

Stress/Anxiety Management Guide





Stress/Anxiety Management Guide

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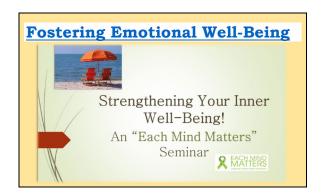
Introduction

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Work, deadlines, bills, homework, chores... and the list goes on. The demands of daily life pull us in all different directions, requiring time and energy that we don't always have. At some point, just maintaining a to-do list becomes a to-do of its own. When these demands grow out of hand, they may lead to the all-too-familiar feeling of stress. Stress is insidious. When stress goes unchecked, its symptoms linger and chip away at both physical and mental health. Many people grow used to the constant feeling of stress pressing down on them, while others wear their stress as a badge of honor.

That being said, it's okay to have some stress. A healthy level of stress pushes people to take care of their responsibilities, without keeping them up at night or damaging their health. The goal isn't to eliminate all stress—it's to keep stress at levels that are helpful, rather than harmful.

In this guide, we provide an overview of stress, its symptoms, and how it presents in daily life. Then, we will introduce 5 strategies for managing stress in a healthy way. But first, let's look at building a solid foundation for inner health and wellness, by viewing the following Power Point presentation.



Click on the Link at the top of the box while pressing the Control key

Hope for Stress and Anxiety

A major premise of this workbook is that you, the reader, have the capacity to change, grow and develop into the person you desire to be, no matter how unpleasant your life circumstances may have been to this point. Famous psychologist Alfred Adler emphasized this point as a cornerstone of his theory of personality: "According to Adler, human behavior is not determined solely by heredity and environment. Instead, we have the capacity to interpret, influence, and create events. Adler asserts that what we were born with is not as important as what we choose to do with the abilities and limitations we possess" (Corey, 2017). Hence, the forward-looking and hope-centered emphasis of this workbook.

"Since the beginning of the twenty-first century, Martin Seligman during his American Psychological Association presidential year positioned psychology to concentrate on health and well-being rather than despair and depression...The field of coping has dovetailed well with this positive psychology conceptualization. It enables us to focus on what can be done to facilitate health, well-being, and optimum development" (Reevey & Frydenburg, 2011). In keeping with this positive, growth-centered emphasis, this workbook is designed not so much to focus on the negative aspects of anxiety and stress, but rather to provide positive coping strategies and workable ways to take care of our inner selves, and to strengthen our emotional and mental wellness.

Personality type and characteristics play an important role in coping with anxiety and effective handling of stress, yet they are not the prime determiners of effective coping strategies. "Personality is...related to coping; different individuals have different characteristic coping styles. Furthermore, a particular coping style may tend to be more effective for people with some personality traits but not others" (Connor-Smith & Flaschbart, 2007). "Personality traits have generally been defined as underlying behavioral dispositions, whereas coping has been defined as the thoughts, feelings, and actions used by individuals to manage stress" (Folkman & Moskowitz, 2004). Whereas personality traits are generally stable and resistant to change, coping styles develop in response to specific situations and can be modified with training.

The important point to note here, according to Connor-Smith and Flaschbart, is that in general, coping mechanisms are likely more teachable and trainable than are broader personality traits. In other words, the message of hope here is that no matter one's personality type, effective coping strategies for stress and anxiety can be learned and can then benefit one's emotional and mental well-being.



What is Stress?

Stress is a feeling of being tense, overwhelmed, worn out, or exhausted. A small amount of stress can be motivating, but too much stress makes even small tasks seem daunting. Symptoms can range from mild (e.g., headaches and stomachaches) to severe (e.g., anxiety and depression).



Acute vs. Chronic Stress

Acute stress is brief but intense. Short-term stressors—such as giving a speech, getting into an argument, or studying for an exam—cause acute stress.

Chronic stress, on the other hand, is long-lasting. The symptoms may not be as intense in the moment, but the long-term effects are more severe. Long-term stressors—such as a difficult job, an unhealthy relationship with frequent arguing, or financial difficulties—cause chronic stress.

The symptoms of acute stress, such as sweating, irritability, and headaches, are disruptive in the moment. The symptoms of chronic stress might go unnoticed in the moment, but cause serious long-term health problems.

Note: Those with chronic stress often become accustomed to the discomfort, and the feeling of stress becomes their new "normal". However, the negative health effects persist.

Symptoms of Stress

Stress causes physical, emotional, and behavioral symptoms. Some people will have an easy time identifying their symptoms and connecting them with stress. Others—especially those who have had chronic stress for years and years—will need more guidance before recognizing their symptoms as stress-related.

Acute Symptoms: Symptoms that occur before or during a stressful situation								
Physical	Emotional / Cognitive	Behavioral						
 Asthma Headaches Migraines Back pain Sweating Nausea Indigestion Chest pain Fatigue 	 Worry Irritability Anger Loss of motivation Difficulty concentrating Mood instability Decreased sex drive Memory problems 	 Nail biting Constant thoughts about stressors Restlessness Teeth grinding Disrupted sleep, diet, and exercise Interpersonal conflict Social withdrawal Substance use Procrastination 						
Chronic Symptoms Symptoms and consequences of long-term stress								
 Sleep disorders Weakened immune system Poor diet and exercise habits 	 Heart disease Anxiety disorders Skin diseases 	Depression Memory impairment Substance use						

Stress Management Strategies

To access Worksheets in this workbook: a) Copy the link and paste it into your browser; b) download the worksheet by clicking on the green button that says "Download Free Worksheet"; c) print the worksheet and fill it out.

Stress Management Tips

Subjective Perception and Stress: Which Lenses Am I Using?

The Greek philosopher Epictetus is generally well-known for his quote about the importance of the ways in which we view our world: "Men are disturbed not by things, but by the view which they take of them." This runs counter to the way in which most people view feelings and emotions, i.e. that when an event happens (Think: someone slipping into the parking spot you'd set your sights on), a certain, set, predetermined feeling automatically follows. But think again: A thought runs through your mind about the parking space (#?\$%!) which then determines your emotional response. It was not the event itself, but rather the thought you had about it, which led to the angry (rage?) feeling.

Modern psychological research has validated this famous insight, an example of which is found in the Handbook of Stress: Causes, Effects and Controls: "Research suggests it is not the events themselves, but their appraisal that largely contributes to one's experience of stress. The combination of not having learned adaptive coping strategies and being exposed to challenging situations can render people vulnerable to experiencing stress and developing mental health problems" (Hansel, & Wittrock, 1997).

According to Devonport & Lane, this appraisal comes in two specific forms, primary and secondary appraisal. Primary appraisal refers to the evaluation of the stressor. Generally, a person will appraise an event as either irrelevant, benign/positive or stressful. Secondary appraisal refers to the subject's ability to use their stress resistance resources to overcome short-term reaction to the immediate stressor. "It has been recognized that the appraisal processes shape the meaning of any encounter, whether it is perceived as stressful and how it can be dealt with" (2006). Kottler and Chen point out that there are many factors which lead to one's unique perceptions of stress and stressors, and therefore to our widely-varying responses to stressors. These include a person's prior experiences and history, personality style, available resources, and resilience (2011).

It is from the famous psychologist Alfred Adler that we glean much of our understanding about the idea of subjective perception and the role it plays in mental and emotional health. According to Adler, each individual has a unique worldview, or subjective frame of reference, known as phenomenological. "The phenomenological orientation pays attention to the individual ways in which people perceive their world. This subjective reality includes the individual's perceptions, thoughts, feelings, values, beliefs, convictions, and conclusions" (Corey, 2017).

Therefore, behavior can only be understood from the vantage point of the individual's subjective perception. As Corey points out, objective reality is less important than how we interpret reality and

the meanings we attach to what we experience. Many contemporary theories have incorporated this notion of the client's subjective worldview as a basic factor explaining behavior.

Kottler and Chen illustrate an example of subjective perception as it relates to stress: "Stress means different things to different people. To some, it represents a complete breakdown in their lives; to others, it means a minor annoyance...and in some circumstances, stress means an opportunity to rise to new levels of performance in a variety of areas" (2011)

The pivotal role, relative to stress and anxiety, played by one's perceptions and cognitions cannot be overstated; the literature is replete with findings and insights into the ways in which subjective perceptions can either help or hinder stress and anxiety management. "Cognitive distortions play significant roles in exacerbating distress levels and negative conflict behavior" (Coban, 2013).

There's an important, and potentially encouraging, message for us to imbibe from the above combination of philosophical insight and psychological research. Even though many of us have grown up in environments which have led us to the tendency toward distorted or skewed appraisals, we need not remain there unless we choose. New, healthy, reality-based perspectives can, in fact, be cultivated, and we can learn to view our circumstances through a different set of lenses. These more adaptive appraisals can in turn lead to better coping strategies, as well as to a healthier sense of self.

experience does not mean you deny its occurrence. When you change your perception, you change your perspective, which really means to "see" something from a different vantage point, through different eyes." To elaborate, this doesn't mean that the experience didn't happen; it simply means that we attach a different meaning to an otherwise neutral event. The salient point for our emotional health is that it is we who attach meaning to all our experiences, so we might as well attach a meaning that corresponds to reality and serves to bolster our mental health.

Kotsos points out that to change our perception is not denial: "To change your perception of an



To access Worksheets in this workbook: Click on the link while pressing the "Control" key.

Introduction to Stress Management
Worksheet



Build Resilience

Resilience refers to the ability to handle stress when it arises, and to protect oneself against future stress. Research has shown that there are a number of qualities that contribute to resilience, including social support, optimism, sense of humor, spirituality, self-esteem, and adaptability. (Many of these qualities can be fostered in therapy.)

Here are a few ways to build resilience:

Using social support can help reduce stress. Social support may come from friends, family, or community organizations. Identify current and potential sources of social support. For help doing so, try the social support worksheet:

Social Support Worksheet

Benefits of participating in a support group may include:

- Feeling less lonely, isolated or judged
- Reducing distress, depression, anxiety or fatigue
- Talking openly and honestly about your feelings
- Improving skills to cope with challenges
- Staying motivated to manage chronic conditions or stick to a wellness routine
- Gaining a sense of empowerment, control or hope
- Improving understanding of a mental/emotional struggle and your own experience with it

Positive journaling can foster optimism, which contributes to stress resilience. Positive journaling involves writing about daily positive experiences. It tends to be easy to remember negative experiences, but it takes more work to recall and appreciate positive experiences. Positive journaling is a great way to appreciate these experiences. For a journal template, try the positive journal packet:

Positive Journal Worksheet

Showing gratitude can increase self-esteem, which contributes to resilience. There are a number of ways to show gratitude, including gratitude journaling, telling someone "thank you", and visiting someone you appreciate. Check out the following gratitude resources:

Gratitude Journal
Worksheet

Tip: Resilience isn't built overnight. Just like with any other skill, it comes with time and practice.

Relaxation Techniques

Relaxation techniques, such as deep breathing and progressive muscle relaxation, are a fundamental part of stress management. These techniques trigger the relaxation response, which counters the body's stress response. This section focuses on how relaxation skills fit into stress management treatment. For information, instructions, and resources about specific techniques, see the guide below on the subject

Relaxation Guide

Relaxation techniques not only provide immediate stress relief, but the effects also generalize. This means the benefits of relaxation continue to be felt long after the exercise is complete. These techniques work best when done regularly and during times of calm, rather than exclusively when stress is at its peak. Begin by practicing relaxation skills one at a time, then developing a routine that includes daily relaxation. Practicing on a consistent basis is important for relaxation to be effective in the long-term.

Tips for Making Relaxation a Habit

Model relaxation practice by starting or ending every day with a relaxation technique or two. This also reinforces the positive effects associated with practicing relaxation.

- · Assign daily relaxation practice to yourself as homework.
- Plan where relaxation can fit into a daily routine. It may help to set an alarm as a reminder, or connect relaxation practice with another activity. For example, practicing deep breathing for 10 minutes after each meal.
- **Keep practicing even if the positive effects are small.** The benefits of relaxation accumulate and grow with practice.

Reducing Stress through Deep Breathing



Time Management

Too much to do, and too little time. Balancing responsibilities and fitting them into a busy schedule is a common stressor. Time management skills can reduce the mental burden of juggling tasks and increase the likelihood that everything gets done.

Time Management Tips

- **Use a to-do list or appointment book.** Writing down your responsibilities has a number of benefits. Not only will it ensure you don't forget anything, it also reduces stress by allowing you to drop your mental to-do list.
- **Prioritize your tasks.** Focus on completing the most important, and the quickest tasks, first. If you have a few "to-dos" that will only take five minutes, knock them out quickly for the peace of mind.
- **Break large tasks into smaller pieces.** It's easy to feel overwhelmed when you have a really big task before you. Breaking big tasks into small pieces will help you get started, which is often the hardest part. For example, writing a paper can be reduced to pieces such as doing research, preparing an outline, and writing an introductory paragraph.
- **Limit distractions.** Spend a few days recording how much time you spend on distractions such as social media or TV. Then, cut out the distractions you don't actually enjoy, and schedule time for the ones you do enjoy. Always set an alarm so you know when to get back to work.
- If you can't limit your distractions, get away from them. If you know that you will succumb to distractions, get away from them. Create clear boundaries between work and play by putting up a "Do Not Disturb" sign on your door, turning off your phone, or going to a coffee shop without a TV.

 Everyone is different in this regard— make the changes you need to focus.
- **Give yourself time between tasks.** Plan on arriving to appointments 15 minutes early, and bring something to do in case you find yourself waiting. Scheduling some buffer time will help to reduce your stress when things inevitably run long.
- **Let yourself be less than perfect.** If you try to complete every task to perfection, some of your other responsibilities won't get done at all. Focus on completing everything to an acceptable level, and then go back to improve upon your work if you have time.

Time Management Tips

Self-Care

When stress is at its worst, hobbies, relationships, and free time are neglected. As a result, stress worsens. This creates a cycle where self-care is neglected, and stress grows.

"Self-care" refers to your favorite activities that help you relax, have fun, or feel energized. These could include talking with a friend, going for a walk, reading, listening to music, or whatever else you enjoy. The important part of self-care is not so much *what* you do—it's just that you do it.

To start, the *Self-Care Assessment* can be used to explore current self-care habits while giving ideas of where self-care can be improved:

Self-Care Assessment
Worksheet

Self-Care Tips

- Self-care means taking time to do things you enjoy. Usually, self-care involves everyday activities that you find relaxing, fun, or energizing. These activities could be as simple as reading a book, or as big as taking a vacation.
- **Self-care also means taking care of yourself.** This means eating regular meals, getting enough sleep, caring for personal hygiene, and anything else that maintains good health.
- **Make self-care a priority.** There will always be other things to do, but don't let these interrupt the time you set aside for self-care. Self-care should be given the same importance as other responsibilities.
- **Set specific self-care goals.** It's difficult to follow through with vague goals, such as "I will take more time for self-care". Instead, set specific goals, such as "I will walk for 30 minutes every evening after dinner".
- **Make self-care a habit.** Just like eating one apple doesn't eliminate health problems, using self-care just once won't have much effect on reducing stress. Choose activities that you can do often, and that you will stick with.
- **Set boundaries to protect your self-care.** You don't need a major obligation to say "no" to others—your self-care is reason enough. Remind yourself that your needs are as important as anyone else's.

- A few minutes of self-care is better than no self-care. Set an alarm reminding you to take regular breaks, even if it's just a walk around the block, or an uninterrupted snack. Oftentimes, stepping away will energize you to work more efficiently when you return.
- **Unhealthy activities don't count as self-care.** Substance use, over-eating, and other unhealthy behaviors might hide stress temporarily, but they cause more problems in the long run.
- Keep up with self-care, even when you're feeling good. Doing so will keep you in a healthy routine. Plus, self-care might be part of the reason why you're feeling good!

 Not sure what to do? Use the Activity List worksheet to get some ideas.

Self-Care Tips

Self-Care Activities

Self-Care Ideas

(Click on link while pressing Control button)





Cognitive Restructuring

Stress is caused by our thoughts about a situation, not by the situation itself. Two people in the exact same situation might have different levels of stress (or no stress at all), just because of how they think about it.

Oftentimes, the thoughts that cause stress are irrational or exaggerated, but we respond to them as if they are factual. Irrational thoughts that lead to stress may look like the following:

"I'll never get through this."

"I have to be perfect all the time."

"If I don't get an A on the test, I'm a total failure."

The process of identifying and changing these irrational thoughts is called cognitive restructuring. Cognitive Restructuring is a simple but powerful technique for identifying and undoing negative thinking patterns like worry and rumination.

• Do you often find yourself "stuck in your own head," caught in endless spirals of negative thinking?

Maybe it's an overly judgmental inner voice that constantly points out past mistakes and perceived faults. Or maybe it's perpetual worry about the future and comparison to other people. For many of us, negative thinking patterns are the source of tremendous emotional suffering and misery. In fact, they're the key drivers of both depression and anxiety.

And while negative thinking can feel completely automatic and outside our control, with the right practice and techniques, you can learn how to re-train your mind's habitual way of thinking and free yourself from the burden of negative self-talk.

In this guide, you'll see exactly what Cognitive Restructuring is and what it looks like, including 10 of the most powerful benefits that come from practicing it. Then we'll walk step-by-step through the process of using Cognitive Restructuring yourself to identify, modify, and ultimately free yourself from your own negative thinking patterns.

Okay, let's dive in!

What Is Cognitive Restructuring?

Cognitive Restructuring is a core technique in Cognitive Behavioral Therapy, the most well-studied and effective approach to treating common mental health issues like anxiety and depression. And while it's often used to treat clinical disorders like anxiety and depression, Cognitive Restructuring can be just as useful to anyone who struggles with overly negative thinking patterns and self-talk.

Change the way you feel by changing the way you think

Cognitive Restructuring is based on the principle of cognitive mediation, which says that how we feel emotionally is not the result of *what* happens to us, but instead, it's the result of *how we think about* what happens to us. This means that we can change the way we feel by changing the way we think about what happens to us.

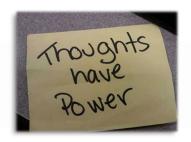
Here's an anonymous example from a recent therapy client:

I was browsing Facebook one evening before bed and notice that my best friend had posted about how much fun she had had with another one of our friends earlier that day. I immediately felt sad and a little angry because I had just spent the previous day with her and had a great time, but she didn't post anything about our day. Before I knew it, I was thinking about all the reasons my best friend might not really be as good a friend as I thought and secretly want to ditch me as a friend. I had been perfectly happy all evening, and within three minutes, I was an anxious, despondent mess!

Cognitive Restructuring would help this client make sense of this difficult experience by showing her how to organize what happened and modifying her initial thoughts:

- **What happened?** Notice that it was the Facebook post *triggered* or set off the whole chain of events and bad mood.
- What were the initial thoughts? The client explained that as soon as she saw the Facebook post, two thoughts popped into her mind: Why didn't she comment on our day yesterday? She must not have had as much fun with me.
- What were the initial emotions? She described feeling mostly angry at first, with a little sadness and fear mixed in as well.
- Can you come up with some alternative ways of thinking about what happened? Maybe she did post about our day together, but I just didn't see it because of Facebook's algorithm. I didn't post anything about our day together but that doesn't mean I didn't have a good time. Etc.
- **How are you feeling now?** After generating these alternative thoughts about what happened, the client explained that she was still a little upset, but definitely not as much.

Core Beliefs Info Sheet



Why Cognitive Restructuring works

Let's take a look at how Cognitive Restructuring works, encouraging us to do several very helpful things when we're upset, and trying to break free from negative thinking patterns:

- <u>It helps us get organized mentally</u>. Just like making a to-do list helps us feel more organized and less overwhelmed when we're working on a big project, Cognitive Restructuring helps us feel better by getting our mental space better organized.
- It forces us to slow down. Every negative thought leads to a corresponding "dose" of negative emotion. If you can slow down your thinking and have fewer negative thoughts, you'll end up with less emotion.
- <u>It helps us be more aware</u>. Thoughts and the emotional reactions they produce can happen quite automatically. Cognitive Restructuring helps us notice and become more aware of our mental habits, which is an essential step in eventually modifying them.
- It gives us a sense of agency and control. By noticing our default thinking patterns as just that, a default, and then generating new alternative thoughts, we change negative thoughts from something uncontrollable that happens to us, to things we actually have a good amount of control over.
- It helps us think more clearly and rationally. By encouraging us to question and examine our initial line of thinking, Cognitive Restructuring helps us to see errors or mistakes in the way we're thinking. As we'll see in a later section, identifying Cognitive Distortions is a key ingredient in managing our negative thinking patterns and moods better.

- It helps us reflect instead of reacting. When we're upset, it's natural to just react—worry more, crack open another beer, distract ourselves with YouTube, etc. Aside from the negative effects that go along with some of our favorite reactions to being upset ("empty" calories, wasted time, etc.), by always reacting without reflecting, we deprive ourselves of the opportunity to better understand our minds and learn how they work. Which of course is important if we want them to run more smoothly.
- It breaks bad mental habits. We can get into mental habits (like worry, for example) just as easily as we can get into physical habits like twirling our hair or biting our lip. The key to breaking those habits is to notice when we start doing them and substitute a different behavior. Cognitive Restructuring does just that: it forces us to notice bad mental habits and replace them with better ones.

These are just some of the mental skills that Cognitive Restructuring helps us to build.



How to Do Cognitive Restructuring: A Step-by-Step Plan

Now that we've talked a little bit about what Cognitive Restructuring is, what it looks like, and what some of the benefits are, it's time to dive into the nuts and bolts of actually doing it.

A quick note before we jump in: Like running on the treadmill or practicing scales on the piano, the power of Cognitive Restructuring comes from doing it consistently over time. Simply understanding it and doing it occasionally is not enough; for Cognitive Restructuring to have a meaningful effect on your life, it must be done consistently and become a habit. We'll talk more about this later, but it's important that you set your expectations realistically upfront.

What follows are the Six basic steps to follow, in order to do Cognitive Restructuring.

Step 1: Hit the pause button.

Cognitive Restructuring can be useful in many situations. But the best time to use it is when you notice that you're feeling a strong negative emotional reaction to something, especially if your response seems out of proportion to what happened.

Our typical way of responding to a sudden wave on negative feeling is to act on instinct:

Feel angry → lash out

Feel anxious → hide

Feel sad \rightarrow have a beer

An alternative is to use sudden, strong emotion as a cue or reminder to "hit the pause button" instead. Then, once you've briefly paused, ask yourself: What's going on here?

When we can inhibit our instinctive response to negative feelings and approach it with an attitude of curiosity, our chances of managing the situation intelligently go way up.

Step 2: Identify the trigger.

Once you've used sudden, strong emotion as a cue to pause, the next step is to identify what event triggered your response in the first place.

A triggering event is often something that happens in our external environment: A coworker makes a sarcastic comment, our spouse gives us "the look," a car cuts us off on the freeway, etc.



But events in our internal environment—that is, in our minds—can also act as triggers: A thought pops into mind that we forgot to mention a critical idea during the meeting, a memory of a recently-deceased friend comes to mind, etc.

To help identify the triggering event in any given situation, use who, what, when, where:

- Who is or was present with me at the time I got upset? Because we're social animals by nature, people often play either a direct or indirect role in our emotional reactions.
- What happened? Literally, what sorts of things happened to me leading up to feeling upset? Remember that no detail or fact is too small to be influential. The trigger doesn't have to be something big and obvious—in fact, often it's something quite small and subtle.
- When did I first start feeling upset? What happened immediately before this? This question is particularly important if you're doing Cognitive Restructuring hours or days after the fact.
- Where did it all occur? Often the initial triggers for becoming upset are a part of or connected with our physical environment.

Step 3: Notice your automatic thoughts.

Automatic Thoughts are our default, initial interpretations of what happens to us. They're almost always spontaneous (i.e. we didn't initiate them) and typically take the form of verbal self-talk or sometimes images and memories.

For example, if someone cuts you off while driving, your automatic thought might be "What a jerk!" Or, if you see an email from your boss late at night, your automatic thought might be "Oh no! What's wrong?! I must have forgotten something earlier." Or perhaps seeing a billboard advertisement for a funeral home triggers a memory of your mother's funeral—what it looked like, how you felt, etc.

We all have Automatic Thoughts all the time. And most of the time we either don't notice them at all or we're only vaguely aware of them. When it comes to Cognitive Restructuring, it's important to build the habit of becoming more aware of our automatic thoughts and really examining them closely.

Step 4: Identify your emotional reaction and note how intense it is.

Emotions are generated from our mental interpretations of things that happen. And the type and intensity of the emotions we experience depend almost entirely on the type of thinking we engage in.

For example, using the example from above of being cut off while driving: If your thought is "What a Jerk," you're likely to feel angry. If your thought is "That son of a b%#*h! What the heck is he thinking?" then you're likely to feel an even stronger form of anger, perhaps bordering on rage.

On the other hand, if your automatic thought was "Oh my God, he almost hit me! I'm going 70 miles an hour—I would have died!" You're much more likely to experience something like fear or anxiety.

Finally, your emotional response can contain more than just one emotion. If your automatic thought had been, "What a jerk! He almost hit me!" You'd probably experience some mixture of anger and anxiety. In this case, it's good to note both but typically there will be one that's stronger or more dominant.

Finally, for each emotion identified, rate how intense it was on a scale from 1-10.

Step 5: Generate alternative thoughts.

Once you've identified a trigger, noticed your Automatic Thoughts about that trigger, and taken note of your emotional reaction, the next step is to come up with alternative thoughts for each of your initial, Automatic Thoughts.

For example, sticking with the car example from above, instead of "Oh my God, he almost hit me! I'm going 70 miles an hour—I would have died!" You might construct an alternative thought like "Wow that was scary! He got pretty close to hitting me but I'm a pretty good driver and I handled it well."

Or, instead of "What a jerk! He almost hit me!" You might say something like "Maybe his wife is going into labor in the backseat and he's on his way to the hospital."

In any case, the important thing is to simply be flexible and come up with more interpretations than your first automatic one. This practice creates mental flexibility, a key component in the ability to disengage from negative thinking patterns and overwhelming emotion.

Also, in addition to simply generating more alternative interpretations or explanations of what happened, it can be useful to notice any obvious errors in your initial thoughts and develop alternative thoughts that are more realistic.

For example, if your automatic thought was "Oh my God, he almost hit me! I would have died!" you might point out to yourself that "I would have died" is far from certain, even if he had hit you, and substitute a thought that contains something about how you're a good driver and it's very possible that you could have acted soon enough to prevent an accident.

If possible, generate at least two or three alternative thoughts for each overly negative Automatic Thought.

Step 6: Re-rate the intensity of your emotional response.

After generating multiple (hopefully more realistic) alternative thoughts, return to your emotion(s) you identified in Step 4 and reassess their intensity. Almost always, they will have gone down at least modestly as a function of questioning your automatic thoughts and generating alternative and more realistic ones.

This final step is crucial because noticing and feeling the relief from your negative emotion decreasing is an important reinforcer of the new habit of Cognitive Restructuring.

In other words, you're much more likely to stick with it as a habit and benefit in the long-term if you get the reward of even slightly lower negative feelings as a result.

Thoughts on Trial
Worksheet

Understanding Cognitive Distortions

No discussion of Cognitive Restructuring and Thoughts Records would be complete without some reference to Cognitive Distortions and the role they play in restructuring negative thinking patterns.

Cognitive Distortions are unrealistic, exaggerated, and generally inaccurate forms of self-talk. And these habitual inaccuracies or distortions in the way we think tend to create distortions in how we feel—usually in the form of excessively strong negative emotions.

Suppose you got an email from your boss on a Sunday afternoon saying, "We need to talk as soon as possible Monday morning. Please come by my office whenever you get in."

Now, imagine two different ways of thinking about this:

"Oh great, she's gonna fire me, I know it. I totally screwed up that presentation last week and that's what did it."

"Hmmm... That sounds ominous, but I guess it could be about anything." In the first response, there are two cognitive distortions:

"She's gonna fire me, I know it." This is what psychologists call Mind Reading, and it happens when we predict what someone else is thinking without any evidence of whether it's true or not.

"I totally screwed up that presentation..." This is called Magnification, and it's what happens when we make an error or mistake and blow it out of proportion.

In both cases, how we talked to ourselves was likely unrealistically negative. And as a result, we probably experienced a significant dose of negative emotion like fear, anxiety, or shame.

Of course, we all play a little fast and loose with our self-talk sometimes. But if you're consistently overreacting to things, there's a good chance it's because your habitual way of talking to yourself about things contains some Cognitive Distortions.





To help you get better at recognizing and disputing your own Cognitive Distortions, here's a list of the most common types of cognitive distortion followed by a brief description and example for each.

Mind Reading

Mind Reading means assuming we understand what other people are thinking without any evidence. Ultimately, Mind Reading is a failure of imagination — we only imagine the negative without considering other possibilities, some of which are bound to be neutral or even positive.

EXAMPLE: Our spouse doesn't immediately say hello when we get home from work, so we assume, "He must be upset with me for something."

Overgeneralization

Overgeneralization is when we extend the evidence for something beyond what is appropriate.

EXAMPLE: After being told that our flight was delayed, we comment in our mind, "Typical! My flights are always delayed."

Magnification

Magnification is when we take our own errors or flaws and exaggerate them. Often magnification takes the form of catastrophizing small negative events and turning them into disasters in our minds. EXAMPLE: After feeling a small heart palpitation, we think to ourselves, "What's wrong with my heart? Am I having a heart attack? I need to go to the ER now!"

Minimization

Minimization is the mirror image of Magnification and involves being dismissive of our strengths and positive qualities. When we minimize, it often keeps us in a cycle of feeling inferior because we don't allow ourselves to benefit from acknowledging our true positive qualities and accomplishments.

EXAMPLE: After receiving a test back, we comment to ourselves, "Sure, I got an A, but I missed the easiest question on the exam."

Emotional Reasoning

Emotional reasoning is when we make decisions based upon how we feel rather than what the evidence actually suggests.

EXAMPLE: "If only I felt more motivated then I could get ahead of my studying and enjoy vacation guilt-free."

Black & White Thinking

Black and white thinking is the tendency to evaluate things exclusively in terms of extreme categories. It shows up most commonly when we evaluate our own personal qualities and characteristics this way.

EXAMPLE: Thinking back on a recent date that seemed to go badly, we think, "Ugh... I'm so awkward!"

Personalization

Personalization is when we assume excessive amounts of responsibility, especially for things that are mostly or entirely outside our control.

situation

Consequences

EXAMPLE: After our child makes a crucial mistake at the end of a softball game, we think to ourselves, "If only I had practiced with her yesterday when she asked me to she wouldn't have dropped that pop-up!"

Fortune Telling

Fortune Telling is when we predict what will happen based on little or no real evidence. Instead, when our mind throws a negative outcome or worst-case scenario at us, we "go with that" and tell ourselves that that's what will happen.

EXAMPLE: After a meeting, we predict, "They hated it!" (Mind Reading) and "There's no way they're going to accept our proposal." (Fortune Telling).

Labeling

Labeling is when we describe ourselves or others in one extreme way, usually negatively. Because people and their sense of self (including our own) are highly complex and ever-changing, Labeling is always an inaccurate oversimplification.

EXAMPLE: After a fight with our spouse, we tell ourselves, "He's such jerk."

"Should" Statements

Should Statements are a kind of self-talk we often use to try and motivate ourselves by always saying what we should and should not do. When we're in the habit of using Should Statements, we set up a false expectation that we should have more certainty than we do. This can lead to chronic frustration, anxiety, and resentment.

EXAMPLE: "I just have to nail this performance," we tell ourselves before going on stage.

Keeping tabs on our cognitive distortions

Cognitive distortions are good to keep in mind anytime you're doing Cognitive Restructuring. In fact, some Thought Records actually have a specific place to note which Cognitive Distortions are present in your thoughts. If we can get better at recognizing these habitual ways that we distort our thinking, we're much more likely to correct them, think more realistically, and as a result, not feel quite so bad.

Cognitive Restructuring Worksheets

Socratic Questioning Worksheet

<u>De-Catastrophizing</u> Worksheet

Understanding Anxiety

Anxiety and Depression in College Students (Prezi)

(After clicking on link while pressing "Control", presentation will appear in upper right corner of screen. Click on "Play," then click to enlarge screen)

Many people experiencing the symptoms of anxiety can begin to wonder if there is something really wrong with them. One typical fear is that they might be going crazy. Unfortunately, the reactions and comments from other people such as, 'just get yourself together' are not very helpful.

Although you might feel alone in your struggle against anxious moods, the reality is that many people experience these moods either from time to time, or on a more regular basis. In fact, it is estimated that 1 in every 5 experience significantly anxious mood at some time in their life.

Anxiety can affect any kind of person at any stage of their life, whether they are an introvert or an extrovert, socially active or shy, youthful or elderly, male or female, wealthy or poor. Whatever your distinction, you can become anxious. That means that any person you know is also fair game. So remember, you are not alone.

Anxiety: Digging In

What is anxiety?



Are you anxious? Maybe you're feeling worried about a problem at work with your boss. Maybe you have butterflies in your stomach while waiting for the results of a medical test. Maybe you get nervous when driving home in rush-hour traffic as cars speed by and weave between lanes.

At times, attempting to get a personal handle on our own anxiety—sorting out the thoughts and feelings, understanding why we feel the way we do, or trying to comprehend if what we're experiencing is truly even anxiety—can be like trying to hug the Sta-Puft Man in "Ghostbusters": it's difficult to wrap your arms around it!

In life, everyone experiences anxiety from time to time. This includes both adults and children. For most people, feelings of anxiety come and go, only lasting a short time. Some moments of anxiety are briefer than others, lasting anywhere from a few minutes to a few days.

But for some people, these feelings of anxiety are more than just passing worries or a stressful day at work; their anxiety may not go away for many weeks, months, or years. It can worsen over time, sometimes becoming so severe that it interferes with one's daily life. "Anxiety disorders are the most common mental disorders in the United States. In any given year, between 15 and 17 percent of the adult population suffer from one or another of the six anxiety disorders identified by DSM-IV" (Comer, 1995).

Feeling afraid is very much a part of the experience of being human. It occurs in response to realistically anticipated danger and therefore is a survival instinct. For example, if a ferocious animal confronted us it is likely that we would respond with fear. This response is important because it initiates a whole series of physical and behavioral changes that ultimately serve to protect us.

In this example, when confronted by an animal, the feeling of fear would probably lead us to either run for our lives or become sufficiently 'pumped up' to physically defend ourselves. As you can see from this example, the experience of fear is part of a process of survival. The experience of anxiety is very similar to the experience of fear - the main difference is that anxiety occurs in the absence of real danger. That is, the individual may think that they are in danger, but the reality is that they are not.

To illustrate this, think of the anxiety one may feel when walking down a poorly lit alley. The individual may feel anxious because they perceive some potential danger. This may not mean that there is any real danger in walking down this particular alley, but what causes the experience of

anxiety is that the person believes that they are in danger. Therefore, the experience of anxiety and fear are basically the same except that in the case of anxiety, there may not be any actual danger - the person just thinks there is.

WHAT IS ANXIETY?

NOUN

A FEELING OF WORRY, NERVOUSNESS, OR UNEASE, TYPICALLY ABOUT AN IMMINENT EVENT OR SOMETHING WITH AN UNCERTAIN OUTCOME.

- Are you anxious? Maybe you're feeling worried about a problem at work with your boss. Maybe you have butterflies in your stomach while waiting for the results of a medical test.
- Maybe you get nervous when driving home in rush-hour traffic as cars speed by and weave between lanes.
- In life, everyone experiences anxiety from time to time. For most people, feelings of anxiety come and go, only lasting a short time. Some moments of anxiety are more brief than others, lasting anywhere from a few minutes to a few days.
- But for some people, these feelings of anxiety are more than just passing worries or a stressful day at work. It can worsen over time, sometimes becoming so severe that it interferes with your daily life.

My Goals and Expectations for Overcoming

Fear and Anxiety

Goals for Fear and Anxiety

WHAT ARE THE SYMPTOMS OF ANXIETY?

- While anxiety symptoms vary from person to person, in general the body reacts in a very specific way to anxiety. When you feel anxious, your body goes on high alert, looking for possible danger and activating your fight or flight responses. As a result, some common symptoms of anxiety include:
- nervousness, restlessness, or being tense
- o feelings of danger, panic, or dread
- difficulty focusing or thinking clearly about anything other than the thing you're worried about
- insomnia
- digestive or gastrointestinal problems, such as gas, constipation, or diarrhea
- a strong desire to avoid the things that trigger your anxiety
- anxiety surrounding a particular life event or experience that has occurred in the past, especially indicative of post-traumatic stress disorder (PTSD)

Fight/Flight Response

It is important to fully understand the way our bodies react to threat or danger, whether real or imagined. When a person is in danger, or believes that they are in danger, a number of changes occur. This response has been named the fight/flight response. As previously explained, when confronted with danger we will typically flee from the situation, or stand and fight. The main purpose of the fight/flight response is to protect the individual. It is therefore important to remember that the experience of anxiety is not in itself, harmful. When a person's fight/flight response is activated, three major systems are affected. These are the physical, cognitive and behavioral systems.

Physical System

When we believe that we are in danger, our whole physical system undergoes some major, temporary changes designed to enhance our ability to either run away, or stand and be ready to fight. Physically, as soon as danger is perceived, the brain sends a message to our autonomic nervous system. Our autonomic nervous system has two sections: the sympathetic branch and the parasympathetic branch. These two sections control the physical changes that occur in the fight/flight response. The

sympathetic branch is the part that activates the various areas of the body to be ready for action. When the sympathetic branch is activated, it includes all areas of the body, and therefore, the person experiences physical changes from head to toe. To get things moving, the sympathetic nervous system releases two chemicals from the adrenal glands on the kidneys. These chemicals are called adrenalin and noradrenalin and are basically messengers that serve to maintain the physical changes for a sufficient amount of time. So, what are these physical changes that the sympathetic mechanism produces when you are anxious?

1. An increase in heart rate and strength of beat

One physical change that is quite noticeable to the person experiencing the fight/flight response, is an increase in heart rate and the strength of heartbeat. An increase in heart rate enables blood to be pumped around the body faster, so that oxygen gets delivered more promptly to the various tissues of the body and waste products can be efficiently eliminated.

2. A redistribution of blood from areas that aren't as vital to those that are

There is also a change in blood flow - away from places where it is not needed (such as skin, fingers and toes) towards the places it is likely to be needed (large organs and muscles). This is very useful because if we were attacked and cut in some way, we would be less likely to bleed to death, as the blood will be with the vital organs.

This physical change results in the skin looking pale and feeling cold, and also in the experience of cold, numb and tingling fingers and toes.

3. An increase in the rate and depth of breathing

As well as changes to heart rate, there are also changes to the speed and depth of breathing. This is very important, as it provides the tissues with the extra amount of oxygen required to prepare for action. The feelings produced by this increase in breathing can include breathlessness, choking or smothering feelings, tightness and pain in the chest, and sighing and yawning.

Restoration of the Systems

Once the immediate danger has abated, the body begins a process of restoration back to a more relaxed state. This is once again controlled by the autonomic nervous system. This time it instructs the parasympathetic branch to begin the process of counteracting the sympathetic branch. As a result, the heart rate begins to slow, breathing rate slows, the body's temperature begins to lower, and the muscles begin to relax. Part of the process of restoration is that the systems do not return to

normal straight away. Some arousal continues and this is for a very good reason. In primitive times, if a wild animal confronted us it would be foolish to relax and be off guard as soon as the animal began to back off. The chances of danger continuing in such a case causes the body to remain prepared for the need to once again face danger. Therefore, some residual effects of the fight/flight response remain for some time and only gradually taper off. This can leave the individual feeling 'keyed up' for some time afterwards. This helps to understand why it is that people can feel anxious for ongoing periods of time when no obvious stressor is present.

Getting a Handle on Your Anxiety

Anxiety Worksheet

Fear and Anxiety: What's the Difference?

(from D. Clark & A. Beck, 2012) Fear is a basic, automatic response to a specific object, situation or circumstance that involves a recognition/perception of actual or potential danger. In terms of cognitive/behavioral theory, the main characteristic of fear is a thought of imminent threat or danger to one's safety.

Anxiety, on the other hand, is a much more prolonged, complex state that is often triggered by an initial fear. Anxiety is a much more enduring experience than fear. It's a state of apprehension...in which you believe you can't control or predict potentially negative future events. Anxiety is always future oriented--it is driven by "what if?" thinking.

"Fear is at the heart of all anxiety states. When we're anxious, fear is the underlying psychological state that drives the anxiety." (Clark & Beck, 2012) Consider the example of Jan, who has social anxiety: Whenever she even thinks about going to a meeting, she becomes intensely anxious. However, the fear causing her anxiety is that of embarrassment, a "what if?" scenario. "What if I'm asked a question I'm unable to answer? Everyone will think I'm incompetent and I'll be so embarrassed."

Discovering the Core Fear Behind Your
Anxiety

Discovering Core Fears.docx

What Causes Anxiety?

The combination of factors which result in an individual developing an anxiety disorder differ from person to person. However, there are some major factors that have been identified, which may be common to sufferers. These factors can be effectively divided into biological and psychological causes.

Behavioral System

As already mentioned, the two main behaviors associated with fear and anxiety are to either fight or flee. Therefore, the overwhelming urges associated with this response are those of aggression and a desire to escape, wherever you are. Often this is not possible (due to social constraints) and so people often express the urges through behaviors such as foot tapping, pacing or snapping at people.

Cognitive System

As the main objective of the fight/flight response is to alert the person to the possible existence of danger, one major cognitive change is that the individual begins to shift their attention to the surroundings to search for potential threat. This accounts for the difficulty in concentrating that people who are anxious experience. This is a normal and important part of the fight/flight response, as its purpose is to stop you from attending to your ongoing chores and to permit you to scan your surroundings for possible danger. Sometimes an obvious threat cannot be found. Unfortunately, most of us cannot accept not having an explanation for something and end up searching within themselves for an explanation. This often results in people thinking that there is something wrong with them – they must be going crazy or dying.

Biological Factors

A genetic factor has been linked to the development of anxiety disorders. For example, in obsessive-compulsive disorder, about 20% of first-degree relatives have also suffered from the condition. Overall, based on family studies, it has been suggested that individuals may inherit a vulnerability to developing an anxiety disorder.

Psychological Factors

Having this genetic vulnerability does not imply that those individuals will develop an anxiety disorder. A great deal depends on the lifestyle of that person, the types of life stressors they have encountered and their early learning. For example, if we were taught to fear certain neutral situations as a child it can become difficult to extinguish these learned patterns of behavior. Therefore, we may have developed certain patterns of thinking and behaving which contribute to the development of an anxiety disorder.

Challenging Anxious Thoughts

Anxiety and Avoidance

(from D. Clark & A. Beck, 2012) The urge to escape what you think is causing your anxiety, and then to avoid any further contact with it is a natural reaction to feeling anxious. Escape and avoidance are the two strategies most commonly used to control anxiety. They are an automatic defensive response to fear and anxiety, and on the surface they seem remarkably effective in reducing or eliminating anxiety.

But the fact that escape and avoidance are natural responses doesn't make them the best anxiety-reduction strategies. In fact, clinical researchers and mental health professionals have long known that escape and avoidance are significant contributors to the long-term persistence of anxiety.

Three Major Problems with Escape and Avoidance:

- 1. They prevent anxiety from declining naturally.
- 2. They prevent you from learning that the dangerous thinking causing the anxiety is false.
- 3. They come at great personal cost by limiting what you can do, where you can go and whom you can be with. When you rely on avoidance and escape, you end up believing that you are weak, dependent and/or inadequate—that you "no longer have a life."

My Avoidance Profile

Avoidance Profile

Anxiety Triggers

(Clark & Beck, 2012) Anxiety is highly reactive to situations; people tend to feel anxious in some situations but not in others. Therefore, a thorough evaluation of the external and internal triggers of your anxiety is critical to addressing your particular problems. The following worksheet is most productively used at the end of each day, when you're able to take the "long view" of that day's events and your responses to them.

Identifying Your Anxiety Triggers

Identifying Anxiety Triggers

Summary

As you can see from this description of anxiety and the fight/flight response, anxiety is an important emotion that serves to protect us from harm. For some people the fight/flight response becomes activated in situations where no real danger is present. The types of situations vary greatly from person to person. For example, simply anticipating poor performance on an examination can be enough to activate the fight/flight response. An anxiety disorder is usually diagnosed when a person cannot manage to function adequately in their daily life due to the frequency and severity of the symptoms of anxiety. It is important to keep in mind however, that some anxiety is functional, enabling us to get to work on time, meet demands, cross busy streets and remain aware of our surroundings.

Cycle of Anxiety.pdf

Rethinking Anxiety: Learning to Face Fear/Dawn Huebner



COPING STRATEGIES

TRY THESE WHEN YOU'RE FEELING ANXIOUS OR STRESSED:

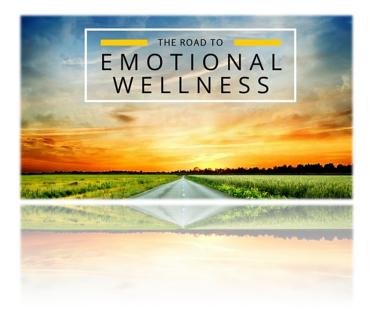
- Take a time-out. Practice yoga, listen to music, meditate, get a massage, or learn relaxation techniques. Stepping back from the problem helps clear your head.
- Eat well-balanced meals. Do not skip any meals. Do keep healthful, energy-boosting snacks on hand.
- Limit alcohol and caffeine, which can aggravate anxiety and trigger panic attacks.
- Get enough sleep. When stressed, your body needs additional sleep and rest.
- Exercise daily to help you feel good and maintain your health. Check out the fitness tips below.
- Take deep breaths. Inhale and exhale slowly.
- Count to 10 slowly. Repeat, and count to 20 if necessary.



- Do your best. Instead of aiming for perfection, which isn't possible, be proud of however close you get.
- Accept that you cannot control everything. Put your stress in perspective: Is it really as bad as you think?
- Welcome humor. A good laugh goes a long way.
- Maintain a positive attitude. Make an effort to replace negative thoughts with positive ones.
- Get involved. Volunteer or find another way to be active in your community, which creates a support network and gives you a break from everyday stress.
- Learn what triggers your anxiety. Is it work, family, school, or something else you can identify? Write in a journal when you're feeling stressed or anxious, and look for a pattern.
- Talk to someone. Tell friends and family you're feeling overwhelmed, and let them know how they can help you. Talk to a physician or therapist for professional help.

"Checking Your Emotional Pulse": Depression, Anxiety and Stress Scale

DASS Scale



Additional Resources

- Video: "Want to be Happy? Be Grateful" David Steindl-Rast (15)
 - https://www.ted.com/talks/david_steindl_rast_want_to_be_happy_be_grateful
- **Video:** What is Stress? (6 minutes) https://www.youtube.com/watch?v=fL73baMxbf8
- **Video:** "Happiness Is All in Your Mind" Gen Kelsang Nyema (16 min.)
 - https://www.youtube.com/watch?v=xnLoToJVQH4
 - **Video:** "How to Cope with Anxiety" | Olivia Remes | TEDxUHasselt https://www.youtube.com/watch?v=WWloIAQpMcQ (15)
 - **Video:** "You Aren't at the Mercy of Your Emotions" Lisa Feldman Barrett (11:53)

https://www.ted.com/talks/lisa_feldman_barrett_you_aren_t_at_the_mercy_of_y our_emotions_your_brain_creates_them?language=en#t-179741

Additional Resource: Co-dependency

From http://www.mentalhealthamerica.net/go/codependency Handout compiled by Teresa Kleffner, MSW, LCSW. St. Louis Counseling and Wellness. www.stlcw.com

• **Video**: "The Difference Between Healthy and Unhealthy Love" (12:13) Katie Hood https://www.youtube.com/watch?v=ON4iy8hq2hM

Fact Sheet on co-dependency from Mental Health America:

Co-dependency is a learned behavior that can be passed down from one generation to another. It is an emotional and behavioral condition that affects an individual's ability to have a healthy, mutually satisfying relationship. It is also known as "relationship addiction" because people with codependency often form or maintain relationships that are one-sided, emotionally destructive and/or abusive. Co-

dependent behavior is learned by watching and imitating other family members who display this type of behavior.

Who Does Co-dependency Affect?

Co-dependency often affects a spouse, a parent, sibling, friend, or co-worker of a person afflicted with alcohol or drug dependence. Originally, co-dependent was a term used to describe partners in chemical dependency, persons living with, or in a relationship with an addicted person. Similar patterns have been seen in people in relationships with chronically or mentally ill individuals. Today, however, the term has broadened to describe any co-dependent person from any dysfunctional family.

What is a Dysfunctional Family and How Does it Lead to Co-dependency?

A dysfunctional family is one in which members suffer from fear, anger, pain, or shame that is ignored or

denied. Underlying problems may include any of the following:

- An addiction by a family member to drugs, alcohol, relationships, work, food, sex, or gambling.
- The existence of physical, emotional, or sexual abuse.
- The presence of a family member suffering from a chronic mental or physical illness.

Dysfunctional families do not acknowledge that problems exist. They don't talk about them or confront them. As a result, family members learn to repress emotions and disregard their own needs. They become "survivors." They develop behaviors that help them deny, ignore, or avoid difficult emotions. They detach themselves. They don't talk. They don't touch. They don't confront. They don't feel. They don't trust. The identity and emotional development of the members of a dysfunctional family are often inhibited.

Attention and energy focus on the family member who is ill or addicted. The co-dependent person typically sacrifices his or her needs to take care of a person who is sick. When co-dependents place other people's health, welfare and safety before their own, they can lose contact with their own needs, desires, and sense of self.

From http://www.mentalhealthamerica.net/go/codependency
Handout compiled by Teresa Kleffner, MSW, LCSW. St. Louis Counseling and Wellness.
www.stlcw.com

How Do Co-dependent People Behave?

Co-dependents have low self-esteem and look for anything outside of themselves to make them feel better. They find it hard to "be themselves." Some try to feel better through alcohol, drugs or nicotine and become addicted. Others may develop compulsive behaviors like workaholism, gambling, or indiscriminate sexual activity.

They have good intentions. They try to take care of a person who is experiencing difficulty, but the caretaking becomes compulsive and defeating. Co-dependents often take on a martyr's role and become "benefactors" to an individual in need. A wife may cover for her alcoholic husband; a mother may make excuses for a truant child; or a father may "pull some strings" to keep his child from suffering the consequences of delinquent behavior.

The problem is that these repeated rescue attempts allow the needy individual to continue on a destructive course and to become even more dependent on the unhealthy caretaking of the "benefactor." As this reliance increases, the co-dependent develops a sense of reward and satisfaction from "being needed."

When the caretaking becomes compulsive, the co-dependent feels choiceless and helpless in the relationship, but is unable to break away from the cycle of behavior that causes it. Co-dependents view themselves as victims and are attracted to that same weakness in the love and friendship relationships.

Characteristics of Co-dependent People Are:

- An exaggerated sense of responsibility for the actions of others
- A tendency to confuse love and pity, with the tendency to "love" people they can pity and rescue
- A tendency to do more than their share, all of the time
- A tendency to become hurt when people don't recognize their efforts
- An unhealthy dependence on relationships. The co-dependent will do anything to hold on to a relationship to avoid the feeling of abandonment
- An extreme need for approval and recognition
- A sense of guilt when asserting themselves
- A compelling need to control others
- Lack of trust in self and/or others
- Fear of being abandoned or alone
- Difficulty identifying feelings
- Rigidity/difficulty adjusting to change
- Problems with intimacy/boundaries
- Chronic anger
- Lying/dishonesty
- Poor communication
- Difficulty making decisions

Questionnaire To Identify Signs of Co-dependency

This condition appears to run in different degrees, whereby the intensity of symptoms is on a spectrum of severity, as opposed to an all or nothing scale. Please note that only a qualified professional can make a diagnosis of co-dependency; not everyone experiencing these symptoms suffers from co-dependency.

- 1. Do you keep quiet to avoid arguments?
- 2. Are you always worried about others' opinions of you?
- 3. Have you ever lived with someone with an alcohol or drug problem?
- 4. Have you ever lived with someone who hits or belittles you?
- 5. Are the opinions of others more important than your own?
- 6. Do you have difficulty adjusting to changes at work or home?
- 7. Do you feel rejected when significant others spend time with friends?
- 8. Do you doubt your ability to be who you want to be?
- 9. Are you uncomfortable expressing your true feelings to others?
- 10. Have you ever felt inadequate?
- 11. Do you feel like a "bad person" when you make a mistake?
- 12. Do you have difficulty taking compliments or gifts?
- 13. Do you feel humiliation when your child or spouse makes a mistake?
- 14. Do you think people in your life would go downhill without your constant efforts?
- 15. Do you frequently wish someone could help you get things done?
- 16. Do you have difficulty talking to people in authority, such as the police or your boss?
- 17. Are you confused about who you are or where you are going with your life?
- 18. Do you have trouble saying "no" when asked for help?
- 19. Do you have trouble asking for help?
- 20. Do you have so many things going at once that you can't do justice to any of them?

From http://www.mentalhealthamerica.net/go/codependency
Handout compiled by Teresa Kleffner, MSW, LCSW. St. Louis Counseling and Wellness.
www.stlcw.com

When Co-dependency Hits Home

The first step in changing unhealthy behavior is to understand it. It is important for co-dependents and their family members to educate themselves about the course and cycle of addiction and how it

extends into their relationships. Libraries, drug and alcohol abuse treatment centers and mental health centers often offer educational materials and programs to the public.

A lot of change and growth is necessary for the co-dependent and his or her family. Any caretaking behavior that allows or enables abuse to continue in the family needs to be recognized and stopped. The codependent must identify and embrace his or her feelings and needs. This may include learning to say "no," to be loving yet tough, and learning to be self-reliant. People find freedom, love, and serenity in their recovery.

Hope lies in learning more. The more you understand co-dependency the better you can cope with its effects. Reaching out for information and assistance can help someone live a healthier, more fulfilling life.

Moving beyond co-dependency

Co-dependency is a learned behavior. This is good news because it means we can learn a new way, a different way of interacting with others, one that will help us feel good about the relationships in our lives. Below are some tools we can use to move beyond the old pattern of co-dependency.

Communicate

» Communicate how you feel directly to the person involved in the situation. Often we spend our time telling *other* people how we feel about a situation but don't tell the person that was *directly involved in the situation*.

One effective way to communicate how you feel is an "I statement". When using I statements you take accountability for your feelings while also explaining the behavior you did not like. Example: I feel (insert feeling) when you (insert behavior). I feel threatened when you yell at me.

- » **Ask for what you want.** Others cannot read your mind. You may be very perceptive but this is rare in most people. Asking for what you want honors yourself and others. The other person is responsible for answering based on their own needs and abilities and has the option to say no.
- » **Say "No".** Saying no without guilt takes some practice if you have been in a pattern of codependency. Learning to say no doesn't mean that you have to say no to everything. It means that you get to choose what you do. When someone makes a request, ask yourself if this is something you can realistically do or if it will cause you some major inconvenience or even harm. When first learning this new skill, it may be helpful to start with saying, "I don't know. Let me get back to you."

Set Boundaries with Others

- » Boundaries are the physical and emotional limits we set to protect ourselves from being manipulated or used by others. Before letting other people know what is okay and is not okay, we have to define it for ourselves. Ask yourself the following questions.
- What is okay and not okay for me? (Examples: It is not okay for people to take their anger out on me, invade my personal space, go through my belongings, make comments about my weight, tell off color jokes in my company, etc.)
- What is it that I need to have a healthy balance in my life? (Examples: privacy, quiet time, space to change my mind, etc.)
- » When setting boundaries with others, keep the following in mind:
- Use simple and direct language. **Explain what the boundary is and what you will do if it continues to be crossed.** Example: Please do not yell at me. If you continue to yell, I will leave the example, yelling is considered not okay and is a boundary marker. Leaving the room is what you will do if the boundary is crossed.
- It is not necessary to defend the boundary, explain your feelings or debate the boundary. Be respectful yet firm when stating your boundary. If the other person attempts to argue or question your boundary, repeat your original statement or request. This is called the **broken record technique**. Keep repeating the statement over and over *instead of engaging in a debate*.
- **Follow through and be consistent** after you have set your boundary. If you go back on your statement, it is a signal to others that they can ignore your boundaries.

Recognize Unhealthy Boundaries

- » Examine your current boundaries. How do other people treat you? Your response to their behavior tells them whether or not what they are doing is okay. Below is a list of some unhealthy boundaries:
- Going against personal values or rights in order to please others.
- Giving as much as you can for the sake of giving.
- Taking as much as you can for the sake of taking.
- Letting others define you.
- Expecting others to fill your needs automatically.
- Feeling bad or guilty when you say no.
- Not speaking up when you are treated poorly.
- Falling apart so someone can take care of you.
- Falling "in love" with someone you barely know or who reaches out to you.
- Accepting advances, touching and sex that you don't want.
- Touching a person without asking.

» If you recognize these things coming up in your life, go back to the setting boundaries section and rework them.

Once you recognize an issue, you have the power to change it.

Set Internal Boundaries with Yourself

- » Internal boundaries protect our own thoughts, feelings and behaviors. We have the power to choose these. When we set clear internal boundaries, we become responsible for ourselves. We define who we are. When we don't have internal boundaries, others can define who we are and we feel powerless.
- » What other people say about you is not necessarily true. When we have poor internal boundaries we take what others say about as the truth without questioning it. Remember this statement from when you were a kid: "I'm rubber and you're glue, what you say bounces off of me and sticks to you." This statement reflects a universal truth. What other people say about you is really more of a reflection of who they are, not who you are. When someone makes a statement about you, ask yourself the following questions:
- How much of this is true about me?
- How much of this is true about the person making the statement?
- Is there any action I need to take? Set a boundary? Take responsibility for my actions?
- » Make yourself a priority. It is not selfish to take care of yourself. Have you ever ridden on a plane and heard the flight attendant explain the safety precautions to take if the cabin loses air pressure and masks drop from overhead? If you are traveling with a small child, who do you put the mask on first? People with codependent tendencies usually say the child first. But the answer is **yourself**. If you do not take care of yourself first, you may not be conscious to help care for that child. The same is true in life. The more you care for yourself the more you will have to give to others.

Reading Resources

- Codependent No More: How To Stop Controlling Others and Start Caring for Yourself by Melodie Beattie
- Boundaries by Drs. John Townsend and Henry Cloud
- Facing Codependence: What It Is, Where It Comes from, How It Sabotages Our Lives by Pia Mellody
- Breaking Free: A Recovery Workbook for Facing Codependence by Pia Mellody and Andrea Wells Miller
- Love is a Choice Workbook: Recovery for codependent relationships by Dr. Robert Hemfelt and Dr. Frank Minirth