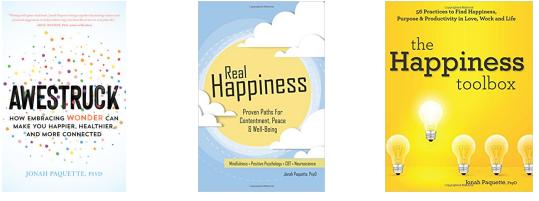


# Applying Cognitive Behavioral Techniques to Create Meaningful Change

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**About Me**

- Author of *Real Happiness*, *The Happiness Toolbox*, and *Awestruck* (coming June 2020)
- International speaker and workshop trainer
- Assistant Director of Mental Health Training at Kaiser Permanente in Northern California

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## What we'll cover

- Broad overview of CBT
- Keys for setting effective treatment agendas
- How distorted thinking can lead to suffering
- 30+ practices and techniques to shift our thinking
- How Cognitive Therapy can change the brain
- Integrating Mindfulness with CBT
- When changing thoughts doesn't work – an overview of defusion

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## What we won't cover

- CBT Case Conceptualization
- 3<sup>rd</sup> wave approaches
  - DBT, ACT, MBCT
- Techniques drawn from classical exposure

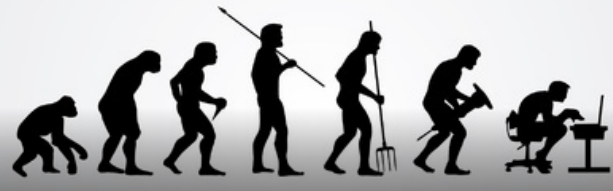
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## 3 Core Principles

1. *How we think influences how we feel*
2. *Our thoughts are often "distorted," particularly in times of suffering*
3. *When we change how we think, we change how we feel*

"Everything can be taken from us but one thing: the last of the human freedoms – to choose one's attitude in any given set of circumstances."  
 – Viktor Frankl

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## The Evolution of CBT

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## Ancient Wisdom



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## Ancient Wisdom

**Epictetus:** "We are disturbed not by things, but by our view of them."

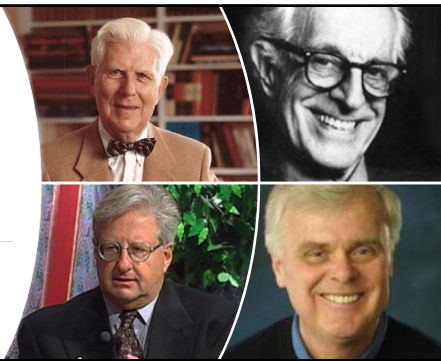
**Buddha:** "We are what we think. With our thoughts, we make the world."

**Marcus Aurelius:** "The happiness of your life depends on the quality of your thoughts."

**Shakespeare:** "There's nothing either good or bad, but thinking makes it so."

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## Pioneers within Clinical Psychology



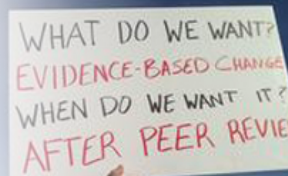
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## Pioneers within Clinical Psychology

- **Ellis:** Rational Emotive Behavior Therapy (REBT)
- **Beck:** Originally a psychoanalyst, developed Cognitive Therapy (CT) while working with depressed patients
- **Meichenbaum:** Initially a behaviorist, integrated cognitive and behavioral approaches
- **Burns:** collaborated closely with Beck, and pioneered many CBT techniques along with integrating motivational methods

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## Effectiveness of CBT



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## Effectiveness of CBT

- Depression
- Generalized Anxiety Disorder
- Posttraumatic Stress Disorder (CPT)
- Panic Disorder
- Social and Specific Phobias
- OCD (ERP)
- Psychosis (CBTp)
- Insomnia (CBT-I)
- Borderline Personality Disorder (Schema Focused Therapy)
- Eating Disorders
- Bipolar Disorder (CT)

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### Style of CBT

- Structured
- Problem-Focused
- Collaborative
- Directive
- Utilizes Feedback
- Emphasizes Homework

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### Misconceptions about CBT

- Only high-functioning, well-educated people can benefit from CBT
- CBT doesn't account for the impact of early life experiences
- CBT doesn't value the therapeutic relationship
- CBT doesn't address emotions
- CBT is just "positive thinking"

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### Rational vs. Positive Thinking

- The aim of CBT is to shift our thought process to being more balanced and rational
- Not** to "think positive"
- The power of realistic thinking

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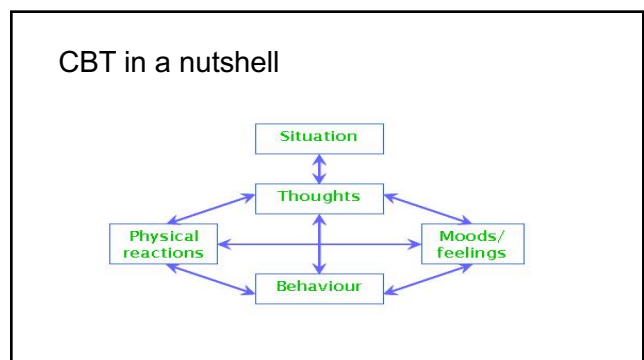
### Thoughts vs. Feelings

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### I felt...because I thought

I Felt....	Because I thought....
Sad	"I'll never amount to anything" after not getting the job I applied to
Angry	"They're not showing me enough respect."
Anxious	"People will think I'm stupid" when I had to give a presentation at work.
Overwhelmed	"....."
Hurt/Rejected	"....."

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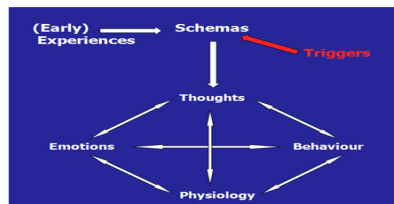
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Apply the model to the following situation/triggers:

- Job Loss
- Public Speaking
- Asking someone out and they say no
- Being criticized by your boss at work
- Getting cut off in traffic

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The Roots of Negative Thinking



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Thoughts, Beliefs, and Schemas

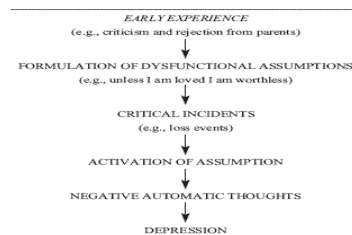
**Automatic Negative Thoughts:** moment-to-moment thoughts, often in response to a trigger or stressor. Often occur outside of conscious awareness, but through practice we can learn to spot them in then moment

**Intermediate Beliefs:** Attitudes, rules, and assumptions that flow out from core beliefs, guiding our decisions and behaviors in the world.

**Core Beliefs/Schemas:** mostly unconscious and deeply held views of oneself, the world, and others. These drive our automatic negative thoughts, and are present in the absence of acute stressors. Guides and underscores how we interpret events.

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How Negative Beliefs are Maintained



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Beck & Young (1987; 1993)

Examples of common beliefs/schemas:

- *Failure:* feeling like we're never good enough
- *Unlovability:* at the core, a belief that we are unlikable or unlovable
- *Helplessness:* the belief that we can't cope
- *Worthlessness/Defectiveness:* the belief that we have no value or are "damaged goods."
- *Abandonment:* the belief that we can't tolerate being alone and that people we love will leave us

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Beliefs/schemas (cont.)

- *Mistrust:* others can't be trusted or are unsafe
- *Vulnerability:* the belief that others will hurt us or take advantage of us
- *Emotional Inhibition:* the belief that expressing ourselves fully is unacceptable
- *Punishment:* the belief that on a deep level we deserve to be punished

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## Examples of Maladaptive Patterns

- Thoughts and beliefs common to:
  - Depression
  - Anxiety
  - Self-Criticism
  - Stress
  - Perfectionism
  - Anger
  - Interpersonal Conflict

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## Depression

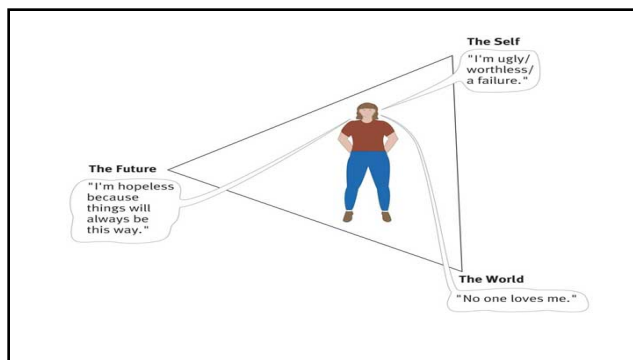
### Negative Triad:

- Self: "I am unlovable"
- World: "Other people don't care about me"
- Future: "The future is bleak/hopeless"

### Common Negative Automatic Thoughts:

- "I'll never succeed at this."
- "Things never go my way."
- "I'll always be a screw-up"

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## Anxiety

### Negative Triad:

- Self: "I can't protect myself"
- Others: "People will humiliate me"
- Future: "It's just a matter of time until I screw up/get embarrassed"

### Common Negative Automatic Thoughts:

- "I'm going to screw this up"
- "People will know that I'm a fraud"
- "The world is dangerous"
- "They'll be able to tell how anxious I am"

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## Low Self-Worth/Low Self-Esteem

### Common Core Beliefs:

- "I'm defective"
- "I'm weak"
- "I'm not good enough"

### Common Negative Automatic Thoughts:

- "If people get to know the real me, they'll leave me."
- "Because I failed at this, I'll never succeed."

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## Shame & Self-Criticism

Thoughts and beliefs centering around feelings of inadequacy and harsh self-judgment

### Common Core Beliefs:

- "I'm damaged goods"
- "I'm defective"

### Common Negative Automatic Thoughts:

- "There's something fundamentally wrong with me"
- "I never do anything right"
- "I should be stronger than I am"
- "No one would ever want to be close to me"

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## Anger and Hostility

Thoughts and beliefs reflecting the expectation of being hurt or wronged. Cognitions linked to threat perception and being constantly on guard.

### Common Beliefs:

- "People can't be trusted"
- "No one will look out for me."

### Common Automatic Thoughts:

- "People should give me more respect."
- "All he cares about is himself!"
- "It's all her fault."

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## Stress-Fueling Thoughts

• Thoughts and beliefs pertaining to a lack of control, and a sense that the demands on us at any given moment exceed our ability to cope

### Common Beliefs:

- "I'm helpless"
- "I'm a failure"
- "I can't handle things on my own."

### Common Negative Automatic Thoughts:

- "This is totally overwhelming"
- "This is too much to take"
- "I should be further along on this task/project"

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## Perfectionism and Unrelenting Standards

- Cognitions linked to unrealistic or unachievable standards
- The belief that one must always be striving; never satisfied

### Common Beliefs:

- "If I don't achieve \_\_\_, I have no worth."

### Common Automatic Thoughts

- "If I don't do things perfectly, I'm a failure"
- "Everyone will see that I'm really a fraud"
- "If I'm not the best, then I'm worthless"

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## Regret and Loss

• Thoughts and beliefs dwelling on the past, and reinforcing a sense that life is no longer worthwhile in the way it used to be.

### Common Negative Automatic Thoughts:

- "My life will never be the same again"
- "If only I had/hadn't...."
- "I can't have a meaningful life without..."
- "There's no point anymore..."

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## Interpersonal Problems

- Thoughts and beliefs that interfere with healthy, equitable interpersonal relationships

### Common Negative Automatic Thoughts:

- "My outbursts are all your fault"
- "If you really cared about me, you wouldn't be in conflict with me"
- "I should always be your number one priority"

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## The Common Threads

- What words did you notice?
- What themes stood out?
- What links between these various sorts of mindsets came up?

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## 10 Core Cognitive Distortions



- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <b>All-or-Nothing Thinking</b>  | <b>Magnification or Minimization</b> |
| <b>Overgeneralization</b>       | <b>Emotional Reasoning</b>           |
| <b>Mental Filter</b>            | <b>Should Statements</b>             |
| <b>Discounting the Positive</b> | <b>Labeling</b>                      |
| <b>Jumping to Conclusions</b>   | <b>Blame</b>                         |

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## 1. All-or-Nothing Thinking

- Looking at things in absolute, black and white categories; viewing things in the extreme, with no middle ground
- Example:**
  - "There's nothing good about this job"
  - "If I can't do it perfectly, I may as well not bother."
  - "I've totally blown it"



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## 2. Overgeneralization

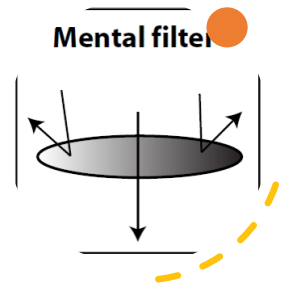
- Viewing a single negative event as part of a pattern of never-ending defeat
- Example:**
  - "I never do things right" after missing a deadline
  - "I'll always be alone" after feeling rejected



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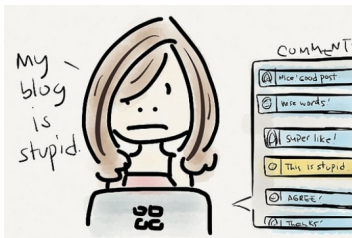
## 3. Mental Filter

- Ignoring the positive and dwelling on the negative aspect of a situation, akin to a single drop of ink coloring the entire beaker.
- Example:**
  - "I must really be a failure" after getting a "B" on a test.



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## 4. Discounting the Positive



- Insisting that one's positive qualities don't count
- Example:**
  - You do a good job on a project but tell yourself "anyone could have done this."

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## 5. Jumping to Conclusions

Jumping to conclusions not warranted by the facts. Can come in 2 forms:

- Fortune Telling:** Predicting things will turn out poorly
- Mind Reading:** Assuming that others are reacting negatively to you

- Example:**
  - "This relationship won't work out so I might as well not work at it."
  - "He probably thinks I'm an idiot."



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### 6. Magnification or Minimization

- Blowing things either out of proportion or shrinking their importance. You trivialize positive information and exaggerate negative experiences and information.
- **Example:** Your annual review has a single criticism – yet that’s all we can focus on



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### 7. Emotional Reasoning

- Reasoning from your emotions – in other words, “I feel like \_\_\_\_\_, so it must be true.”

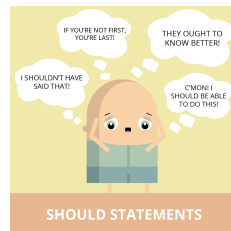


- **Example:**
- “I feel like a failure so I must be one.”
- “This feels hopeless so it must be so.”

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### 8. Should Statements

- Criticizing yourself or others with:
  - Should’s
  - Shouldn’ts
  - Must’s
  - Have-to’s
- Can be self-directed or other-directed
- **Examples:**
- “She should be more understanding.”
- “I should be able to handle this better.”



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### 9. Labeling

- Calling yourself names, or putting yourself down. An extreme form of all-or-nothing thinking, and can be self-directed (often linked to depression) or other-directed (often linked to anger)
- **Example:**
- Instead of saying “I made a mistake,” we instead say “I’m a loser and a screw-up.”
- “They’re such a jerk.”



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### 10. Personalization and Blame

- Finding fault rather than solving the problem, can be self-directed or other-directed
- **Example:**
- Your child fails a test and you respond by saying “this shows what a bad parent I am.”
- You’re having relationship conflict and you say “my spouse is a totally unreasonable person, this is all their fault!”



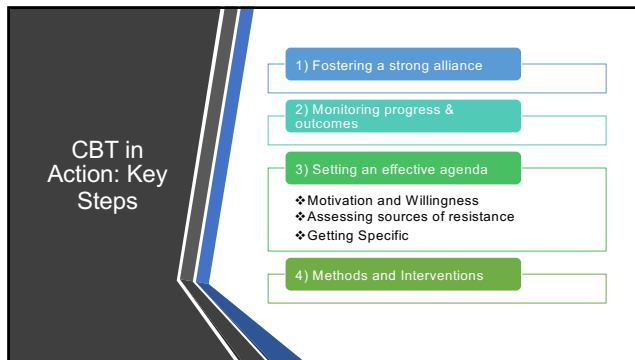
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### Finding the Distortions

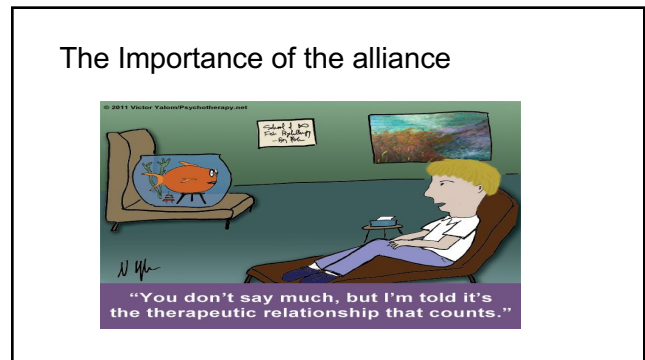
- I always keep messing everything up
- I’m such a loser
- I’ll never be able to get this done
- They must think I’m such a failure
- I should be able to handle things better
- He/she should be more understanding
- He/she’s such a stupid jerk!
- I’m so lazy, I’ll never finish this project
- Anyone could have accomplished that
- I’ll never find a job

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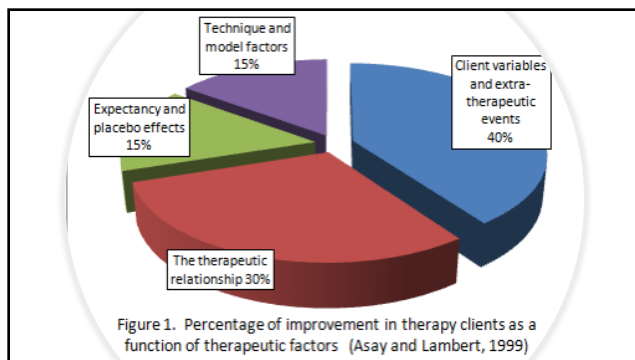




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### Establishing strong alliances

- **Therapeutic Alliance**
  - Goals
  - Tasks
  - Interpersonal Bond
- **Clinicians tend to overestimate their relationship with clients**
  - Illusory Superiority
  - Self-Enhancement bias
  - Lake Wobegon effect



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### Establishing strong alliances

**Burns' 5 Secrets of Effective Communication (Burns, 1999)**

- ❖ **Listening Skills**
  1. **The Disarming Technique** – finding truth
  2. **Empathy** – seeing the world through the client's eyes
    - Thought Empathy – paraphrasing their words
    - Feeling Empathy – reflecting their emotional experience
  3. **Inquiry** – asking gentle, probing questions
- ❖ **Expression Skills**
  4. **"I feel" statements** – using "I" statements rather than "you" statements
  5. **Strengthening** – expressing admiration and genuine praise

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### Monitoring Outcomes & Progress

- Is what we're doing working?
- Are relevant symptoms increasing or decreasing?
- Is the client feeling understood and respected?
- Are we aligned in terms of treatment goals, methods?
- Is my perception accurate?
- **Depression Scales:**
  - BDI, CES-D, HAM-D, PHQ-9
- **Anxiety Scales:**
  - BAI, GAD-7, HAM-A
- **Overall outcomes:**
  - Outcome Rating Scale (ORS)
- **Session Rating:**
  - Session Rating Scale (SRS)

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### Setting an Effective Agenda

1. Motivation and Willingness
2. Assessing sources of resistance
3. Getting Specific

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### Assessing Motivation & Willingness

- **Ready** – assessing the patient's readiness for change.
- **Willing** – what is the patient willing to do in order to get better?
  - E.g. doing homework between sessions, experiencing discomfort, etc.
- **Able** – assessing the person's self-efficacy

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Process vs. Outcome Resistance

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### Examples where resistance may arise

<p><b>Process Resistance:</b></p> <ul style="list-style-type: none"> <li>• Patient not wanting to take medications</li> <li>• Depressed patient not wanting to do behavioral activation</li> <li>• Person with phobia not wanting to do exposure therapy</li> </ul>	<p><b>Outcome Resistance:</b></p> <ul style="list-style-type: none"> <li>• College student who's binge drinking</li> <li>• Patient with depression</li> <li>• Person with marital conflict</li> <li>• Student with test anxiety</li> <li>• Trauma survivor not wanting to trust</li> </ul>
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### Questions for Assessing Motivation

- If we could work together on this, what would it be worth to you? How badly do you want that result?
- Would you be willing to do self-help exercises between sessions in order to solve this problem? How often, and for how much time each day/week?
- How many sessions can we devote to working on this problem?
- In order to solve this problem, who do you think should change? Do you think you should change, or do you think that someone else should do the changing?

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### Enhancing Motivation

- Drawn from *Miller & Rollnick's* work on Motivational Interviewing
  - Collaborative
  - Empathic and Compassionate
  - Supports self-efficacy
  - Elicits the patient's experience
  - Strength-Based
  - Develop Discrepancy
  - Elicit Change Talk (vs. sustain talk)
  - Roll with Resistance (Judo, not Boxing)

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### Suitability for CBT (Safran & Segal)

- |   |   |
|---|---|
| 1. Accessibility of automatic thoughts        | 6. Alliance potential (out of session)        |
| 2. Awareness & differentiation of emotions    | 7. Chronicity of problems                     |
| 3. Acceptance of personal responsibility      | 8. Avoidance vs. Facing the problem "head on" |
| 4. Compatibility with the cognitive rationale | 9. Focality                                   |
| 5. Alliance potential (in session)            | 10. Optimism/Pessimism regarding treatment    |

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### Getting Specific



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### Getting Specific

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>• <b>Instead of...</b></li> <li>• "I want to feel better"</li> <li>• "I want to feel less depressed"</li> <li>• "I hope to have a better relationship"</li> <li>• "I'd like to feel less anxious"</li> <li>• "I want to be less angry"</li> </ul> | <ul style="list-style-type: none"> <li>• <b>Try Using...</b></li> <li>• "What was going on/what happened?" (<i>situation</i>)</li> <li>• "What were you feeling?" (<i>emotions</i>)</li> <li>• "What was going through your mind as _____ was happening?" (<i>thoughts</i>)</li> <li>• "What did you do next/what happened then?" (<i>behavior</i>)</li> </ul> |
|--|--|

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### Helpful questions

- Situation**
  - What happened?
  - Who was there?
  - When and where did this occur?
- Thoughts**
  - What was going through your mind when you felt this way?
  - What thought bothered you the most?
  - What images came with these thought?
- Feelings**
  - What were you feeling just before this happened? During? After?
  - What mood were you in after? On a 0-100 scale?

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### Dysfunctional Thought Record

Situation	Automatic Thoughts	Emotions (0-100)	Distortions	Evidence For	Evidence Against	Balanced Thought	Emotional Outcome (0-100)

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## Identify the Distortions

• Negative Thought(s): \_\_\_\_\_

Distortion		Distortion	
1. All-or-Nothing Thinking		6. Magnification and Minimization	
2. Overgeneralization		7. Emotional Reasoning	
3. Mental Filter		8. Should Statements	
4. Discounting the Positive		9. Labeling	
5. Jumping to Conclusions		10. Blame	
• Mind-Reading		• Self-Blame	
• Fortune-Telling		• Other-Blame	

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## The Straightforward Technique

• Substitute a realistic positive thought for the negative thought.

• **Example:** patient struggling with PTSD

• *Negative Thought:* "I'm weak and should be able to handle this by now."

• *Balanced Response:* \_\_\_\_\_

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## Letting go of the Double Standard

What might I say to a close friend?  
What words, tone, etc.?

**Example:** You don't get a job you had applied to, and tell yourself:

*"I'm such a failure, and I'll never find a good job."*



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## Examining the Evidence

Rather than assume the negative thought is true, examine the evidence for and against the negative thought or belief.

- What evidence supports this thought?
- What evidence refutes it?
- What are the facts? What do they say?

**Example:**

- "I'm a total and complete failure."
- "My boss is always mean to me."



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## The Experimental Technique

Test the validity of the negative thought, the way a scientist might test a theory

**Example:**

- "I'm going to have a heart attack" while having a panic attack.
- "I'm going to die from embarrassment" while speaking in public.



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### Fact versus Opinion

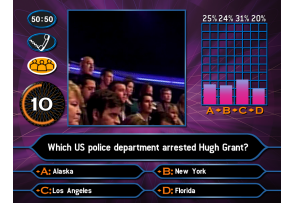
Negative Thought	Fact	Opinion
"I'm a worthless person."		
"Nothing ever goes my way."		
"No one will ever love me."		
"I'm a loser."		

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### Survey Technique/Ask the Audience

Conduct a survey to find out if thoughts are realistic  
 "How do others think about this?"  
 "Who can I ask to find out?"

- Example:**
- Public speaking: "I shouldn't be so anxious!"
  - Suicidal patient: "I'm a burden to my family, and they'd be better off."



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### Reattribution

Instead of blaming yourself entirely for the problem, consider other factors.  
 "What caused this problem?"  
 "What did others contribute?"  
 "What factors, outside of my control, played a role?"

**Examples:**

- Person feels guilty about daughter's depression and thinks "It must be something I did."
- Person who cheated on spouse thinks "I'm the worst person in the world, and I ruined my marriage."



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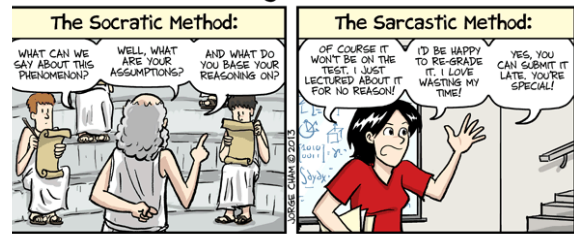
### The Socratic Technique

- Asking a series of questions that allows the patient to discover the inconsistency or error in their thinking
- Aimed to stimulate thought and awareness, rather than requiring a correct answer.



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### Teaching Methods



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### Thinking in Shades of Gray

All-or-nothing thinking can reinforce

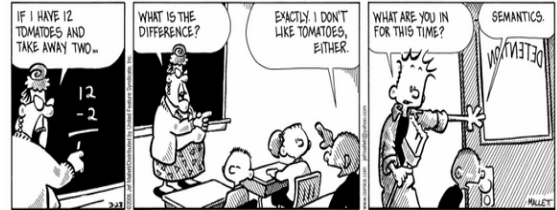
- Depression
- Anxiety
- Perfectionism
- Anger (towards self or others)

**Keys:**

- Learn to find the middle ground, and a more balanced perspective
- Shift from all-or-nothing to a 0-100 continuum
- Shift from global evaluations to more specific

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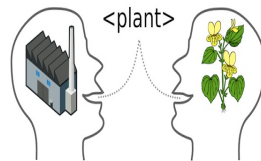
### Semantic Approaches



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### The Semantic Technique

- Very effective for Should Statements
- Aims to soften the language enough to reduce suffering



**Example:**

- "I should be more successful."
- "They should be more understanding."

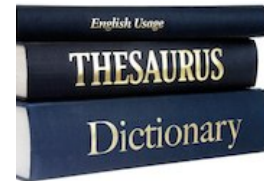
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### Defining Terms

Immense suffering comes from words like:

- Loser
- Worthless
- Unlovable
- Jerk
- Failure
- Stupid

Semantic clarity can lessen the pain from these thoughts



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### Getting Specific

- Particularly useful for Overgeneralization
- When we're depressed or anxious, we generalize a specific failure to our entire self
- Learning to focus instead on specific, solvable issues can reduce suffering



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### Adding another "but"

- Particularly useful for discounting the positive
- When we "yes, but" ourselves, try following it up with a "positive but" (or an "and")

Positive Attribute	Negative "but"	Positive/balanced "but"

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### Scheduled Worry Breaks

Struggling to control negative thoughts can make them more intense

Instead of fighting the thought, give into them in a time-limited, structured way

**Recommendations:**

- 10-30 minutes
- Not right before bedtime
- Follow up with pleasant/distracting activity



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### Negative Practice

- Similar to scheduled worry breaks but more relevant for depression (rather than anxiety)
- Paradoxical approach – more negative thinking reduces frequency and intensity over time

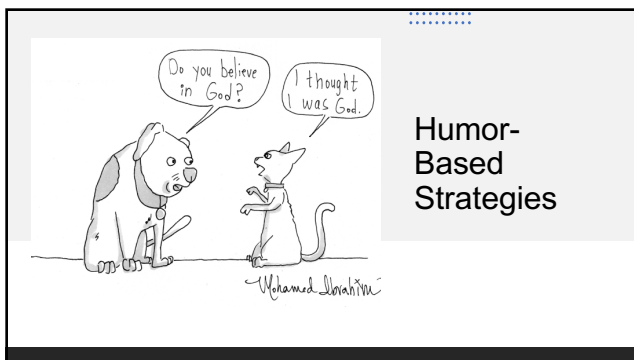
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### Self-Monitoring

- Keeping track of negative thoughts by counting each time it happens
- 3x5 index card
- Smart phone




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### Paradoxical Magnification

- Instead of disputing negative thought, exaggerate and make as extreme and absurd as possible
- Paradoxically, this can often bring relief
- Particularly useful for:
  - Fortune-Telling
  - Mind-Reading
  - Magnification or Minimization
  - Self-Blame



90

## Shame-Attacking

- If you suffer from shyness, you probably have intense fears of looking foolish in front of other people.
- Shame-Attacking Exercises are a specific and potent antidote to these kinds of fears. You intentionally do something foolish in public so you can get over this fear.
- **Example:** standing up and announcing each stop on a bus or shout out the time in a crowded department store.

91



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## Externalizing Voices

- Helps convert intellectual shift into an emotional change
- Take turns role-playing negative and positive (adaptive) thoughts
- Negative thoughts attack, positive thoughts

93

## Facing the Feared Fantasy

- A 2-person technique similar to "externalizing voices."
- You and the other person act out your worst fears, such as being rejected by an exceptionally hostile critic because you aren't smart enough or good enough.
- When you face your worst fear, you often gain liberation from it. Your worst fears don't usually turn out to be real monsters, but figments of your imagination that you can defeat with a little logic, compassion, and common sense.

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95

## Future Projection

- If you're depressed, you can take a mental trip into the future and imagine that you've recovered. The current self who feels worthless and defeated can have a conversation with the future self who feels joy and self-esteem.
- Notice as well whether your perspective changes after imagining yourself further into the future



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### Past Projection

- You can also take a mental trip into your past and have a conversation with someone who hurt or abused you. This will give you the chance to express thoughts and feelings that have been bottled up and eating away at you for many years.



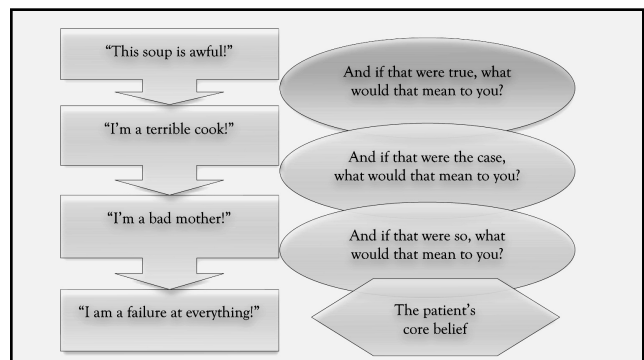
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### Individual Downward Arrow

- Helps uncover the deeper, self-defeating beliefs that underscore automatic negative thoughts
- Step 1:** Identify negative thought
- Step 2:** Ask "if this were true, what would this mean to me?" or "Why would it be so upsetting if this were the case?"
- Step 3:** Continue until deeper, core belief has been uncovered



99

100

### Downward Arrow

Try using the "downward arrow" technique to dig deeper into the following thoughts:

- "I have to pass this test"
- "I really hope they don't criticize me"
- "I better not screw up this talk"
- "They probably think I'm dumb."

101

### Interpersonal Downward Arrow

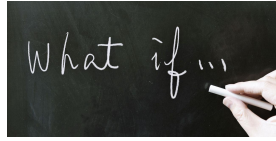
- Similar to the Downward Arrow but geared towards interpersonal problems
- Step 1:** Identify negative thought
- Step 2:** Ask "if this were true, what would it mean about the type of person he/she is? The type of person I am? And the type of relationship we have?"
- Step 3:** Continue until deeper, core belief has been uncovered
- Can identify deeper beliefs that interfere with interpersonal relationships, damage intimacy, etc.

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### The What-If Technique

Similar to the Downward Arrow but specifically helpful with anxiety

1. Identify Negative Thought
2. "If this were true, what's the worst that could happen?" "What do I fear most here?"
3. Repeat process until deeper fear is uncovered
4. Then ask "How likely is this to happen?" "If it did happen, could I live with it?"



103

### Uncovering the Hidden Emotion

- Particularly useful for anxious individuals who struggle with people-pleasing or conflict-phobia
- Explore other problems that may be getting swept under the rug



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### Cost/Benefit Analysis

- Weighing the pros/cons of holding onto a specific:
  - Thought
  - Attitude/Belief
  - Emotional state
  - Relationship pattern
  - Habit

	ADVANTAGES	DISADVANTAGES
NO CHANGE:		
CHANGE:		

106

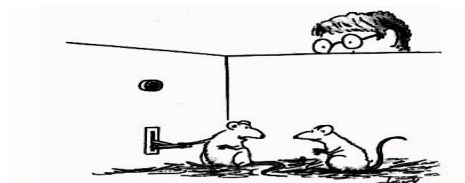
### The Devil's Advocate Technique

- Similar to Externalization of Voices, but focused on habits and addiction
- Role-play tempting thoughts trying to get person to give into the habit, and have person respond in a more adaptive manner
- When stuck, use role-reversal.



107

### Behavioral Interventions



It's a rather interesting phenomenon. Every time I press this lever, that post-graduate student breathes a sigh of relief.

108

### Activity Monitoring

- Baseline lots of activities
- What do I notice?
- What patterns?
- How did I feel?
- What small changes might I make?

**Activity Diary**  
To get started, try to fill your week. This can help you to make good use of your time.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Breakfast							
Morning							
Afternoon							
Evening							
Bedtime							

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### Activity Scheduling

- Pre-planning activities that might increase interest, agency, or joy
- Activities that are active and/or social

DAY	MORNING	AFTERNOON	EVENING
<i>Example</i>	• Wake by 8 AM • Eat a full breakfast	• Go for a 15 minute walk	• Call a friend • Practice guitar
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

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### Building Mastery

- Cleaning the kitchen or a room in my home
- Putting on make-up
- Doing the laundry
- Fixing something in the home
- Gardening
- Making a to-do list
- Completing a puzzle
- Catching up on bills
- Completing some errands
- Planning a full day
- Mowing the lawn
- Painting nails
- Doing some creative writing
- Crossing things off my to-do list
- Catching up on emails
- Doing community service

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### Building Pleasurable Activities

- Burning incense
- Taking a bath
- Walking in nature
- Being outside
- Watching a funny movie or TV show
- Doing yoga
- Going to the beach
- Smelling a fragrant candle
- Taking a weekend getaway
- Looking at old photos from fun times
- Playing a sport we like
- Getting a massage
- Calling a friend
- Saving a nice meal

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### Pleasure Prediction

Activity	Companion	Predicted Satisfaction	Actual Satisfaction
Schedule Activities	Who will you do this with?	Record before activity from 0-100	Record after activity from 0-100

113

### Meaningful Activities

- What are some activities that would connect me to something bigger than myself?
- What parts of my life give me a sense of meaning, and how can I engage in these more fully?
- What are the things that truly matter to me, that I truly value, and how can I engage in those in the coming days?

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### Interpersonal Connection

- Who is someone I feel supported by, who I can reach out to when I'm feeling this way?
- Who is someone I feel encouraged by, who's patient with me even when I'm not at my best?
- Who is someone who I know will listen to me?
- Who is someone who's available to me, who makes sure they're there for me when I'm struggling?

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### Healthy Distraction

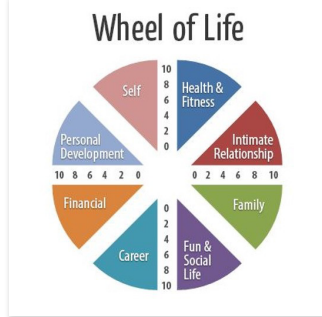
- Not meant as a permanent solution or a pathway to avoidance
- But in moderation, can allow ourselves the space to gather ourselves and re-engage when we're feeling more able to

*Examples of healthy distraction:* exercise, meditation, taking a bath, taking a walk, watching a show/movie, reading, calling a support person, playing with a pet, time with loved ones

*My healthy distraction tools:* \_\_\_\_\_

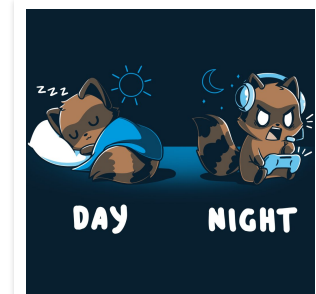
116

### Positive Self-Care



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### Sleep



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### The Importance of Good Sleep

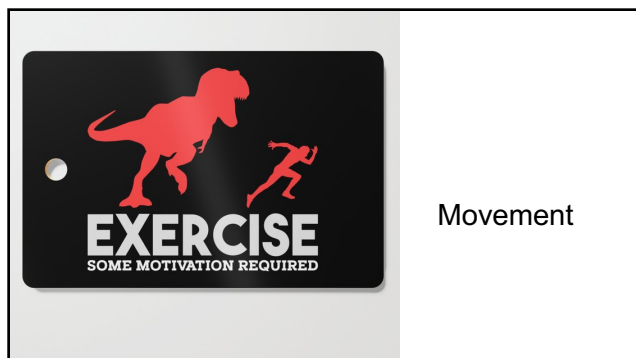
- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>• <b>Poor Sleep Quality:</b> <ul style="list-style-type: none"> <li>• Linked to depression, anxiety, stress, and risk of mania/hypomania</li> <li>• Decreases impulse control and affect regulation</li> <li>• Increases risk of numerous health conditions</li> <li>• Decreases cognitive function</li> <li>• Greater sensitivity to pain</li> <li>• Decreases prefrontal activity (Atena, 2008)</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• <b>Good Sleep Quality:</b> <ul style="list-style-type: none"> <li>• Cleans away metabolic waste via cerebrospinal fluid (Xie, 2013)</li> <li>• Improves cognitive functioning</li> <li>• Decreases depression and anxiety</li> <li>• Reduces reward response to unhealthy behaviors</li> <li>• Reduces feelings of loneliness</li> <li>• Increases empathy</li> <li>• Improves emotion regulation</li> </ul> </li> </ul> |
|---|---|

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### Healthy Sleep Tips

- |   |  |
|---|--|
| <p><b>Do's</b></p> <ul style="list-style-type: none"> <li>Keep a regular schedule</li> <li>Exercise regularly—but not within 3 hours of bedtime</li> <li>Keep a comfortable sleep environment—consider temperature, bedding, lighting, etc.</li> <li>Shut off all bright screens—including phones and televisions—at least 1 hour before bedtime</li> <li>Establish a relaxing pre-bedtime routine—this can include things like taking a warm bath, listening to soft music, or drinking chamomile tea</li> <li>Use your bed only for sleep or sex</li> </ul> | <p><b>Don'ts</b></p> <ul style="list-style-type: none"> <li>Take daytime naps—these can interfere with your ability to sleep well at night</li> <li>Use stimulants such as caffeine or nicotine (especially within 6 hours of bedtime)</li> <li>Go to bed too hungry or too full</li> <li>Exercise vigorously within 3 hours of bedtime</li> <li>Drink alcohol—especially within 3 hours of bedtime</li> <li>Stay in bed when you can't sleep—if you cannot fall asleep within 30 minutes, get out of bed and try a low-stimulation activity</li> <li>Watch TV in bed, eat in bed, talk on the phone in bed—these can make it harder to sleep at night</li> <li>Watch the clock</li> </ul> |
|---|--|

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### Exercise

- Mood benefits after 20 minutes can last 12 hours
- Reduces cortisol and adrenaline
- Improves sleep quality and quantity
- Increases blood flow to PFC
- Improved memory, concentration, and focus
- Release of BDNF
  - Low levels linked to depression, memory and learning impairment
  - Critical for brain health
- Increases Serotonin, Norepinephrine, Dopamine, and endocannabinoids
- Similar effect sizes as medication and psychotherapy for low/moderate depression
- Countless benefits for physical and mental health

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### Exercise Keys & Tips

- Make it aerobic: 55-90% max heart-rate
  - Max HR=220 minus your age
- Make it sustainable
  - Choose activities that fit with your lifestyle and that you enjoy
- It's OK to keep it short
  - 20 minutes can go a long way
- Make it a habit

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### Case Example #1

- **Overview:** 57 year-old male presents with complaints of depression. Currently on disability due to his depression and has been off work for 9 months. He states that his wife "made me come here," and that he spends most of his days in bed and isolating. The patient presents as irritable and guarded, and answers most of your initial questions tersely.
- **Negative Thoughts/Beliefs:**
  - "I'm a total failure."
  - "I've let everyone in my life down."
  - "I'll never get out of this funk."
- **Goals for Treatment:** "I want to feel better."

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### Case #1

- Possible Alliance Concerns
- Potential Motivation/Resistance Issues
- Clarifying Goals
- Distortions Present
- Possible Techniques

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## Case Example #2

• **Overview:** 35 year-old female presents with intense fear of public speaking. She has been working hard at her job and is up for a promotion, but the new position would require her to do more presentations and public speaking while taking on more of a leadership role. She presents as earnest and motivated for treatment, though quite anxious.

• **Negative Thoughts/Beliefs:**

- "I'm going to freeze up and make a fool out of myself"
- "Everyone will know that I'm a fraud who can't cut it."
- "I'll be a total failure at this job."

• **Goals for Treatment:** "I want to feel less anxious"

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## Case #2

- Possible Alliance Concerns
- Potential Motivation/Resistance Issues
- Clarifying Goals
- Distortions Present
- Possible Techniques

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## Case Example #3

• **Overview:** 45 year-old male presents with complaint of interpersonal conflict at work. A new supervisor has begun managing him, who used to be a colleague of his. The patient was recently written up for subordination, and he is now mandated to undergo anger management counseling. He presents as irritable and angry.

• **Negative Thoughts/Beliefs:**

- "My boss is such an idiot"
- "People should be more respectful"
- "No one values what I do around here"
- **Goals for Treatment:** "I want my boss off my case!"

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## Case #3

- Possible Alliance Concerns
- Potential Motivation/Resistance Issues
- Clarifying Goals
- Distortions Present
- Possible Techniques

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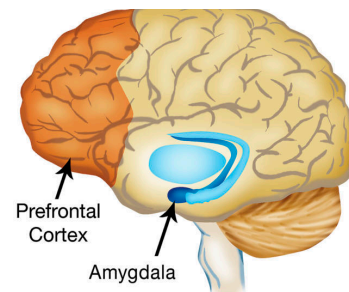
## Bridging Sessions

- What main points stood out from the last time we met?
- What did you learn over the past week that would be important to discuss?
- Is there anything that felt unfinished that we want to pick up with today?
- How is your mood today compared to last time? And how has it been over the past week?
- What's feeling important to focus on today in terms of our agenda?
- How did the homework assignment go from last time?

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## CBT and the Brain

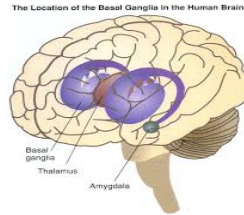
- Increased connectivity between the frontal lobes and the amygdala
  - Allows thinking and reasoning to override threat response
- Decreased activation in the amygdala, increased activation in the dorsolateral prefrontal cortex (DLPFC)



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## The Habit Brain

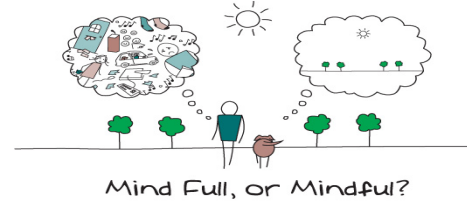
- Basal Ganglia
  - Ancient structure
  - Automatic/habitual behaviors
- Prefrontal Cortex
  - PFC to BG pathway
  - Over time, shifts from conscious to automatic



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## Mindfulness

"The present moment is filled with joy and happiness. If you are attentive, you will see it." –Thich Nhat Hanh



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## What is Mindfulness?

“ Mindfulness means paying attention in a particular way; On purpose, in the present moment, and non-judgmentally.”

Jon Kabat-Zinn

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## Mindfulness

- Mindfulness vs. Mindlessness
- The toll of a wandering mind (Killington & Gilbert, 2010)
- Barriers to Mindfulness
  - Modern Culture
  - What mindfulness is not
- A way of being in the world

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## Benefits of Mindfulness

- | <u>Psychological</u>   | <u>Physical</u>  |
|--|--|
| • Depression & Anxiety (Keng, 2011)                                    | • Fewer doctor's visits, fewer hospital days (Williams & Penman, 2011) |
| • Buffers against future depressive episodes (Williams & Penman, 2011) | • Immune system (Davidson & Kabat-Zinn, 2003)                          |
| • Happiness, Well-Being (Shapiro, 2008)                                | • HIV (Creswell, 2009)   |
| • Problem-solving, attention & focus (Moore, 2012)                     | • Chronic Pain   |
| • Disordered Eating  |  |

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## Benefits of Mindfulness

- |   |  |
|---|--|
| <p><u>Life/Relationships</u></p> <ul style="list-style-type: none"> <li>• Improved job performance &amp; retention (Dane, 2013)</li> <li>• Less aggression, improved behavior in schools for students</li> <li>• Lower BP for teachers (Flook, 2013)</li> <li>• Increased altruism (Condon, 2013)</li> <li>• Increased compassion for others' suffering (Weng, 2013)</li> </ul> | <p><u>Brain/Body</u></p> <ul style="list-style-type: none"> <li>• Left Prefrontal Cortex (Davidson, 2003)</li> <li>• Decreased amygdala response (Davidson, 2003)</li> <li>• Increased left hippocampus volume</li> <li>• Brain changes within 8 weeks</li> <li>• Memory and learning centers (Holzel, 2011)</li> <li>• Offsets cortical thinning</li> </ul> |
|---|--|

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## How mindfulness upends negative thought patterns

- Brings us into the here & now
- Gives us distance to from our thoughts
- Helps reduce rumination
- Allows us to get to know our patterns – our automatic thoughts as well as our beliefs
- Takes us off autopilot

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## Mindfulness of the Breath



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## Mindfulness of Thoughts



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## Everyday Mindfulness

- Choose 1 "autopilot" activity per day
- Cultivate present moment, nonjudgmental awareness
- Examples include:
  - Eating
  - Walking
  - Showering
  - Cleaning Dishes
  - Gardening
  - Others?

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## Slow Exhale Breathing



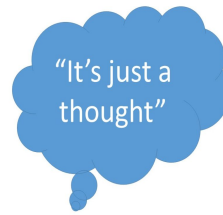
144



### Mindful Walking



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### Thought Defusion: Distancing Ourselves From Our Thoughts

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### Fusion vs. Defusion

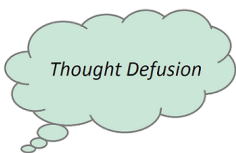
- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>• <u>Fusion with Thoughts:</u></li> <li>• Over-identification with thoughts</li> <li>• Take thoughts as truth</li> <li>• Feel overpowered by negative thoughts</li> <li>• Looking <b>from</b> our thoughts</li> </ul> | <ul style="list-style-type: none"> <li>• <u>Defusion from Thoughts:</u></li> <li>• See thoughts as "just thoughts"</li> <li>• Create distance from negative thoughts</li> <li>• No need to act on thoughts</li> <li>• Looking <b>at</b> our thoughts</li> </ul> |
|--|---|

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### Effectiveness of ACT

- Depression
- Generalized Anxiety Disorder
- Chronic Pain
- OCD and OCD spectrum disorders
- Mixed Anxiety Disorders
- Psychosis

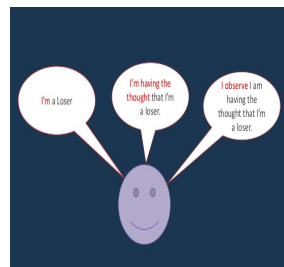
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*NOTICING thoughts, rather than being caught up in them...  
Looking AT thoughts, rather than FROM thoughts...*

### Sampling of Defusion Practices

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### "I'm having the thought that..."

- Identify a negative thought or self-judgment
- Next, replay this thought preceded by: "I'm having the thought that..."
- Can take step further: "I'm noticing myself having the thought that..."
- Creates distance between ourselves and our thoughts
- Highlights the non-literal quality of our thoughts

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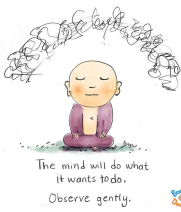
### Appreciate your Mind

- When an unhelpful thought pops up in our mind...
  - Say, "thanks for that, brain!"
  - Remind ourselves that our brain is just trying to help (albeit unsuccessfully)



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### Simply Observe

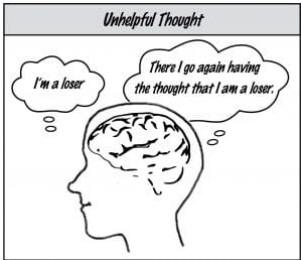


- Notice our thoughts, without attaching to them
- Observe the mind, as if watching a passing cloud overhead
- Recognize that thoughts are just thoughts, here one moment and gone the next

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### Accepting our Thoughts


- Rather than try to push back and resist negative thoughts, we simply notice and accept that negative thoughts are a part of life.
- Paradoxically, this acceptance leads to decreased pain from our negative thinking



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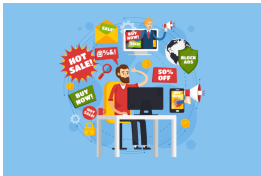
### Name the Story

- Imagine your negative thoughts and feelings were turned into a movie or story
- What might we call it?
  - The "I'm a failure" story
  - The "No one likes me" story
  - The "Nothing goes my way" story
- Remind yourself that this is just that old story acting up again, nothing more and nothing less



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### Pop-up Mind



- Imagine that your unhelpful negative thoughts are like an internet pop-up ad
- The more we frantically click them closed, another few are ready to take their place
- Instead, practice simply noticing our mind's tendency to do this, without trying too hard to shut it off

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### Return to the Present



- Bring yourself back to the present by saying "Back to now," or "It's not happening right now."
- Much of our suffering comes from our mind pulling us to the past or the future, and we can reduce suffering by refocusing to the here & now

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## Say it Slowly

- Try saying the negative thought in slow motion
- What do you notice about the power of the thought when you do this?
- Negative thoughts tend to be less painful and uncomfortable through this practice, because doing so highlights that our thoughts are just a string of words, nothing more or less



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## Type it Out

- Imagine your negative thought on a computer screen
- Picture it, and then try playing with it by changing the font, the color, the formatting
- Notice whether doing this decreases the power and painfulness of the thought

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## Leaves on the Stream

- When negative thoughts pop up, imagine placing it on a leaf, floating on top of a gentle stream
- Watch the leaf as it slowly drifts down the stream, around a bend, and out of sight



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## Make it Silly

- Try saying the negative thought in a silly voice to further reduce its power and impact
- Say it in the voice of a robot, Donald Duck, etc.

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## Sing it Out

- When negative thoughts come up, try singing the thought out to the tune of "Happy Birthday" or any other song you'd like to try

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## Get in Touch!

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