



Thought challenging

A guide for those living with a long-term health condition



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Work through the above contents and tick once completed.

How thoughts, feelings and behaviour work together

The way we feel about situations and our thoughts can affect the things we do. We illustrate the relationship between thoughts, feelings, behaviours and management of long-term health conditions in the example below and on the next page.

Example: Getting exhausted with housework

What might go through your mind? Let's imagine that Jas has the thought, "If I don't do all the housework properly, my friend will think I can't cope and that I'm weak"

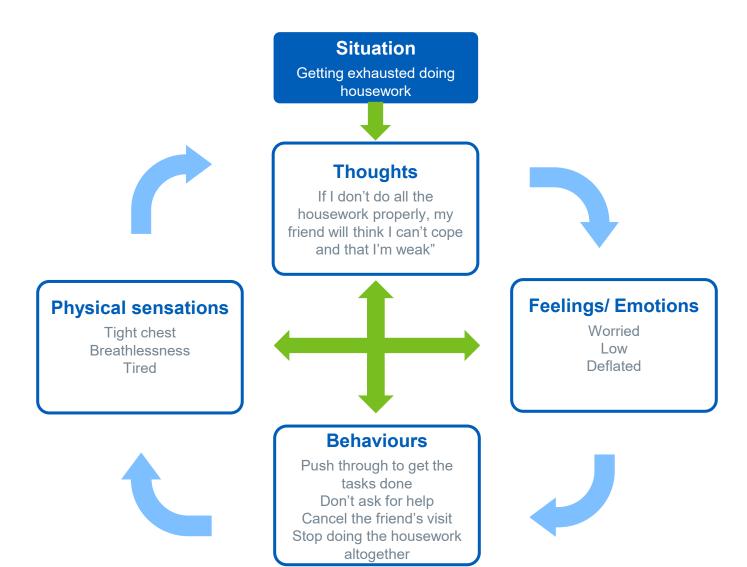
Jas then feels low and deflated. When Jas feels low and thinks he can't do the housework properly, he might stop doing the housework altogether and not ask for help from others.

By avoiding tasks all together, it actually reinforces his thoughts that 'he can't do the housework properly' and leaves him feeling worse. In this way, his thoughts, feelings, and behaviours are working in a vicious circle to maintain his difficulties and his low mood.

See the Hot cross bun diagram on the next page to see this shown visually.



How thoughts, feelings and behaviour work together



It's easy to think that events, situations or other people determine how we feel, for example we hear ourselves say that 'my friend has made me so upset' or 'the weather is making me miserable'.

When we do this, we are telling ourselves that other people or events control our feelings. However, if we look at the situation more closely, we will find a step in-between that's easily overlooked. The step in-between involves how we see or perceive the situation or other people i.e. our interpretation.

Example one: Cancelling dinner plans

You have plans to meet a friend for a drink and they cancel at the last minute.

How would you feel if you thought, "They always do this to me; they don't want to meet because they've got something better to do. I must be boring."

What if you had thought: "Something bad has happened to them; they wouldn't have cancelled unless it was an emergency?"

Another thought could have been "Oh well, something has probably come up, I'll give them a call tomorrow and rearrange."

You can see in the above example that you could have had three different emotions all from the same situation, depending on how you see or perceive the situation, in other words depending on your thoughts in the situation.

Example two: Eating sweet treats with diabetes

You've had a bad day and go home and eat chocolate biscuits. You could think about this situation in different ways.

- One person may have the thought: "I'll never be able to manage my diabetes". This might result in them feeling quite low (and possibly even eat more biscuits or give up trying to follow a healthy eating plan).
- Someone else may think: "Eating all those biscuits wasn't good for me, but I've eaten well all week, and I'll make sure I eat well in the next few days" and then feel okay about the situation.
- Another person may think: "I've had a bad day, and I deserved a treat. It's ok to treat myself sometimes" and then feel compassion towards themselves.

Many of these thoughts are automatic and quite a lot of them are unhelpful as they make us feel bad.

These thoughts have a big impact on our mood and can keep us feeling low or anxious.

Thought challenging is a technique that can be used to catch these thoughts, challenge them, and arrive at a thought that can help improve mood.



Thought challenging involves three steps

1. Identify thoughts

Think about a situation where you felt low or anxious. Try to describe how you were feeling with one word and rate how intense this was on a scale of 0%-100%. Write down what you were thinking about when you felt the emotion. Have a look at all your thoughts and choose the one that made you feel the way that you did. That becomes your **hot thought**. Rate how much you believe the thought on a scale of 0%-100%.

2. Look for evidence for the hot thought

Use the evidence recording sheet to write down evidence for and against the truth of the thought. Think about your hot thought as if it is in court and you are looking for evidence to defend the thought (evidence for) and evidence to prosecute the thought (evidence against).

3. Reconsider your thought

Once you've gathered evidence for and against the thought you need to reconsider the thought in light of the evidence. Much in the same way a jury would consider someone in court after listening to the defence and prosecution. Use the thought diary to right down new 'more balanced' thoughts. It is sometimes helpful to think about what you would tell someone else in this situation. Then rate how much you believe the new more balanced thought on a scale of 0%-100%. Then in the last column write down how you feel after considering your reconsidered thought again using a scale of 0%-100%.



When identifying situations in which you may have felt low or anxious, it may be helpful think about the following situations.

For each situation: What went through your mind? How did you feel?

Think of a time when you felt stressed.
Think of a time when you had a bad day.
Think of the last time you had an unwelcome result from a medical test.
How do you feel before you go to a health appointment?
Have you ever felt worried about a social situation? e.g. Where you need to adapt for your health condition? Telling people about it for the first time? Worried about the impact of your health on others?
Think of a time when you've planned to do exercise and felt too tired

to do it.

Frequent thinking errors



Self-blame

Thinking that everything is **your fault** and ignoring any other contributing factors.

e.g. "It's my fault I developed diabetes. If I had eaten better, this wouldn't have happened."



Mind-reading or jumping to conclusions

Assuming others are thinking the worst of you and reacting to what you believe they are thinking. **Ignoring the facts** that might indicate otherwise.

e.g. "My friends think I'm lazy because I cancelled plans again"



Unrealistic expectations

Thinking about how you 'should' and 'ought' to be and placing unrealistic expectations on yourself.

e.g. "I should be able to work full-time and keep up with all my responsibilities, just like before"



Magnification and minimisation

Exaggerating the importance of negative events and underestimating the importance of positive events.

e.g. "This flare-up means my condition is deteriorating rapidly" ... "It doesn't matter that I made it to the shops and back, anyone can do that"



Black or white thinking

Seeing things as completely one way or the other, ignoring the grey area and other possibilities in-between. e.g. "If I eat any sugar at all, I've completely failed in my diet" ... "If I can't finish my physio exercise routine, I might as well not do it at all"



Frequent thinking errors

Catastrophising Believing that disaster is always around the corner and predicting that the worst will happen.	e.g. "If I have another asthma attack, I might stop breathing and die, even if it's mild"
Emotional reasoning Thinking that what you're feeling must be true about yourself.	e.g. "I feel embarrassed by my IBS, so I must be a burden to others"
Picking out a negative feature and focusing on that without letting anything positive have an effect on it. Looking at the world from a negative viewpoint.	e.g. "People only notice my skin flare ups, they must think I'm unhygienic"
Labelling Calling yourself unhelpful names such as 'stupid' or 'useless' and thinking that this amounts to who you are.	e.g. "I'm lazy because I can't get through the day without resting"
Ignoring the positive Acknowledging something positive about you, such as an achievement, and then using something negative to put yourself down and dismiss it.	e.g. "Sure, I cooked dinner today, but that doesn't count because anyone can do that"



Thought diary



Situation	Feeling	Thought	Revised thought	Feeling
	Rate how bad it was 0%- 100%	Rate how much you believe this thought 0%- 100%	Rate how much you believe this thought 0%- 100%	How bad was it 0%-100%
Who were you with? What were you doing? When was it? Where were you?	Describe each mood in one word	Rate how much you believe in each thought Circle the hot thought		

Thought diary

My automatic thought					
How much do I believe this thought?%					
Evidence for	Evidence against				
My new more balanced thought _					
How much do I believe this thought?					



Notes

Further resources



Workbooks

Centre for Clinical Interventions (CCI) - https://www.cci.health.wa.gov.au/

A range of detailed resources and PDF workbooks available to download for free focusing on a range of depression and anxiety related difficulties.

Northumberland, Tyne and Wear NHS - https://web.ntw.nhs.uk/selfhelp/

Self-help guides free to download by PDF and print on a range of difficulties including anxiety and depression.

Smartphone apps (found on Apple and Google Play store)

WRAP - Wellness recovery action app

Mood Tools - Depression aid

Fear Tools – Anxiety kit

<u>Insight Timer</u> – Meditation app

Websites

<u>Mind</u> – <u>https://www.mind.org.uk/</u>

<u>Mental Health Foundation</u> - <u>https://www.mentalhealth.org.uk/</u>

NHS - https://www.nhs.uk/mental-health/

Useful contacts...



0300 365 2000

(Open 8am to 8pm Monday to Thursday 8am to 5pm Friday)

talkingtherapies@berkshire.nhs.uk

Email:

Other contacts:

Berkshire Crisis Team:

0800 129 9999

(24 hours, specialist service for immediate mental health crisis)

Samaritans:

116 123

(24 hours, confidential listening service)

NHS Direct / out of hours:

111

(24 hours, physical and mental health concerns)

In an emergency always call 999







