

happening to them and to help in naming the negatives and the consequences of what has been happening. The carer can also begin to ask what the person dreams and goals are for their lives. And in this way they can begin to map out a plan of how to move forward.

#### Action/Change:

The person has decided to change and wants to move forward. The carer can help with mapping out a plan and breaking it down in such a manner as to be able to take a step by step approach, and to also map out the support the person will need in being able to achieve their goals. The plan will also take into account the risks of change and how those risks will be monitored and managed. The carer will also make the person aware of any issues around grieving that will occur due to the change.

#### Maintenance:

At this stage the carer will affirm self management behaviours and efforts. It is important in all the stages that the carer is aware of their own needs that may impact negatively on the person's ability to change. In maintenance the carer becomes more of a mentor and not a counselor. It is also in this stage that plans are made about the issue of relapse. To affirm that relapse is normal, and that it is not a life disaster. There needs to be a plan put into place for when relapse occurs. The carer becomes more of a coach in this stage and needs to encourage and make suggestions that will continue to assist in the change process.

This model is helpful as the carer is able to determine where the person is in the model of change and then is able to make a choice around how they will be involved and what role they will play in the pastoral encounter.

### **Dealing with difficult people.**

Often as pastoral carers we will be involved with people who have difficulty being able to be in relationship. Healthy personality allows us to be in relationship, to deal with conflict, to manage stress, to find meaning and purpose in our lives, to have a healthy sense of self as integral and whole. When people are traumatised or abused, especially as children, their personality can be stunted or impaired. This means that people will not be able to manage relationships well, will not be able to deal with conflict or stress and will find it hard to understand and know who they are. Often their locus of identity is very dependent on other people and what is happening around them. And they can be very dependent on others for emotional

support and care. The issue is that their ability to deal with stress is often reduced and it does not take much to induce a sense of crisis and powerlessness for them, and they have a great sense of worthlessness and shame in their lives that makes it hard for them to communicate what is going on for them. Often in dealing with people who experience personality issues we can be of the belief that they do things on purpose to create issues and conflict with people. The reality is that their personality is not able to function well and they have little insight into how they are acting. This issue of insight is important and when people become stressed their ability to have insight is diminished and if conflict is around they struggle because their self image is so poor that they can find it hard to admit that there is a problem. Pastoral carers need to ensure that they are prepared to go the long road with people who experience personality problems. They also need to have strategies in place to minimise the effects on themselves. One of the strategies is to minimise the person's ability to push the carer's buttons

### **Button Pushing**

People still need to experience love, value and acceptance and this is also the case for people who experience personality problems. People learn one way or another to be able to obtain what they need. People who experience personality issues have learned that they need to get their needs met but without having to be open or be vulnerable to others around them. In order to do this people are co-erced into giving of themselves without often realising what is happening to them. I think that people do not do this on purpose. I think that they have learned that the world is not a safe place and will do things to keep themselves safe, and still be able to obtain what they need. People are able to do this by pushing people's buttons. We all have parts of us that are able to be manipulated and used. This is where people are able to use these areas or buttons and to push them and to get what they need. These buttons will vary in each person, and we need to be aware of these and allow God to heal these areas so that we can respond in safety and be able to make choices that are life giving and encourage people to grow and develop. We need to be able to do this for ourselves and for the people we care for. If we continue to respond out of our buttons being pushed then the person is not encouraged to grow and we do not encourage relationships that are based on trust and respect. Some of the buttons that we may have include things like our ability to deal with conflict, our ability to respond out of our own unmet needs, or our own insecurities, and our own past hurts. These buttons are able to be seen and known by people, and used by others

to manipulate or control. And as pastoral carers we need to be aware of these issues in ourselves and to allow God to heal them.

### **Conflict problems as a button**

Our ability to deal with conflict and how we perceive conflict will be one area that makes us vulnerable. There will always be issues of conflict and we need to realise that we have learned particular ways of dealing with conflict. For some conflict is to be avoided at all costs, and this will make us vulnerable to others. Conflict only has to be hinted at and the person will capitulate because of their fear of conflict. For some conflict is seen as being a win at all costs situation, and the person in this situation can be pushed till they become out of control and then once out of control, can be manipulated. People need to review how they perceive conflict, and how their flight or fight response reacts, and then to work on taking the time to respond in ways that allow the carer to maintain perspective without being used inadvertently. This needs to be done in conjunction with a supervisor who is able to point out these issues and to work on ways to prevent this from happening.

### **Unmet needs as a button**

We all have unmet needs that we need to be aware of so that we are not manipulated. The need to be loved, the need to be valued, the need for sex, the need to feel in control, the need to be liked, and the need to feel important. And all of these needs if unrecognised or dealt with can be used to manipulate or control. I believe this where God calls to be aware of our needs to carry our cross daily and to bring them before him and allow him to deal with them. In order to deal with them we need to be aware of what they are. There is no use hiding or pretending. We all experience brokenness and part of our brokenness is expressed in unmet needs. These needs can be read by others and used so that they can get what they want. For example I know that I have a need to be needed. I was taught at an early age that if I wanted to experience love and value that I would make myself available to others and in particular when they were in crisis, and I would listen and go out of my way for them. This sounds honourable, but it meant that I put my issues on hold and being available made me feel like I was a somebody. And people would respond by saying, "That it's so great to have you around", "how could we have done this without you." At that point it stops being

honourable. I have learned over the years that I am a somebody, in the relationship that I have with God. That I am loved and valued and that I belong, and that this is not dependent on what I do. And as I have realised this, that button has lost its ability to be pushed and that I can respond to people out of genuineness and what will be best for them and for me. I have also realised that button pushing is not personal; it is a way that this person is responding at this time and place. People will often come up to me and make comments like, "Mark, you are the only one I can talk to." At times like these I am able to see this as a button pushing moment and how am I going to respond to this. My reply to people is to ask, "How do you think I can help you in this situation?" Or I may say, "This is what I can do for you in this situation." In the past I would have responded and gone all out, and run myself into burnout. And in the end I would find some way to not have to be around the person and would use the language of blame against the other person. So not helpful all the way around.

### **Past hurts as a button**

Again we all have our own insecurities and past hurts that can be triggered. These will often be triggered by people challenging our belief systems. Belief systems are often learned by osmosis, and unless we are aware of them we will have people triggering them and then using them to obtain what they need. Carers will see this happen when people use comments like, "you can never understand what it is like for me," "Do you actually know what you are doing?" "What makes you think you are any better than me," Or they may use passive aggressive type behaviour to make you feel insecure. And again unless we are aware of these issues we are open to manipulation and to being drawn away from helping the person to find healing and wholeness.

In dealing with people who find it hard to relate to others we need to be aware of some of our own issues so that we are able to respond in openness and honesty without finding ourselves being drawn into situations that will ultimately damage and hurt both ourselves and others.

Some of the other techniques that I have found helpful in this situation are to not personalise what is going between the person and myself. People are simply trying to do the best they can. I do not assume adult response in some people. Some people do not have the emotional or personal growth to respond as adults. I am willing to accept that people are unable to respond in a "normal manner."

I have also learned not to make promises that God cannot keep. Sometimes people will use our faith or belief systems to manipulate or get what they need and often we can be made to feel that we have to defend the nature and person of God. And this can lead to us making promises about what God can do, and this will mean that we can be left keeping the promise to make them well or being made to take responsibility for their lives.

I have also learned not to make promises that I cannot keep or follow through with. I make sure that if I say anything that it is something I can accomplish, and do without compromising my boundaries, my energy, my time or compromising other relationships that are important for me.

I try to be aware of splitting if I am working in a team situation with someone. It becomes harder for a person to manipulate if there is a team involved. The team is able to support one another and to encourage the person to change without the person being able to compromise their growth and development. Splitting is a technique that people will use to split the team, so that they can compromise the team and get what they perceive they need. It usually involves the person saying things to members of the team on an individual basis, so that the team becomes fragile and the person is able to manipulate the relationships in the team to get what they want.

## CHAPTER 1

# UNDERSTANDING NORMAL GRIEF REACTIONS AFTER BEING DIAGNOSED WITH A MENTAL ILLNESS.

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Changed perceptions-different priorities

"How can other people go about their business as if nothing has happened? Don't they know, can't they see how different your life is? How can they laugh, go to the movies, worry about trivial things? Don't they realise how fragile life is"?

Colours seem too bright, sounds too loud, words meaningless. You feel alone, isolated in your pain distanced from people, from life. You move and think in slow motion or feel so agitated you can't keep still. You exist in a different dimension, separated from all you cared about by a wall of pain and the fear that you will never be the same again. What is the purpose of going on? Your life feels as if it has no meaning, your confidence is shattered, your beliefs challenged. Can anyone hear?

You see everything differently now. Sleep is a welcome respite from pain, until the dreams start. Then you wake to find yourself tense or frightened, unable to go back to sleep. Morning seems a long time away. If you're lucky enough to sleep until morning, you wake trying to convince yourself that this is all a dream, that nothing has changed. Reality hits with brutal force and you are reluctant to get up and start the day, glad if you have no choice. You still have roles to fulfil, tasks to complete, all with a sense of automation. Survival seems like hard work.

You may wonder if you will ever be able to enjoy life again, to find meaning in activities, work or even friendships.

*Does this sound familiar to you ?*

This is a description of a normal and healthy response to loss and change. A person in this state is experiencing grief.

*How does this description compare with what you've experienced? Does it seem realistic to you, or an exaggerated description?*

People who have been diagnosed with a mental illness, are likely to experience losses and changes, and consequently they will usually experience grief reactions. It is often difficult to work out what are the symptoms of mental illness and what may be grief reactions.

In this programme, we'll be looking at the losses and changes that accompany mental illness. And we'll be looking at how understanding, accepting and dealing with your grief reactions can help you. The grieving process won't necessarily heal the mental illness, but it can help you heal.

Understanding healthy grieving can help you get in touch with healthy aspects of yourself.

The grieving process involves understanding what is happening to you, and in you. It involves putting words to your feelings, so that you can recognise and express them as understandable and often healthy reactions that you can then do something about. In this way, the grieving process can be a positive experience through which hope can be kindled; and renewed hope gives us a chance to make other positive choices.

*What are some of the losses you've experienced since being diagnosed with a mental illness?*

*What are some of the changes you've experienced since being diagnosed with a mental illness?*

## What is the experience of grief like?

"No one ever told me that grief felt so much like fear. I am not afraid but the sensation is like being afraid. The same fluttering in the stomach, the same restlessness."

C.S. Lewis. A Grief Observed.

Some people think that they shouldn't be feeling as intensely or as much as they do. They may feel reassured by the fact that all reactions listed in the four categories below are considered normal grief reactions.

Please place a tick alongside any of the reactions that you've experienced as a result of grief.

### Emotional

- Anxiety
- Fear
- Sadness
- Anger
- Guilt
- Inadequacy
- Hurt
- Relief
- Loneliness
- *Frustration*
- *Over-excitement*

### Physical

- Hollowness in stomach
- Tightness in chest
- Tightness in throat
- Over-sensitivity to noise
- Sense of depersonalisation
- Breathlessness
- Muscle weakness
- Lack of energy
- Dry Mouth
- *Muscle-stiffness*

### Mental

- Disbelief
- Confusion
- Preoccupation
- Denying that anything is wrong
- Hearing things or having visions related to the past

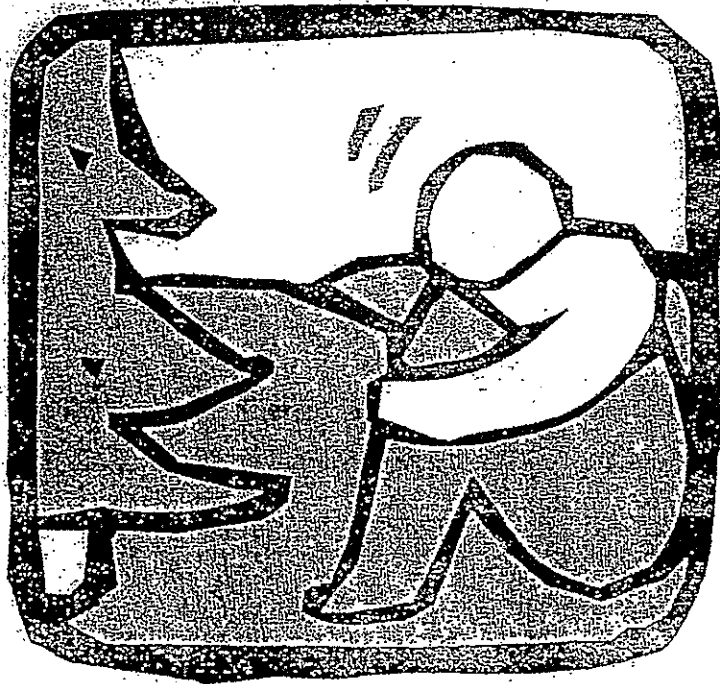


#### Behavioural

- Crying
- Sleep disturbance
- Sighing
- Restlessness and overactivity
- Appetite disturbance
- Absent mindedness
- Social withdrawal
- Dreams of the past
- Avoiding reminders of the past
- Visiting places and carrying reminders of the past

Reactions listing based on the work of J William Worden.

Now go back over the list and underline the experiences and underline the experiences that are symptoms of the mental illness you've been diagnosed with. We'll discuss "how can we tell the difference between the effects of mental illness - and the effects of grieving.



*I know this feeling of grief will pass but that's not how I feel right now*

## **Your dreams**

Dreaming may be affected as you experience grief, and for some people, their dreams give them hints or clues as to things, they might do to help them create a new life. Dreams can also be a major means of re-experiencing and working through emotionally charged experiences.

*How has your dreaming been affected?*

If it has, telling the group about it, might help you further understand what it could be saying to you.

## **Bodily distress**

Grief reactions involve every cell in your body. Changes in normal bodily functions serve as a message to you to slow down and take care of yourself. This includes creating an environment in which you can express your feelings. Crying is an important process and for those who are able to express sadness in this way, the body produces chemicals in the brain which have a calming and soothing effect. These chemicals are released in the tears and for this reason it is important that you do not inhibit your tears.

For many people, crying comes only rarely. Even so, it can still be very important to be in a sense, 'selfcentred', at this time; you might find it valuable to go walking, or to exercise, to pray, or meditate. This taking time out for yourself isn't a sign that you don't care for family and friends, (although you may feel at times that you have nothing to give). It's probably the case that you need nurturing and time for yourself to allow you to adjust to the changes that have occurred.

*Do you have enough time for yourself lately? Or too much?*

*Do other people seem to accept the need for you to take time for yourself?*

*How could you make it easier for them to understand?*

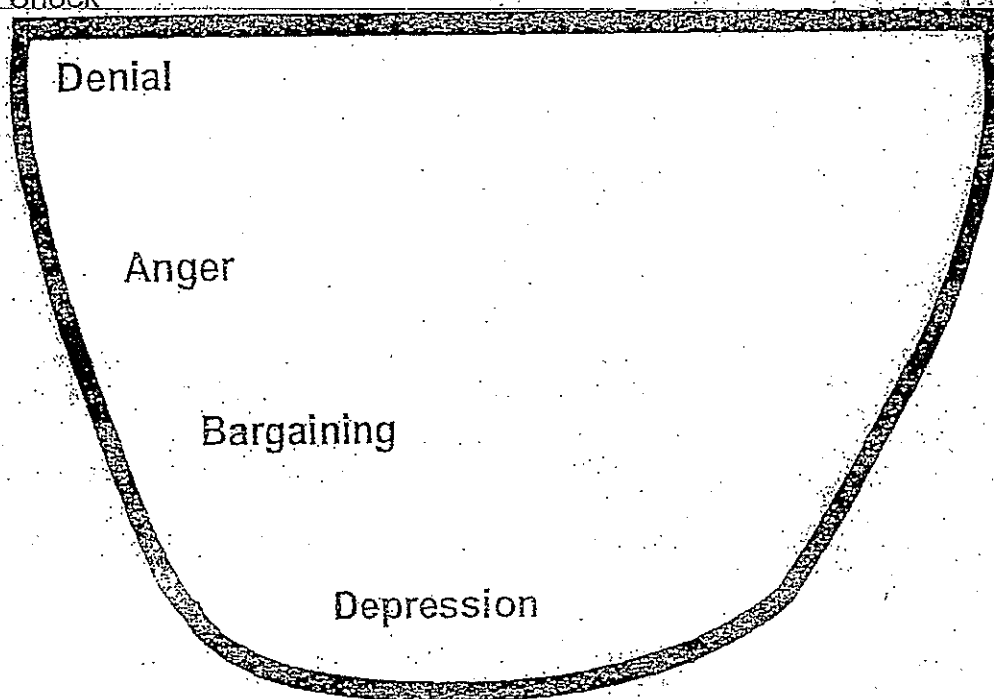
You may also experience decreased appetite, disturbed sleep patterns, muscle tension and, for women, changed menstrual cycles. These can be distressing and may require investigation to give assurance that the cause is not a medical condition. If there is no medical problem, it is possible to accept that this may be the body's way of drawing attention to the pain you are experiencing. The body may be letting you know how much nurturing you need until your body and emotions settle.

Two diagrams which describe stages a person can go through in dealing with illness

*Cooper Ross model*

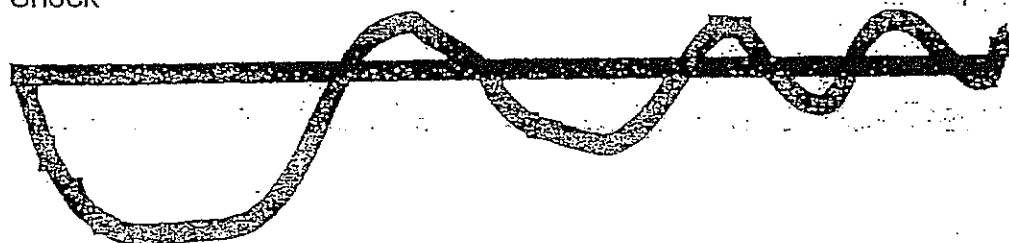
Shock

Acceptance Adjustment



Shock

Acceptance Adjustment

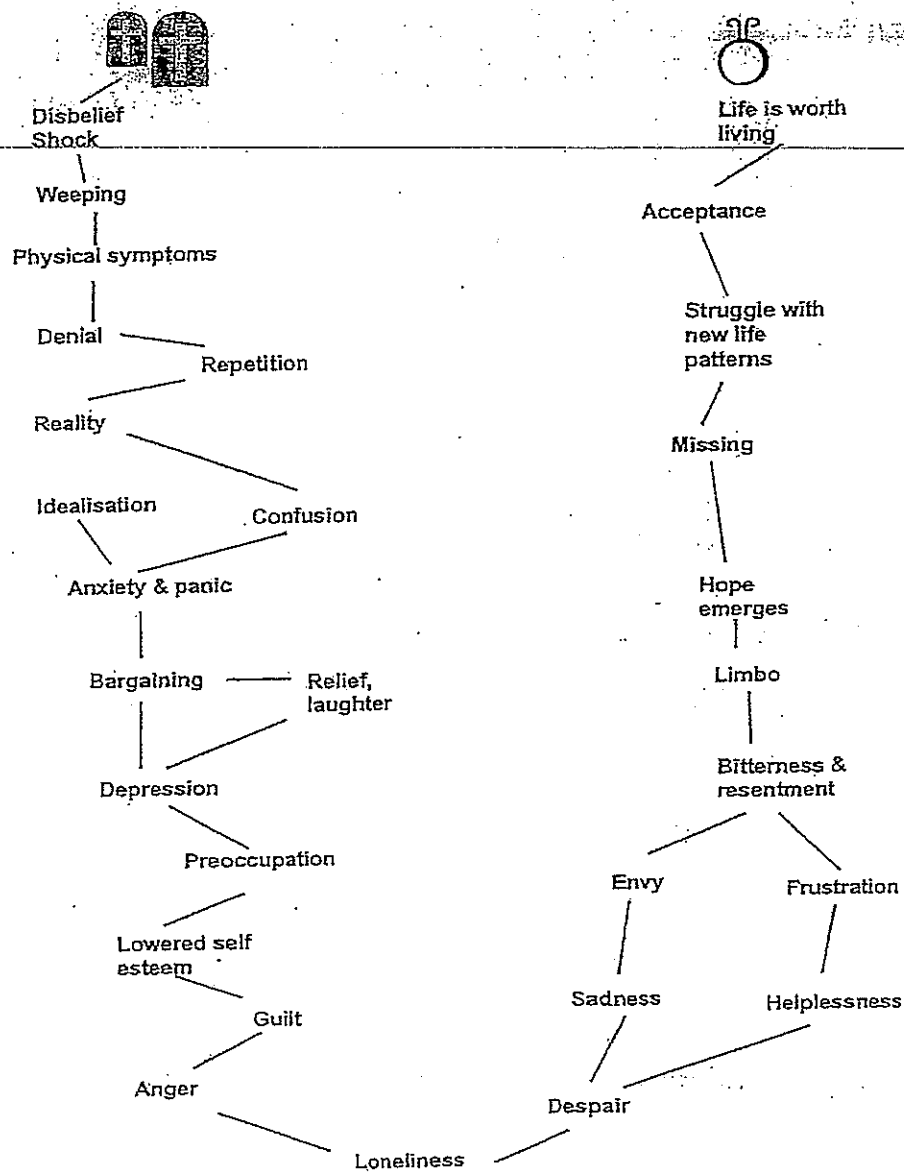


Which of these diagrams makes most sense to you?

Do you understand what they are trying to convey?

Have you experienced any of these stages?

The chart on the next page shows the path of recovery, which many people have followed.



Modified from Schoenecck TS Hope for Bereaved New York 1988

*What changes have you noticed in your experience of grief?*

*Which of these reactions have you experienced?*

*Which have you got stuck in at times?*

*Which have you been able to move through?*

How stressful is your life right now? If stressful situations aren't dealt with, stress can build up to the point where a relapse is possible. Stress can also make it difficult to deal with grief. Discussing your responses to the following Stress Scale can help the group understand how stressed you are at the moment.

## Holmes and Rahe Stress Scale

### Measuring life stress

Holmes and his colleagues (Holmes & Holmes 1970; Holmes & Rahe 1967; Rahe & Arthur 1978) have developed a scale—the Social Readjustment Rating Scale—which reflects the cumulative stress to which an individual has been exposed over a period of time. Life change units are used to measure life stress in the following areas:

Events	Scale of Impact	Events	Scale of Impact
Death of a spouse	100	Son/daughter leaving home	29
Divorce	73	Change in responsibility at work	29
Marital separation	65	Outstanding personal achievement	28
Jail term	63	Wife begins/stops work	26
Death of close family member	63	Begin/end school	26
Personal injury or illness	53	Change in living conditions	25
Marriage	50	Revision of personal habits	24
Fired at work	47	Trouble with boss	23
Marital reconciliation	45	Change in work hours or conditions	20
Retirement	45	Change in residence	20
Change in health of a family member	44	Change in school	20
Pregnancy	39	Change in recreation	19
Sex difficulties	39	Change in church activity	19
Gain a new family member	39	Change in social activity	18
Business readjustment	39	Small mortgage or loan	17
Change in financial state	38	Change in sleep habits	16
Death of close friend	37	Change in number of family get-togethers	15
Change to different line of work	36	Change in eating habits	15
Change in number of arguments with spouse	35	Vacation	13
High mortgage	31	Christmas	12
Foreclosure of mortgage or loan	30	Minor violations of the law	11
Trouble with in laws	29		

# 12 Scientifically Proven Steps to Happiness

91

COMMENTS

10k

Like

91

206



"Be happy for this moment. This moment is your life." ~ Omar Khayyam

Happiness, just like everything else in life, takes time, takes practice and takes work but the rewards are endless. And once you truly commit to crafting your life in a way that will make you happy, nothing and no one will be able to stand in your way.

If happiness is something you're interested in, here are the 12 scientifically proven steps to happiness discussed by Sonja Lyubomirsky in her book, *The How of Happiness*.

Enjoy.

## 1. EXPRESS GRATITUDE

The life you are now living, express your gratitude for it, the mistakes you made in the past and all the lessons you've learned, express your gratitude for them. Look for the good in your life and appreciate it.

"The single greatest thing you can do to change your life today would be to start being grateful for what you have right now. And the more grateful you are, the more you get." ~ Oprah

## 2. CULTIVATE OPTIMISM

Expect the best from life and you will receive the very best. Life doesn't care whether you are a pessimist or an optimist, whether you focus on the good or the bad, whether you expect the worse or the best from life. Life will treat you exactly the way you expect to be treated and if that's the case then you should definitely start cultivating your optimism.

"The optimist sees the rose and not its thorns; the pessimist stares at the thorns, oblivious to the rose." – Kahlil Gibran

## 3. AVOID OVER-THINKING AND SOCIAL COMPARISON

Our lives and where we are right now are the result of all the thoughts we had since birth up until now. If you don't like something, see if you can change it but if you can't change it, don't stress about it and just let it go. Change your attitude towards life and life will change its attitude towards you. Look for ways to be better than you used to be and not better than anyone else. Spend your time and energy improving yourself and your life and you will no longer feel the need to compete and compare yourself with others.

"Stop thinking, and end your problems. What difference between yes and no? What difference between success and failure? Must you value what others value, avoid what others avoid? How ridiculous!" ~ Lao Tzu

## 4. PRACTICE ACTS OF KINDNESS

Be kind to others and to yourself and you will be happy.

If you want others to be happy, practice compassion. If you want to be happy, practice compassion. ~Dalai Lama

## 5. NURTURE SOCIAL RELATIONSHIPS

Go out and meet new people, socialize, get interested in what others are doing and they will automatically get interested in what you are also doing.

## 6. DEVELOP STRATEGIES FOR COPING

Work on developing strategies for coping by observing your thoughts and playing with your mind. Be the lab scientist and not the rat.

"There are times in everyone's life when something constructive is born out of adversity... when things seem so bad that you've got to grab your fate by the shoulders and shake it." ~ Anon

## 7. LEARN TO FORGIVE

Learn to forgive yourself and those people who might have hurt you in the past. The moment you forgive, you free yourself from pain and you allow happiness to enter your life once again.

"Forgiveness means that you fill yourself with love and you radiate that love outward and refuse to hang onto the venom or hatred that was engendered by the behaviors that caused the wounds." ~ Wayne Dyer

## 8. INCREASE FLOW EXPERIENCES

Work with your unique gifts and talents, work with your passions, manage your weaknesses but cultivate your strengths and by doing so you will increase the flow experiences and become more happy.

"Everyone has unique gifts and talents. What you love is what you're gifted at. To be completely happy, to live a completely fulfilled life, you have to do what you love." ~ Barbara Sher

## 9. SAVOR LIFE'S JOY

Look at the Sun, look at the trees, look at the beauty of nature, beauty of life and savor it all.

"Enjoy the little things, for one day you may look back and realize they were the big things." ~ Robert Brault

## 10. COMMIT TO YOUR GOALS

If you want to be happy, you have to have goals. Know what is it that you want from life, ask for it and trust that in the end you will receive it. Make sure you set all kinds of goals, personal goals, career goals, adventure goals, contribution goals and by doing so you will have a sense of direction, security and trust into your life.

"If you want to live a happy life, tie it to a goal, not to people or things." ~ Albert Einstein

## 11. PRACTICE SPIRITUALITY

The practice of spirituality makes people feel safe and secure, it gives them strength when in danger and faith when in doubt. There is an invisible force that created us all and this force is watching over us. By knowing this you become a lot happier and at peace due to the fact that you feel you are not alone.

"The further the spiritual evolution of mankind advances, the more certain it seems to me that the path to genuine religiosity does not lie through the fear of life, and the fear of death, and blind faith, but through striving after rational knowledge." ~Einstein

## 12. TAKE CARE OF YOUR BODY

"Take care of your body. It's the only place you have to live." ~ Jim Rohn

Your body is your temple and the way you feel internally will reflect externally. Exercise whenever possible, make sure you drink plenty of water- water is life, and eat as healthy as possible.



"Good for the body is the work of the body, good for the soul the work of the soul, and good for either the work of the other." -Henry David Thoreau

With all my love,

*Get your daily dose of inspiration*  
*Luminita*

.....  
Your Name

.....  
Enter Your

Like this post? Then sign-up for our *"Daily Dose of Inspiration"* Newsletter. It's FREE ! Over 30,000 likeminded people have already registered.

Added by Luminita Saviuc on 24, September 2012

TAGS   be happy   find happiness   gratitude   habits of happy people   happiness  
how do you achieve happiness   how to be happy   key to happiness   Steps to Happiness  
what is the key to happiness

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15 Powerful Things Happy People Do Differently

Appreciation: The Key to a Happy Life

3 Scientifically Proven Ways to Boost Your Happiness

The Science and Psychology of Happiness: An Experiment in Gratitude

How to Be Happy: The 10-Day Happiness Challenge

6 Unconventional Secrets of Happy People

Things to Keep in Mind When Searching for Purpose

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24 comments

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Racheal Victoria

I love the science behind happiness. I was reading a study earlier this week that found, people who are physically active are 52% happier than people who are sedentary. The intensity of the activity had very little bearing but frequency was very important. If this study is accurate, a daily

## What is Depression?



Being clinically depressed is very different from the 'down' type of feeling that all people experience from time to time. Occasional feelings of sadness are a normal part of life, and it is that such feelings are often colloquially referred to as "depression". In clinical depression, such feelings are out of proportion to any external causes. There are things in everyone's life that are possible causes of sadness, but people who are not depressed manage to cope with these things without becoming incapacitated.

As one might expect, depression can present itself as feeling sad or "having the blues". However, sadness may not always be the dominant feeling. You may have experienced depression as a numb or empty feeling, or perhaps no feeling at all. A person with depression may experience a noticeable loss in their ability to feel pleasure about anything. Depression, as viewed by psychiatrists, is an illness in which a person experiences a marked change in their mood and in the way they view themselves and the world. Depression as a significant depressive disorder ranges from short in duration and mild to long term and very severe, even life threatening.

Depressive disorders come in different forms, just as do other illnesses such as heart disease. The three most prevalent forms are Major Depression, Bipolar Disorder, and Dysthymia. Post natal depression is also common, but is classed differently to other mood disorders.

(this information is from the website "Frequently asked Questions", accessible by <http://www.faqs.org/faqs/alt-support-depression/faq/part1>)

### What are the signs and symptoms of depression?

- A depressed or irritable mood for most of the day
- Marked diminished interest or pleasure in all, or almost all activities
- Significant weight loss or gain
- Insomnia or hypersomnia nearly every day
- Psychomotor agitation or retardation
- Fatigue or loss of energy nearly every day
- Feelings of worthlessness and/or excessive, inappropriate guilt
- Diminished ability to think or concentrate or indecisiveness
- Recurrent thoughts of death or suicide plans and suicide attempts

## CHECKLIST OF COGNITIVE DISTORTIONS

1.	<b>All or nothing thinking:</b> You look at things in absolute, black and white categories.
2.	<b>Overgeneralization:</b> You view a negative event as a never-ending pattern of defeat.
3.	<b>Mental Filter:</b> You dwell on the negatives and ignore the positives.
4.	<b>Discounting the positives:</b> You insist that your accomplishments or positive qualities "don't count."
5.	<b>Jumping to conclusions:</b> (A) Mind reading – you assume that people are reacting negatively to you when there's no definite evidence for this; (B) Fortune Telling – you arbitrarily predict things will turn out badly.
6.	<b>Magnification or Minimization:</b> You blow things way out of proportion or you shrink their importance inappropriately.
7.	<b>Emotional Reasoning:</b> You reason from how you feel: "I feel like an idiot, so I really must be one." Or "I don't feel like doing this, so I'll put it off."
8.	<b>"Should Statements":</b> You criticize yourself or other people with "Shoulds" or "Shouldn'ts." "Musts," "Oughts," "Have tos" are similar offenders.
9.	<b>Labeling:</b> You identify with your shortcomings. Instead of saying, "I made a mistake," you tell yourself, "I'm a jerk," or "a fool," or "a loser."
10.	<b>Personalization and Blame:</b> You blame yourself for something you weren't entirely responsible for, or you blame other people and overlook ways that your own attitudes and behavior might contribute to a problem.

## TEN WAYS TO UNTWIST YOUR THINKING

1.	<b>Identify the Distortion</b>	Write down your negative thoughts so you can see which of the ten cognitive distortions you're involved in. This will make it easier to think about the problem in a more positive and realistic way.
2.	<b>Examine the Evidence</b>	Instead of assuming that your negative thought is true, examine the actual evidence for it. For example, if you feel that you never do anything right, you could list several things you have done successfully.
3.	<b>The Double-Standard Method</b>	Instead of putting yourself down in a harsh, condemning way, talk to yourself in the same compassionate way you would talk to a friend with a similar problem.
4.	<b>The Experimental Technique</b>	Do an experiment to test the validity of your negative thought. For example, if, during the episode of panic, you become terrified that you're about to die of a heart attack, you could jog or run up and down several flights of stairs. This will prove that your heart is healthy and strong.
5.	<b>Thinking in Shades of Grey</b>	Although this method might sound drab, the effects can be illuminating. Instead of thinking about your problems in all-or-nothing extremes, evaluate things on a range of 0 to 100. When things don't work out as well as you hoped, think about the experience as a partial success rather than a complete failure. See what you can learn from the situation.
6.	<b>The Survey Method</b>	Ask people questions to find out if your thoughts and attitudes are realistic. For example, if you believe that public speaking anxiety is abnormal and shameful, ask several friends if they ever felt nervous before they gave a talk.
7.	<b>Define Terms</b>	When you label yourself "inferior" or "a fool" or "a loser," ask, "What is the definition of a 'fool'?" You will feel better when you see that there is no such thing as a "fool" or a "loser."
8.	<b>The Semantic Method</b>	Simply substitute language that is less colorful and emotionally loaded. This method is helpful for "should statements." Instead of telling yourself "I shouldn't have made that mistake," you can say, "It would be better if I hadn't made that mistake."
9.	<b>Re-attribution</b>	Instead of automatically assuming that you are "bad" and blaming yourself entirely for a problem, think about the many factors that may have contributed to it. Focus on solving the problem instead of using up all your energy blaming yourself and feeling guilty.
10.	<b>Cost-Benefit Analysis</b>	List the advantages and disadvantages of a feeling (like getting angry when your plane is late), a negative thought (like "No matter how hard I try, I always screw up"), or a behavior pattern (like overeating and lying around in bed when you're depressed). You can also use the Cost-Benefit Analysis to modify a self-defeating belief such as, "I must always try to be perfect."

## THE TEN FORMS OF TWISTED THINKING

1.	All-or-nothing thinking	You see things in black-or-white categories. If a situation falls short of perfect, you see it as a total failure. When a young woman on a diet ate a spoonful of ice cream, she told herself, "I've blown my diet completely." This thought upset her so much that she gobbled down an entire quart of ice cream!
2.	Overgeneralization	You see a single negative event, such as a romantic rejection or a career reversal, as a never-ending pattern of defeat by using words such as "always" or "never" when you think about it. A depressed salesman became terribly upset when he noticed bird dung on the windshield of his car. He told himself, "Just my luck! Birds are <i>always</i> crapping on my car!"
3.	Mental filter	You pick out a single negative detail and dwell on it exclusively so that your vision of all of reality becomes darkened, like the drop of ink that discolors a beaker of water. Example: You receive many positive comments about your presentation to a group of associates at work, but one of them says something mildly critical. You obsess about his reaction for days and ignore all the positive feedback.
4.	Discounting the positive	You reject positive experiences by insisting they "don't count." If you do a good job, you may tell yourself that it wasn't good enough or that anyone could have done as well. Discounting the positive takes the joy out of life and makes you feel inadequate and unrewarded.
5.	Jumping to conclusions	You interpret things negatively when there are no facts to support your conclusion. <b>Mind reading:</b> Without checking it out, you arbitrarily conclude that someone is reacting negatively to you. <b>Fortune-telling:</b> You predict that things will turn out badly. Before a test you may tell yourself, "I'm really going to blow it. What if I flunk?" If you're depressed you

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		may tell yourself, "I'll never get better."
6.	Magnification	You exaggerate the importance of your problems and shortcomings, or you minimize the importance of your desirable qualities. This is also called the "binocular trick."
7.	Emotional reasoning	You assume that your negative emotions necessarily reflect the way things really are: "I feel terrified about going on airplanes. It must be very dangerous to fly." Or "I feel guilty. I must be a rotten person." Or "I feel angry. This proves I'm being treated unfairly." Or "I feel so inferior. This means I'm a second-rate person." Or "I feel hopeless. I must really be hopeless."
8.	"Should statements"	<p>You tell yourself that things <i>should</i> be the way you hoped or expected them to be. After playing a difficult piece on the piano, a gifted pianist told herself, "I shouldn't have made so many mistakes." This made her feel so disgusted that she quit practicing for several days. "Musts," "oughts" and "have tos" are similar offenders.</p> <p>"Should statements" that are directed against yourself lead to guilt and frustration. Should statements that are directed against other people or the world in general lead to anger and frustration: "He shouldn't be so stubborn and argumentative."</p> <p>Many people try to motivate themselves with shoulds and shouldn'ts, as if they were delinquents who had to be punished before they could be expected to do anything. "I shouldn't eat that doughnut." This usually doesn't work because all these shoulds and musts make you feel rebellious and you get the urge to do just the opposite. Dr. Albert Ellis has called this <i>musterbation</i>." I call it the "shouldy" approach to life.</p>
9.	Labeling	Labeling is an extreme form of all-or-nothing thinking. Instead of saying "I made a mistake," you attach a negative label to

		<p>yourself: "I'm a loser." You might also label yourself "a fool" or "a failure" or "a jerk." Labeling is quite irrational because you are not the same as what you do. Human beings exist, but "fools," "losers," and "jerks" do not. These labels are just useless abstractions that lead to anger, anxiety, frustration, and low self-esteem.</p> <p>You may also label others. When someone does something that rubs you the wrong way, you may tell yourself: "He's an S.O.B." Then you feel that the problem is with that person's "character" or "essence" instead of with their thinking or behavior. You see them as totally bad. This makes you feel hostile and hopeless about improving things and leaves little room for constructive communication.</p>
10.	Personalization and blame	<p>Personalization occurs when you hold yourself personally responsible for an event that isn't entirely under your control. When a woman received a note that her child was having difficulties at school, she told herself, "This shows what a bad mother I am," instead of trying to pinpoint the cause of the problem so that she could be helpful to her child. When another woman's husband beat her, she told herself, "If only I were better in bed, he wouldn't beat me." Personalization leads to guilt, shame, and feelings of inadequacy.</p> <p>Some people do the opposite. They blame other people or their circumstances for their problems, and they overlook ways that they might be contributing to the problem: "The reason my marriage is so lousy is because my spouse is totally unreasonable." Blame usually doesn't work very well because other people will resent being scapegoated and they will just toss the blame right back in your lap. It's like the game of hot potato – no one wants to get stuck with it.</p>

## WAYS TO CHALLENGE AUTOMATIC THOUGHTS

3. The Double-Standard Method	
2. Examine the Evidence	4. The Experimental Technique
1. Identify the Distortion	5. Thinking in Shades of Gray
<p><b>AUTOMATIC THOUGHTS:</b></p> <p>"I'm inferior to all these other men who have such better physiques. If I took my shirt off, everyone would stare at me and think I was abnormal."</p>	
10. The Survey Method	6. The Feared Fantasy Technique
9. Define Terms	7. The Vertical Arrow Technique
8. Cost-Benefit Analysis	

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## YOUR THOUGHTS AND FEELINGS

1.	Sadness or Depression	Loss, a romantic rejection, the death of a loved one, the loss of a job, or the failure to achieve an important personal goal.
2.	Guilt or Shame	You believe that you've hurt someone or that you've failed to live up to your own moral standards. Guilt results from self-condemnation, where as shame involves fear that you'll lose face when others find out about who you really are.
3.	Anger, Irritation, Annoyance, or Resentment	You feel that someone is treating you unfairly or trying to take advantage of you.
4.	Frustration	Life falls short of your expectations. You insist that things should be different. It might be your own performance ("I shouldn't have made that mistake"), what someone else does ("He should've been on time!"), or an event ("Why does the traffic always slow down when I'm in a hurry?").
5.	Anxiety, Worry, Fear, Nervousness or Panic	You believe you're in danger because you think something bad is about to happen. "What if the plane crashes? What if my mind goes blank when I give my talk in front of all those people? What if this chest pain is the start of a heart attack?"
6.	Inferiority or Inadequacy	You compare yourself to others and conclude that you're not as good as they are because you're not as talented, attractive, charming, successful, intelligent. "She's really got what it takes. She's so cute. All the men are chasing her. I'm just average. There's nothing very special about me."
7.	Loneliness	You tell yourself that you're bound to feel unhappy because you're alone and you aren't getting enough love and attention from others.
8.	Hopelessness or Discouragement	You feel convinced that your problems will go on forever and that things will never improve. "I'll never get over this depression," or "I just can't lose weight and keep it off," or "I'll never find a good job," or "I'll be alone forever."