likely to follow through and accomplish your goal. Once you lay 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.

## STEP 6: EXAMPLE

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

For example, Mandy has decided to get more confident about saying no to things. You can see examples of what she plans to do in this action plan, by breaking her solution into 5 smaller and more manageable steps:

1<sup>st</sup> Mandy borrows a book on confidence from the library

2<sup>nd</sup> Mandy reads the book

3<sup>rd</sup> Mandy starts practicing saying “no” in the mirror every day

4<sup>th</sup> Mandy decided to say “no” for the first time when her sister asked her to pick up an order for her

5<sup>th</sup> Mandy rewards herself for saying no by treating herself to a coffee from her favourite cafe

## 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

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. Be sure to reward yourself for a job well done.

If your solution isn't working, be kind to yourself. Remember, even the best plans don't always work as expected. You can re-evaluate to see where you can make changes to your plan.

You can always re-evaluate and make changes to our plan and solution. If you feel stuck, ask yourself the following questions: Did I define my problem correctly? Were my goals unrealistic? Was there a better solution? Did I carry out the plan of action properly? Has the situation changed?

You may need go through these steps more than once until you have a satisfactory solution. This is normal—especially for more difficult problems.

Keep using the techniques from the Problem-Solving step guide – they'll continue to help you. 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 to need to make as part of your work or study. The more you practice, the easier problem-solving will be!



# 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:

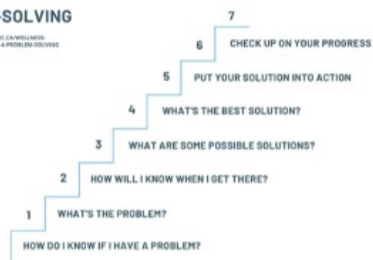
- Increased functioning at school and/or work
- More positive relationships with friends, family members and co-workers
- Builds our self-esteem
- Increases life satisfaction

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 would 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](http://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>



These resources have been modified from the original with permission from the Canadian Mental Health Association BC Division, and the BC Partners for Mental Health and Substance Use Information, CMHA BC and the BC Partners for Mental Health and Substance Use Information were not involved in the modification process and cannot attest to the quality of the final materials. To see the original 2019 English version, visit: <https://www.heretohelp.bc.ca/wellness-module/wellness-module-4-problem-solving>

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

## SKILLS PRACTICE

- Mindfulness 5 min twice/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

This week's skills practice, we're asking you to try

- Mindfulness 5 min twice/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

## 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](http://www.heretohelp.bc.ca/wellness-module/wellness-module-4-problem-solving)]

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

## ADDITIONAL RESOURCES

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

**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.reasontolive.ca>

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

**First Nations and Inuit Hope for Wellness Help Line** - (1-855-242-3310)

→ An online chat feature is also available on their website: <https://www.hopeforwellness.ca>

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



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

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

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

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

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

THANKS!

# 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.



Our 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 (eg. staying angry all day about someone else using up the last of the milk) or take out the anger on the wrong person (eg. getting angry at family members when it is your boss you are angry with).

## 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 just 'laugh your problems away,' you can often use humour to help you to 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 focussing 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.

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See website [www.cci.health.wa.gov.au](http://www.cci.health.wa.gov.au) for more handouts and resources.

# assertive communication

Assertiveness means expressing your point of view in a way that is clear and direct, while still respecting others. Communicating in an assertive manner can help you to minimise conflict, to control anger, to have your needs better met, and to have more positive relationships with friends, family and others.

Assertiveness is a style of communication which many people struggle to put into practice, often because of confusion around exactly what it means. Sometimes it helps to start by explaining what assertiveness is *not*:

## Aggressive Communication

People often confuse assertiveness with aggression, because it involves sticking up for yourself. But the two are actually quite different:



<b>Aggression</b>	<b>Assertiveness</b>
Force your needs or opinions onto others.	Express your needs clearly but respectfully.
Often involves bullying or pushing others around.	Others are treated with respect.
Only your needs matter.	Considers the needs of others as well as yours.
No compromise.	Often compromise.
Damages relationships.	Stronger relationships.
May lead to shouting or physical aggression.	Using clear language to get point across.
Damages self-esteem	Builds self-esteem

For example, imagine you are standing in line at the bank and someone else pushes in front of you. An aggressive response could be to grab them by the shoulder and say loudly:

*Hey! What makes you so important that you don't have to wait in line like the rest of us?*

This might make you feel better in the short term, but you will probably also spend the rest of the hour feeling annoyed about the interaction. Or perhaps the other person will shout back at you and the situation will get even worse, *really* leaving you in a bad mood.

A more assertive response could be to gently tap the person on the shoulder and say in a clear but respectful voice:

*Excuse me, there is actually a line here. It would be better if you could wait your turn like the rest of us.*

Chances are you will get a more positive response to this - perhaps the other person will apologise and move to the back of the line, or they may explain their reason for wanting to push in and you may feel happy to do them this favour. They may still respond badly - your assertiveness does not guarantee others will not be aggressive - but at least you will feel good knowing that you did your best and used assertive communication.

## Passive Communication

Another thing that assertiveness is *not* is passive communication. Passive communication is:

- Not speaking up for yourself, either because you think your views don't matter or for reasons like 'trying to please everyone or 'keep the peace'
- Putting your needs last to the needs of others
- Allowing yourself to be bullied or ignored
- Often involves speaking quietly or with a hesitating voice, or with body-language like looking at the floor or shrugging the shoulders
- You may undermine your opinions with passive phrases such as: *only if you don't mind*, or: *but it really doesn't matter that much to me*



Passive communication can be damaging to your self-esteem, and also to relationships. If you use a passive communication style, others are more likely to ignore your needs, which may leave you feeling hurt or even angry with them for not treating you better.

## So Assertiveness is....



Think of assertiveness as the halfway point between passive and aggressive - just the right balance!

## Here are some tips for practicing being assertive:

- State your point of view or request clearly.
- Tell the other person how you feel as honestly as you can, and remember to *listen* to what they say as well.
- Tone and volume of voice: *how* you say it is as important as *what* you say. Speak at a normal conversation volume, rather than a shout or whisper, and make sure that you sound firm but not aggressive.
- Make sure your body language matches. Your listener will get mixed messages if you are speaking firmly while looking at the floor. Try to look the other person in the eye, stand tall, and relax your face.
- Try to avoid exaggerating with words like always and never. For example: *You are 20 minutes late and it is the third time this week*, rather than: *You are always late!*
- Try to speak with facts rather than judgements. For example: *This report has important information missing*, rather than: *you have done a bad job again*.
- Use "I Statements" as much as possible, to tell the other person how you feel rather than be accusing. For example: *When you leave your dishes on the table, I feel frustrated because I don't like the mess but don't want to clean it up for you*, rather than: *You're such a pig!*
- Practice often - assertiveness is a skill which requires you to practice in many different situations. And don't forget to praise yourself for your good efforts!

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## Assertiveness

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-judgmental, 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?

### 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 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 apologize, 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 of 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 is 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 (lean forward, 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 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 (eg. 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.

## 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 of 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.

## 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.

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*See website [www.cci.health.wa.gov.au](http://www.cci.health.wa.gov.au) for more handouts and resources.*

## 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:

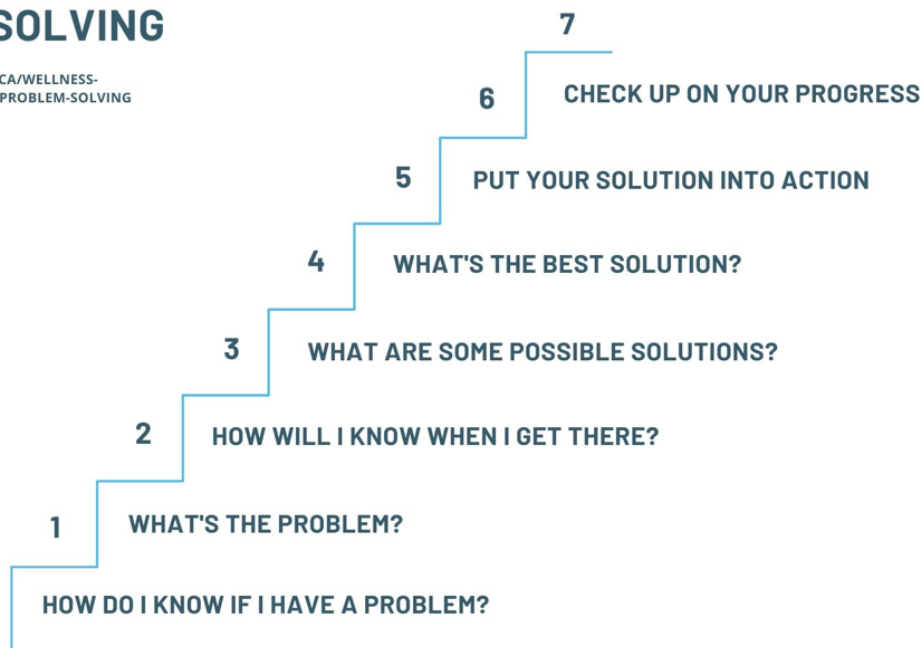
- Increased functioning at school and/or work
- More positive relationships with friends, family members and co-workers
- Builds our self-esteem
- Increases life satisfaction

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 would 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](http://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:

- Ask yourself if anything is different
- Maybe try another one of your solutions
- Check if you followed the steps in the problem-solving approach correctly

In any way the problem worked out, remember to be proud of yourself for taking these steps. If you keep using this approach it will get easier



[Version date: January 2022]

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 see the empty textbox below the session number on the slide.]

## GROUND RULES

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- Please respect everyone's confidentiality
- Please do not share with the class personal stories of trauma or suicidal or violent thoughts
- If you are distressed, please talk to facilitators individually

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

## OUTLINE FOR TODAY

---

1. **Mindfulness**
2. Skills Practice Review
3. What is Stress?
4. Coping with Stressful Experiences
5. Wellness Plan
6. Skills Practice

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 5 objects in the room
  - Focus your gaze on one spot in the room
  - Can you think of any more?
- But is grounding avoidance?

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WITH MINDFULNESS

Sometimes when we have stressful experiences or trauma, our mind goes back to those times and thinks about them more than we'd like. Grounding strategies are one type of mindfulness exercise that can help to bring you back into the present instead of feeling like you're back in the stressful experience. 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 cannot work for you. Keep trying and accept that it will not always be easy but 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.

Lead class in the “Tense and Release” grounding exercise.

*Find a comfortable position either seated in a chair with your head supported, or lying down. Your eyes may be open or closed. This grounding exercise involves tensing and releasing muscles in the body. If you have injuries or difficulties with chronic pain, just do the portions of this exercise that seem wise.*

*Take a slow breath in through your nose. Hold for a couple of seconds then breathe out fully.*

*Now pay attention to your body and how it feels, start with your feet. Squeeze all the muscles in your feet, curl your toes under as tight as you can. Now relax and exhale, let your feet go completely limp. Notice the difference between the feeling of tension and relaxation. Feel the tension flow out of your feet like water.*

*Next tense all the muscles in your legs. Squeeze your knees and thighs together and tense the muscles in your calves. Now completely let go and relax. Let your legs go completely limp. Imagine your legs are like jelly and relax all the muscles. Your legs might feel heavy or warm.*

*Now take a slow gentle breath in and hold, breathe out slowly.*

*Now make a fist with your left hand and squeeze. Imagine that you are holding a lemon and you're squeezing out all of the juice. Feel the tightness in your hand. And now let your hand go completely limp. Notice how your muscles feel when they're totally relaxed. Take a breath, hold and breathe out slowly. Now tighten all of the muscles in your entire left arm while clenching your fist. Hold. Now relax and let your arm go limp. Notice the difference between tension and relaxation. Let the tension completely drain out of your arm*

*<Repeat all with the right hand and arm>*

*Notice if both arms now feel loose, relaxed, heavy or warm. Lets move to your shoulders. Pull your shoulders up as high as you can. Try to touch your ears with your shoulders. Hold. Now let go and let your shoulders drop down. Let the tension in your shoulders melt away. Notice the sensation of relaxation.*

*Take a deep breath and hold it and breathe out.*

*Now pull in your stomach muscles. Imagine that someone put a bowling ball on your belly. Suck in all the muscles in your stomach. Hold. Let your stomach out and let out all the muscles in your belly relax. Notice that sensation of relaxation.*

*Take a deep breath and hold it and breathe out.*

*Now squeeze your face as much as you can. Wrinkle your nose. Wrinkle up your forehead and clench your jaw while pushing your lips together. Notice how tight the muscles in your face feel.*

*Hold. Now let go soften the muscles in your face and let your lower jaw drop down. Notice the sensation of relaxation.*

*Take a deep breath and hold it and breathe out.*

*Now bring your attention to your whole body. Imagine that your body is floating, light as air. Notice the sensation of relaxation where ever it is present in your body. Calm, warm, pleasant.*

*Take a deep breath and hold it and breathe out.*

*Continue to focus on your breathing and stay in this relaxed state as long as you like.*

*When you are ready slowly open your eyes and bring your attention back to your surroundings.*

After the exercise, ask participants what that experience was like, i.e. do they feel more relaxed, more stressed, no different? Validate all answers as normal and expected within a group of diverse individuals.

A reminder that you can practice mindfulness with many regular daily activities. For example, you can walk mindfully – noticing each step, your feet making contact with the ground, the sounds of your footsteps, the connection between the movement of your feet, ankles, legs, knees, the feel of your foot inside your shoe, and so on. You can wash the dishes mindfully, being aware of the bubbles, water temperature, motions, and sounds.

## OUTLINE FOR TODAY

---

1. Mindfulness
2. Skills Practice Review
3. What is Stress?
4. Coping with Stressful Experiences
5. Wellness Plan
6. Skills Practice

Next we'll review the skills practice that was assigned at the end of Class 4.

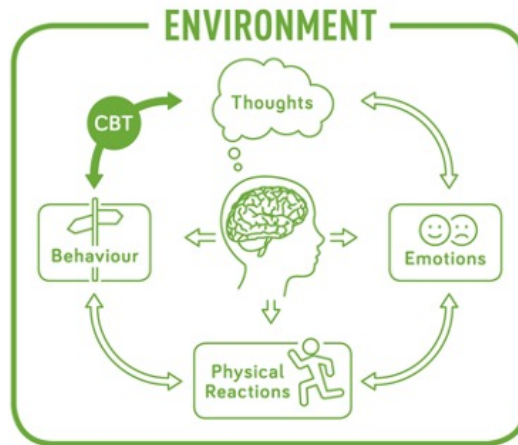
## SKILLS PRACTICE REVIEW

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- Mindfulness 5 min twice/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 3 **SMART** goals

Let's review the skills practice from Class 4.

## THE CBT MODEL



CBTm COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

Review the diagram with the group.

Consider giving a trauma-related example:

- Driving again after a car accident
- Visiting the hospital again after a loved one was very ill or died

You could ask participants what they think “thoughts, emotions, physical reactions and behaviours” might be.

## OUTLINE FOR TODAY

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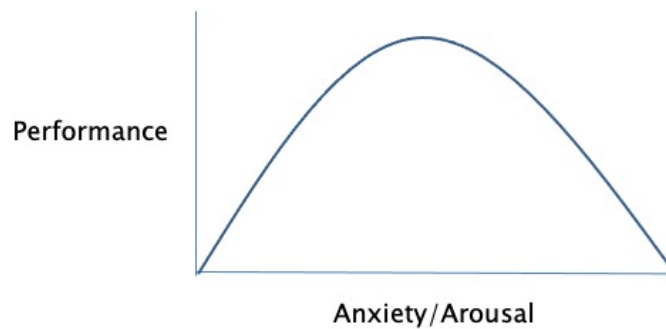
1. Mindfulness
2. Skills Practice Review
3. **What is Stress?**
4. Coping with Stressful Experiences
5. Wellness Plan
6. Skills Practice

Next we'll talk about stress – what it actually is and what happens when we're stressed.

# STRESS

Some stress can be good. Too much can be debilitating.

## Yerkes-Dodson curve



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WITH MINDFULNESS

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 just the right amount of stress about the test? Participants might comment that they would study/work/not procrastinate.

What would happen if you had no stress at all about this test? You would probably procrastinate, watch an extra hour of Netflix, stay up late, don't study much or at all.

What would happen if you had too much stress about the test? You might feel overwhelmed, paralyzed, not sure where to start, have thoughts about failing the test or doing poorly (catastrophic thinking, fortune telling). The day of the test, you might have trouble concentrating or remembering information because of stress.

This graph represents exactly what we just talked about. The top of the curve is the "sweet spot", the best level of stress to get optimal performance. Too much or too little will impair function.



## FIGHT, FLIGHT OR FREEZE RESPONSE

Our bodies all react similarly in response to something threatening.  
The purpose of this response is to help us avoid harm.

**CBTm** COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

During human history, the stress response developed in ourselves and other species as an **“automatic”** way of helping us protect ourselves from danger. No Thought Necessary! The stress response was very useful when facing a threat to our physical safety, such as a predator (e.g. sabre-toothed tiger). The stress response has also been called the flight, flight or freeze response, because when our body perceives a threat it prepares itself to do one of three things: stay and fight the threat, get away from the threat, or brace ourselves to minimize impact (like a mouse going limp when grabbed by an owl, it might still get away if given a chance). It is important to remember that we don't choose to have a fight, flight or freeze response. The body 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 COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

However, most of the threats we face in modern society are social or psychological threats, such as loss of a job, break up of a relationship, being humiliated in front of others or bullied by others, etc. The stress response isn't great at helping us deal with these types of threats. In fact, sometimes that rush of adrenaline makes it harder to think and problem-solve. But it's what we've got. Sometimes, the stress response gets triggered in situations where there is no real threat, but something about that situation reminds us of a previous situation where there was a threat. We can think of this like a "false alarm", like having a smoke detector go off when there's no fire. If this happens too frequently or severely, it can start to get in the way of your life and develop into more severe forms of stress.

## FIGHT, FLIGHT OR FREEZE RESPONSE

- After very stressful experiences, all sorts of memories, places, people, and things can bring up reminders and 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 COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

Let's take an example where there's been a home invasion. As the perpetrator is getting away, the homeowner catches a glimpse of his blue shirt. Now, it might be months, even years later, 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 home invasion.

Can anyone think of other examples? Pause to allow participants to comment. If no comment from participants, could also mention car accident – now don't drive anymore or only with a friend or only in the city, etc.

What do people think the phrase "you have to get back on the horse" means? Pause for participant comments.

## OUTLINE FOR TODAY

---

1. Mindfulness
2. Skills Practice Review
3. What is Stress?
4. Coping with Stressful Experiences
5. Wellness Plan
6. Skills Practice

Next we'll discuss different ways to 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

When faced with stressful experiences, important things to remember are:

1. Remember the stress response, so you understand what's happening in your body. For example, if you're in a stressful situation and you notice that your heart is beating faster and you feel sweaty or flushed, it's because of the stress response. It's what your body is designed to do. These physical changes are not dangerous. There are some other things that can be helpful, which we'll now review.
2. Common Thinking Traps – Going back to Class 1, we all have some shortcuts in our thinking that can lead us to see situations as overly negative or threatening.

# THINKING TRAPS ABOUT STRESSFUL EXPERIENCES

## Thinking Traps about Stressful Experiences

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. Those with anxiety and depression tend to fall into thinking traps more often, which can trigger and maintain anxiety and depression. Adapted from [www.beechbain.co.uk](http://www.beechbain.co.uk)

Thinking Traps	Examples
<b>Overgeneralising</b> 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".	Last time I drive downtown I made stupid errors. This always happens to me! I never manage this stuff well.
<b>All or Nothing Thinking (Black and White thinking)</b> Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in black and white terms see a small mistake as a total failure.	I can never let my guard down. People are bad. Nobody can be trusted.
<b>Fortune Telling</b> Predicting that something bad will happen, without any evidence.	If I'm not in full control, people will get hurt.
<b>Emotional Reasoning</b> 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.
<b>Labeling</b> Saying only negative things about yourself or other people.	My organisation doesn't support me. My supervisor is a jerk! I made a mistake therefore I'm incompetent!
<b>"Should" Statements</b> 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!
<b>Mind Reading</b> 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.
<b>Mental Filter</b> Focusing only on the negative parts of a situation and ignoring anything good or positive.	I've driven for 20 years but had one serious accident. I am a horrible driver.
<b>Catastrophic Thinking</b> Exaggerating the importance of negative things, believing the worst case scenario, or thinking something is unbearable or impossible when it isn't that bad.	Because I feel stressed/overwhelmed now, I won't ever be able to drive again.
<b>Personalization</b> You see yourself as the cause of some negative external event for which, in fact, you were not primarily responsible.	The family looks grief-stricken. They must blame me for what happened.

We are going to review the thinking traps that were first presented in Class 1, as these might show up related to stressful experiences.

## COMMON THINKING TRAPS

- Overgeneralization
- All or Nothing Thinking
- Fortune Telling
- Emotional Reasoning
- Labelling
- Should Statements
- Mind Reading
- Mental Filter
- Catastrophic Thinking
- Personalization

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 stress worse.

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: 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** (also called Black and White Thinking): Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in black and white terms see a small mistake as a total failure. Example: I 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 will get hurt.

**Emotional Reasoning:** Believing that bad 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 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: My friend didn't stop to say hello. If I take a few days off to deal with this, my coworkers will think I'm weak.

**Mental Filter:** Focusing only on the negative 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 matters.

**Catastrophic Thinking:** Exaggerating the importance of negative things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn't that bad. Example: Because I feel stressed/overwhelmed now, I won't be able to do this job/course.

**Personalization:** You see yourself as the cause of some negative external event for which, in fact, you were not primarily responsible. Example: My partner/child/parent/friend is unhappy. It must be my fault. I'm not a good enough partner/parent/son/daughter/friend.



# THOUGHT RECORD ABOUT A VERY STRESSFUL EXPERIENCE

Beck Institute

## TESTING YOUR THOUGHTS (Example)

This worksheet is a version of a Thought Record.

What is the situation? Involved in car accident where a woman died

What am I thinking or imagining? It's my fault that she died.

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 0-100 90)

What makes me think the thought is true? I was driving the other vehicle and tried to perform CPR but she didn't make it.

What makes me think the thought is not true or not completely true? I did not cause the accident. I did everything I knew how to do.

What's another way to look at this? I tried my best to save her life, but her injuries were severe.

What's the worst that could happen? Would I still live through it? The family might blame me. 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.

What will probably happen? The family will not focus on my but their own grief.

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 continue functioning.

What would I tell my friend Pat if this happened to him/her? That I'm proud they tried to save her and it wasn't their fault.

What should I do now? Talk to my partner, going for a walk, listening 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)

Next we are going to review how to use the thought record when dealing with a very 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 COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

Let's review one of the core tools of CBT that we learned in Class 1 - the thought record (Testing Your Thoughts worksheet), which is an exercise in balanced thinking. This exercise helps you 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 TYT worksheet provided in handouts with the class.)

- What is the situation?  
*involved in a car accident where a woman died*
- What am I thinking or imagining?  
*it's my fault that she died.*
- 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, strong, medium, very strong (or rate 0-100\_\_\_\_)

Next, we'll talk about feelings related to this 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?

Let's talk about thoughts:

- What makes me think the thought is true?  
*I was driving the other vehicle and tried to perform CPR but she didn't make it.*
- What makes me think the thought is not true or not completely true?  
*I did not cause the accident. I did everything I knew how to do.*
- What's another way to look at this?  
*I tried my best to save her life, but her injuries were severe*

## 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'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.*
- What will probably happen?  
*The family will not focus on me but their own grief.*

## 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 him/her?

CBTm COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

- 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 continue functioning*
- What would I tell my friend if this happened to him/her?  
*What I would tell my friend Pat if this happened to her, that I'm proud they tried to save her and it wasn't their fault*

## 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 strong, medium, very strong (or rate 0-100\_\_\_\_)

CBTm COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

- What should I do now?  
*Talk to my partner, 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.

This is the thought record. It is one tool used in cognitive therapy.

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

**COMMON BEHAVIOURS**

**Helpful:**

- Sticking to usual routine
- Healthy living strategies
- Seeking social support

**Unhelpful:**

Avoidance

- Behavioural
- Chemical
- Mental
- Emotional...

**CBTm** COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

After a stressful experience, there are many different types of behavioural responses. Some tend to be more helpful and some less helpful.

Ask participants to suggest helpful responses (list should come up one by one).

Ask participants to suggest potentially unhelpful responses. The list should come up one by one – ask participants to give an example of each type of avoidance; provide an example if no one can think of one.

Behavioural - avoiding certain places, people or things because of fear. E.g. 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.

Chemical - drinking alcohol or using drugs to reduce the intensity of difficult emotions (anger, sadness, fear)

Mental - Mentally checking out/zoning out. You still go to places and do things, but you're not really there. Binge-watching netflix for days at a time so you don't have to think about stressful things.

Emotional - Distancing yourself from friends and loved ones so you don't have to feel anything at all. Avoiding conversations that might lead to feeling emotions.



## AVOIDANCE

- Avoid fearful situation
  - Short Term
    - Decrease in anxiety
  - Long term
    - Increase in anxiety
    - Decrease in self-esteem
    - Decrease in function

Remember in Class 2 we talked about how it's natural to want to avoid situations that trigger the fear response, and it brings a short-term sense of relief. However, if you avoid too much it can increase anxiety over time and limit your ability to do things you want.

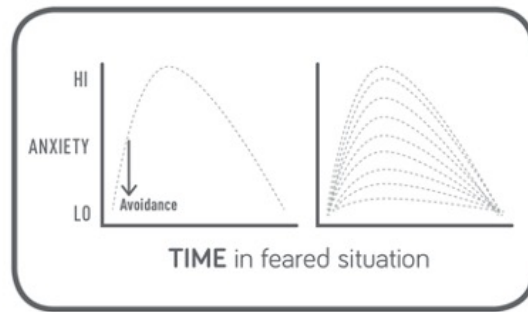
## AVOID AVOIDANCE

- 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

We also discussed in Class 2 that facing situations that feel threatening but are actually safe can help us cope well and reduce 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.

## EXPOSURE

- Facing your fears in a planned and repeated manner to decrease anxiety
- Start with fears that are ≈3-4 out of 10
- Delay the avoidance
- If possible stay in the anxious situation for 30 min or until anxiety drops by 50%



**CBTm** COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

Remind participants that the stress response is one of our body's natural responses and is not dangerous. If you don't avoid the false alarms, over time they have less and less impact on you.

## 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?

If you avoid, 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 fled the situation.

How about fear of dogs? Explain imaginal exposure too

## BUILDING AN APPROACH LADDER

- Mugging on Harris Street
- Blue shirt example
- Other examples?

This same concept applies to facing reminders of a past stressful experience. For example, let's consider a person who had a traumatic encounter with a mugger on a certain street, e.g. Harris St. A way to gradually face this fear response might include:

1. View the building on Google maps – keep viewing repeatedly for set amounts of time (e.g. 20-30 min) 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 for 20-30 min or until anxiety starts to come down. Repeat until anxiety is minimal.
3. Go to Harris St. and look at the building while sitting in your car.
4. Go to Harris St. with a friend and walk around.
5. Go to Harris St. alone and walk around

Remember, we don't take this on because we "should". We take it on because it would make our lives easier if we had more comfort being certain places, doing certain activities or interacting with certain people.

## SMART GOALS

- Specific**
- Measurable**
- Attainable**
- Relevant**
- Timely**

Consider how you would create a SMART goal for each step of an Approach Ladder.

## SMART GOALS

<input type="checkbox"/> <b>Specific</b>	Begin Harris St. exposures
<input type="checkbox"/> <b>Measurable</b>	Daily practice for 20 min
<input type="checkbox"/> <b>Attainable</b>	Gradually ↑ difficulty
<input type="checkbox"/> <b>Relevant</b>	Important for my work
<input type="checkbox"/> <b>Timely</b>	Starting today

**CBTm** COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

A SMART goal related to the bad 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 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: today.

If you know that you are avoiding or reactive in situations that remind you of a past stressful experience, it can help to spend some time working out an Approach Ladder to deal with these reminders when you need to.

## OUTLINE FOR TODAY

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1. Mindfulness
2. Skills Practice Review
3. What is Stress?
4. Coping with Stressful Experiences
5. **Wellness Plan**
6. Skills Practice


Next we'll focus on building an individualized wellness plan.



# MAKING A WELLNESS PLAN

## WELLNESS PLAN

<b>STEP 1:</b> Warning signs (thoughts, images, moods, behaviours) that indicate I'm feeling overwhelmed by stress 1. _____ 2. _____ 3. _____	<b>STEP 4:</b> Three people I can ask for help 1. Name _____ Phone _____ 2. Name _____ Phone _____ 3. Name _____ Phone _____
<b>STEP 2:</b> Three coping strategies - things I can do myself to take my mind off my problems 1. _____ 2. _____ 3. _____	<b>STEP 5:</b> 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: _____
<b>STEP 3:</b> 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** COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

You can use this handout to record the details of your wellness plan.

## WELLNESS PLAN

- How I know when I am not doing well/at risk of acting in ways that are harmful to myself or others:

1)\_\_\_\_\_ 2)\_\_\_\_\_ 3)\_\_\_\_\_

- 3 coping strategies:

1)\_\_\_\_\_ 2)\_\_\_\_\_ 3)\_\_\_\_\_

- 3 people I can call (to just hang out or to talk to):

1)\_\_\_\_\_ 2)\_\_\_\_\_ 3)\_\_\_\_\_

**CBTm** COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

During times of high stress, it can be harder 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 steps that we can use to help manage our stress, moving from strategies that we can try on our own, to community mental health resources if the symptoms do not subside and we are feeling overwhelmed and need additional help. The plus side of creating a wellness plan when we are relaxed is that we do the thinking and problem-solving in advance, and therefore we don't have to do the thinking during times when it can be harder to consider what to do next. Let's try creating a plan right now. \*Go through each step as participants privately write down their responses\*

## WELLNESS PLAN SUPPORT RESOURCES

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### 24/7 Help Resources:

- Crisis Response Centre – 817 Bannatyne Ave.
- Mobile Crisis Unit – 204-940-1781
- Klinik Crisis Line – 204-786-8686

We encourage you to take this plan home and keep working on it. When it's finished, take a picture of it with your phone so you have it with you wherever you go.

If you ever find yourself in serious distress, there are crisis resources that can be helpful.

## MENTAL WELLNESS VS. MENTAL ILLNESS



- You may be familiar with this graphic from R2MR
- It points to a good way to evaluate your own, and your buddies', stress levels
- What changes do you need to make if you're "yellow" or "orange"?

CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS

Let's talk about the zones in more detail:

In the green "healthy" zone, you're feeling your best, your energy is good, 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 you've begun to eat more fast food, or you are skipping meals. You may be more irritable and not sleeping as well on occasion. However, your stress levels are still manageable and with some effort, you can move yourself back in to the green zone.

In the orange "injured" zone, you are perhaps feeling down or worried most of the time. Your friends and family may comment on your mood. You may isolate yourself more. You may feel overwhelmed and not sure what to do to change things. In this zone, you will want to seek help, either from family doctor, EAP or other resources to help you find ways to manage better. Being in the orange zone is a sign that you need to find some resources in order to make changes. Being in the orange zone may point to a need for a short-term change or reduction in stress or responsibilities in some area in order to manage better and work on moving back into the green zone.

In the red "ill" zone, a person is unable to manage their situation without assistance

from mental health services or other professional supports. They may be unable to work.

## SKILLS PRACTICE

- Pay attention to any false alarms.
- 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 it with you wherever you go.
- Do a mindfulness exercise for 5 minutes every day.
- The next time you feel stressed, 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 own wellbeing
  - Refer to your Wellness Plan

The skills practice items are our suggestions for how you can make this information useful in your life to cope with stress and build greater resilience.

## ADDITIONAL RESOURCES

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

**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.reasontolive.ca>

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

**First Nations and Inuit Hope for Wellness Help Line** - (1-855-242-3310)

→ An online chat feature is also available on their website: <https://www.hopeforwellness.ca>

**CBTm** COGNITIVE BEHAVIOUR THERAPY  
WITH MINDFULNESS

You might be thinking “I’m feeling better but want to keep working on this and don’t know what to do next.” Here are some 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).
- You may need to schedule time for skills practice to keep up the momentum, or to not have important self-care get crowded out in a busy schedule.
- You may want to discuss your self-care plan or additional steps in treatment with your physician or a mental health clinician.

[Facilitators can add additional self-help resources that may be useful for their population]



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

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

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

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

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

THANKS!



## Thinking Traps about Stressful Experiences

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. Those with anxiety and depression tend to fall into thinking traps more often, which can trigger and maintain anxiety and depression. *Adapted from [www.heretohelp.bc.ca](http://www.heretohelp.bc.ca).*

Thinking Traps	Examples
<p><b>Overgeneralizing</b> 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”.</p>	<p>Last time I drive downtown I made stupid errors. This always happens to me! I never manage this stuff well.</p>
<p><b>All or Nothing Thinking</b> (Black and White thinking) Seeing things as only right or wrong, good or bad, perfect or terrible. People who think in black and white terms see a small mistake as a total failure.</p>	<p>I can never let my guard down. People are bad. Nobody can be trusted.</p>
<p><b>Fortune Telling</b> Predicting that something bad will happen, without any evidence.</p>	<p>If I'm not in full control, people will get hurt.</p>
<p><b>Emotional Reasoning</b> 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><b>Labeling</b> Saying only negative things about yourself or other people.</p>	<p>My organization doesn't support me. My supervisor is a jerk! I made a mistake therefore I'm incompetent!</p>
<p><b>'Should' Statements</b> 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><b>Mind Reading</b> 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><b>Mental Filter</b> Focusing only on the negative parts of a situation and ignoring anything good or positive.</p>	<p>I've driven for 20 years but had one serious accident. I am a horrible driver.</p>
<p><b>Catastrophic Thinking</b> Exaggerating the importance of negative things, believing the worst-case scenario, or thinking something is unbearable or impossible when it isn't that bad.</p>	<p>Because I feel stressed/overwhelmed now, I won't ever be able to drive again.</p>
<p><b>Personalization</b> You see yourself as the cause of some negative 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>

### TESTING YOUR THOUGHTS (Example)

This worksheet is a version of a Thought Record.

What is the situation? Involved in car accident where a woman died

What am I thinking or imagining? It's my fault that she died.

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 0-100 90)

What makes me think the thought is true? I was driving the other vehicle and tried to perform CPR but she didn't make it.

What makes me think the thought is not true or not completely true? I did not cause the accident. I did everything I knew how to do.

What's another way to look at this? I tried my best to save her life, but her injuries were severe.

What's the worst that could happen? Would I still live through it? The family might blame me. 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.

What will probably happen? The family will not focus on my but their own grief.

What will happen if I keep telling myself the same thought? I will not be able to continue driving.

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What could happen if I changed my thinking? I might be able to continue functioning.

What would I tell my friend Pat if this happened to him/her? That I'm proud they tried to save her and it wasn't their fault.

What should I do now? Talk to my partner, going for a walk, listening 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 (Example)

This worksheet is a version of a Dysfunctional Thought Record.

What is the situation?

What am I thinking or imagining?

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

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

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

What makes me think the thought is true?

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

What's another way to look at this?

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

What's the best that could happen?

What will 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 him/her?

What should I do now?

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

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

# 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: \_\_\_\_\_

## Facilitator Registration on Website

Please register yourself as a trained facilitator on the website, [www.cbtm.ca](http://www.cbtm.ca)

Any updates to the class content, including revised Power Points and speakers notes will be available through the website, so you will have access to these once you have registered.

Handouts for class participants will also be available on the website but can be downloaded without registering on the site.

## Registration

Choose a Username

Password

First Name

Last Name

Organization

Role

Phone number

E-mail Address

Have you attended any CBT Facilitator Training?

No

Yes

Please list any specialized CBT education, training or experience

Sign in

**The importance of skills taught in CBTm for mental health.**

This program, CBTm, was developed in specialty mental health clinics to provide those experiencing anxiety or depression with faster access to basic CBT and mindfulness strategies while they were waiting for therapy programs to begin. The specific component skills included in CBTm were each chosen because of strong research evidence that these skills help people heal from mental health difficulties and remain resilient to recurrence of these problems. The information contained in the classes can be applied to a wide variety of mental health concerns, so these classes can be offered to most everyone on a waiting list.

It is a little more difficult to determine what sorts of skills can help prevent a problem from ever happening in the first place. However early results have been promising that the CBTm skills can improve an individual's wellness by helping them resist stress and prevent the development of more serious mental health issues. Some sites have made it very easy for a support person to attend along with the class participant. Most everyone can find the material relatable, and find ways to implement these skills in a way that fits for their own life.

As a facilitator, when you are talking about the classes to a prospective participant and you are providing a rationale for attending CBTm, any of the above points may be valid. The following points can be included on material promoting the classes:

- Cognitive behavioural therapy and mindfulness are well-researched treatment strategies that have been proven effective to reduce depression and anxiety.
- These strategies can be learned and applied by the individual so that treatment can start while they are waiting to meet with a clinician.
- These strategies can be components of the treatment they eventually receive for their specific concern.
- There is much well-written, openly available material on the internet specific to management of emotional concerns. The classes provide direction to useful websites so it is easier to filter scientific information from opinions.
- It can be difficult for class participants to explain to friends and family what classes are about. The class gives a friend or family member the opportunity to understand cognitive behaviour therapy skills, therapy in general, ask question and be an optimal support for the individual as they engage in treatment.
- If you want to be resilient to stress, there is evidence that these are the best skills to have.

**Is participant screening necessary??**

Over the years, it has been observed that most individuals can manage the class format and have some benefit from the material presented. Screening of participants does not appear necessary when offering classes to the general public.

In settings where there is a higher incidence of serious mental health concerns, it may be helpful to review referrals, and to have a screening process for classes. There is a very short list of potential exclusion criteria to consider. These criteria are: active psychosis or mania, acutely elevated suicide risk, severe cognitive impairment and inability to control disruptive behaviour. Should it be possible to stabilize these concerns, the individual then may be able to adequately concentrate and absorb the class content. The following questions are pertinent to determine if any exclusionary criteria are present, and can be used as the format for a case note in the individual's chart.

1. How does the individual describe their current functioning with respect to the reason for referral? You might ask "I see you have been referred for depression, how are you coping?" Complete a mental status exam to assess for evidence of suicidality, impaired reality testing, mania or impaired cognitive functioning.
2. Does the individual meet any exclusion criteria for class participation? (active psychosis, acutely elevated suicide risk, severe cognitive impairment)? [Yes|No]
3. Is the patient eligible for the CBTm Education class? [Yes|No] If not eligible for the CBTm Education Classes, provide reasons and suggest alternate plan:  
If eligible, is the patient interested in attending the classes? [Yes|No]
4. Is the patient interested in bringing a family member/friend to the classes? [Yes|No]
5. Has the patient been provided with details of class dates/times/locations and told to call when planning to attend? [Yes|No] It is helpful to have a written summary of this information to give to the individual.

### Use of Outcome Monitoring

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 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 on the following pages.

- Patient Health Questionnaire - 9 (PHQ-9) - A measure of common symptoms of depression including suicidality.
- Generalized Anxiety Disorder - 7 (GAD-7) - A measure of common symptoms of anxiety.
- Connor-Davidson Resilience Scale - 10 (CD-RISC-10) - A measure of resilience to stress.



### Patient Health Questionnaire (PHQ-9)

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

	Not at all (0)	Severa l days (1)	More than half the days (2)	Nearly every day (3)
a. Little interest or pleasure in doing things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Feeling down, depressed, or hopeless.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Trouble falling/staying asleep, sleeping too much.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Feeling tired or having little energy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Poor appetite or overeating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Feeling bad about yourself, or that you are a failure, or have let yourself or your family down.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Trouble concentrating on things, such as reading the newspaper or watching TV.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. 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 more than usual.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Thoughts that you would be better off dead or of hurting yourself in some way.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you checked off any problem on this questionnaire so far, 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**

### Generalized Anxiety Disorder 7 –Item (GAD-7)

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

	Not at all sure	Several days (1)	Over half the days	Nearly every day (3)
1. Feeling nervous, anxious, or on edge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Not being able to stop or control worrying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Worrying too much about different things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Trouble relaxing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Being so restless that it's hard to sit still	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Becoming easily annoyed or irritable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Feeling afraid as if something awful might happen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you checked off any problem on this questionnaire so far, 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**

### CD-RISC 10

Please indicate how much you agree with the following statements as they apply to you over the **LAST MONTH**. If a particular situation has not occurred recently, answer according to how you think you would have felt.

	Not true at all	Rarely true	Sometimes true	Often true	True nearly all of the time
a) I am able to adapt when changes occur.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) I can deal with whatever comes my way.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) I try to see the humorous side of things when I am faced with problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Having to cope with stress can make me stronger.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) I tend to bounce back after injury, illness, or other hardships.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) I believe I can achieve my goals, even if there are obstacles.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Under pressure, I stay focused and think clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) I am not easily discouraged by failure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) I think of myself as a strong person when dealing with life's challenges and difficulties.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) I am able to handle unpleasant or painful feelings like sadness, fear and anger.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**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, Evaluation of the CBTm Education Session, 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.

## EVALUATION of the CBTm Education Session

Please complete this evaluation form. Your comments are important for helping to improve sessions in the future.

1. How useful was the session for you? (circle one number)

Not very useful

Extremely useful

1

2

3

4

5

Please List 3 things you have learned:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

2. What did you like about the Session? \_\_\_\_\_

\_\_\_\_\_

3. How could we improve the session? \_\_\_\_\_

\_\_\_\_\_

4. Would attend another session like this one (please circle one): **YES**      **NO**

5. Other Comments? \_\_\_\_\_

\_\_\_\_\_

**THANK YOU**

## 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 preemptive 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.

### **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.

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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 Essentials**

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.

### **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

### **Class 2**

- Participants engaged in mindfulness exercise
- Homework 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

### **Class 3**

- Participants engaged in mindfulness exercise
  - Homework from Class 2 was reviewed
  - Principles of healthy living presented, including physical exercise, nutrition, reducing alcohol/drug use, reducing 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 a CBT approach
-



**Class 4**

- Participants engaged in mindfulness exercise
- Homework 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

**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.

**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 need to schedule time for skills practice to keep up the momentum, or to not have important self-care get crowded out in a busy schedule.

You may want to discuss your self-care plan or additional steps in treatment with your physician or a mental health clinician.

Additional self-help resources can be found at...

<use the slide included with Class 5 or edit this to add your own suggestions>