Cognitive-Behavioral Therapy (CBT) Group Program for Depression

Adult Patient Manual
Self-Care

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Acknowledgements

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Acknowledgements

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Parts of this manual were broadly adapted and integrated from the following sources about depression, Cognitive-Behavioral Therapy, and group psychotherapy:


What is Cognitive-Behavioral Therapy?

Cognitive-Behavioral Therapy (CBT) is a short-term, evidence-based treatment for many problems, including depression. It is based on science that shows that thoughts (cognitions) and behaviors (actions, choices) affect the way we feel (emotions).

Emotions (feelings)

Thoughts (cognitions)                                Behaviors (actions, choices)

We want to be sure that our treatments are effective!

Evidence-based means that there is scientific evidence to show that something works.

CBT is an evidence-based treatment that has been studied and shown to be effective in hundreds of scientific experiments.

While there is not a 100% guarantee that CBT will work for you, it is likely that with practice and hard work you will receive benefit from these techniques.

How to use this manual

This manual includes a great deal of information on depression and CBT. You will get the most out of our group program if you take notes during the group and then review the manual between sessions. Some of the skills may be very pertinent to you, and others less so; regardless, we hope that you will give CBT a good try (including consistent practice in between sessions for 4-6 weeks) before determining if it is a good fit for you.
CBT is...

Cognitive-Behavioral Therapy is an effective, evidence-based treatment that has been proven to have an impact on depression in both the short- and long-term. Our department specializes in delivery of this intervention to people like you, who want depression to stop interfering with their lives. Below we explain some of what to expect from CBT treatment.

Cognitive-Behavioral Therapy...

...is **regular**. It works best when you come to treatment once per week for most of the treatment course. It is common to change course to once-every-other-week or once-a-month when the symptoms have been reduced and you have entered the “maintenance” period of treatment.

...typically **lasts for between 12 and 16 sessions**. Depending on the problem, it may take more or less. This is not a treatment that is meant to last for significant amounts of time.

...is **structured**. This is not the style of therapy in which one comes into the session only to “vent” or have someone with whom to talk. The treatment is focused specifically on treatment aims, which usually include reducing the impact of depression on our lives and feeling better, by learning skills and techniques to respond to depression when it arises.

...has a **variety of skills**. As you will see as you dig in to this manual, there are different angles from which to address your depression. Most people find it helpful to use a variety of skills, instead of searching for just one “silver bullet.” **There is most likely not just one answer to your depression.** However, depression can usually be managed well if one practices **multiple skills** repetitively over time and incorporates them into the flow of daily life.

...requires **practice**. Call it homework, daily practice, or whatever you choose. Regardless, it takes daily repetition to learn skills and retrain our depression-influenced habits. A rule of thumb is to expect to spend **about one hour a day** practicing CBT in-between sessions. We want you to feel better outside of sessions and maintain this after you finish treatment, not just while you are at our clinic.

...depends on **follow-through**. The most important factor in whether or not treatment works is the amount of work you put into it. Consider it an investment in a future with more freedom, enjoyment, and flexibility.

...is **collaborative**. Individual and group CBT are structured, but are also centered around your life aims. The patient and therapist work together to define treatment targets, adapt skills to the patient’s unique circumstances, and troubleshoot as barriers arise. If certain skills do not work, it is common to try others. If something does not seem to be working, one can discuss this with the therapist or group leader. Communication is an important part of CBT.

...is **evidence-based**. This means that the concepts and skills are based on scientifically-validated concepts, and the interventions have been tested to be sure they are helpful.
What does CBT for depression look like?

How we think and act can greatly influence how we feel. The better we understand (and challenge) thoughts and behaviors that are influenced by and contribute to depression, the more skillful and in control we feel. We learn to move away from being on “automatic pilot” and letting our depression make choices for us.

Below are the various components of CBT and how they are designed to treat the depression.

### What we’ll learn:

- **About depression** (“psychoeducation”)
  - What people experience
  - What causes it

- **Self-care** (sleep, diet, exercise, etc.)

- **Mindfulness**

- **“Cognitive” (thought) restructuring**

- **Behavioral Activation:**
  - Values, pleasure and mastery
  - Activity monitoring and scheduling
  - Pleasure predicting
  - Goal setting
  - Motivational strategies
  - Managing barriers to activation

### What they target:

- Social isolation
- Decreased physical activity
- Avoidance
- Motivation problems
- Negative thinking
- Hopelessness
- Difficulties enjoying things
- Poor self-esteem
- Worried thoughts
- Sleep problems
- Problems with appetite and eating
- Fatigue
There is a great deal of scientific research on psychotherapy, and we know a lot about what can be helpful for people. We continue to learn more and more about how to use psychotherapy to help as many people as possible.

However, because everyone is different, and our brains and lives are very complex, right now it is often hard to know exactly what it is that will help a particular person feel better.

On the next page, follow the path from the bottom of the page upward for some tips to make your “path through psychotherapy” more helpful and rewarding.
See this as **just one piece of the puzzle** in your process of better understanding yourself and moving toward what you want in your life. Get all you can out of it and then make efforts to find out what other types of work could be helpful. For example, maybe you did a great deal of work on managing your depression with cognitive and behavioral skills. Now you believe that you want to improve your relationships to achieve more in that area of your life.

**Manage barriers** to showing up regularly to treatment and practicing skills: improvement depends primarily on follow-through and the amount of work you put into your therapy.

**Address depression from different angles.** There is no one “silver bullet” that will change depression all by itself. Usually a combination treatment, or mixed approach is what works best to make depression better. This also means putting in some effort to understand the different ways to manage your depression.

**Practice skills over, and over, and over.** It usually takes time for changes in our behavior and thinking to lead to feeling better. Like learning an instrument, we are practicing new ways of doing things that will feel “clunky” at first, and become more comfortable over time.

**Take small steps toward change** each day. Try not to wait for “light bulb moments,” “epiphanies,” or for something to take it all away instantly.

**Along the way**

Expect **ups and downs** during the process. Think of it as “2 steps forward, 1 step back.” Try not to get too discouraged or give up when things seem to move backward or stagnate.

**Make it about you:** engage in your treatment because you want to improve your life, take responsibility for achieving your aims, and feeling better, not because others are telling you to do so. Remember that even if you are being pushed to engage in therapy by someone else, that relationship must be important enough for you to consider this option!

Make an **open mind about the possibility of change**, while being realistic about **how fast** this change can happen.

Especially at first, gauge **success according to how you change your responses** to stress, uncomfortable emotions, and body sensations, not whether or not these things exist or continue to occur. Focus on **valued action**, even more than just “feeling better.”

“**Credibility:**” Make sure the treatment in which you are engaging makes sense to you and seems to be addressing your problem. There are different paths to the same goal. If this type of therapy is not working for you, you are confused about what you are doing, or you have any other concerns, talk to your clinician right away. Clinicians are trained to have these discussions with their patients!

Make sure **your definition of the “problem”** is the same as the clinicians with whom you are working. Maybe they think it is “depression” and you think it is something else. Try to clarify this with your clinicians.
Did you know that scientific studies have shown that exercise is just as powerful as an antidepressant medication for treating depression, when it is practiced regularly?

How are you sleeping? Depression sometimes affects sleep; we may sleep too much, or too little. Improving our sleep can be an important element of depression treatment.

Believe it or not, how we eat also can affect our mood for the better, or worse.

In this section we talk in more detail about how taking care of your body can help you manage your depression.
“Self-care:” An Important Part of Managing Depression

Battling depression requires a multifaceted strategy; we have to “unite our forces” to keep depression from interfering with our life aims. CBT supplies us with some of the ammunition to wage this battle, but other lifestyle factors are important, as well. Below we discuss some of these factors; consider them when assessing your challenges with depression. Consider trying out some changes to see if they help.

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<th>Moderate and Balance Coping Skills</th>
<th>Treat Mental Illness</th>
<th>Diet</th>
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<td>Address depression from a variety of different angles by confronting situations, problem solving, accepting that which cannot be controlled, and modifying thinking when necessary. Take care of the body and mind, addressing the important elements of self-care listed below. Remember that “diversity” is the cardinal rule when it comes to coping with challenges; the more skills and coping methods we have, the more flexible we can be when challenges arise.</td>
<td>Learn to manage depression using CBT skills. Treat other forms of mental illness if they interfere with your life. If the therapy you try does not seem to be working, try another therapy style or therapist. Consider a “combination therapy,” which combines an assortment of therapy skills, medication, and self-care.</td>
<td>Eating a balanced diet helps us maintain health, improves energy, and contributes to good mood. Be aware of the quality of your food, as well as how much you eat; eating either too much or too little can affect how you feel on a daily basis.</td>
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<th>Avoid or limit use of “mind altering drugs”</th>
<th>Exercise</th>
<th>Confront Conflict</th>
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<td>Be aware that all drugs that alter state of mind such as alcohol, caffeine, nicotine, marijuana, other illicit drugs, can exacerbate depression in both the short and long term. Discuss your use of these substances openly with a prescribing clinician to understand better your own risk factors.</td>
<td>Regular exercise has been shown to be as good as antidepressant medication for treating depression and increases our resistance to debilitating anxiety. Try to get a minimum of 20 minutes of vigorous cardiovascular exercise at least three times a week. Of course, be sure to ask your doctor if you are healthy enough for more intensive exercise.</td>
<td>Do not allow interpersonal conflicts to fester; learn assertiveness and other communication skills and address conflict proactively and diplomatically.</td>
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<th>Goal Setting</th>
<th>Treat Physical Illness</th>
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<td>Research has shown that most people need an average of about 7 hours of sleep per night. Sleeping well is an important aspect of managing depression. Talk to your doctor or therapist about a referral for a consultation with a sleep expert if you suffer from insomnia or sleep apnea.</td>
<td>Set realistic goals in line with your life aims. Strive for balance of meaningful work, interpersonal (family and friends), and enjoyment-oriented goals. Remember to take one small step at a time to reach larger goals.</td>
<td>Scientific research shows a connection between physical health, mood, and anxiety. Learn about your family medical history, go to the doctor as needed, and take prescribed medications.</td>
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<th>“Slow down”</th>
<th>Time Management</th>
<th>Social Support</th>
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<td>Ask yourself: “Has there been a day this week in which I did not “rush” at all? Keeping a constant fast pace in activity, whether walking, working, or even planning leisure activities, communicates a sense of urgency to the brain, raising blood pressure and tension in the body. This has an impact on our mood from day-to-day. Practice “slowing down” your pace of life consciously to reduce this sense of urgency.</td>
<td>Set realistic goals about what can be accomplished in a certain amount of time. Avoid multi-tasking excessively. Plan your day with enough time left over to sleep enough, exercise, and enjoy a leisure activity. If you feel that you have trouble managing your time, discuss it with a therapist or life coach.</td>
<td>When we feel supported by others, we feel more safe, secure, and happy. One important approach to treating depression is to reduce symptoms; another way is to increase positive experiences, especially with people that help us feel good about ourselves.</td>
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“Sleep hygiene” is a fancy way to refer to good sleeping habits. We often underestimate how much sleep impacts our mood and functioning. Lack of sleep or poor quality of sleep is sometimes caused by engaging in certain behaviors (often just out of habit) that are problematic in helping our body relax and fall asleep.

How are your sleeping habits?

Check the statements that apply to you:

___ I look at my cell phone, work on my computer, or watch TV before bed
___ I clean my house or do other physically stimulating activities before bed
___ I drink caffeinated beverages (coffee, tea, soda, energy drinks, hot chocolate) after dinner time
___ My room is hot
___ I sleep with lights on
___ I do work in bed
___ I go to sleep at different times every night
___ I take naps
___ Sometimes I stay in bed awake for hours just trying to fall asleep
___ I drink alcohol to help me sleep
___ Worries often keep me up
How to improve your sleep...

If you’re having trouble sleeping and checked one or more of the boxes from the previous page, chances are you could benefit from working on better sleep hygiene.

Here are some suggestions:

• Get regular exercise (we will talk about this later).

• Plan to get to sleep at the same time every night.

• Avoid naps. This will help your body get into a natural sleep cycle.

• Designate your bed for sleep (and sexual activity) only. When we work and do other activities in bed our brain gets confused about what to do when it’s bed time.

• Avoid stimulating physical activity too close to bedtime (3-4 hours before bed).

• Avoid alcohol and sugar before bed.

• Keep your room cool (about 65 degrees) and very dark.

• If worry is a problem before bed, “schedule” worrying earlier in the day.

• Take a warm bath or drink warm milk.

• Listen to relaxing or ambient music before bed.

• Do breathing exercises or progressive muscle relaxation.
Exercise

You’ve probably heard that exercise is as good for your mind as it is for your body. Current mental health research shows that exercise is just as powerful as an antidepressant medication when it is practiced as a program.

To be even more scientifically specific, exercise is thought to stimulate the neurotransmitter (brain chemical) serotonin which plays a role in experiencing positive emotions. This is the same neurotransmitter that is targeted with SSRI antidepressant medications. It can also help regulate sleep (as mentioned earlier) which is an important factor in caring for your depression.

So how much will I need?

The Department of Health and Human Services suggests 150 minutes of moderately intense exercise per week. Current literature on depression suggests that when using exercise as a tool to treat your mood, individuals should exercise at moderate intensity for 25 minutes 3-5 days per week.

What is “moderate” intensity? Basically, it’s physical exercise that brings your heart rate up. For example, walking at a fast pace, climbing stairs, and riding a stationary bike.

If you are interested in pursuing exercise as a primary tool for your depression, be sure to talk to your doctor first to review your physical health. Talk to your individual therapist about this so that you can work on this goal together in your CBT treatment.
Food for Your Mood?

How we eat can impact our mood. Here are some tips for improving your mood by paying attention to how you eat.

Stay away from foods that make you feel overly emotional, such as sugar or other foods that increase appetite.

Avoid eating too little or too much, as this can also influence your mood.

Avoid excessive caffeine or energy drinks, as these often negatively impact anxiety and sleep.

Alcohol, even in moderation, can interfere with depression recovery. Because alcohol is a depressant (drug type), it can make depression worse and interfere with sleep, which indirectly impacts your mood.

If you are having trouble cutting back or eliminating drinking altogether, we encourage you to talk to your provider about this.

Fat for brain health!

Research suggests that eating foods rich in **Omega-3 fatty acids** can help fight depression. Walnuts, flax seeds, salmon, and sardines are all foods that are naturally high in Omega-3’s; however, it is difficult to get enough through diet alone when using as an alternate to antidepressant medication. Omega-3 supplements have been shown to be helpful in improving mood; it is important that the supplement to have two fatty acids: EPA and DHA (both have been shown to improve mood in scientific studies). According to current literature depressed individuals should take 1 gram of EPA per day for optimal results. If you have questions about types of Omega-3 supplements, we encourage you to talk to your provider.
Use the following worksheet and design your own self-care plan. Review the previous pages to get ideas.

My Self-Care Plan
(how I plan to incorporate self-care into my daily life)

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