



A psychological therapy service

Anxiety

A guided self help workbook

italk is provided by Solent Mind and Southern Health NHS Foundation Trust



Southern Health
NHS Foundation Trust



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Welcome to italk

- ✓ Step 2 of the italk service offers telephone based support to people who are experiencing symptoms of anxiety and/or depression by using Guided Self Help.
- ✓ Guided Self Help interventions are based on Cognitive Behavioural Therapy (CBT), and you will work through these interventions with one of our Psychological Wellbeing Practitioners (PWP). PWPs are specially trained to deliver these CBT approaches to help you to manage and overcome your particular difficulties.
- ✓ Your PWP will introduce you to a range of self-help tools and literature that you can work through in your own time between appointments. Through Guided Self Help you can gain a better understanding of the issues that are affecting you and you will learn new skills to be able to make positive, practical changes. Guided Self Help strategies that we use at italk are based on NICE (National Institute for Health and Care Excellence) guidelines and recommendations.
- ✓ Guided Self Help is delivered over 4 – 6 sessions, generally spread over several weeks. The sessions are booked for 30 minutes and the aim of them is to focus on reviewing your homework and setting up tasks for the next session. To prepare for each of these sessions, you will also be asked to complete the questionnaires that you became familiar with during your assessment.
- ✓ If at any point during the course of the sessions you feel the selected intervention is not working for you, then let your PWP know so that other options can be explored. If you have any questions about the tasks discussed then ask your PWP for clarification and guidance. Your PWP can also give you information about other services in your area that may be helpful.

How can we help you to overcome and manage symptoms of anxiety?

Fortunately there are a number of techniques we can start using in order to overcome anxiety, worry and stress. These include:

- ✓ Learning how to challenge unhelpful thinking and seeing things in a more balanced way.
- ✓ Learning how to filter out the worries that we can change from the ones that we can't.
- ✓ Learning or improving your relaxation skills.
- ✓ Learning to acknowledge and notice your qualities and achievements.

These strategies are based on Cognitive Behavioural Therapy (CBT).

What is CBT?

CBT is a way of managing common mental health difficulties such as depression and anxiety by understanding and talking about:

- ✓ How you think about yourself, the world and other people and how these thoughts might be affecting your emotions
- ✓ How your actions influence your thoughts and emotions.

CBT based interventions can help you to challenge and change how you think ('Cognitive') and what you do ('Behaviour'). These changes can help you to feel better emotionally and break the vicious cycle of worrying that maintains your anxiety. Unlike some of the other talking treatments, the CBT approach focuses on the 'here and now' problems and difficulties. Instead of focusing on the causes of your distress or symptoms in the past, it looks for ways to improve your state of mind now by making changes in the way that you do things or in the way that you think and interpret things. By making changes in just one of these areas it can reverse a vicious cycle and have a positive impact on the other areas that have also been affected by your anxiousness.

What is Anxiety?

Anxiety is a very common experience that may affect us at different points in our life. It can be a normal response to unpleasant or stressful life events, such as illness or financial difficulties, or even in positive times, such as preparing for a wedding or the arrival of a new baby. Sometimes anxiety can even be helpful for us. For example, if we are worried about an exam, our anxiety may help us to prepare better. However, anxiety can become a problem when it starts taking up a lot of our time, if we are not able to get rid of the worries when we want to, or when the anxiety causes us a lot of distress. At this point, it might be something that you feel you want or need to address.



Fight or Flight

Fight or flight is one of the most basic survival mechanisms that we have. It helps us to react quickly when a threat arrives. When we spot a threat, our bodies release adrenaline, a natural chemical that stimulates the body, causing everything to speed up. Our heart starts racing, our breathing quickens, we become more tense; all the same physical symptoms described in the diagram on the next page. This means that if we need to fight against something, or to quickly run away for something, our body is ready to react straight away.

The fight or flight response is something that we have developed over many generations. In more primitive times, we would have had to contend more with predators (bears, lions, etc.), so when we saw one, our fight or flight would kick in, getting our bodies ready to either run away or fight back to protect ourselves.

While there are less of these types of predator around in our everyday lives, the modern day still has its physical threats. For example, if you step in to a road and a car is racing towards you, you want your fight or flight to kick in so that you can jump out of the way. However, many of the threats we face in modern life are less obvious. It might be worries about getting sick, losing our jobs or letting people down. When we are anxious, we even find threats in things that would not normally worry us, such as going to the supermarket. In these situations, neither fight nor flight are particularly helpful options. People will sometimes try to cope by using flight, running away from the situation, and then avoiding going back to it in the future. This may cause us to see that situation as a threat, meaning we might avoid it in the future, which could have a big impact on our lives.

Physical Symptoms of Anxiety

Feeling light-headed/Dizzy

Our quickened breathing causes a small imbalance in our blood-gas levels which may make us feel more faint or dizzy.

Blurred vision

Our pupils get wider to allow us to better detect threats in our peripheral vision.

Heart rate accelerates

Our heart pumps quicker and our blood pressure rises, providing our muscles with more blood.

Sweaty palms

Sweating happens when our muscles are working hard and also when the body tries to cool itself. It may also help prevent muscles cramps and make it more difficult for predators to grab us.

Hands shake/ "Jelly legs"

Our blood vessels constrict to provide your larger muscles with more blood. This can cause trembling, numbness and tingling.

Stomach churns

Our adrenaline diverts blood away from the stomach and relaxes the muscles in our stomach causing nausea, churning or 'butterflies'.

Muscles tense

Our muscles become tense so that they are ready to act quickly and powerfully in whatever way we need.

Fidgety/Restless

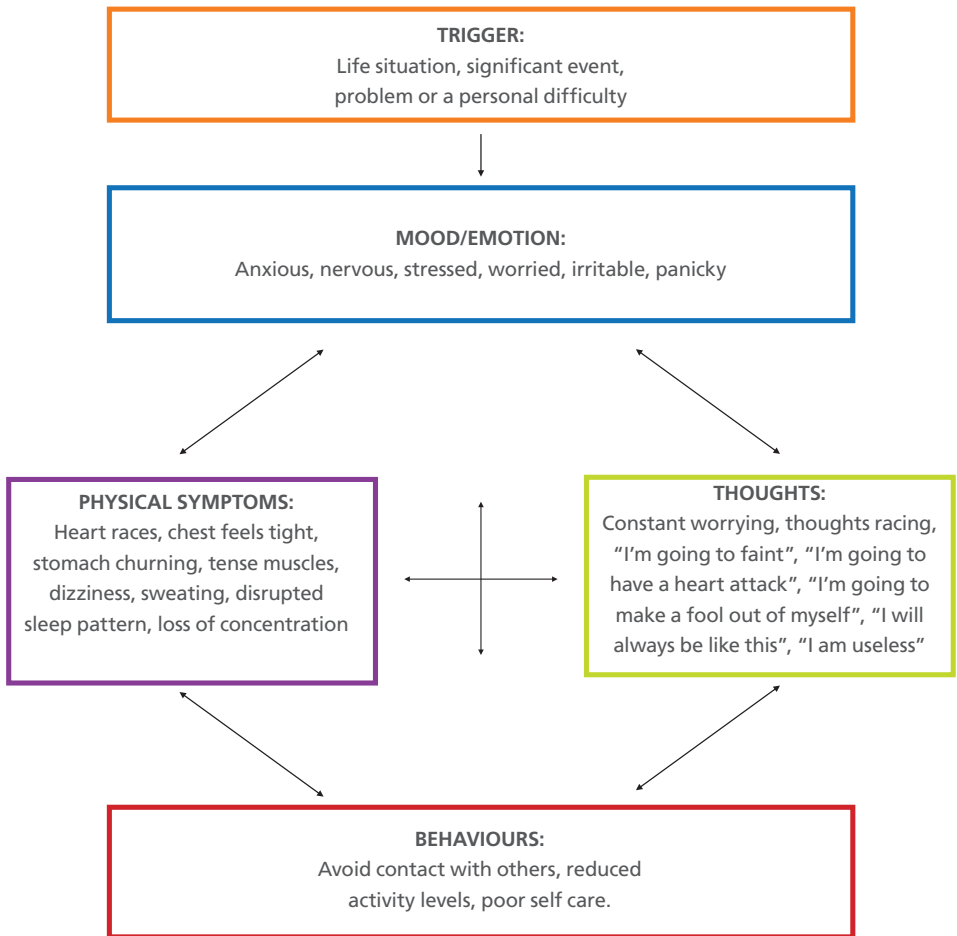
We cannot sit still and feel that we need to be keeping ourselves busy.

Bowels and Bladder Loosen

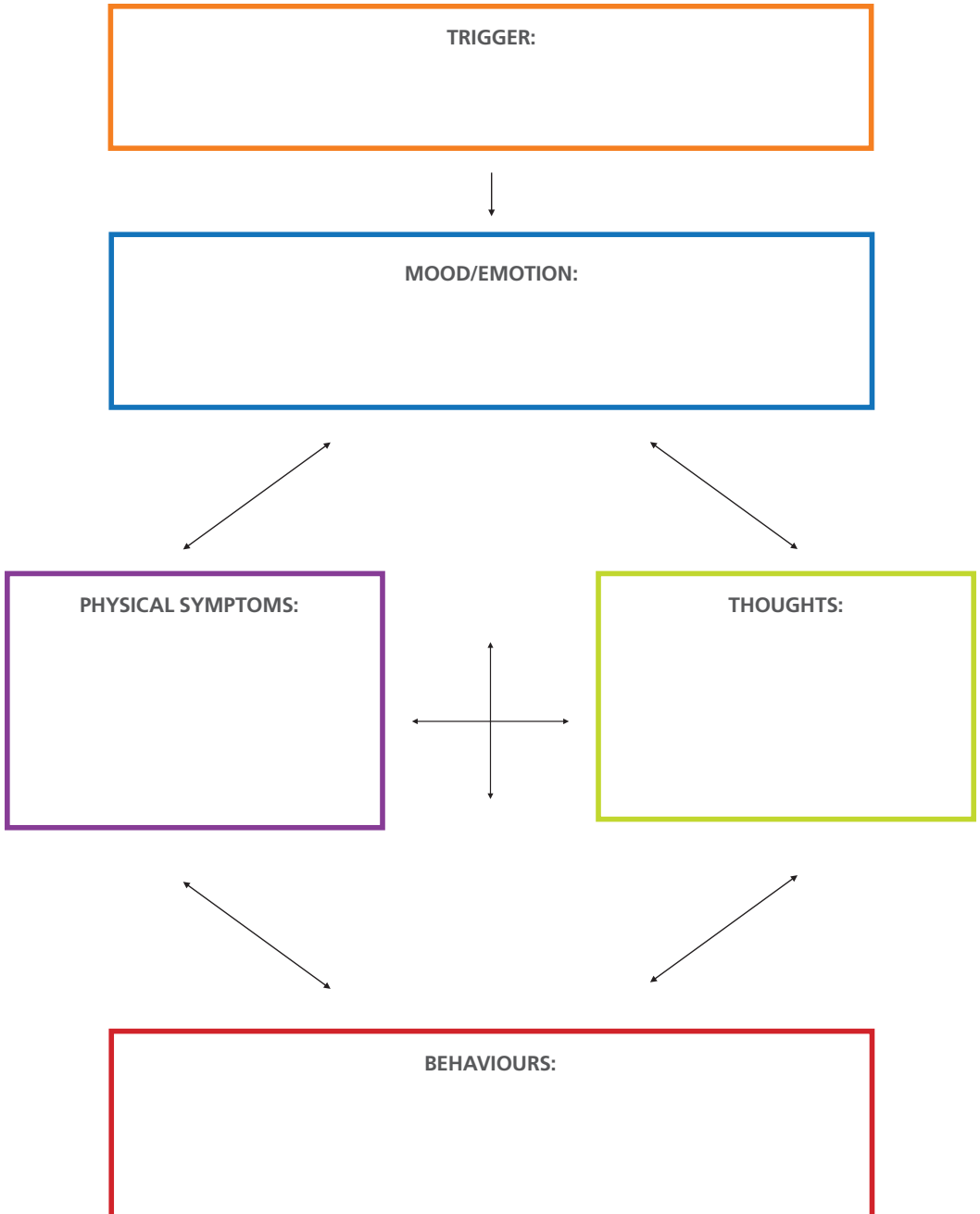
Our body wants to be as light as possible so we may need to go to the toilet more frequently.

Five Areas Diagram

When we are anxious in a particular situation, we experience changes in our body, our mind, our feelings and our behaviour. To help us look at what we are going through, we can use a Five Areas Diagram. Below is an example of what a Five Areas Diagram might look like. Notice how the different areas are connected by arrows that go both ways. This is because each of the areas will affect the others. For example, if you feel anxious, you might get physical symptoms like a racing heart, you might worry that you are going to faint and feel you need to sit down immediately or escape from the situation, which might make you feel more anxious. This is what we call a vicious cycle.



To help you to look at your personal difficulties in more detail, have a look at the blank 'Five Areas Diagram' below and try to fill it in based on your personal experiences and how you might be feeling right now.



Goal Setting

Now that you have had an opportunity to work on your own Five Areas Diagram, you may have a better understanding of some of the unhelpful changes you have experienced recently. Next we can start to look at what your personal goals are and what you would like to achieve. Based on your personal goals, we can move on to selecting an intervention that could help you in the road of recovery.

Before we can start to learn to apply these new strategies into our current life situation, we need to know what we want to achieve or how we would like things to be different from how things are currently. Making changes and learning new things can be challenging when we are feeling anxious and therefore is important that we start with small steps and build up from these small steps. We can start the process by looking at making short term and long term goals. In general your goals would be directly linked to your problem statement you created during your assessment. Your PWP will help you to review your problem statement in the session and you can reflect on your experiences and changes as they occur.

Write Your Problem Statement Here:

My main problem is...

To help you in thinking about your goals and what you would like to achieve ask yourself the following questions;

- What is it that I am really struggling with at present?
- When and where do I find things most difficult (i.e. work, home, when alone)?
- Are my difficulties related to being in a specific situation with specific people?

To be most effective your goals should be SMART.

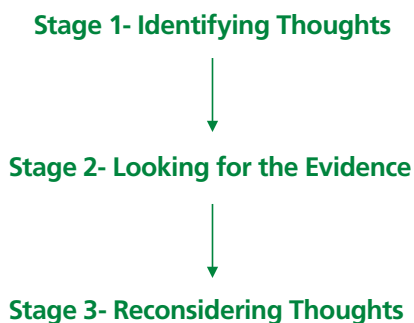
SMART GOALS	
SPECIFIC	Make your goal as specific as possible. Ensure it includes dates, times, resources and anything else that you might need to achieve it.
MEASURABLE	Work out how you will know whether you have completed your goal and/or tracking your progress. If you cannot do this, think about rephrasing the goal so that you will be able to measure it.
ACHIEVABLE	Make certain it will be possible to complete your goal. If your goal is short-term, ensure it is realistic that you will be able to accomplish it in the next couple of weeks. If not, think about breaking it down into smaller parts.
RELEVANT	Ensure that your goal is important and applicable to your life now. Decide if achieving the goal will make a difference to you right now. If not, try to adapt it so that it will make a difference.
TIME SPECIFIC	Try to set yourself a time by which you want to achieve your goal. If short term, this may be within the next week or two. If not, then go back to 'achievable' and think about how to adapt it to make it so.

SHORT TERM GOALS
LONG TERM GOALS

Thought Challenging

Thought challenging is based on the notion that our emotional states can be maintained by how we think. Some thoughts are 'automatic' and many of these can be 'unhelpful'. Unhelpful automatic thoughts seem believable and real at the time they appear and they are often ones that would upset anybody. These types of thoughts have a very powerful impact in maintaining particular states of mood. Unhelpful automatic thoughts are often based on our assumptions of a situation, as opposed to the facts and the reality of the situation. Thought challenging is a process that helps us to examine and challenge our unhelpful thoughts, and it allows us to gain a more realistic and balanced way of thinking, in order to improve our mood.

There are three steps to the process of thought challenging and your PWP will support you through each stage.



Stage 1 - Identifying Thoughts

In order to be able to help you in identifying your thoughts, it is helpful to record a particular situation where you were feeling a particular emotion and try to identify what the emotion was. Try to give this emotion a rating of intensity from 0-100%, whereby 100% would be the most intense the emotion could be. Following this, try to capture the exact thoughts that went through your mind at the time of being in that situation and write these thoughts down on your Thought Diary. Once you have identified the thought/s, try to think about how much you believed those thoughts to be true at the time and give them a rating from 0-100%, whereby a rating of 100% would mean that you believe there to be no other explanation. See an example on the next page.

Thought Diary

Situation Where, who with, when	Emotion Rate the intensity of the emotion from 0-100%	Thought Rate how much you believed this thought at the time from 0-100%
Sat watching TV with my partner, not able to concentrate, my mind filled with thoughts	Anxious 90% Upset 70% Worried 75%	"I am so worried about all the things I have to do" 70% "I never do a good enough job" 75% "I am worried other people notice especially at work and think someone else could do a better" 90%

Stage 2 – Looking for the Evidence

Once you have identified and written down your thoughts on the Thought Diary, choose one thought to work on. Ordinarily this would be a thought you have given the highest belief rating, or a rating of 60% and above. We call this thought a 'hot thought' because in general the highest rated thoughts cause the most emotional distress. Once you have selected the thought you would like to work on, transfer this to the 'Evidence Recording Sheet' where we would then search and examine the evidence for and against this thought. Please remember the evidence should be based on facts, rather than your opinion. See an example below.

Evidence Recording Sheet

My thoughts	My belief %
"I never do a good enough job"	90%
Evidence for	Evidence against
-I have not got a promotion -I'm signed off work	- I have achieved some things like raising my two children - Everybody has difficult times - I have never had time off sick before - I am good at supporting my parents in their old age - Other people have not got a promotion - I have been in my job for 3 years successfully

Stage 3 – Reconsidering Thoughts

Now that you have identified your thoughts and looked for evidence for and against your thoughts, you can start to reconsider your thoughts based on the facts you have gathered. The idea is to come up with a revised thought, based on the evidence you gathered previously. See an example below:

Reconsidering Thoughts

Revised thought Rate how much you believe the new thought From 0-100%	Emotion Rate the intensity of the emotion from 0-100%
"I am just having a tough time at the moment, there are plenty of things I have achieved in my life" 50%	Anxiety 50% Upset 40% Worry 50%

Thought Diary

Try and keep a thought diary for yourself:

Stage 1: Identifying Thoughts

Situation Where, who with, when	Emotion Rate the intensity of the emotion from 0-100%	Thought Rate how much you believed this thought at the time from 0-100%

Now pick the hot thought, and have a go at challenging it:

Stage 2: Looking for Evidence

My thoughts	My belief %
Evidence for	Evidence against

Finally, come up with a new revised thought and re-rate your feelings:

Stage 3: Reconsidering Thoughts

Revised thought Rate how much you believe the new thought From 0-100%	Emotion Rate the intensity of the emotion from 0-100%

Every time the original thought comes back in to your mind, repeat replacing it with the new revised thought. It will take practise for this technique to work. Over time you will find that the process comes more naturally to you.

Worry Management

It is normal to worry about things. There will always be stresses in our lives that cause us concern. Some worries can even be helpful (such as worrying about doing well on an exam or project causing us to work harder on it). However, if our worries start to come in to our minds at times we don't want, if we have difficulty getting rid of those worries or if they start causing us a lot of distress, then those normal worries may have become a problem. The worries can change how we think, feel and act, so it may be a good idea to try to address the worries when this happens.

Controlling Our Worries

Sometimes when we are having troubles with worrying, people will tell us, "Just don't worry about it." Unfortunately, stopping ourselves from worrying is not that simple. You may be able to forget about them for a short time, but they'll normally return later. Even worse, by telling ourselves not to think about the worries; we often think of them more and have an even harder time getting rid of them.

For example, right now I want you to think about a pink elephant. See it in the room with you. Notice what size it is, what it looks like, what shade of pink it is, where is it standing, and it is doing. Try to have a clear picture in your mind.

Now, stop thinking about the pink elephant. Don't let it enter your mind at all for the next few minutes.

Those thoughts about the pink elephant probably came back at least once. You may be able to get rid of the elephant for a short time, but try not to think about it for the rest of the day and see how you get on.

The problem is that by trying hard not to think of the pink elephant, we actually pay more attention to it. In the same way, the harder we try not to think about the things that worry us, the more strength we give to those worries and the more they are likely to return.

So if "just not thinking about it", isn't a good strategy, what can we do instead?

Keeping a Worry Diary

The first thing we need to do is identify exactly what it is we are worrying about. We do this by keeping a Worry Diary. This is a record of the things that you are worrying about throughout the day. You may want to write it down on a notepad or piece of paper, or on your phone or computer; whatever works best for you.

Once you have written down your worries, try to distract yourself away from them by whatever means you can. One way of doing this is 'Present Focus'. Try to pay attention to what is going on around you. Use any or all of your five senses (sight, smell, taste, touch, and hearing). Any time the worry comes back, just remind yourself that you will be coming back to it later, but that you don't need to worry about it now.



Worry Time

The next step is to set up Worry Time. This is a block of time that you arrange for yourself once per day when you will allow yourself to deal with your worries. You can put it wherever you like in your day, but you should try to keep it at a regular time. You should also try to avoid the final few hours before bed if possible as otherwise it may disrupt your sleep. Worry time can be whatever length you'd like (30, 45 or 60 minutes are common times), but it is important to set aside the same length of time every day.

During this time, you should get your list of worries. Reflect on the worries you recorded. If there are any worries that are no longer bothering you or no longer seem relevant, then no further action is required.

For those that are still bothering you, decide which type of worry they fall under. This will help you see how controllable they are and which course of action to take towards your thoughts.

There are two types of worry that many of us experience:

P) Practical Worries: Sometimes we worry about existing situations that we do have control over. We can do something about them either now or in the near future. These can be things such as studying, paying the bills, finding childcare, etc.

H) Hypothetical Worries: Sometimes we worry about future situations. These are our 'What if' worries. We may have very little or no control over them. These can be things such as,

*“What if I get ill when I am older?” “What if the plane I am on has a problem?”
“What if I lose my job?” etc.*

What next?

Now that you have identified the **types of worry** you are having, you will need to decide how you can manage them:

P) Practical Worries: existing problems that you have control over

- Start brainstorming! Make a **plan of action** to manage the worry e.g. making a study timetable to meet deadlines if you are worried about your studies.
- If the worry appears too big to solve, then your PWP can talk to you about **Problem Solving** techniques in your sessions to learn how to break down the worries and create solutions for them.

H) Hypothetical Worries: the future 'what ifs' that you have little or no control over

- Ask yourself how likely is it that this will happen? Will it matter in 5 years?
- Can you do something about the problem, prepare for it or is it out of your control?
- You might have a small amount of control over these 'what ifs'. For example, you can manage your health with good nutrition and exercise, but we cannot say for certain that this will stop you from becoming ill years from now.
- If the worry is something that you have no control then use **'Present Focus'**. Try to shift your attention away from the worry and accept that there is nothing you can do to change this situation and that worrying further will not achieve anything. Move your attention to something more enjoyable or on something you have control over.

Worry Diary

What am I worrying about?	Type of worry (P or H)	Can I do anything about it right now?
What if no one comes to my party this weekend?	H	No. I have invited people and reminded them about it. They will probably come.

Relaxation

Relaxation is another effective way of reducing anxiety. By doing changing behaviours that affect our body we can reduce the physical symptoms that feed the vicious cycle of anxiety. There are two main types; Progressive Muscle Relaxation and Breathing Retraining.

Progressive Muscle Relaxation

Muscle tension is another symptom of anxiety that affects a lot of people. Releasing some of this tension can help us to feel less on-edge which can help us to feel less anxious overall. Progressive Muscle Relaxation aims to help you notice the difference between when your muscles are tense and when they are relaxed. It takes practise, but if you can get into the habit of doing it every day, you should find it very helpful. This procedure is unlikely to cause any injury as it is all controlled by you, but if you have any concerns that this might affect (such as back or neck pains), you may wish to discuss them with your GP before attempting this.

General Procedure

Working through muscles in order, tense the muscle and hold it for 8-10 seconds. During this time, pay attention to how tight it feels. Then as you release the tension, notice how relaxed your muscles feel instead. If you have more time, do this two or three times before moving to the next group of muscles. Each time, notice the difference between tense muscles and relaxed muscles.

Relaxation Sequence

It doesn't matter what order you work through your muscle groups, but it is best to use the same order each time. We would suggest working from top to bottom, but you can use whatever order you feel most comfortable with. Below is an order that you can work through:

Fingers. Wrists. Elbows. Eyes. Face. Jaw. Shoulders. Stomach. Hips. Knees. Ankles. Toes.

Alternatively, if you prefer to listen to someone talk you through the exercise, your PWP will be able to provide you with a CD or a link to an online resource that you can work through.

Controlled Breathing

This technique automatically sends a message to the brain to tell it that the body is relaxing. This reverses the physical symptoms of anxiety, such as fast breathing or palpitations. You may be required to repeat it a number of times for effective results, and it will get more effective with time and practice, as the body re-learns a new behaviour. This is especially true if the unhelpful physical symptoms are habitual and have been happening for a while. This technique is excellent for helping to get to sleep.

It will help if you practice using this technique regularly, and at first use it at times when you don't need it, but for regular daily practice. Do this for one or two weeks several times a day, then use it when you need it.

General Procedure

Breathe in gently and evenly, over a count of 3 seconds.

Hold your breath for a count of 3 or 4 seconds.

Breathe out steadily and evenly over a count of 4 or 5 seconds.

To start with, use a clock with a second hand to get the length of the count right. Once you have an idea of the pace of the count, you won't need to use the clock anymore.

Make sure your breathing is calm and easy. If a person is looking at you whilst you are doing it, they should not be able to detect that you are breathing any differently to normal.

If you struggle with the count, try starting with a lower count; breathe in for 2 seconds, hold for 3 seconds and breathe out for 4. Or try 1-2-3, or 2-2-3. Experiment and use whatever works as your best starting point. Try to keep the out-breath longer. When you get used to this, increase gradually until you are doing 3-3-4.

Practice the technique little and often to get used to it before expecting it to work at its best. Use it for just a few seconds or minutes at a time, but use it many times throughout the day. It is ok to take some normal breaths between the rounds if you need to.

Planning for the future

Now is a good time to review the progress that you have made with your PWP. Firstly, let's look at those initial goals that you made:

SHORT TERM GOALS	
The goals I set were:	Do I feel they have been met?

LONG TERM GOALS	
The goals I set were:	What can I do to keep heading in the right direction?

Now that you have either made progress towards, or met these goals, let's look at making some new ones, or using the new skills that you have learned.

Goal (make sure it's SMART)	How can I achieve this?
Short term	
Longer term	

Relapse Prevention

Now that you have come towards the end of your treatment it is important to look at ways to avoid things 'slipping back' to how they were before. Your PWP will support you to complete this relapse prevention and will review the plan with you during your final session.

It is natural to experience a lapse or relapse, particularly at stressful periods in our life because change can be challenging to maintain. A lapse is described as a one-off return to previous unhelpful behaviours e.g. avoiding a social event. A relapse is a return to a certain lifestyle e.g. persistently avoiding activities, returning to negative automatic thinking. Some people relapse many times before maintaining the changes they have made. Therefore it is helpful to learn about and use relapse prevention strategies to avoid returning to the initial vicious cycle we looked at using the Five Areas Diagram. Answering the questions on the next page can be helpful in achieving this, so please have a go at filling out the table with your own examples which you can review and build on in your last session with your PWP.



Reflections

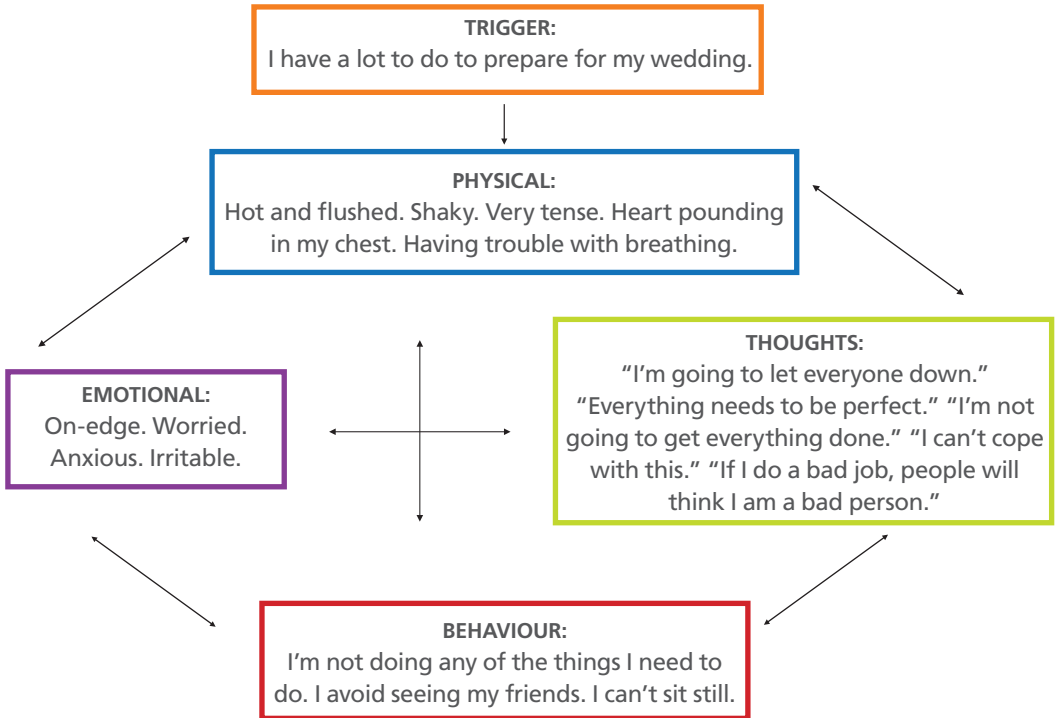
<p>What have I learnt about myself during my treatment sessions? Think back to the 'Five Areas Diagram' if this helps.</p>	
<p>Which helpful skills have I learnt that I can continue to use?</p>	
<p>What are the barriers to me using these skills in the future? (e.g. time, my own thinking). How can I overcome these barriers?</p>	
<p>What are some of the early signs that things may be slipping? Remember these may be thoughts, behaviours, emotions or body sensations. (You may wish to ask friends and family as they often notice first).</p>	
<p>Are there any particular situations or triggers that I need to plan ahead for?</p>	
<p>Everyone has the odd 'bad' day or two. What can I do on these days to help me?</p>	
<p>If I am worried that things are slipping again, who can I contact to support me? Think about friends, family, GP, or another organisation.</p>	

Recovery Story – Worry Management

Jenny was a 38 year old woman who was getting married in 6 months' time. She started feeling overwhelmed with how much she felt she had to do. As a result, she started finding herself getting worried about other things in her life.



Let's have a look at Jenny's initial five areas to get an understanding of the difficulties she was experiencing:



With the help of her PWP, Jenny made a problem statement to summarise her difficulties:

You can see that Jenny's anxiety was causing her fight-or-flight to kick in, causing the physical symptoms. This anxiety was leading her to have negative thoughts about herself and her abilities and because she was doubting herself, she wasn't making any progress on the things she needed to do, causing her to become more anxious and giving her more thoughts that she wouldn't manage to complete everything.

"My main problem is that I feel I have too much to prepare for my wedding. I feel anxious and tense all the time. I know that I can't do everything I need to and people will think less of me if everything isn't good enough. This impacts my life because I am not able to do anything."

She also identified the following goal:

- I would like to be able to control my worries so that I am able to get on with the things I need to do for my wedding over the next six months.

After discussing the treatment options with her PWP, Jenny decided that worry management would be the most helpful. She started keeping a Worry Diary and wrote down what her thoughts were. She then worked out what type of worry they were. Here's an example of one of her days:

What Am I Worrying About	Type of worry
We have not arranged a wedding photographer.	Practical.
Everything is going to go wrong.	Hypothetical.
It might rain and we might not be able to have outside photos.	Hypothetical.
What if I trip over while walking down the aisle?	Hypothetical.
People will think I look fat.	Hypothetical.
I haven't paid the caterer yet.	Practical.
I've got too many things to sort out on my own.	Practical.

Jenny decided that she would have 45 minutes for worry time each evening at 7:30, after dinner, but plenty of time before bed. In her worry time, she took her list, and thought about what she could do to fix the Practical Worries, whether there was anything she could do about the Hypothetical Worries, and trying to discard the worries that she couldn't do anything about. She then made an action plan of the things she was going to do.

Action Plan:
• I will talk to my fiancé tomorrow afternoon and get him to take on some of the jobs (including finding a photographer) so that I feel less overwhelmed.
• I will write a cheque for the caterer and post it first thing tomorrow morning.
• I can't change the weather, so I will ask the venue if there is somewhere inside where we can have our photos taken if it rains.

After 45 minutes, Jenny stopped her worry time and focused on being in the moment, spending time with her fiancé. When she noticed a new worry, she wrote it down for the next day.

After a few weeks, Jenny was able to address thoughts as they came into her head and only needed to keep a few for her worry time.

Recovery Story – Thought Challenging

Eric is a 61 year old man who had become anxious recently because of some difficulties at work. During a presentation he gave to an important new client, one of their team yawned. This made Eric become very flustered and although he finished the presentation, he did not feel he had done a good job which made him doubt about his ability to give presentations. He worried about losing this client's business and that as a result he would be fired.



Eric's problem statement was:

"My main problem is that I have a lot of self-doubt. Ever since my terrible presentation, I don't think I can do my job. I feel panicky and get hot, sick and dizzy when I am asked to do presentations now. I am making excuses so that I don't have to do them. This makes me worry that I am going to lose my job."

His goals were:

- To be able to deliver presentations confidently without worrying.
- To have more confidence in my ability and not make excuses to avoid doing things.

Based on his problems, Eric's PWP suggested that he would benefit from Thought Challenging or Relaxation. Eric felt that Thought Challenging was the better option. Eric was asked to keep a Thought Diary to see what his thoughts were.

Situation Where, who with, when	Emotion Rate the intensity of the emotion from 0-100%	Thought Rate how much you believed this thought at the time from 0-100%
While giving a presentation, someone yawned.	Worried (90%). Embarrassed (80%). Angry (20%). Upset (30%).	"He thinks I am a boring" (90%). "I am boring" (80%). "I am going to lose us their business" (50%).

My thoughts	My belief %
"He thinks I am boring"	90%
Evidence for	Evidence against
- People do yawn when they are bored. He did not ask any questions at the end of the session.	- People yawn for lots of reasons. Lots of people in the room didn't yawn and did seem interested. He thanked me for my presentation before he left. I have done lots of presentations before and people weren't bored then.

After weighing up the evidence, Eric only believed his existing thought 30%. The new thought that he came up with was, "One man yawned, so he might have been bored, but it could have been for lots of reasons. Everyone else seemed to enjoy the presentation so try not to be so hard on yourself" (85%). With this new thought, Eric now only felt worried 20% and embarrassed 10% and no longer felt low or angry. This helped him regain his confidence at work and although he had to challenge a few more thoughts to be back to where he was before, he was able to deliver presentations rather than have to avoid them.



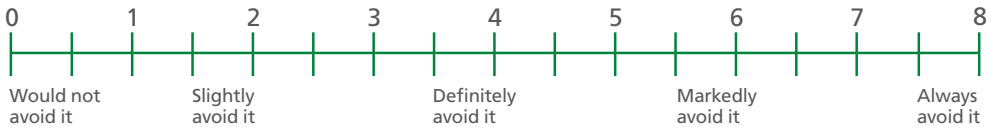
Throughout your treatment you will be asked to complete these questionnaires before your appointments, so that your practitioner can assess the progress you are making and review the support and therapy that you receive.

PHQ-9 - Over the last 2 weeks, have you been bothered by any of the following problems? (Circle your answer)	Not at all	Several days	More than ½ the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
3. Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself in some way – or that you are a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed? Or the opposite - being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts of being better off dead or of hurting yourself in some way	0	1	2	3
				(out of 27)

GAD-7 - Over the last 2 weeks, have you been bothered by any of the following problems? (Circle your answer)	Not at all	Several days	More than ½ the days	Nearly every day
1. Feeling nervous, anxious or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Trouble relaxing	0	1	2	3
5. Being so restless that it is hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid as if something awful might happen	0	1	2	3
				(out of 21)

Phobia Scales

Choose a number from the scale below to show how much you avoid the situations or objects listed. Then write the number in the box opposite the situation.



1. Social situations due to a fear of being embarrassed or making a fool of myself
2. Situations because of a fear of having a panic attack or other distressing symptoms (e.g. loss of bladder control, vomiting or dizziness)
3. Situations because of a fear of particular objects or activities (such as animals, heights, seeing blood, being in confined spaces driving or flying)

Work and Social Adjustment Scale

People's problems sometimes affect their ability to do certain day-to-day tasks in their lives. To rate your problems look at each section and determine on the scale provided how much your problem impairs your ability to carry out the activity (choose a number from the scale below and then write the number in the box opposite)



WORK

if you are retired or choose not to have a job for reasons unrelated to your problem, please write N/A (not applicable)

HOME MANAGEMENT

Cleaning, tidying, shopping, cooking, looking after home/children, paying bills etc.

SOCIAL LEISURE ACTIVITIES

with other people, e.g. parties, pubs, outings, entertaining etc.

PRIVATE LEISURE ACTIVITIES

Done alone e.g. reading, gardening, sewing, hobbies, walking etc

FAMILY AND RELATIONSHIPS

Form and maintain close relationships with others, including the people that I live with.

Additional Resources

- **Samaritans – 08457 909090, www.samaritans.org**
Confidential listening service for anyone who needs emotional support or someone to talk to.
- **Books On Prescription www.booksonprescription.org.uk**
Self-help scheme to provide access to self-help books on a range of subjects.
- **Glasgow Steps Audio Materials <http://glasgowspcmh.org.uk/downloads/audio>**
Downloadable tracks for stress, depression, anger and many other topics.
- **Mood Juice www.moodjuice.scot.nhs.uk**
A variety of self-help resources.
- **Citizens Advice Bureau – www.citizensadvice.co.uk/**
Help people resolve their legal, money and other problems by providing free, independent and confidential advice.
- **Family Lives – 0808 800 2222, www.familylives.org.uk/**
Free service that can help with problems in all aspects of parenting.
- **Benefits advice www.gov.uk/benefits-advisor**
Information around what benefits you might be entitled to claim.
- **Depression information www.depressionalliance.org**
Specific information about depression.
- **NHS Choices www.nhs.uk**
General information on all aspects of physical and mental health.
- **Relaxation www.nhs.uk/conditions/stress-anxiety-depression/pages/ways-relieve-stress.aspx**
Further relaxation techniques to relieve stress

References

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